

## Adults and Autism: Case Study of Robert's Remediation Journey

Robert is a 35 year old man with autism. Diagnosed at age 3, his parents tried every therapy that emerged over the years, but saw only minimal change. By the age of twenty-eight Robert had learned some academic skills however he struggled with even the most basic of daily life interactions. By that time Roberts parents were feeling very frustrated as they didn't feel they could communicate well with their son and had expressed to others how difficult it was to be around him - even to just be in the same room with him! Robert was unable to transition from almost any activity without becoming hyper focused on elements of the situation that only he was interested in. Sometimes these hyper focused communications would last days, as he was unable to let go of an outcome that he didn't like or want. Any time he was asked to do something, he would protest. They were unable to take him out in public places because his obsessive communication would escalate into 'tantrums' and his social and self awareness were so poor. He was home all day, every day.

### **Understanding Robert**

His parents had lost hope that they could continue to care for their son, let alone teach him anything. At the age of 28, Robert's and his family's lives were changed when they found Relationship Development Intervention (RDI™). RDI is a fairly new approach to ASD intervention designed to help develop an individual's capacity for flexible thinking. The 'RDI model is based upon the most up to date research in autism and human development, and is built around the concept that the human mind can be changed through external stimuli provided by trusted caregivers, and thus improve the affected individual's prospects for a better quality of life. Their program started with a parent education component during which Robert's parents learned what the true, or 'core' deficits of autism were, and how those were influencing Robert's behaviors. This proved to be instrumental in helping Roberts' parent understand why he behaved the way he did. In particular, they learned how the rigid behaviors Robert exhibited were not acts of resistance to their parental authority, but rather a response to the profound anxiety he felt when engaging with a world that did not function in a way his mind could grasp.

In Robert's case, he was unable to accept particular answers to questions or requests that weren't in line with what he expected, what he wanted, or if there were boundaries set on his behaviors (from his parents or anyone). He was perpetually fixated on his own internal scripts and desired outcomes, and was unable to take any perspective other than his own. Below are

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some examples of some typical 'conversations' he would have. These types of conversation would go on and on for sometimes hours- with him repeating the same questions.

### Example (1)

Robert: *Why does "Smith's" Pizza not serve ice-cream?*

Partner: *I don't know... Restaurant and business owners choose what they want to serve. They chose not to. Each owner has choices when they create their business and they decide what they want to do.*

Robert: *But I like ice-cream so why don't they have it?*

Partner: *We can get it somewhere else.*

Robert: *I understand we can get it some somewhere else, but I want to know why they don't have it because I like it. I don't know why they wouldn't have it.*

RDI taught Robert's parents that rigid thinking is not a direct characteristic of autism, but rather a response to the great deal of difficulty autistic minds have in coping with novel circumstances or unpredictability. The resulting anxiety compels the individual to rely upon predictable, static rules and schedules in order to function.

Robert was also hyper focused on watching people's mouths when they spoke and was therefore unable to understand any non-verbal communication. He would only accept a person answering questions with a *yes* or *no*, and when he didn't get the answers that he wanted, he would become very frustrated, and talk increasingly faster as he repeated himself. This escalated frustration sometimes ended with him banging his head, yelling, and lashing out.

### Example (2)

Robert: *Do you want to go to the park with me?*

Partner: *Sure.*

Robert: *So do you want to go to the park with me?*

Partner: *I just told you yes.*

Robert: *But you didn't say yes, you said sure. Why is it that you didn't say yes?*

Robert's parents learned that the reason for this is that Robert's mind does not inherently understand or see the value in non-verbal channels of communication – a trait which evolves

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naturally in neurotypical children – and so he placed an over emphasis upon the words people spoke. Since he was so reliant upon speech, concise language was critical to his understanding others. Thus, his attention was almost always focused on people's mouths and equally oblivious to their gestures, vocal intonations or facial expressions.

Sometimes Robert would ask his mother a question and she would nod their head yes in response. He would stare at her mouth and say, "You didn't answer me." Because she hadn't verbalized a 'yes', and he did not understand that nonverbal communication was a critical sub component of communication, he thought she was ignoring him. At one point, his mother explained to him, "I am showing you my answer with my head." He would step back, looking confused. She told him that a head nod means yes. Even though he learned this, he was unable to 'remember' this during conversations and remained hyper focused on mouths. He would stare at his mother's mouth waiting for a verbal answer, and if she walked away, he would follow her relentlessly until she said 'yes'.

### **Starting Point: Establishing a guiding relationship**

Robert had never been able to form a solid guide/participant relationship with his parents, the foundation for all parental teaching, due to his deficits. He had great difficulty with being an apprentice (learning from others), dynamic / flexible thinking, social referencing, experience sharing communication, and emotional regulation. In order to go back and redo that relationship, their consultant had Robert's parents focus on adjusting their communication style to model for Robert to set interactive boundaries. The idea was for them to learn techniques to help create the space for Robert to be an apprentice and to establish roles. There was a focus on slowing down the pace of their interaction, turn taking, and moving on physically / not responding when Robert would become stuck on a particular item or statement. When Robert was stuck, he was unable to 'move and talk' at the same time. So when talking, he would stand in whatever spot he was (for a long time until he got the answer he was expected). They with the interactions halted or escalated. A feedback cycle that was unproductive and frustrating developed over the years as a result of Robert's core deficits and his parents reacting the only way they know how.

As Robert's parents were quite overwhelmed and given that Robert had demonstrated clear neuro-processing difficulties, it was important that objectives assigned were kept simple, broken

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down and administered in a step by step manner. Below are a few examples of areas that they worked on.

### **Communication**

Robert's parents were instructed to increase their use experience sharing communication and reduce their directions and instructional communication. The idea was to help them break the static communication pattern that they were in, to model experience sharing communication for Robert, and re-set the tone of the relationship to that of a collaborative partnership. These are some examples of instrumental vs. experience sharing communication:

#### Instrumental communication VS. Experience sharing

*"Go get the scissors." VS. "This bag looks like it's sealed. We may need to cut it."*

*"Did you like the movie?" VS. "My favorite part of the movie was ....."*

*"Take your wallet and cell phone before you leave." VS. "It's important think about what you may need before leaving."*

### **Perspective taking- A first step**

Robert was not noticing the world around him. He didn't realize that observing / noticing was of value in his life. So much so to where in public, he would literally walk into people. As a basic starting point, mom and dad would go out with Robert and take turns sharing what they 'saw'. "I see a \_\_\_\_\_. " There was no expectation or performance component. Each person could share whatever they noticed, as a starting point to realizing that there are things to notice.

### **Nonverbal communication- A first step**

Robert had no idea that nonverbal communication was part of communication. He didn't 'look' for it, as he would focus on watching the mouth of who was talking to him and focus solely on the verbal communication channel. As a starting point, mom and dad would 'answer' his yes / no questions with nonverbal head nod or shake only.

Robert has progressed by leaps and bounds from where he was at 28. He is now able to engage in short reciprocal conversations with his parents and others, is able to transition with minimal (to zero) difficulty, he is observing his surroundings, and is sharing more of what he

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sees, thinks and feels much more consistently. Not only can he now go places, he also takes college classes at the local community college, attends social groups, Special Olympics, and can go to movies, plays, and sporting events with his family without any issues. He no longer bangs his head or lashes out. He is now able to learn from his parents and continues to learn every day!

Today, a conversation looks like this:

Robert: *I really liked that movie.*

Partner: *Me too!*

Robert: *What did you like about it?*

Partner: *I liked the comedy. I thought it was really funny.*

Robert: *Me too. I thought the laughing horse was funny. Do you think that we maybe later get some ice cream?*

Partner: *Sure!*

Robert: *Okay.*

After a great deal of patience, learning, and dedicated practice, Robert's parents have learned to guide him, to learn to learn from them and better understand the world around them. There is still a lot of room for Robert to grow and develop. The exciting thing is that he has come so far and has been able to learn so much in his adult years. In fact, Robert's parents report that he has made more progress in the time that they did RDI than he had his entire childhood and early adulthood! Their family life has greatly improved and his parents are able to enjoy time with him in ways that they never had before.

### ***Author's Bio***

Kim Isaac- Emery is an autism specialist with experience since 1997 specializing in parent training, working with teens and adults who have autism spectrum disorders, and distance consulting. She is a Certified Relationship Development Program® Consultant. She has a Masters degree in Counseling Studies and a Bachelors degree in Psychology. She owns Autism with Excellence, an autism consulting company and is the autism correspondent on Theories of Mind radio show the 2nd Tuesday of each month on 1110am KTEK Houston. Visit [www.autismwithexcellence.com](http://www.autismwithexcellence.com) for more information.