


**SELF-MANAGEMENT AND SOCIAL
SKILLS INSTRUCTION FOR
STUDENTS WITH ASD**

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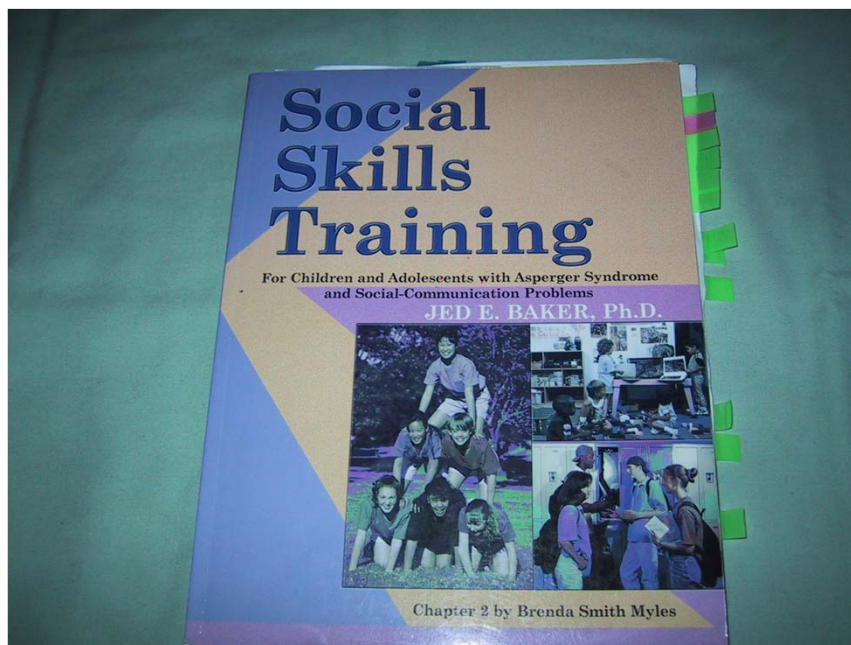
INTRODUCTION

- Many social skills interventions that are considered evidenced-based
- Still some limitations when examining social skills outcomes for students with ASD
 - Limited generalization
 - Limited interventions teaching complex social skills



SOCIAL SKILLS AND CBT


- Social Skills Training
- Incredible 5-point scale
- Superflex




NUMBER 1

Don't Be a Space Invader

1. Stand at least an arm's length away.



2. Don't get too close.



Practice

Who will I try this with? _____


When? _____

What happened? _____

How did I do? _____

Jill E. Baker, Social Skills Training for Children and Adolescents with Asperger Syndrome and Social Communication Problems, 2003.
Stamens Mission, KS: Autism Asperger Publishing Company, www.asdppg.com

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







Low-Quorers

The Incredible 5-Point Scale

Assisting students with autism spectrum disorders
in understanding social interactions
and controlling their emotional responses

Kari Dunn Buron and Mitzi Curtis

5					
4					
3					
2					
1					



The Incredible 5-Point Scale

Understanding My Feelings by Adam

Scared/Afraid

My word for this is:
Shy

This is how I look:
Mean

This is how my body feels:
Sick

This is what I do:
Hide
Hit people

This is what I say:
Swear

"Quitting sports makes me afraid because I don't want to quit. I'm afraid I might lose control at a game or a practice or whatever."
- Adam

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I'm Afraid I'm Losing Control

Name: Adam My Scared/Afraid/Shy Scale

Rating	Looks/Sounds like	Feels like	Safe people can help/I can try to
5	Swear Be mean Hit people Bite teeth tight	sick Stomach turns Head hurts See too much, eyes wide open	(Work in Progress)
4	Swear Yell loud	Feel sick	(Work in Progress)
3	Walk around room	Can't concentrate Antsy	(Work in Progress)
2		My stomach starts turning over A voice in my head tells me to do things.	Ask for or go for walk.
1	Put head down Hide Be quiet	Shy	Get reassurance from SAFE person.

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SKILL 28 Dealing with Feeling Mad

1. Stop and think. (STOP sign icon)
2. Choose.
 - a. Turtle. (Turtle icon)
 - b. Relax. (Relaxing person icon)
 - c. Ask to talk. (Two people talking icon)

SKILL 22 Accepting Consequences

1. Stop and think. (STOP sign icon)
2. Decide if you're wrong. (Sad face icon)
3. Say, "Yes, I did it. I'm sorry." (Smiling face icon)
4. Follow the direction. (Arrow icon)

SKILL 1 Listening

Think. (Thinking person icon)

Listen. (Listening person icon)

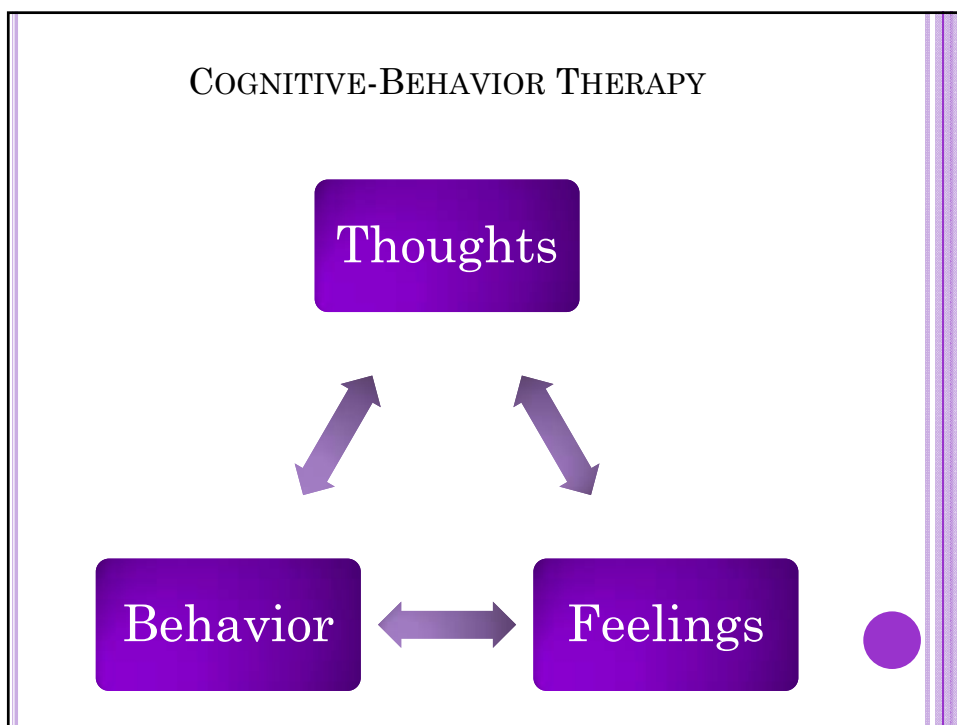
Stay still. (Person sitting icon)

SKILL 9 Asking a Question

1. What to ask? (Question mark icon)
2. Whom to ask? (Group of people icon)
3. When to ask? (Clock icon)
4. Ask. (Person asking question icon)

SKILL 10 Following Directions

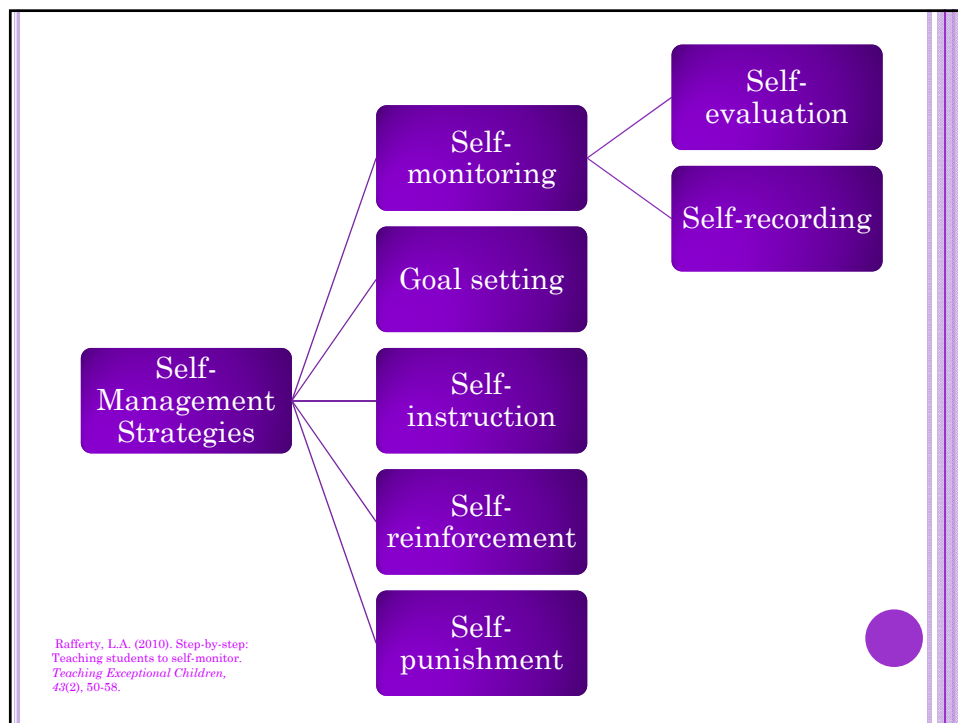
1. Listen. (Lightbulb icon)
2. Think about it. (Person thinking icon)
3. Ask if needed. (Person asking question icon)




CBT, SOCIAL SKILLS, AND ASD

- Limited evidence
- Not generalizing
- Recommended to:
 - Combine with other practices (i.e., ABA, Social Stories, Self-management strategies)
 - Train others from different settings (i.e., peers, parents, teachers)


Schreiber, C. (2010). Social skills interventions for children with high-functioning autism spectrum disorders. *Journal of Positive Behavior Interventions*, 13(1), 49-62.



WHY TEACH SELF-MANAGEMENT?

- Enables independence for students
 - Involving the student may increase performance of behaviors
 - Portability
 - Increased generalization
- 

THINGS TO KEEP IN MIND

- Student has skills to perform behavior
 - Self-management package must be taught to student, just as you teach any other skill
 - Collect data on student behavior intermittently
- 

Self-Evaluation

- Evaluating behavior
- Immediate feedback
- Must be able to **discriminate** between acceptable and inappropriate (or occurrences and non-occurrences)

Self-Recording

- Making a record of behavior
- Reactive effects of self-recording (may be temporary)
- Two reasons self-recording changes behavior:
 - Student is monitoring his/her own behavior
 - Increases students' awareness of consequences
- Students can graph their progress
- ACCURACY IS NOT THAT IMPORTANT

DESIGN

- Multiple Baseline across Settings
- Two Settings:
 - Recess 1 – 12:10
 - Recess 2 – 2:00

DATA COLLECTION

- 10-second partial interval recording
- Data collected on:
 - In a group
 - Engaged
 - With at least 1 peer



PARTICIPANT

- Cody
 - Age: 11 years old
 - 5th grade
 - Diagnosis by pediatrician – Autism Spectrum Disorder- Asperger's Syndrome



WHY CODY?

- Concerned about middle school
- Anxious about being bullied
- Spends a lot of time alone at recess
- Has learned strategies for joining a group



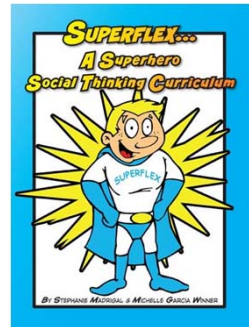
SETTING

- Elementary school playground at recess
- 4th-5th grade recesses
- Large, urban school district
- Many activities
 - Basketball
 - Kickball
 - Foursquare
 - Chase/Tag



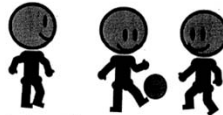
BASELINE “BUSINESS AS USUAL”

- Superflex® Curriculum
- Cognitive-Behavior Therapy approach
- Taught in small-groups
 - Cody – 4 times a week



Joining Others in Play

1. Walk up to the people playing.



2. Wait for a pause or for them to look at you. You may need to get closer and raise your finger up to get them to look at you.



3. Say something nice about what they are doing.

That looks like fun!

That's cool!

4. Ask if you can play too.

Can I play too?

- i. If they say, "No," then ask someone else.

INTERVENTION

○ MotivAider



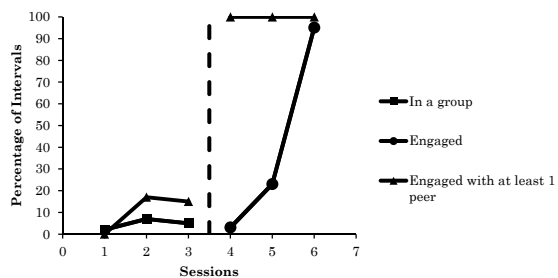
○ “Am I in a group?”

• If “Yes”

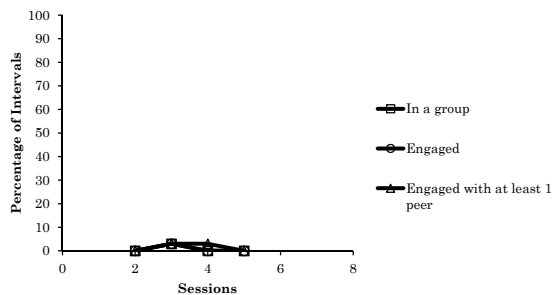
○ move a penny from one pocket to another



Setting 1 (12:10 recess)



Setting 2 (2:00 recess)



RESULTS

- Increase in engagement after intervention implemented
- No increased engagement in the non-intervention setting



THINGS TO CONSIDER

- Fading the prompt
- Social skills and adolescents with ASD
- Skill teaching and skill self-monitoring



QUESTIONS?

