



Autism Spectrum Disorder: An Introduction for Mental Health Professionals

By Jerrod Brown, Barbara Lusk, and Bethany Hastings

Abstract

Autism Spectrum Disorder (ASD) is a developmental disorder characterized by social skill deficits, cognitive rigidity, and a range of behavioral symptoms. As would be expected of any disorder characterized as a spectrum, the presentation and severity of ASD symptoms vary widely by individual. Careful consideration of each ASD symptom and any comorbid disorders is necessary for effective treatment. Therefore, successful treatment likely requires expertise in several different areas.

Introduction

Autism Spectrum Disorder (ASD) is a life-long, pervasive developmental disorder that is characterized by social skill deficits (e.g., restricted interaction and communication impairments), cognitive rigidity, and a range of behavioral symptoms (e.g., maladaptive, aggressive, and/or obsessive behavior). Characteristics of ASD are highly individualized, presenting features on a spectrum from mild to severe. In a departure from previous iterations of the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*, Asperger's Syndrome has been incorporated with ASD diagnoses in the *DSM-5*. The presence of impaired social and communication skills can be particularly isolating in the absence of

appropriate diagnosis and treatment of ASD. To improve the likelihood of diagnosis and awareness of ASD, this article presents 11 fast facts that all mental health professionals should know about ASD.

Origins of ASD

Although the etiological origins of ASD are unclear, the biopsychosocial model suggests that ASD may be the result of the complex interplay of several different biological and prenatal environmental factors. There is no evidence that ASD is the result of childhood experiences.

Theory of Mind (ToM)

Theory of Mind (ToM) is the skill to appreciate that the behavior of others is driven by their beliefs, desires, and other mental states. The social communication skills of individuals with ASD are limited by deficits in ToM. Social communication is further complicated by difficulty assigning meaning to different pieces of information as a result of weakened central coherence.

Social Skill Impairments

The social impairments may make it difficult for some individuals with ASD to understand when to conclude social encounters. This can lead to issues with interpersonal encounters in academic, vocational, and social settings.

Emotional Development

Due to heightened levels of alexithymia, individuals with ASD can have difficulty identifying, verbalizing, and analyzing their emotions. This also limits their ability to recognize the emotions of others (see ToM).

Sensory Considerations

Most individuals with autism are under- or over-reactive to sensory input such as touch, smell, light, or pain. Situations with extreme audio-visual stimulation could result in high levels of anxiety and panic for individuals with autism. Some individuals with ASD may need an ample amount of sensory input to regulate, relax, and calm down. Alternatively, others with autism may avoid being touched or seek inappropriate interpersonal contact.

Body Movement

Body movement issues (e.g., clumsiness, limited coordination, and strange posture) are sometimes present in ASD. Many individuals with ASD have difficulty knowing where their body is in space.

Criminal Justice Involvement

Although research is limited due to methodological limitations, individuals with ASD could be disproportionately represented in criminal justice settings. The cognitive, social, and behavioral impairments of autism may make it difficult for some individuals with ASD to recognize the consequences of criminal behavior. This, in turn, could increase the likelihood of committing a crime.

Violence Risk

Despite a wealth of knowledge on violence risk factors for psychosis, substance use, and other disorders, less is known about violence risk factors for those with ASD. When violence is present, identification and treatment of comorbid psychiatric disorders could be essential in reducing future risk.

Victimization

The social-emotional deficits (e.g., recognition of social cues) of ASD could decrease the likelihood of recognizing dangerous situations. As such, individuals with ASD may be disproportionately likely to experience various forms of victimization.

Substance Abuse

Some individuals with ASD may abuse alcohol or street drugs to cope with social deficits and anxiety. As such, mental health professionals are encouraged to screen for the presence of comorbid substance misuse problems.

Conclusion

ASD encompasses a range of different symptoms, abilities, and behaviors, each of which requires careful consideration for effective treatment. Complicating matters, the identification and treatment of comorbid psychiatric disorders could be an essential component in the overall treatment of ASD-related behaviors and symptoms. Therefore, successful treatment likely requires expertise in several different areas. Careful consideration of how to improve therapeutic programs (e.g., assessment, engagement, skill-building, and evaluation) for individuals with ASD is necessary to prevent negative outcomes such as social isolation and involvement in the criminal justice system.

Biographies

Jerrod Brown, M.A., M.S., M.S., M.S., is the Treatment Director for Pathways Counseling Center, Inc. Pathways provides programs and services benefiting individuals impacted by mental illness and addictions. Jerrod is also the founder and CEO of the American Institute for the Advancement of Forensic Studies (AIAFS), and the Editor-in-Chief of Forensic Scholars Today (FST). Jerrod is currently in the dissertation phase of his doctorate degree program in psychology.

Barbara Luskin, Ph.D., LP, is a licensed psychologist at the Autism Society of Minnesota. Dr. Luskin has worked closely with children and adults with ASD for more than 30 years in professional and home settings. She specializes in providing both assessments and counseling to individuals with ASD and those who support them. Dr. Luskin's services include diagnostic and functional assessments, individual therapy for adults and adolescents, training and consultation for caregivers. Dr. Luskin helps her clients understand ASD, teaches them creative and effective interventions, helps them evaluate progress, and provides guidance when adjustments are needed. To learn more about the Autism Society of Minnesota's Mental Health Services programs, visit www.ausm.org.

Bethany Hastings, M.A., AT, is a Lead Therapist and the art therapist at the Lazarus Project, Plymouth, Minnesota, working with clients with Autism Spectrum Disorder. She has her master's degree in Adlerian Psychology with a dual degree in Art Therapy (AT). Bethany is currently working toward Licensed Professional Counselor licensure and board certification in AT.