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Problems Experienced by Individuals with Autism and Therapy Options



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ABSTRACT

Background: The concept of how communication and language play an important role in autism spectrum disorder is growing. Language and communication are fundamental aspects to have in all human cultures and are used to interact with others. Having autism causes language impairments that interfere with communicating effectively with others. It is essential to discuss the impact of communication with those on the autism spectrum disorder. **Purpose:** The purpose of this review was to determine the problems experienced by individuals with autism and explore some therapy options. **Method:** This literature review was conducted using an analysis of assorted sources, which include peer-reviewed journals and scholarly articles. **Findings:** Findings indicated that autism is linked to depression and anxiety, making it harder for effective communication and leading to other behaviors that do not include verbalization. Therapy options include mindfulness-based therapies and emotional awareness. **Conclusion:** Based on these findings, it is important to conduct a good interview during the patient assessment to properly identify the problems to care for the patients' needs.



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INTRODUCTION

Language and communication are key factors for all human civilizations. A cognitive disability, such as autism interferes with the language process, and the individual's social and intellectual advancements are limited [1]. This is important with the diagnosis of autism, which can be paired with language impairments. The Center for Disease Control and Prevention [2] emphasizes that an autism spectrum disorder (ASD) is a developmental disability that can cause significant social, communication, and behavioral challenges. Additionally, they describe that those with ASD may communicate, interact, behave, and learn in ways that are different from most other people [2]. Depression and anxiety play an important role in ASD. The purpose of this review was to determine the problems experienced by individuals with autism and explore some therapy options. The research question: What are the problems experienced by individuals with autism and identify available therapies?

CASE STUDY

Two adult persons with autism were observed. Verbal consents were obtained for the case study. They presented with repetitive behaviors, hyperactivity, fixations, and extreme sensitivity to touch, light, and sounds. People with autism typically present anxiety and depression differently than people without because it is hard for them to verbalize their emotions. These case studies are just a slight look into their experiences.

Patient A

Patient A was a younger adult in his early 30s with a primary diagnosis of depression accompanying autism. The patient was diagnosed at a very young age but was high functioning when discussing the spectrum. During the conversation, it was noted that the patient has been on his own for a while. He moved away from home over a year ago and has been doing well but has had some depressive episodes. It was very difficult for the patient to state that he was feeling sad or depressed, but by listening, one could infer that something was wrong. He would say things like he did not want to do anything, and his hobbies were not fun anymore, which are classic signs of someone struggling with depression. In a study, Magnuson and Costantino [3] noted that the major presentation of depression in people with autism was anhedonia, a lack of interest in

things [3]. His mom also stated that his behaviors were changing, and it seemed as if he was straying in his condition. His mom had a conversation with the patient, and together they decided that coming into the hospital would be the best thing to try to get a handle on the situation. This patient attempted to be a part of small groups, but one could observe that loud noises and crowded spaces were troublesome. The nurses did an excellent job of making him feel as comfortable as possible, but he was still struggling with being around so many people, and he would fixate on certain things or topics for long periods.

Patient B

This patient was observed in an outpatient setting in a support group. Anxiety presents differently in someone with autism; instead of verbalizing that they feel worried or nervous, they cause disruptive behaviors. It is not easy for someone with autism to express how they feel, so that is why these feelings come out as actions. As the group started getting larger, the patient began mumbling things and rocked back and forth. When everyone sat down and started getting louder, the patient got up and started being loud and not making sense. The therapist tried to settle him down, but it resulted in him having to wait a while and take deep breaths. One can observe that in the beginning, when there were not so many people, it was easier and calmer for him to be around, but as soon as more people showed up, it started to become a problem.

LITERATURE REVIEW

Throughout conducting this literature review, databases such as ProQuest, PubMed, and the Cumulative Index of Nursing and Allied Health Literature (CINAHL) were searched. Using keywords such as ASD, communication, repetitive behaviors, depression, anxiety, nonverbal communication, language, and emotion were used to narrow down the search. The studies were published between 2016 and 2020.

ASD and Depression

White *et al.* [4] discussed how people with depression who have ASD benefit best from alternative therapies, such as mindfulness-based therapies, in treating depression. This study used a meta-analysis to find the best treatment for depression in people who have ASD. There has been shown a link between depression and ASD, but little research has been done on how to

effectively treat depression in those who also have ASD. They researched how well different therapies would work in treating depression in people with ASD. Some of the therapies studied were Cognitive-behavioral therapy (CBT), interpersonal therapy (IPT), and mindfulness-based therapies. CBT and IPT are very promising in treating depression in people without ASD. Although CBT and IPT worked for others, it was not as promising in those with ASD. They found the CBT would increase anxiety in those with ASD. CBT has a high level of cognitive strategies that can be difficult for people with ASD to follow during times of high distress. That is why mindfulness-based therapy works best for people with ASD (see Figure 1). Mindfulness-based therapy is a calm, low-stress therapy that is ideal for people with ASD [4].

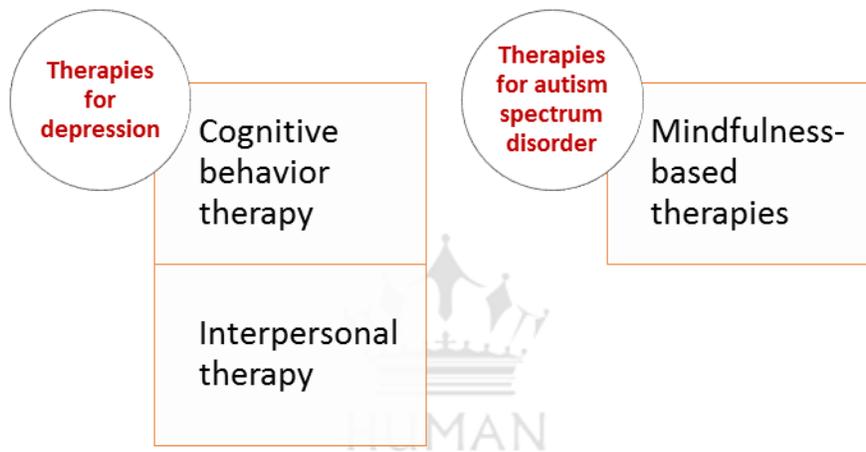


Figure No. 1: Therapies for depression vs. ASD

ASD and Anxiety

Postorino *et al.* [5] discussed the relationship and prevalence between anxiety and ASD. The authors found an estimated 11-84% of people with ASD also have anxiety. Another study used a meta-analysis to research the prevalence of anxiety in people with ASD [6]. In the meta-analysis, they investigated 31 existing studies and found that 36.9% of young people with ASD also had clinically elevated anxiety levels or at least one anxiety disorder. The manifestations range from worries of surroundings, fear of change or novelty, to unusual phobias. It can be challenging to distinguish anxiety in people with ASD. Some expressions of anxiety, such as social withdrawals and ritualistic behaviors, can be similar to core behaviors in ASD, making the differentiation between the two very difficult [5]. Postorino *et al.* [5] suggest an augmented CBT that focuses on social skills and has parent interventions for a child with anxiety with ASD. They also believe

that mindfulness-based therapy is the best approach for treating anxiety (see Figure 2). Rodgers *et al.* [7] discuss another interesting intervention for people with ASD who also have anxiety, is the virtual reality environment (VRE). VRE has helped show fears or phobias that cause anxiety to a person while still being in a comfortable environment [7].



Figure No. 2: Therapies for individuals with ASD and anxiety

Communication and Executive Function

Friedman *et al.* [8] discussed the difficulties in executive function and the difficulties in language skills in a person with ASD. Social communication is a large part of ASD. People with ASD have challenges with greetings and goodbyes, topic maintenance, appropriate turn-taking, and conversational repair strategies [8]. These challenges are associated with theory of mind and perspective-taking. People with ASD have difficulties in executive function such as shifting, inhibition, and planning. Shifting is the ability to switch between mental states or tasks (see Figure 3). The Wisconsin Card Sorting Task (WCST) is used to test this; in the WCST, there are sorting cards of different numbers or colors or shapes with three different sorting dimensions [8]. An error in shifting will be if the participant does not switch from one sorting method to another. Children with ASD made more errors than children with typical development, children with developmental language disorder (DLD), and children with attention deficit/hyperactivity disorder (ADHD). Inhibition is the suppressing of information that may interfere with the task at hand. To assess inhibition, they used the Stroop Task, which is when you have the word blue printed in green ink, and you have to say the color of the word, not what the word says. They

found that children with ASD scored worse than children with typical development, DLD, and ADHD [8]. People with ASD struggle with planning compared to people with typical development. Planning is a higher-level cognitive process and requires planned sequences for it to be put into action.

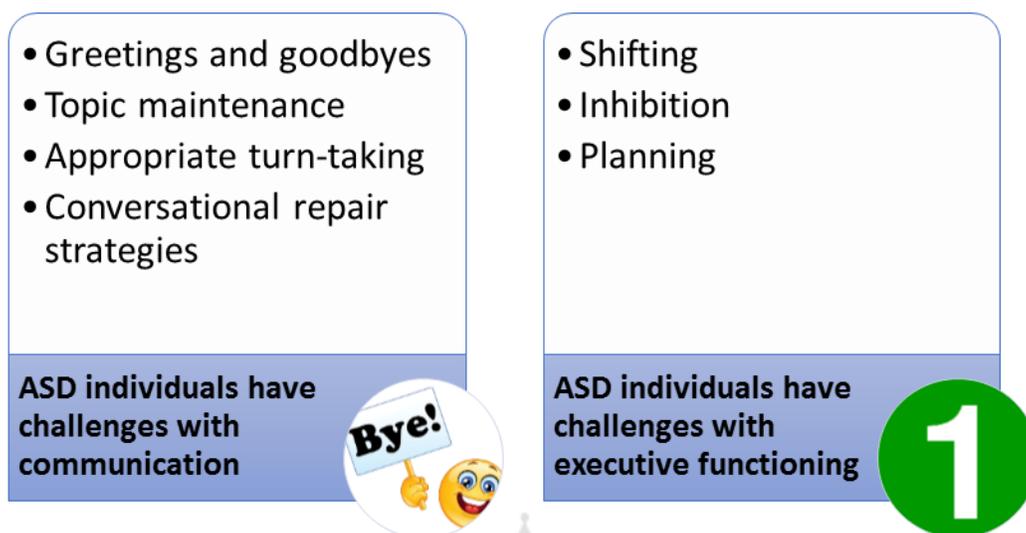


Figure No. 3: ASD individuals have challenges with communication and executive functioning

Emotion Awareness in ASD

Robert-Collins *et al.* [9] discussed how emotional awareness helped people suffering from anxiety or depression or other emotional problems in people with ASD. The study was aimed to assess the difference in emotion awareness in people with ASD compared with people with typical development. Emotion awareness is defined as an attentional process that monitors and differentiates emotions, locates their antecedents, but ignores their physical arousal that is a part of the emotional experience. Children with ASD are known to struggle with their own emotions as well as other emotions (see Figure 4). Studies have shown a correlation between impaired emotional awareness and an increase in anxiety and depression. Children with ASD have trouble identifying and understanding their emotions compared to children with typical development [9]. This research highlighted the need to tailor CBT to ASD.

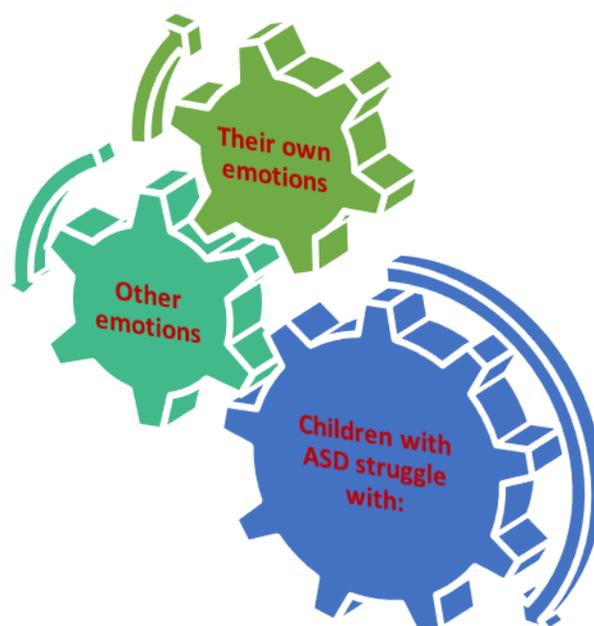


Figure No. 4: Children with ASD struggle with their own emotions and other emotions

Mind-Body Therapies

Houston *et al.* [10] discussed how mind-body therapies are used in people with ASD. It was a meta-analysis of different mind-body therapies used in people with ASD. Mind-body therapies encompass a wide range of practices that focus on a connection between the mind, body, and health. The types of mind-body therapy included were yoga, meditation, mindfulness-based cognitive therapy, Nei Yang Gong mindfulness-based stress reduction, mindful parenting, acceptance commitment therapy, and mindfulness-based therapy. One of the studies used adults with ASD and found positive effects from a mindfulness intervention for depression, anxiety, and rumination. Overall, they found positive results from the mind-body therapies on behavior, anxiety, depression, and emotional awareness [10].

SUMMARY

Based on the findings from the literature review, depression and anxiety play a role in ASD. They are linked to communication and how these individuals use language. Although not everyone on the ASD experiences anxiety or depression, it can still be challenging to communicate with others. People with ASD have challenges with greetings and goodbyes, topic

maintenance, appropriate turn-taking, and conversational repair strategies [8]. It is essential to recognize what coping strategies work best and do a good nursing assessment during the interview phase.

Effective interventions for anxiety and depression for individuals with autism are likely to provide positive outcomes. CBT and interpersonal therapy are not used in treating depression in people with ASD as it is linked to increased anxiety. It is found that mindfulness-based therapy works best to treat depression with ASD as it is a calm and low-stress therapy. For anxiety and ASD, it is also recommended that mindfulness-based therapy is the best approach (see Figure 5).

The care provider needs to be completely present during the interview phase of the assessment portion. Every person with ASD is different, and they all have different styles. It is important to note how they learn and communicate best to reach a more positive outcome. As stated in the literature review section, they have specific tests that can be done to assess where a person is at with ASD. It is also important to distinguish if they have anxiety or depression, which plays a part in someone with ASD.

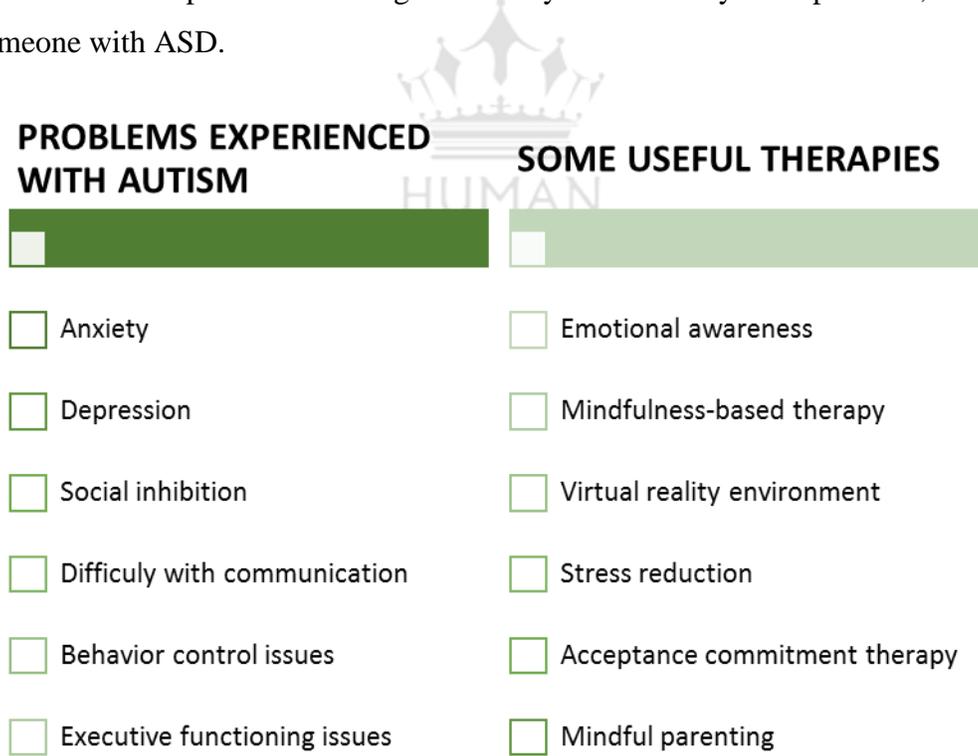


Figure No. 5: Problems experienced by individuals with autism and possible interventions

CONCLUSION

It is crucial to understand how anxiety and depression play a key part in ASD. People with ASD face enormous challenges in everyday life that some might not understand or find hard. It is essential to reason with others and find a balance to lead to better and positive outcomes. Dealing with anxiety and depression is hard enough, but with ASD, it leads to more challenges. Communication is already an arduous path with ASD to go down. We as good citizens and healthcare providers should work together and do proper assessments and engage in conversations. WE need to learn how to be better communicators with those who need our help. In that case, we can all come out stronger together.

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