Core Deficits of Autism:
What They Look Like and My Role as an Interventionist
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Objectives

Participants will be able to:

• Recognize the Core Deficits of Autism
• Describe each Core Deficit of Autism
• Understand various intervention ideas as they relate to each Core Deficit of Autism

Autism: What is it again?!
Autism Programs at the CDD, HSC, UNM

Onset Before Three Years Old

Impairments of Social Interactions

Impairment of Expressive & Receptive Communication

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Restricted Areas of Interest and Repetitive Behaviors

The Core Deficits of Autism…..what are they?

Social Differences

Babies & Toddlers with ASD are less likely to:

- Be attentive to others (parents, siblings, etc.)
- Visually engage
- Demonstrate attention seeking behaviors
- Appear interested in engaging with others
- Respond to simple social games, such as “peek-a-boo”
Social Differences

Babies & Toddlers with ASD are less likely to:

- To be consoled when distressed
- To respond to own name
- Express a wide range of emotions
- Turn head towards noises
- Imitate

Communication Differences

Babies & Toddlers with ASD are less likely to:

- Give big smiles or warm, joyful expressions
- Practice raspberries, bubbling or vocalizations
- Make back-and-forth gestures such as pointing, showing, reaching or waving
- Develop typical language skills

Repetitive Behaviors

Sensory based

- Hand-flapping, finger movements
- "Happy dance"
- Spinning, pacing, jumping
- Toe-walking
- Unusual sensory exploration
  - Own body fluids
  - Poop
  - Water
  - Sand
  - ETC!!!
Repetitive Behaviors Continued…

The need for “sameness”
- The need for the same “things”
- The need for same routines

A rigidity around routines and object use with no interest in what others may want to do

Sensory Differences

Babies or Toddlers with ASD are more likely:
- To present with sensory differences
- Sensory needs can change over time
- Sensory needs are often interpreted as negative behaviors
- Many children do these things, but it is the quality and frequency of the behavior that makes it different.
- Visual, touch, taste, sound, smell

A BIG PUZZLE!

Visual

- Odd perspective taking
- Bringing preferred/favorite objects very close to their eyes
- Looking at objects or people out of the corners of their eyes
- Looking at light filtering through their fingers
- Focused on objects around the home (ceiling fans, clocks, air vents, etc.)
- Brief or no visual engagement with others
- Water
**Touch**

- **Under sensitivity** to pain. Compromises their safety every day.
- **Under sensitivity** to temperature.
- **Under sensitivity** to specific textures (i.e., smooth, rough, soft, bumpy, coarse, wet, blankets, skin, sand, rugs, floors).
- **Over sensitivity** to physical touch, fabrics, clothing, shock, carpet, flooring, grass, furniture, hair against their skin, facial hair, finger nail clipping, hugs, knees open air, etc.

**Taste**

- Licking objects - very different from developmental oral exploration.
- Resist different textures of foods (i.e., yogurt, oatmeal, jello, meat, it could be anything).
- Put unusual textures in their mouth (i.e., dirt, sand, woodchips, lotion, paper, glitter, paint, play-doh, it could be anything).
- Strong preferences for foods that are more intense in flavors such as spicy foods, crunchy foods, very cold and .... it could be anything.

**Sound**

- Appliances around the home (blender, vacuum, hair dryer, electric rice, garage, disposal, coffee grinder, loud television, loud speakers, etc.)
- Sirens, emergency vehicles, car horns, loud car stereo, generally all traffic sounds.
- Loud voices, laughter, children crying, singing, live instrument playing, guitars, pianos, drums, etc.
- Fire alarms, smoke alarms, some fluorescent lighting.
Smell

- Find typical smells very offensive
- Randomly smell objects
- Strong preferences for and will seek out specific unusual smells (blanket, a person(s), body parts, clothing, it could be anything!)

Intervention: What is my role?

- To teach social skills AND communication
  - To be able to make communicative intents, the social skills for wanting to engage must be present
- To teach independence
- To teach flexibility

Important considerations before intervention

- Engage! Engage! Engage!
- Do not take it personally!
- The right time is the calm time!
- Use many opportunities throughout the natural course of the day!
Share the Love!

Social Communication Intervention
Developmental Age 3 – 15 months

- Engage:
  - With movement through gentle-sounding toys, water, sand
  - Engage in a face to face manner with genuine affect
  - Keep your activity very close to your face
- WAIT! You need to wait for some kind of response from the baby:
  - Eye contact, smile, or vocalization
  - There may NOT be any response, and that is ok!
  - Response may not be directed at you
- Repeat several times
- Try again throughout the day in different contexts
  - Embed in your natural daily routines
- Social skills must be taught directly
- Celebrate the little steps!!!
Natural Activities

- Water
- Sand or bean play
- Gentle sounding toys

WAIT!!!

- What are you waiting for?
- For how long?
- When do you repeat?

Social Communication Intervention
Developmental Age 16 to 36 Months

- Follow the child's lead
  - Engage or interrupt the child around the activities he/she prefers
- Label objects & actions
- Share book time
- Use short, consistent phrases
  - Fewer language is always best
- Teach imitation
- Engage many times per day
  - Embed in natural daily routines
- Social skills must be taught directly
Face to Face!

Big Celebrations for Little Steps!

Intervention for Sensory-Based Behaviors

- Sensory behaviors
  - Visual, Touch, Taste, Sound, Smell
  - They are for a reason
  - The child is getting something from these behaviors
- Observe what the child is doing
  - How frequently
  - For how long
  - What intensity
- Recognize what the child gets from the behavior
  - Must identify the purpose
- Consult with an occupational therapist
Sensory Behaviors

May happen anywhere but they must be interrupted with distractions in order to allow for a natural social communicative exchange.

Unhealthy Sensory Behaviors

Need to intervene with replacement behaviors with guidance from teachers, consultants and/or occupational therapist.

Intervention for Repetitive Behaviors

• At play time
  – Shake it up each time
• Interrupt gently
• Be careful how you present new things
  – Do it a little differently each time
References

http://www.autismspeaks.org/what-autism/video-glossary

- Social Interaction
  - Non-verbal Behaviors (page 1, 4)
  - Sharing Attention (page 2)
- Communication
  - Expressive and Receptive (page 6)
  - Make Believe Play (page 2)
- Repetitive Behaviors
  - Restricted Patterns of Interest (page 2)
  - Repetitive Motor Mannerisms (page 4)

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