

Jennifer Schoffer Closson, Ed D, CCC-SLP

# COUNSELING PEOPLE WITH ASD

Thank-you to Taylor Linrude, MA School Counseling for her contributions

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## AGENDA

- Introduction
- Background
- Evidence-Based Practices for ASD
- Other Considerations
- Questions


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INTRODUCTION

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JENNIFER SCHOFFER CLOSSON  
ED D CCC-SLP  
AUTISM SPECIALIST

Owner/Member of YETI Consulting LLC



- 11 Years Public Schools
- 12 Years University of Montana
- 7+ Years Private Practice



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INTERVENTION PRINCIPLES

- Everyone deserves respect
- Every person has a program, it is our job to figure it out (individualized programs)
- Assessment is ongoing
- Assume competence (make the least dangerous assumption)
- Behavior is usually communication
- Neurodiverse affirming practice: Helping people move effectively and efficiently through the world



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# Questions

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FEEL FREE TO ASK QUESTIONS DURING THE PRESENTATION OR WAIT UNTIL WE ARE THROUGH. THE CHOICE IS YOURS.



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# WHAT KIDS WANT YOU TO KNOW



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# BACKGROUND



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## BACKGROUND



In many countries around the world, individuals with autism spectrum disorder (ASD) lack access to services that would,

“support, on an equal basis with others, their right to health, education, employment, and living in the community. When available, services are too often far from human rights friendly or evidence-based.”

- CDC 2011: Need for coordinated services systems for people with ASD and their families.

Reference: American Psychiatric Association, 2022



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## BARRIERS



- Difficulty with communication.
- Difficulty with social interaction with others.
- Restricted interests
- Repetitive behaviors
- Symptoms that affect their ability to function in school, work, and other areas of life.



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## ASD & MENTAL HEALTH



- Higher rates of suicide attempts & death by suicide.
- 90% of those with ASD who attempted to complete suicide were found to have another existing condition.
- Lack of support for adults with ASD has been associated with an increased risk of depression & suicidality.
- The population reports a significantly higher number of unmet needs than the general population.
- Need for specialized neuropsychiatry for professionals.

Reference: Cassidy et al., 2018a; Cramm-Crosbie et al., 2019; Crane et al., 2016; Jones et al., 2014



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## GAPS IN SERVICES

- Difficulty finding appropriate treatment & professional support for co-occurring mental health conditions coinciding with ASD.
- Professionals lack of understanding of ASD.
- Absence of support from other mental health professionals with particular expertise in crisis management.

Reference: Autism Speaks, 2022; Cramm-Crosbie et al., 2018; Mason et al., 2019; Ono et al., 2019



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## BARRIERS



For individuals with ASD:

- Not knowing where to find help
- Feeling overwhelmed with the steps to seek help
- Difficulties describing problems & needs

For mental health professionals:

- Existing literature lacks action pieces on how to integrate EBPs into their scope of practice.



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## UNIQUE NEEDS



Inclusive mental health services:

- Training on treating clients with ASD & co-occurring mental health disorders
- Anxiety, mood disorders, depression, ADHD, OCD, ODD



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## EBPS FOR ASD



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## EVIDENCE-BASED PRACTICES FOR ASD




- CBT – This is you!
- *Visual Supports*
- *Modeling/Video Modeling*
- *Scripting*
- *Social Narratives*
- *Augmented and Alternative Communication*



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## VISUAL SUPPORTS













Check in Chart

For each domain, indicate if you are a 1, 2, 3, 4, or 5 in the white boxes.


| Domain                | 1 – Really hard right now | 2 – Somewhat challenging | 3 – Average, the way things should go | 4 – Going better than expected | 5 – Amazing, I am loving it! |
|-----------------------|---------------------------|--------------------------|---------------------------------------|--------------------------------|------------------------------|
| Life at my house      |                           |                          |                                       |                                |                              |
| Notes:                |                           |                          |                                       |                                |                              |
| Academics             |                           |                          |                                       |                                |                              |
| Notes:                |                           |                          |                                       |                                |                              |
| Family relationships  |                           |                          |                                       |                                |                              |
| Notes:                |                           |                          |                                       |                                |                              |
| Friend relationships  |                           |                          |                                       |                                |                              |
| Notes:                |                           |                          |                                       |                                |                              |
| Partner relationships |                           |                          |                                       |                                |                              |
| Notes:                |                           |                          |                                       |                                |                              |

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## EMOTIONS CHART

 Frustrated  
 Embarrassed  
 Sad  
 Mad  
 Nervous  
 Happy  
 Proud  
 Scared  
 Loved  
 Lonely

This  
is  
how  
I  
feel  
today!



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# VISUAL SCHEDULE

### Individual Meeting Agenda

- ✓ Feelings check in
- ✓ Warm up
- ✓ Skill introduction
- ✓ Practice
- ✓ Goal setting/application
- ✓ Cool down
- ✓ Exit Ticket/self-assessment

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# FIRST/THEN

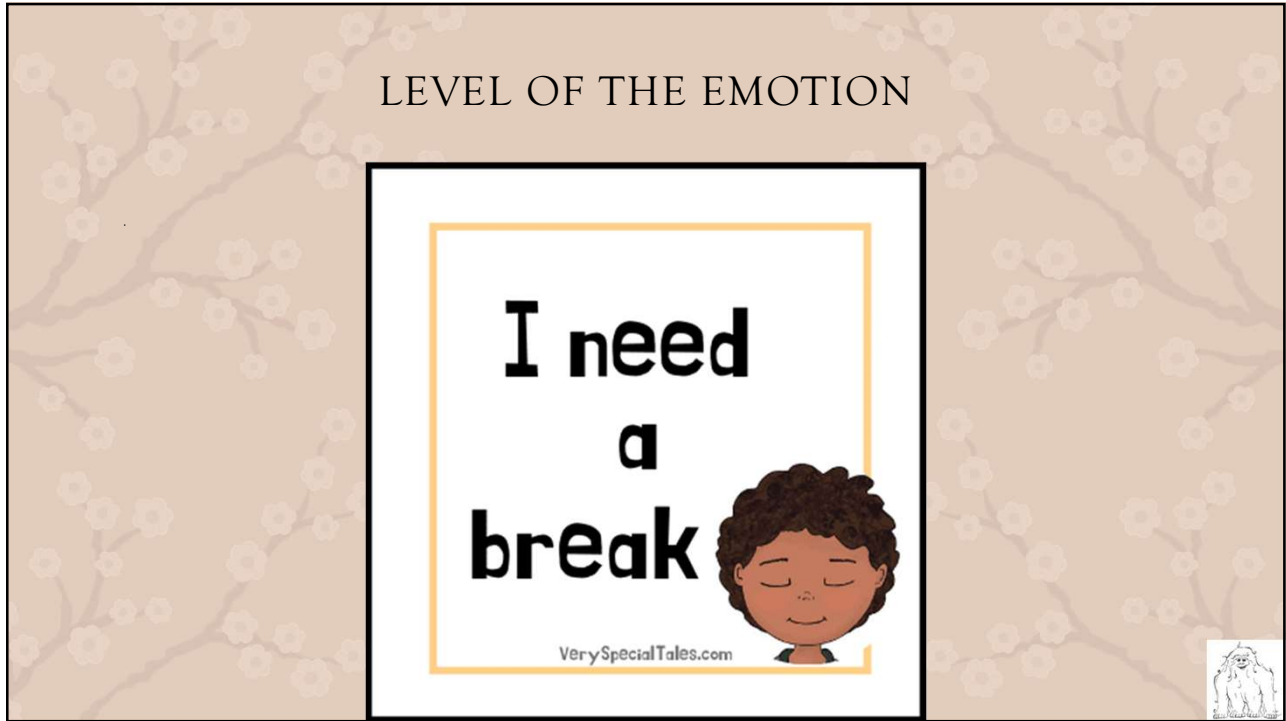


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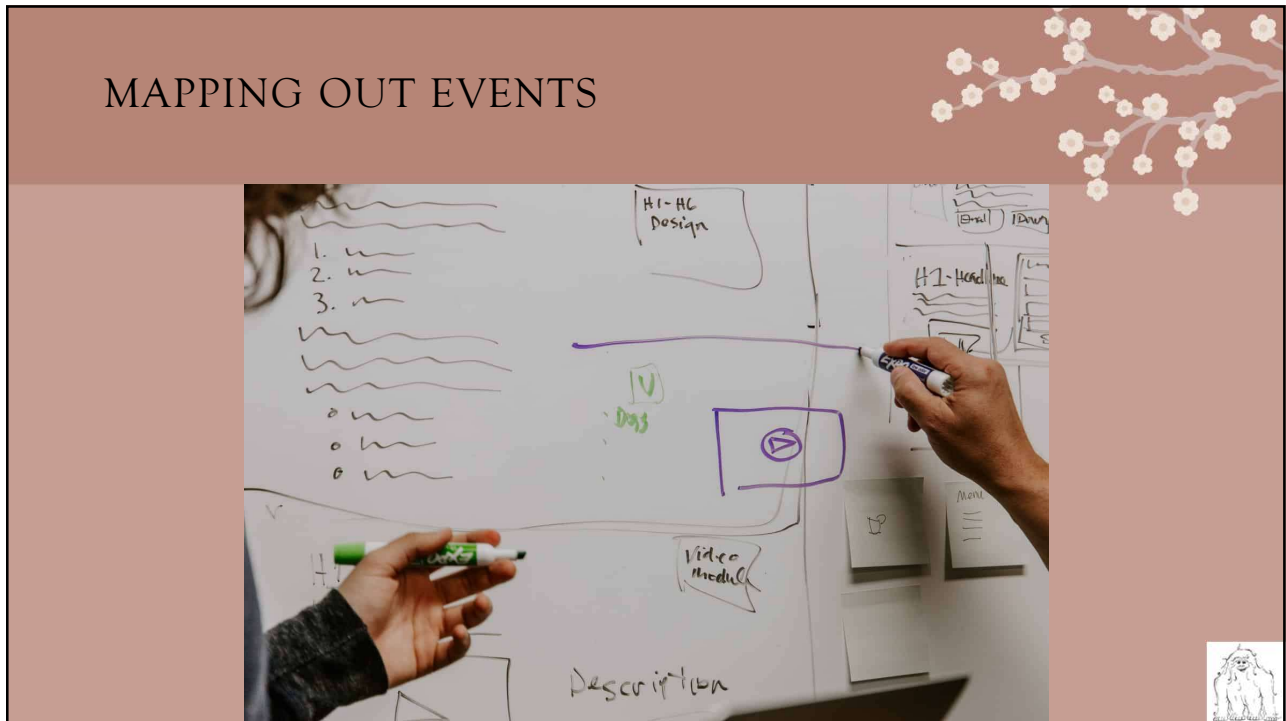
# LEVEL OF THE LEARNER



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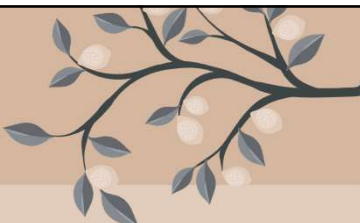
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Problem Solving Flow Chart

|  |    |    |
|--|----|----|
| 2. List below other factors that could be contributing to your mood, challenges, etc. Some things could be academic stress, finances, tired, relationship problems. Etc. |    |    |
| 2.   | 2. | 2. |
| <b>1. Best describe the problem and associated emotions</b>  |    |    |
|  |    |    |
| <b>3. Possible solutions</b>   |    |    |
| 3.   | 3. | 3. |
| <b>4. Information required to make an informed decision</b>  |    |    |
|  |    |    |
| <b>5. Perspectives I could take that may help me understand the situation</b>  |    |    |
| 5.   | 5. | 5. |
| <b>6. My decision and why I chose this</b>   |    |    |
|  |    |    |
| <b>7. Anything that may need to be addressed from #2? (Use a new form)</b>   |    |    |
|  |    |    |



## PROBLEM SOLVING FLOW CHART



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## VIDEO MODELING



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## VIDEO MODELING

### Making a video model

- It should be less than 1 minute long
- It needs to be about a single topic
- It should be developed at the level of the learner
- Keep it concise and to the point
- It should be worded in neutral language – providing the expected behaviors
- It should be simple, music and crazy editing just distract from the content of the video



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## SCRIPTING



- Social anxiety is very real for people with ASD
- When people struggle with producing language, using scripts can reduce the pressure and provide a person with a clear and concise interaction
- This supports
  - social interactions
  - academics
  - employment
  - independent living



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## SELF-ADVOCACY SCRIPTS



### While Talking:

Can you ask that a different way?  
 I don't understand.  
 I am confused.  
 I am overwhelmed.  
 Can you map it out?  
 I need a break.  
 I don't feel like I can talk about that yet.

### For when I leave:

I need to know exactly what to say when this happens.  
 I need a reminder.  
 I need some notes.  
 I need to get more help in this area. Who else could I see?  
 I need my plan mapped out.

### For when I come back:

I need to make an appointment.  
 Is there anything I need to bring next time?  
 Do you want to talk to my other providers?



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## SOCIAL NARRATIVES

### RUNNING

I like to run. It is fun to go fast.

It's okay to run when I am playing outside.

I can run when I am on the playground.

Inside the school people walk. Walking is safe.

I am only allowed to run in the gym.

I will try to walk inside and only run when I am outside on the playground.

People feel safe in the school when everyone is walking.



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## BURPING

Sometimes I need to burp. When there is a burp in my mouth that needs to come out, I make sure it's quiet. When I burp out loud, people around me could be grossed out. I can burp out loud when I am alone.

When I feel like I need to burp, I can close my mouth, so the burp is quiet and say, "excuse me" after. Everyone burps, and people like it when it is quiet.



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## WRITING A NARRATIVE

- Should be short and to the point iterating the expected behavior
- Must only address one skill
- Must be written in neutral or positive language
- Should end with a social proverb – the sentence that can be used for coaching
- Needs a picture to support the visual learners
- Should include language that the team has agreed on such as “walking feet” or “quiet hands” for optimal generalization



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## SOCIAL NARRATIVE NOTES

- Easily shared
- Used to help others understand the expectations
- Used as a cue
- Needs at least 3 reviews before the learning can start to understand what is being described



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## POWER CARDS

- Visual
- Incorporates the child's special interest
- Encourages the child to use expected behaviors
- Very brief, even 1 line work
- These examples will help you understand power cards



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## WEARING A DRESS

Elsa likes to wear a dress.  
When she sits on the floor,  
she sits so her dress covers  
her legs. This way, no one  
can see her underwear.  
Everyone is comfortable  
when our underwear is  
covered.



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## USING THE POTTY

When Strawberry Shortcake has to use the potty, she does these four things:



1. She goes pee in the toilet



2. She wipes her bottom with toilet paper



3. She flushes



4. She washes her hands



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AAC

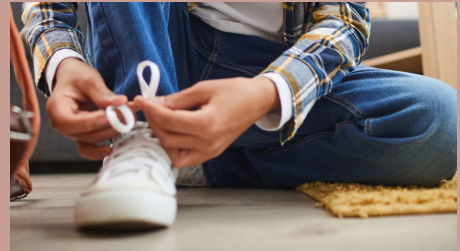


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## KIDS WITH ASD NEED TO KNOW WHY IT IS IMPORTANT

- We tie our shoes, so we do not trip on our laces
- We walk in the halls to keep from falling
- We clean our tray because we are responsible for our messes



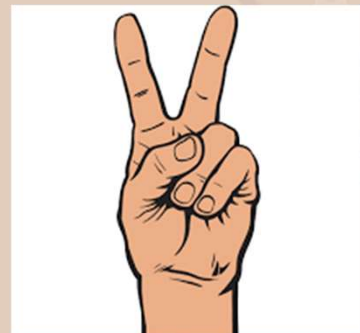
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## STRATEGY: CHOICE OF 2

You can pick up your coat or I can help you pick up your coat.

You can make your bed after your shower or after breakfast

- Either way the task gets done, you just give the learner some control
- This aligns with trauma informed practices



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## KIDS WITH ASD NEED MORE OPPORTUNITIES FOR LEARNING



- No running
- Stop spitting
- Stop yelling
- Don't touch that
- If you don't wear your coat you don't get recess

*When you feel like you are going to scold – remember to reteach*



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## COMMUNITY RULES



### Be Safe

- Keep hands feet and objects to yourself
- Let the teacher know if you are concerned about yourself or someone else's safety

### Be Kind

- Use manner words
- Sharing means everyone gets at turn

### Be Responsible

- Calm learning bodies
- Keep your items in your cubbie

*Post them  
Review them often*



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## TEACH REPLACEMENT BEHAVIORS



THE  
EXIT  
COOKIE!



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## SENSORY NEEDS



- Fidgets
- Light covers
- Alternative seating
- Temperature
- Others?



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## COMMUNICATION

- When possible, give advanced notice of the agenda
- Language delay - Allow extra time when speaking/ listening.
- Promote self-advocacy
- Be more directive (avoid sarcasm, gray areas)
- Strengths-based approach
- Help develop self-regulatory strategies



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## HAVE ON HAND:

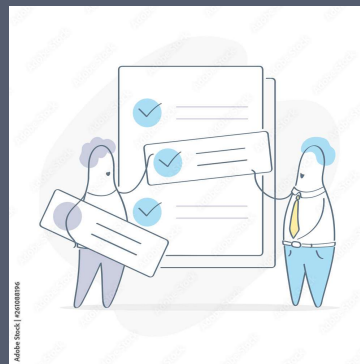
### Visual aids

- Emotion charts
- Problem-solving flow chart
- Check-in charts
- Visual schedules

### Materials to write it out

- Prioritization list (movable items)
- Dry erase board (draw it out)

### Fidgets



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# QUESTIONS



[jennifer.closson@mso.umt.edu](mailto:jennifer.closson@mso.umt.edu)

[YETIconsultingMT@gmail.com](mailto:YETIconsultingMT@gmail.com)

Thank-you for having me here today!

