

## **Supporting Adults Who Have an Autism Spectrum Disorder**

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Autism Spectrum Disorder (ASD) has been diagnosed much more frequently over the recent decade or so. Many children who were diagnosed with ASD are now adults with ASD - although the symptoms can be a bit different. We are now seeing more and more adults with ASD in residential care settings and in the PRS program.

### **Adult Social Expectations**

Our society expects many things from adults. Modern adults are expected to:

- Behave safely and treat others with respect and kindness.
- Find and keep a job.
- Make money, pay bills, and have a bank account.
- Have friends and share recreational activities.
- Prepare meals and entertain socially.
- Have a romantic partner and perhaps marry and have children.
- Keep up with society's changing demands.

Adults with ASD have a great deal of struggle with these expectations. But adulthood for people with ASD has even more challenges to deal with. People with ASD have different levels of skill when it comes to communication, academic learning and cognitive abilities, and social interests. Some have extra sensitivity to sounds, lights, smells, tastes, and textures. ASD affects how people think; people with ASD are often described as having "odd" ways of interpreting things. Many with ASD have issues related to unplanned changes in their routine or environment. Rigid patterns of social interaction undermine relationships and make for having few friends. A high number of adults with ASD are also diagnosed with other mental health challenges like anxiety and depression. Other common challenges for adults with ASD is being unable to engage in back-and-forth exchanges in social communication and showing interest in other people's interests rather than just their own. Many people with ASD appear insensitive to how their behavior effects other people. And they have difficulty understanding what others are asking of them.

Lumped together, these challenges get in the way of developing and keeping friends and getting jobs. Living independently is not a possibility for some adults with ASD.

### **ASD-related Sexuality Issues**

People with ASD often have sexuality issues too. These social and communication issues can contribute to their distinct ways of interpreting the meaning of sex and sexually oriented behaviors.

Some adults with ASD are not interested in having sexual intercourse with another person, making masturbation their only form of sexual expression. While some want to be in meaningful relationships, there may be boundary definitions or rules the person with ASD may expect that are unique to the individual -like phone sex but never in person- or that are not of

interest to the other person. Some adults with ASD appear to feel entitled to touch others or be too close while also complaining if someone else gets in their physical space.

Some adults with ASD engage in uncommon sexual practices. These often incorporate ASD-related characteristics, such as preferences for specific textures of fabric used in masturbation, or two people doing solo sex behaviors in front of each other without having physical contact with each other. Some men with ASD have described “sex” as two people humping and reaching orgasm while fully clothed. Others prefer to only talk about “sexy” things with another person without engaging in any physical sexual activity.

Adults with ASD also engage in forms of sexual problems or sexual offending that are like other males who may or may not have a developmental disability. An example might involve collecting hordes of pornography, viewing child pornography, or showing their genitals to strangers or others who do not want to see them. Other examples might involve sexual behavior toward children or sexual touching to others that is unwanted. Sometimes these behaviors are motivated more by psychological immaturity than deviance, but support and services are needed to bring about healthy changes.

### **How Can Direct Care Staff Members Support Adults who have ASD and Sexual Issues?**

Behavior Support Plans typically prescribe interventions for staff to perform when sexual behaviors arise. Here are some suggestions that can be helpful for direct care staff members to keep in mind when supporting adults with ASD who have exhibited sexual problems or sexual offending behaviors. These can help staff engage more effectively and have better working relationships with persons who have ASD.

- **Be mindful of body language differences:** having poor eye contact and misinterpreting nonverbal cues are common challenges for adults with ASD. We need to remember they are likely to overlook some of our nonverbal cues and gestures. We know that nonverbal cues are significant elements of human communication. Learning to use our words to fully express our ideas without relying too much on the non-verbal expression short-cuts, i.e., facial expressions, tone of voice changes, or intensified eye contact, and help us be more effective when communicating with people who have ASD.
- **Be calm and carry on:** some people with ASD say odd or intrusive things. Some statements are just plain blunt and are said with no thought for how other people will feel about them. Some individuals with ASD ask questions that are too personal. Others with ASD say things out loud rather than keeping their thoughts to themselves. Some of the comments may be sexual in nature. Sometimes it seems like the person has no ability to filter what they are saying. We need to not take these things personally and become upset. Learning to take several deep, calming breaths and telling ourselves “It’s not about me” can go a long way.
- **Be careful about humor:** many people with ASD have a different take on jokes and kidding around. Some do not like humor at all. Many with ASD take things too literally, or as if they are being made the butt of the joke. Or they may tell a joke they heard

somewhere else but say it at an inappropriate time or place. We need to take the time to learn the kinds of jokes and humor the individual with ASD prefers. We should avoid jokes that would be perceived as about the person or the person's special interests. We need to adjust how we express our own humor when we are at work. Learning how to make the individual laugh and not take things so seriously can help everyone have better days, but this takes a bit of time and effort.

- **Be curious:** lots of people with ASD have unique preferred interests. An individual with ASD can get stuck on his or her preferred topics and talk about nothing else. Some of these interests are super intense. Others are intellectual interests. Yet others show a great deal of creativity. A few adults with ASD seem to fixate on sexual topics. When individuals with ASD tell us their preferred topics, they are telling us the very topics that can be the keys to open doors of communication with them. Learning to be curious and ask questions about the person's interests can help us connect and start to convey that we are interested in them as an individual person.
- **Be clear and concrete:** most adults with ASD take other people's words very literally. Many people with ASD take words in their most concrete form of meaning. We may set up a miscommunication if we use words or instructions that could be taken two ways, have innuendos, or which require someone to think about concepts rather than actions. We need to avoid sarcasm and snide remarks. We need to use words and phrases that make easy sense to the individual hearing them. Being this concrete is even more challenging when the individual has intellectual disabilities along with the ASD. Learning to be clear and concrete with direct communication can reduce episodes of confusion and frustration.
- **Be patient with their translation:** most adults with ASD have unique or odd ways of interpreting what other people are saying to them. Many with ASD also have unique or odd ways of communicating what they are thinking and can be frustrated that we do not understand. In some ways having ASD is like having another language. People with ASD need to be bilingual, or in some cases trilingual. When they hear us talking, they have to intake the information in our language, then translate it into their specific, albeit unique, way of thinking, then consider what is being asked, then translate their thoughts back into our language before saying those thoughts out loud in ways we can understand. Learning how the person with ASD processes information is time consuming but ultimately helpful. Learning to wait for this translation process can help our communications to be much more effective.
- **Be neutral:** some adults with ASD engage in unhealthy or harmful sexual behaviors. Sexual behavior problems or offending behaviors often cause other people -including staff- to have significant emotional reactions. As noted above, some behaviors are done without regard for how other people will take them. Some people with ASD do not understand what is wrong with their behavior given the way they think about sexuality.

Learning to respond neutrally, without judgment or support, when persons exhibit such behaviors can reduce the attention the person may get from those behaviors.

- **Be reasonable and consistent:** some adults with ASD exhibit poor personal or sexual boundaries. Some individuals with ASD have poor sexual boundaries even though staff are around. Some adults with ASD interpret things as simple as shaking hands or a pat on the back in sexual ways. There may be a sexual sensation perceived when none is intended. While we do not want our persons to mistake our social gestures of kindness in sexual ways, we do need to find ways to show concern, care, and empathy. Although to never have physical contact with other people can create its own problems we need to avoid hugging which can be too easily misunderstood. Learning to have reasonable and consistent boundaries with people with ASD is an important way to show we understand their needs.
- **Be understanding of unique ASD-related social and sexual issues for the person you support:** some people with ASD have “quirky” ways of relating to others. Some people with ASD are very clumsy or awkward when it comes to social or sexual expression. Some people with ASD have had poor learning experiences about how to relate to others or about healthy sexual practices. People with ASD often have different ideas about touch and texture, about shared emotions, or the value of relationships. Because people with ASD think differently, they learn differently, and have different forms of self-expression. Learning about how autism spectrum disorders affect people differently can help us be more understanding of how these persons see the world we share.
- **Be pragmatic:** many people with ASD view relationships from a pragmatic vantage point. The grocer sells groceries. The bus driver transports people. The teacher gives information. This perspective reduces relationships to the function the other person does for the person with ASD. We can serve a pragmatic role in the life of a person with ASD by explaining what we can and cannot do for them. We can be the driver, the information giver, and the helper. These do not have expectations of exchanging feelings of care and concern. The person with ASD likely first thinks about what they can gain from the relationship. Learning to accept that our care and concern are not likely to be reciprocated can help us be more pragmatic -service oriented- when supporting a person who has ASD.
- **Be aware:** many people with ASD who have exhibited sexual problems or offending behaviors do not pay attention to their surroundings or may not respond appropriately in some situations. We need to pay attention to the person’s specific risk factors, i.e., children in the environment or intruding on other people’s space. Learning the individual person’s risk factors -and the needed interventions- can help us be more effective in reducing opportunities for sexual misconduct to happen.