# A Needs Assessment of Social Groups for Individuals with Autism Spectrum Disorder

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## BACKGROUND

Autism Spectrum Disorder (ASD) is defined as a disorder of relating and communicating (Greenspan, 2017). As forming and developing relationships with difficulties in relationships is a hallmark challenge for individuals with autism, there has been an identified need to create social groups for individuals with ASD to facilitate social interactions and teach social skills. 1 in 59 children ages 8-11 years old in the United States in 2014 had an ASD diagnosis (CDC, 2019).

An indication of the need for extra support in the development of social skills was supported by a study of out-of-school participation and behaviors for individuals with high-functioning ASD (HFASD). This study noted significant differences between typical students and students with HFASD in the way that individuals with HFASD participated in less social activities and less physical activities than their typically developing peers. The differences in engagement limit individuals with HFASD from creating and maintain friendships (Hilton et.al , 2018).

Social groups discussed in this poster include the PEERS program, participant led social groups, activity-based social groups, and unstructured social groups. PEERS is a structured social skills group that was was developed out of UCLA as a formal curriculum for adolescents and young adults with HFASD to teach social skills (Wyman & Claro, 2019).This model has been utilized across the United States within schools and in communities by educators, skilled professionals, and community members interested in sharing this program (Laugeson, Gantman, Kapp, Orenski, Ellingsen, 2015). Occupational therapists that utilize the DIR/Floortime model within the United States facilitate participant led social skills and activity-based groups.

Social support groups are also common for parents and caregivers of individuals living with ASD. However, these groups are not reflected on this poster.

## FOCUSED QUESTIONS

❖ What is the availability of social groups for individuals with ASD in Nebraska?
❖ What are the structures, goals, and funding structures of social groups for individuals with ASD in Nebraska, Colorado, and Georgia?
❖ What are the advantages and disadvantages of various social group structures based on perspectives and experiences of facilitators, participants, and their families?

## METHODS

To complete this needs assessment, I gathered data regarding the availability of social groups in Nebraska. I compared the structures, activities, goals, and cost/funding of social groups in Nebraska, Colorado, and Georgia. I observed social groups and conducted interviews of facilitators, participants, and parents. Upon completing these interviews and observations, I noted themes from interview conversations to arrive at my results.

## SOCIAL GROUP DATA
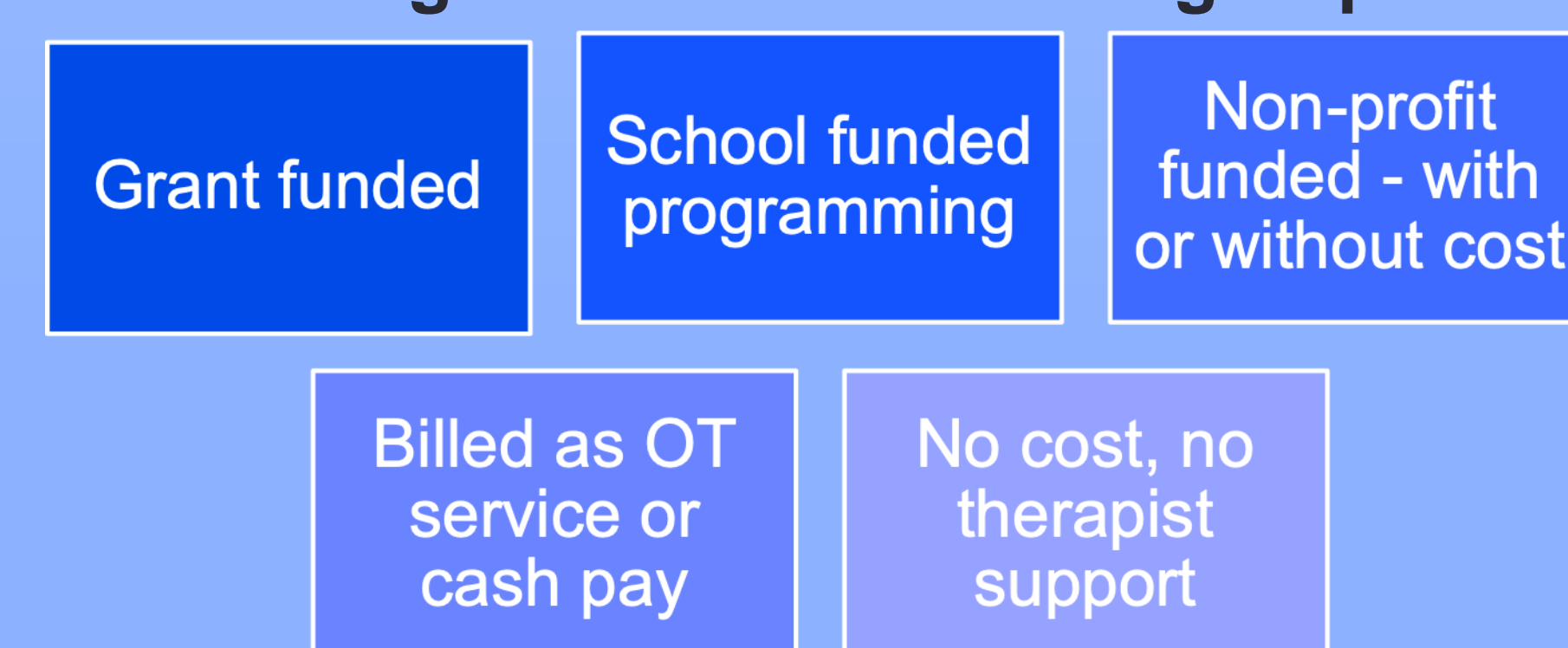
Types of Social Groups for individuals with ASD:

**Groups focused on social skill acquisition**

❖ Structured social skills groups – PEERS program

  ❖ Example activity: role play and group discussion surrounding structured curriculum, frequent meetings based on age, follow-up homework to lessons

❖ Semi-structured social skills groups – Millard High Schools PEERS curriculum (Omaha, Nebraska)

  ❖ Meeting 1x/week for role play, activities, and group discussion surrounding social skills from curriculum. 1x/month the group has a community outing

**Groups focused on peer social interaction**

❖ Participant led social groups with OT support – Zier Institute (Omaha, Nebraska)

  ❖ Meeting 1x/week and alternating weeks between a community outing and a clinic-based time. Past activities: camping, restaurant outings, shopping malls, playing board games, walking from clinic to Starbucks, virtual meetings

❖ Activity-based social groups -- Two Thumbs Up, Inc. (Atlanta, Georgia)

  ❖ Yoga class, tennis lesion, robotics presentation, virtual meetings

❖ Unstructured social groups, peer driven – MeetUp.com (Denver, Colorado)

  ❖ Pizza night meet & eat, virtual meetings

### Funding structures of social groups

| Grant funded | School funded programming | Non-profit funded - with or without cost |
| Billed as OT service or cash pay | No cost, no therapist support | |

| Group structure | Age demographics |
| --- | --- |
| Structured social skills groups | 13-18 years old |
| Participant led social groups | Teen groups: 14 - 18 Young adults: 19 - 30 |
| Activity-based social groups | 15 – 30 years old |
| Peer-driven, unstructured social groups | 18 years old+ |

## RESULTS

**Themes of facilitator perspective from peer social interaction groups (participant led and activity-based):**

❖ Facilitating a social group is one of the most meaningful parts of their jobs

❖ They hear that holding the space for a social group gives participants a place to socially problem solve in a natural and meaningful space with peers and OT support

**Themes of facilitator perspectives from structured and semi-structured social skill acquisition groups:**

❖ Facilitators recognize the need for the participants to use social skills

❖ Relevant social challenges are presented and formal solutions and role play are utilized to promote problem solving for these social challenges

❖ They find the opportunity to support community integration in their formal groups 1x/month

**Participant perspectives:**

❖ A participant who has participated in a school-based structured social group and frequently attends an out-of-school participant led social groups comments that he prefers the participant led group because he can bring social challenges without pressure.

❖ Participants in the participant led group have formed natural friendships with each other outside of the group without it being a requirement of the structure of the group.

**Participant led group advantages**
- Natural agenda – activities depend on what is relevant and interesting to group members on that day
- Community engagement and participation incorporated into the group

**Participant led group disadvantages**
- Cost – also may lead to difficulty with continuity of group members
- OT lead group may lead to expectation that group will be very similar to OT session

**Curriculum-based group advantages**
- Low cost or no cost to participant
- Community engagement and participation incorporated into the group

**Curriculum-based group disadvantages**
- Decreased interest and participation at end of school day
- Curriculum informs discussion
- Carry-over is difficult due to changes in school schedule

## BOTTOM LINE FOR OT

As occupational therapists, we can positively support social engagement and participation through the facilitation of social groups for individuals with ASD. There is a large need for continued support and facilitation of these groups to promote the positive social interactions. In the school-setting and pediatric occupational therapy clinics, there is a recognized need to facilitate and organize opportunities to support due to client and caregiver report of decreased social interaction and desired for opportunity for engagement.

Each of these social groups provide a unique set of advantages and disadvantages. Ultimately, all groups exist to promote and support social engagement and social skill development to increase functional participation and independence.

In the time of the COVID-19 pandemic, many social groups have transitioned their activities to virtual meetings. These virtual meetings have maintained a similar structure to the in-person groups. Participants in the participant led teen groups and activity-based group have reported a familiarity with video conferencing and enjoy the opportunity to continue to engage.

Occupational therapy through its practice framework and mission continues support the facilitation of social groups as it is advantageous to facilitating engagement in the meaningful occupations of individuals living with ASD. For occupational therapists passionate about working with individuals with ASD, facilitating a social group can be a meaningful addition to direct-client care and OT practice.

## REFERENCES

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