

Sociotherapeutic interventions for children with Asperger Syndrome

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1. Introduction

What do Wolfgang Amadeus Mozart, Albert Einstein, Thomas Jefferson, Marie Curie, Charles Darwin and Glenn Gould have in common? Well, apart from being famous personalities they are all said to have displayed traits that today would be called characteristics of Asperger Syndrome.¹ - Nature and characteristics of this still rather little known condition as well as possibilities and methods to help young clients with such a diagnosis is, broadly speaking, the area of research that this writing aims to contribute to. As the title suggests, the work below will cover a specific type of support for the clients, namely sociotherapeutic interventions. More specifically, the question this writing aims to answer is: How can clinical social workers intervene sociotherapeutically in everyday life situations that they encounter in their in-home work with children with Asperger Syndrome (AS) where symptoms of the condition become apparent?

The path chosen to answer this question is to present four experience-based hypothetical situations, to analyze them with regard to AS-symptoms shown by the clients as well as to tasks arising for the social worker, and to make suggestions for suitable sociotherapeutic interventions. The four situations are entitled: "Arrival of the social worker", "Playing a board game", "Wanna bite of peperami?" and "I'm a psycho."

To familiarize the reader with Asperger Syndrome, Chapter 2 provides background on the history of the disorder, on diagnostic criteria and diagnostic instruments, on etiology, prevalence and comorbid conditions. Furthermore, psychological theories on autism spectrum disorders (ASD)² are presented whereby it is explained which AS-

1 Cf. <http://normledgin.com> (accessed 24/1/2010). More on the topic should be found in his books *Diagnosing Jefferson* and *Asperger's and Self-Esteem*.

2 Notwithstanding the fact that the diagnostic manuals ICD-10 and DSM-IV distinguish between childhood autism (also called Kanner-Syndrome), Asperger Syndrome and atypical autism, in recent years it has become common to speak of

symptoms can be accounted for by each of the different theories.

As the aim of this work is to develop sociotherapeutic in-home interventions for AS-clients, Chapter 3 addresses the relevant issues: what sociotherapeutic work means, how sociotherapeutic tasks for the work with AS-clients can be identified and what the characteristics of an in-home setting are. As sociotherapy is still an ill-defined concept, in Chapter 3.1., I elaborate what is understood by sociotherapeutic work in this writing. In Chapter 3.2. the characteristics of the in-home setting are outlined as are some of the consequences that this special setting has for social workers' work. For the identification of sociotherapeutic tasks I distinguish between general and specific tasks. Starting from the task analysis model by Elliott et al. (2009: 97ff), I have developed a set of task markers and general tasks for sociotherapeutic work with AS-clients (Chapter 3.3.). As the situation-specific task analyses in Chapter 4 are furthermore based on SORC-analyses,³ this method from behavior therapy is introduced in Chapter 3.4.

Chapter 4, the heart of this writing, presents the description and analysis of four situations, which, or part of which, social workers could encounter in their in-home work with AS-clients. As mentioned, the situations described are experience-based hypothetical situations: They contain situational and behavioral elements that are all derived from the experience of working with children with AS. As raw data for the following synthetization process I collected situations that social workers encounter in their work with their clients where AS-symptoms become apparent. From these real situations I synthesized and abstracted characteristic situational and behavioral elements and thereof composed the following four experience-based hypothetical

Autism Spectrum Disorders (ASD). The name change gives credit to the new understanding that ASD is a heterogeneous group of disorders with a number of subgroups. When I, nevertheless, use the term Asperger Syndrome in the following, then with this understanding of ASD as a continuum in mind.

3 SORC being the abbreviation for stimulus, organism, response and consequence.

situations, which cover a broad range of AS-typical symptoms: “Arrival of the social worker”, “Playing a board game”, “Wanna bite of peperami?” and “I’m a psycho”.⁴

The first situation, “Arrival of the social worker” shows the impaired communication skills of an AS-client, his underlying anxiety and his avoidance strategies. The second situation, “Playing a board game”, draws attention to problems with turn-taking, which many AS-clients have, as well as to difficulties with emotion regulation, here specifically with managing anger. The third situation “Wanna bite of peperami?” highlights the issue of sensory sensitivities of people with AS and their vulnerability to bullying. “I’m a psycho.” focuses on AS-clients’ impaired ability to recognize and label their own emotions as well as on the complex issue of self-acceptance and acceptance of the AS-diagnosis.

For the analysis of each of the four situations I proceed as follows: After describing the situation I present a SORC-analysis of the behavior displayed therein by the client.⁵ On the basis of the SORC-analysis and with reference to the set of task markers and general tasks as developed in Chapter 3.3., I identify task markers and corresponding tasks for the social worker with regard to the described situation. Following the analytical part, I present various suggestions for sociotherapeutic interventions for the different tasks and, if need be, necessary adaptations to the in-home setting. The interventions are intended for children at the age of nine to twelve years. Of course, before conducting any of the exercises the social worker in charge would need to check whether a certain intervention is suitable for his or her client, suitable with regard to his or her current skill level.

I hope that the reader finds some of the analyses and suggestions for

4 All names mentioned in the situations are, of course, entirely fictional.

5 The physiological aspect of the organism variable in the SORC-analysis contains the diagnosis of the client’s AS-typical skill deficit, presented with reference to the psychological theories explained in Chapter 2.

interventions helpful and can make use of them in his or her own work with AS-clients.