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Centre for Child and Adolescent Wellbeing



SOCIAL SPECTRUM

Fostering Social Skills
Across Lifespan



AUTISM & BEYOND - IV



An Initiative by Centre for Child and Adolescent Wellbeing (CCAW), New Delhi



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Fostering Social Skills

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Note From The Founder

Autism and Beyond, Series 4 – A Parent Empowerment Book is in continuation with the last three years release of *Autism & Beyond Series*. This year, on 2nd April 2017, Centre for Child and Adolescent Wellbeing (CCAW), New Delhi is proud to release, '*Social Spectrum, Autism and Beyond – Series 4*'. This is a special edition focusing on developing and enhancing social skills in children, adolescents and young persons with Autism Spectrum Disorders (ASD).

Across the globe, as children with ASD grow, social skill deficits are one of the most important challenges faced by parents and caretakers. This issue covers varied aspects related to fostering social skills across lifespan. Newer advances in Bio-medical interventions, role of parents as partners and facilitators, pre-requisites for building social skills in school children, social skills across adolescence and life span, focus on friendships, the journey of a mother and various important applications are the key areas specifically covered in this issue.

I am thankful to all the CCAW team members for their excellent and dedicated work in bringing out this edition. Special mention to the editing team for spending tireless days in making this books a reality.

I truly believe that with this endeavour, we at CCAW have added another tiny drop to the vast ocean of support required by the ASD community.

I am highly grateful to all the families with an ASD member, Akhil Autism Foundation (USA), and my family for their continuous love, support and encouragement. I am also thankful to Ms. Jasmine Sinha, our event consultant for all her efforts to bring this event together. We hope that in the future, we at

CCAW will continue to develop more and more resources that will be helpful and beneficial to parents and care takers.

With my deepest commitment to the ASD community...

Best wishes

Dr. Deepak Gupta

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New Delhi

Foreword

Bio-Medical Interventions and Social Skills

Dr. Deepak Gupta

Child and Adolescent Psychiatrist

Bio-medical interventions in children with Autism Spectrum Disorder (ASD) emphasizes the need to address medical issues in children with ASD which include gut, metabolic, neurological, methylation, heavy metals and oxidative stress. Addressing these various medical issues helps to improve the core features of ASD.

Various bio-medical interventions, which help to improve social skills, are as follows:

Oxytocin, a hormone produced by the brain, which is associated with good feelings and emotions. It is the hormone associated with reducing the stress response and general anxiety in people. The last two decades have witnessed a surge in research investigating the application of oxytocin as a method of enhancing social behaviour in children with autism. According to a research done by Hollander et al. (2007), oxytocin increases the retention of social cognition in autism. In a review done by Stavropoulos & Carver (2013), the role of oxytocin was also particularly noted in the development of joint attention.

Communication is an essential tool in the realm of our social behaviour. With the bio medical perspective, language and communication in a child with autism is addressed by *folinic acid*, which is a reduced form of a B vitamin known as folate and is also vital for normal neurodevelopment. Defects in folate metabolism can cause secondary physiological abnormalities, some of which have been associated with autism. Preliminary studies have suggested that a folinic acid intervention is associated with receptive and expressive language

improvements. In a study by Frye et al., (2016) it was noted that folic acid is associated with significant improvement in verbal communication, as well as core and behavioural symptoms, but only in children who were positive for folate receptor- α auto antibodies.

A study by Autism Speaks (2016), conducted on the effect of folic acid on communication found that it eases the symptoms of autism. Further based on findings from the study, Edward Quadros, a senior researcher, suggested that if identification of autism and the presence of folate receptor as auto antibodies is done early in life, it may present an opportunity to prevent at least some of autism's developmental deficits with folic acid treatment.

Another crucial aspect of treating autism bio medically is *methylation cycle*. Ninety per cent of children diagnosed with autism have demonstrated methylation impairment. Heavy metals like lead and mercury can further damage the body's ability to methylate DNA. Research has shown that children with autism have impaired methylation and decreased levels of glutathione (Deth, et al. 2007). Supporting and/or repairing the underlying impairment and deficiency may translate into increased social, cognitive and language development. Based on the findings of the above study it can be said that impaired methylation may lead to increased risk of neurodevelopmental disorders like autism.

One of the most necessary elements of methylation cycle that encourages success in autism is *Methyl B12 injections*. Research from the Arkansas Children's Research Institute in July, 2014 has shown that methyl B12, when injected helps to support methylation and production of glutathione. Another study by Gupta & Tandon (2012), at the Center for Child & Adolescent

Well Being (CCAW), New Delhi, gave promising results for an increase in social communication in children with autism. In this study it was specifically noted that out of 75 children, 61.3% of the cases, i.e. 46 children showed remarkable improvement especially in sociability, in terms of social responsiveness, understanding, alertness and increased eye contact. 72% of the total population i.e. 54 children, showed an inclination towards being more verbal (being able to use one or two words at a time).

Another core feature that must be addressed while treating autism are repetitive behaviors. Biologically, these behaviors are linked to the levels of *serotonin* in the brain. Serotonin plays a role in regulating mood, food intake by stimulating the gut and regulating sleep. It also plays a role in social behavior, as lower levels of serotonin have been associated with the atypical behaviors common in individuals with autism.

These levels are controlled by an essential nutrient known as Vitamin D. The vitamin D hormone activates the gene that produces serotonin in the brain; therefore, a vitamin deficiency could lead to lower serotonin levels. Researchers have established a link between serotonin and certain behaviors of some children with autism, a link that may lead to new treatments for autism (Allday & Finz, 2014).

According to Carissa Cascio, Ph.D., assistant professor of Psychiatry and autism researcher at the Vanderbilt Kennedy Center, “there is a relationship between sensory difficulties, specifically tactile defensiveness, and the serotonin system in children with autism” (Bricker-Anthony, 2016).

Another key element of the bio medical treatment where parents often face challenges is the *diet*. Most parents would agree that it is one of the hardest parts of the treatment. However, for children with autism, consistent dietary modifications often

work as an asset for them in their course of bio medical treatment. Although carbohydrates, dairy and sugar help children feel good, this gratification is short lived, leading to the next gratification cycle. It is crucial to interrupt this cycle that is toxic to the brain. Many studies have shown that restricting carbohydrate helps improve brain function (Williams et al., 2011). Research shows that 91% of children with autism improve on the GFCFSF diet and it is the single most effective therapy that helps children talk (Bortfeld & Romaneic, 2016 cited in 'Families with Autism: Journey Guide', TACA). Also diet is merely a change of food, so it's not invasive or dangerous for the child and there are a handful of supplements that can help spur on more verbalization. The supplements that generally help speech production are TMG (trimethylglycine) or DMG (dimethylglycine), P-5-P (Pyridoxal 5-Phosphate, a vitamin B6 metabolite), flaxseeds and essential fatty acids. The diet that best supports the methylation cycle is the "paleo" diet that only includes meat, vegetables, fruit, nuts and seeds (Doherty, 2014).

Few biomedical practitioners also characterize autism by certain physiological abnormalities, including oxidative stress, mitochondrial dysfunction and immune dysregulation or inflammation. *Oxidative stress* is often defined as an imbalance of pro-oxidants and antioxidants. Research suggests that oxidative stress in autism may contribute to the development of the disorder (Chauhan & Chauhan, 2006). A study by Waly et al. (2011), displayed that lower antioxidant capacity in the body leads to heightened behaviours related to autism. Based on all the findings, oxidative stress clearly plays a major role in heightening the features of autism. With regard to bio-medical, *Glutathione* is the body's master antioxidant. It is needed to protect the brain from toxicity and is in fact the limiting step to a child's development.

In my experience, most of the time parents are involved in various psychological interventions to improve the social skills of their children. On the other hand, working on neural substrate in brain structures involved in social and communication skills can really help children with autism in their social skills and peer interactions. Awareness about various bio-medical interventions to address these issues is very important. Timely, holistic interventions involving bio-medical and psychological interventions at critical period, i.e. first five years, of child development remains a cornerstone in successfully mainstreaming the child in the society.

Over the years in my clinical practice, maximum improvement in the social skills of children with autism has been seen from consistent dietary changes, oxytocin, working on the methylation cycle and folic acid. When taken together, if bio-medical issues are addressed along with various psychosocial therapies in children with autism, social skills can be enhanced to improve their quality of life leading to better adaptation in the society.

Parents: Our Co-Partners

Dr. Shilpa Gupta

Parenting Coach & EFT Trainer

With most of the parents that I have come across there is one question that comes to the mind of every parent during their journey, “What will happen to my child?” This question leads to emotional turmoil, which may create agony lasting split seconds to months or years. “What will happen in the future?” The uncertainty, the inability to look into the future invokes fear and feelings of restlessness and helplessness in one’s mind.

What was worse was that I did not know how to guide or handle this question or comfort the parent till one day I read the story of Donald Triplett who was the first person to be diagnosed with autism. He was only given a diagnosis, but there was no intervention.

At that time no one knew how to handle autism. I read his story a few times and realized that his parents actually prepared their child for the future. Mr. Donald has an entire village as a support structure; he plays golf; plus he has travelled many countries on his own. Many a times I think about the state of mind of the parent and them coping with the challenges when there was no reading material, researches or YouTube videos for a mind to understand the differently-abled capacity of a child and yet raise an independent child. The magic was in the ability to teach life skills which could also be called as ‘social skills’.

Three months back a couple was referred to me and their teenage son had the label of Asperger’s (I usually use the word label because it allows the mind to look at the human being beyond the diagnosis). To give you all a little background the

parents were referred to me as the mother was extremely anxious and the boy was showing behavioural challenges. The mother had been insisting on academics and he would throw tantrums as he did not want to study any further.

When the parents shared their side of the story and the journey of their child, I realised how committed they were and how well they had managed their child's needs which made me feel so empowered. Yet, I saw the same doubt in the mother's eyes and finally she broke the silence saying, "I am always worried about his future". "What will happen to him after us?" I saw her eyes fill with tears. I asked the parents to accompany me to another room where I had a white board. I made them sit comfortably and asked them to close their eyes and take a few deep breaths. I asked them to visualize the future of their child 15 years from now and see him living a happy and comfortable life. I could see the mother had a smile even with her eyes closed. I asked them to open their eyes and report what their child was doing. They both had very similar and surprisingly very simple expectations, "We see our child has a lot of people around him. He is living a good life". I asked them, "What all does your child need to learn to reach that goal?" The father was very quick in answering, "Money management, taking care of his needs and trust worthy people".

Based on what the parents told me, I jotted down all their concerns and points on the board, following which they kept looking at the board in silence. After a few moments, I asked what amongst these targets would be achieved in school and they shook their head in silence and then whispered, NONE. I further asked them who they thought could help the child achieve these goals. The mother said in a soft tone while still staring at the board "Only me" and then held her husband's hand and said, "We both".

Together, we did backward planning plus broke down the goals to the present time where the mother said, “Now I will teach him how to make his bed and prepare tea” and the father said, “I will slowly introduce the concept of money”. It took us just 2 and half hours of collaborative brainstorming to figure out the present day goals. The mother while leaving also mentioned, “I will tell his therapist to also work on these goals”. The father turned back while leaving and said, “We feel much sorted as if all our worries are taken care of and we can prepare our child for the future”. After they left I sat for a few moments and thought; *I wish every parent could do this small exercise of closing the eyes and seeing the future and then creating the present day goals for social skills.*

This brings to my mind, John Elder Robinson, a famous author of the book, ‘Look Me Into The Eye’ who was diagnosed with autism at the age of 40. In one of his interviews, he shared a very beautiful statement that has till date stayed with me in my heart which highlights that a therapist may not be able to help a child completely but plays an instrumental role in making him/her as functionally adept as possible.

I personally believe that the best cannot be created with only the therapists working with the child. Optimum improvement is observed when the child does the same with practice at home and the parent adopts his or her parenting style and techniques to the need of the child. The parent has to take over the role of the therapist, as a parent will work with intuition, taking advantage of the bond with their child. It is this practice of social skills that can bring out the best in the child.

Rediscovering the Strengths and Mastering Skills of Young Children with Autism

Shreya Tandon¹ & Ishani Ahuja²

¹ Psychologist, ² Associate Psychologist

Childhood days is considered as the golden days of one's life. We were far away from any responsibilities, stress and worries. All we had to do was play hard and sleep tight. Those days were really the golden days, which are never going to come back in our lives.

As a child, growing up in the era of 90's, we now know, life indeed was bliss in those days. When the day began with running outside to play in the park, the open verandas of our house with clay, sand, and toys alike, to making our own imaginary games with stones, grass, and some others being '*unchneech ka papda*', commonly known as land and water, hopscotch, hide and seek, ring-a-ring roses and many alike until the street lights came on.

To every Sunday sitting under the sun with Nani and Dadi or mama putting oil in our hair, it always meant a family day with smell of *pakor*as and *chole bhature* being cooked in the house that woke us up. It also meant picnic day to places like India gate, just for that yummy orange bar, the zoo to gaze at the intriguing and mesmerising animals, and lodhi garden for all school trips and family picnics.

Whether it was a big gang of us chasing each other around the park, or even if we were out playing by ourselves, we always found some way to entertain ourselves because as children, all we needed was our imagination.

Children with autism are as naughty merrymakers as we were,

as little children growing up. But just because they may not be able to communicate their desire to delve in as much naughtiness and frivolity as other children verbally doesn't mean they aren't communicating. Children with autism, who are just beginning to communicate often express themselves by leading your hand to what they want, handing you items or placing your hand on items (i.e., placing your hand on a windup toy to activate it), pointing to what they want, crying or exhibiting behaviours like flapping hands, going round and round in circles in open spaces, smiling to themselves, many a times at us and staring at us closely. But these are just their forms of expression to communicate what they feel and what they like. The reason your child may suddenly start jumping when you are walking on the road with him, may not be because he is socially awkward but the reason he jumps is because he's seen something in his surroundings that has surged such happy feelings in his heart. The reason he jumps may be because the sky looks so vast and beautiful to him that it's enough to make his heart quiver and fill it with joy. The reason he jumps is because the bird that just flew past him was so beautiful to his eyes that he couldn't resist himself and jumps at it like we may jump at by looking at a butterfly.

As Higashada, a young boy with autism explains in his personal account "The Reason I Jump" (which is a one-of-a-kind memoir that demonstrates how a mind with autism thinks, feels, perceives, and responds).

"Our bodies don't feel like they are our own. Stuck inside them, we are struggling so hard to make them do what we tell them. As a result, its either a flashback of a terrifying or beautiful memory from the past that may make my body jump and my hands flap in all directions. That's how I know to express myself".

While growing up, amidst the huge sensory input around them

the only way they could draw a connect with their parents is by using their body as a medium to communicate and express themselves. All our brains are wired differently which in turn manifests uniquely each one of us. Then why is it that when a child with autism acts on what they've learnt becomes so overwhelming for us?

These are questions as parents and professionals we probably need to reflect upon. We often hesitate from taking our children out to interact with others thinking that they might harm self or others in open spaces. Pause and think are we caring for them or is that our fear?

The desire to interact with others is often in place in individuals with autism, but the processes that allow social interaction to occur can be so overwhelming that they do not know where to begin. Take care not to interpret social deficits as a lack of desire or avoidance of social interaction. Keep in mind the issues of timing and attention, sensory integration and communication, and recognize that to build social skills all of these issues need to be addressed.

Social ability builds on skills of imitation and reciprocity. Reciprocity, the give and take of an interaction, is a critical social skill necessary for developing a relationship. Typical individuals build strong relationships on reciprocity and socially demand it. Relationships are not based only on one-sided giving. To create true reciprocity, it is important to engage a child on his terms and interests, not just expect him to engage on yours.

While we shouldn't delay teaching children functional or symbolic communication skills, we also shouldn't ignore the importance of cognitive development and the impact it has on language development. So, encourage their cognitive growth with early stimulating interactions both inside and outside

home. Neural circuits create the foundation for learning, behaviour and health. They are most flexible or ‘plastic’ during the first five years of life. Over time, they become increasingly difficult to change. The brain is strengthened by positive early experiences; especially stable relationships with caring and responsive adults, supportive environment, and appropriate nutrition.

Recommendations

- **Cultivate social development at a young age**
Be the motivation. When playing with your children, be the source of FUN. Children like to be chased, tickled, played with, and made funny faces at.. The idea is to make your presence the most motivating thing in the room or at least enhance the thing that most interests them.

- **Let the child “BE”**
Let the child go out, play in open spaces, let him run around as much, jump all over the place, make sounds because after all it’s the child's way of discovering the world around him. He/she deliberately seeks out new spaces, expertise and learning opportunities at every stage that shall help him or her grow. Therefore take advantage of a child's natural desire to learn by exploring the world around him. Pick on the cues he/she gives you. Let our insecurities and fears not become the barriers in their process of exploration.

- **Encouraging language development**
Children with autism often engage in repetitive play and preoccupation with non-toys in the early years. When they are focusing on a task (i.e. playing with car wheels, playing an instrument repetitively, building a tower

again and again), narrate their every move. For example, “*Arjun is playing with a car*”, “*Let’s drive the car*”. Then start passing the car to each other. This will encourage play and will involve turn taking. Giving vocabulary to the play and actions which the child is doing, will encourage language and play development.

- **Structured play time is a MUST**

Play is an essential part in the early years of development. Other than spontaneous play, structured play time could involve activities he/she likes, basic activities like fixing puzzle pieces to building blocks where you can focus on your child. We must not limit our child’s potential because it is simpler to place them in a restrictive environment than let them be free. So let’s not just leave them with iPads and mobile games, because it’s convenient, but create space for the children and ourselves to go that extra mile where we step out. Let’s create greater avenues to spend more time with our children, play with them the way they express themselves and you will be surprised to find the child inside them come out.

- **Play dates with a buddy**

Send them to play dates with other children (not in a larger group, always start with a smaller group, and please don’t be worried that they might hurt themselves. Didn’t we as children do that all the time while playing? We always fell off the bicycle, got those little knee-scratches and got dirty in the mud. But today when we look back aren’t they the most precious days of our childhood that we may miss so much.

Probably it indeed holds true, “*Dag ache hotehai*”.

These early experiences may serve to be really important as that’s how a child learns easily, the social

skills to interact with other children, wait for his turn and share with others. These are all virtues no one really taught us with a rulebook but we gradually learnt over time. That's exactly the same experience we need to give our children.

- **Community Visits**

Go on shopping sprees together and don't be scared of them going to every corner of the shop wanting to touch the items placed on display. It's just their natural instinct through which they may try to know the world around them. Preparing them in advance before going outside using a visual cue can help them become more comfortable and prepared for the social situation. Taking them to the zoo, parks, India Gate, rickshaw rides, temples, gurudwara, restaurant visits, etc.

- **Family functions**

Take them out for family functions as often as possible because not only is that the best platform for them to get all the love and attention from the family members that they truly deserve, but like all other children, it's the perfect opportunity to play with the other siblings in the family. Such an experience may be quintessential in sowing the most important seeds for early socialization. Carry their personalized bags with favourable items, for them to engage in play if bored.

There are always going to be both good days when the child is playing with you, wrapping you up in snuggles and not-so-good days when the child feels over stimulated by the environment and feels tensed. But let's halt and think for once are they doing it on purpose? Don't other children in your locality be as difficult on certain days and as innocent like an angel on other

days? At the end of the day they are all children, and we are all humans with different range of emotions and feelings that we undergo each day.

So each time you maybe at the brink of giving up on your child, think of those beautiful sunny days, after all it's not easy to constantly keep sailing in the stormy sea and it's not easy to parent a child with autism. But hang around; keep investing in harnessing their everyday life and social skills because that is what is going to make your child into the person he's going to grow up into. Don't deprive him of the childhood that all the other children may experience as a regular process. He/she maybe like the lotus, which may grow up in the muddy waters while all other flowers may grow up in the lush green grass, but your child is as beautiful as the other flowers!

Social Skills in Adolescents with Autism

Kritika Mehta¹, Sonia Puar²

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Adolescence! Adolescent years can be very challenging for any child, and for a child on the spectrum with challenges in social interaction and communication, it can be rather puzzling.

Once considered rare, currently, it is one of the more common developmental disorders. It is estimated that every 1 in 500 children in India or more than 2,160,000 people in India have been diagnosed with Autism (Rehab Council of India). So it would be wrong to think that you are alone in this journey.

The symptoms usually show most between 12-18 months of age (Johnson & Myers, 2007) and with intervention these concerns can be managed. Therefore, by adolescence these symptoms change in manifestation, and one of the most affected areas in adolescent and adulthood is social skills. Gradually, as the children grow up, communication improves and there is a decrease in stereotypical behaviour. However, the social interactions continue to be a challenge in adolescent and adulthood (Seltzer, et al., 2004).

Social skills are needed for anything and everything, be it in a classroom, at workplace, at home in a family etc., for sustaining relationships. From something as basic as turn taking to knowing when not to say the entire truth. Teenagers with ASD do not learn these skills naturally or pick up on social cues. Symptoms become more visible with age as the social context becomes more complex.

Adolescent transition represents one of the most dynamic, broad and influential periods of human development. The changes that

occur during this period are sweeping; spanning biological, physical, psychological and behavioural domains of functioning. The breadth of these changes makes the period somewhat risky, given that problems in one domain may spill over and influence functioning in other domains. At the same time though, the transition may also represent an ideal time for interventions, largely for the same reason. Small alterations in one domain could have large, cascading and potentially long-term effects across other domains.

In adolescence, the social world and its influence have a huge impact. The way they respond to the challenges, deal with the stressors and the personality they develop as a consequence depends hugely on the experiences during this time. Some of these challenges are inevitable; however, others are affected by the social world. Such an effect is cascaded in individuals with autism because their individual characteristics, mode of expression and life circumstances are exceedingly heterogeneous in nature.

During infancy, the brain is wired to pay attention to faces, as opposed to other objects in the environment (Valenza et al., 1996) and to prefer the sound of a human voice over any other sound (Fifer et al., 1994), paying special attention when that voice is loaded with strong emotion (Grossmann et al., 2005). When a child reacts to a face or a sound of a human, they receive reinforcing feedback like a smile, a hug or a pat, which strengthens their response over time.

Such a stimulatory environment and the social interactions of children in the initial years of life have a direct impact on the child's emotions and social relationships from childhood into adolescent and adulthood. However, children with autism lack this ability to connect with human faces and voices (Osterling et al., 2002). Even when the child is attached to the parent, they do not connect with the faces and voices, thus lacking the initial

social experiences, which later form the basis for social interactions.

Due to this compromise of social interactions, the theory of mind, which is the understanding that other people have their own thoughts, perceptions, and intentions separate from one's own (Premack & Woodruff, 1978), is impacted. To understand non-verbal cues, interpret tone of voice, predict one's behaviour, theory of mind is very important, especially in adolescence, as teenage relationships come with several unspoken social rules, like, honesty might not always be appreciated and there are no set rules for communication, it depends on the situation and the person involved.

As a child with autism reaches adolescence, they may have mixed feelings about how to act in social situations often as a result of what may be called as an 'acquisition deficit' referring to the child's inability to perform a particular social skill because of lack of exposure or knowledge of it. All through their childhood, they may have faced discouragement, rejection and felt really confused while socialising because of lack of an appropriate medium of expression. The child may have many wonderful qualities to offer but the lack of social skills, may often preclude them from establishing meaningful social relationships as these social skills and a lot of the social rules seem illogical to adolescents with autism for example, they have a hard time understanding jokes and sarcasm.

In teenage years, distress increases as the social expectations increase and they become more aware of the deficit. Emotional outbursts could increase in teenage years. As a child hits puberty, hormone surges can cause dysregulation of emotions. Developmental delays can affect sexuality as well. Physical development doesn't necessarily mean emotional maturity or even basic clarity to know how to take care of urges or even comprehend them. All these changes, along with social

expectations cause a lot of confusion and anxiety.

To cope with these emotions, often adolescents may either isolate themselves or form a restricted social circle that understands them, have common interest (socialising not being one of them). However in comparison to the long held notion that children with autism lack an interest in social interactions is often inaccurate. Many children with autism do indeed desire social involvement; however, these children typically lack the necessary skills to interact effectively. Therefore, it becomes more important for us to understand and provide meaningful aids to help them. They may manifest their ways of expression in their social environment, and form friendships, based more on their developmental age and common interests as opposed to their biological age. Providing support and helping in regulation of one's emotions serves to be an essential step in boosting their self-esteem and hence quality of life.

McGovern and Sigman (2005), found that when individuals with autism were more socially engaged with peers, they gained more adaptive skills than their peers with autism who were not socially engaged with 'non-disabled' peers. They concluded, "Engagement with peers improves the social skills of children with autism as is true for typically developing children". Further, they note that as children with autism enter adolescence, they show increased social interest.

Strategies to develop social skills

Social stories: Social stories can be useful for explaining social rules. Seeing things from someone else's point of view and understanding how someone else is feeling are important social skills but they can be hard for teenagers with autism. For example, you could use a social story to explain how to greet someone, who to shake hands with, discuss physical

boundaries, etc.

Using social stories in such situations, for example, a story of a rabbit, and asking questions like, ‘how do you think the rabbit felt’, ‘what do you think the rabbit could have done in the situation?’ etc. They are a very effective way to work on perspective and look beyond the rigidity.

Using everyday situations: You can also use everyday situations to encourage your child to see situations from another person’s perspective. Throughout the day, for example, tell your child how you’re feeling, and why you’re feeling that way. And you can ask your child to describe how she thinks you might be feeling. For example, ‘I dropped the scoop of ice cream on the floor. How do you think I feel? How would you feel if that happened to you?’

Preparing your child before going to a social place, about the expectations, who all will be there, what they will do, will acquaint them with the situation beforehand.

Comic strip conversations: provide a visual aid to work on a situation from a second or third-person perspective. Comic strips can be used as a visual aid in composing social stories.

Role-play: Role-play is assuming a role to consciously act out an adopted role in a particular situation. They are a good way for your child to practice social skills. For example, you and your child could role-play the skills you need when you meet someone, such as saying hello, asking how he or she is and saying thank you. You could talk to your child about what skills and situations he would like to practice. Your child could also try role-playing with other family members or friends. This will provide them with a script and the skills required in various social situations. To make things more interesting and real, one could also use props, for example, to practice interaction with a

fruit vendor, we could actually lay out the fruits.

Watching TV programs: While watching TV programs, give your child some idea of how to act and not act in different social situations. For example, you could have a conversation around a scene and ask “How else the character could have responded” or “Why do you think he/she behaved like that?” You could record an episode and pause it to talk about what your child would do next in that situation.

Video modelling: You can buy ready-made videos to help your child learn social skills, but making your own is also an option. For example, you might record two of your friends having a scripted conversation that shows how to start a conversation and what to say. Or you could video your child taking turns, so that he can watch himself modelling the behaviour. You could also use videos to help your child understand facial expressions, body language, and tone of voice and so on.

Picture Cards/ Prompt Cards: You could use pictures to show how people let others know they’re interested in having a conversation. For example, the pictures might include someone looking at you and smiling, or someone looking away or yawning. You could use photos to show different facial expressions and body language.

Prompt cards can be helpful to remind your child what to do in different situations. For example, you could pass a ‘My turn’ card back and forth to practise taking turns in a conversation.

Lists: Making a list of topics that are unacceptable and acceptable to talk about with a person in a particular situation can be handy. This list can be in the child’s pocket.

Computer games/apps: Using computer games and apps that

help develop social skills. A lot of these apps are mentioned in the book later.

Social groups: Social groups consist of 6-8 children that target social skills from turn taking, sharing to initiating and sustaining a conversation. It gives them the space to interact with their peers, share experiences and make friends.

Young people on the spectrum are gifted, have a plethora of strengths, they just require recognition and to be worked on.

“It is never too late to expand the mind of a person on the autism spectrum.” –Dr. Temple Grandin.

(Temple Grandin is a 69 year old American Professor who was one of the first few to be diagnosed with autism and is a spokesperson of the same sharing her own personal experiences).

Lifespan: Perspectives on various stages of Social Difficulties

(Through Childhood into Adolescence and Adulthood)

Indu Chaswal

Autism Expert and Special Educator

I am beautiful, not broken,

Different, not less,

Challenged, not challenging,

Overwhelmed, not spoilt.

Autism is not a choice, acceptance is.

The appearance of autism within a family always brings about its challenges. There will be different issues that present themselves according to the age of the child. Therefore, the concerns of parents and the needs of their child change from childhood into adolescence and as adulthood sets in.

Following the initial diagnosis, many parents experience loss of the ‘anticipated or the so-called normal child’. In the beginning, autism seems like an enigma, difficult to understand and highly complex. Families therefore move typically through stages of grief: denial, anger, despair and finally reconciliation. From the child’s perspective this is a difficult stage. Diagnosis takes place at the time when social expectations start emerging. These include eye contact, response to name, joint attention and a constant need to seek attention by ‘showing off’ and ‘imitation’ of adult roles along with a lot of pretence. Language is the hallmark of the early years of life as it develops very rapidly. When parents notice that these skills are either limited or absent they start running from doctor to doctor/ therapist to therapist.

At this stage the child is almost under radar, often losing on the most beautiful initial social bonds of life; parents who are normally expected to become children when they have their own, turn very serious and sometimes even stop playing with them.

“I don’t really understand why it’s considered normal to stare at someone’s eyeballs. “

John Elder Robinson

Social skills are most important in a person to ‘fit’ into the society. However from the family’s perspective, speech, pre-academic skills like naming, attributes, number, alphabet and handwriting become the topmost priority, as the child has to join a school. In reality it is easy for the child with autism to learn these concepts versus picking up social cues and rules from the environment. Diminished motivation, over or under selectivity, lack of social understanding of even basic skills of sharing and reciprocity (like turn taking and waiting) are some of the difficulties that come in the way of school performance. More about early social skills has been elaborated in this book in the article- ***‘Rediscovering the Strengths and Mastering Skills of Young Children with Autism’*** by Ms. Shreya Tandon and Ms. Ishani Ahuja.

As a child moves into teenage, social relationships can be complex, unstable and variable as they are full of unspoken social rules. The teenager with autism might need to work on learning these rules, along with basic social nuances, such as what is appropriate to say in a situation, using simple social courtesies in language (please, excuse me, may I, thank you etc.), maintaining social distance and differentiating between strangers and known people.

Difficulties of teenagers with autism in social situations can be summarized as a limited ability in the following:

- Awareness and understanding of what other people are thinking and feeling. They pay less attention to others' emotional displays and therefore show less empathy or shared emotion.
- Understanding facial expressions and body language of others.
- Adjusting to changes in social situations.
- Critical thinking in solving social problems or making decisions, such as what to do when you disagree with someone.
- Understanding unwritten social rules.
- Understanding of self is limited which leads to a lack of awareness of how their behaviours would be interpreted by others.
- They lack social initiation and responsiveness to peers.
- They have limited nonverbal communication. Gesturing and emotional expression may be absent.

Social-Emotional Changes During Adolescence And Adulthood.

*It was easier to solve an Engineering Problem
than figuring out how to interact socially*

Temple Grandin

A person with autism may physically mature at an expected rate but social and emotional changes may not be at par with the age; they may be limited or very odd.

The individual may seek some independence in some form. If people around tend to control his/her life there can be meltdowns. The person is ready for more responsibilities that are actually not entrusted upon him/her. This happens because the people around this young adult undermine his/her ability. Awareness of differences starts developing. Behaviours that were earlier accepted are now considered unacceptable. This causes confusion. Physical changes in appearance add to confusion; growing up can be scary if not explained in a concrete manner. Disclosure of differences (versus disability or difficulty) needs to be worked upon with the individual.

Associated conditions like anxiety, depression, increase in obsessive behaviours come in with adolescence and adulthood. Impulsivities may increase. In fact, adults with autism do try to exert control over their impulses and their parents and teachers need to give them the right space and not be too indulgent or restless themselves. The adult with autism does not like to be treated as a child. Too much of feedback, spoon-feeding may not be appreciated by them and they might yearn for their private space.

Contrary to the belief that autism means ‘self-absorbed’, most grown-ups actually seek friendships, acceptance and affection. They just do not know the socially appropriate way of expressing and securing the same. Therefore, adulthood is probably the most emotionally brittle and lonely stage of life for them.

Sexuality and Sexual needs

Sexuality is more than just the act of sex. It’s the way one perceives the developing body. It is how the person understands feelings of intimacy, attraction and affection for others and how he/she develops and maintains relationships. Sexuality is important to a person’s holistic development.

Adults with autism have normal sexual development like their peers, but they might have sensory issues that interfere in the expected sexuality. For example, many of them may have needs for intimacy but proximity is affected due to tactile or olfactory issues.

Like others, they may have romantic feelings, experience sensations and attempt to satisfy such needs. However, sexual and romantic experiences and feelings may impose additional challenges when such emotions may be manifested in odd and socially undesirable manner. On the other hand, many adults with autism can find it hard to understand feelings of intimacy, attraction and affection in themselves and others.

Concept of consent is difficult to understand by a mind affected by autism. Concepts related to safety from sexual assault, unwanted pregnancy and sexual diseases do not develop naturally. Therefore, these concepts have to be integrated in the training of adults with autism.

Change in Parental Perspectives

The roles and responsibilities of parents of children with autism shift as their children age and move from early childhood through the various developmental stages of life (Marcus, Kuncze, & Schopler, 2005). In the early years the concerns revolve around an appropriate diagnosis, services like therapies and early schooling. In India, there is an over emphasis on the role of the mother as a caretaker and the father as the 'breadwinner'. Siblings, if any, are sometimes expected to take up 'surrogate roles' in looking after the child. However, with an increase in awareness and the advocacy of autism and its inclusion in the National Trust Act and now in the amended Persons with Disability Act, the scenario is gradually changing.

Adolescence is the time that is most difficult for the parents.

After having acquired ‘acceptance or reconciliation’, puberty hits the child and brings with it fresh challenges. Concerns revolve around social security; protection against abuse and finding placement after school age is over. At this stage, the differences in their child become more apparent and parents have to find new strategies of not just handling the child, but also the community in which they live. Behavioural difficulties and lack of flexibility can cause a severe handicapping condition for the family. Knowledge of management (behavioural as well as medical and biomedical) can be very empowering for the parents.

When adults with autism reach 18 years of age, parents are no longer their guardians and they have to secure legal guardianship to be able to secure the future. Socially, it is a stage in which the adults with autism have very limited exposure because in our country services for this age group are very limited. Unfortunately, not everyone has a meaningful transition plan developed, and the transition plan is totally dependent on available community resources. There may be associated psychiatric conditions and with the parents getting older themselves management of the person becomes a rather difficult task. Parents of adults have high priority on deciding ‘what after us’.

A person with autism is an asset in the family. Parents become more sensitive, empathetic, god fearing and better citizens. Yoga, meditation, healthy habits have been adopted by many families to stay fit for their children. Ms. Kritika Mehta and Ms. Sonia Puar have further elaborated strategies for development of skills in the article ***‘Social Skills in Adolescents with Autism’***.

Despite the importance of social skills, it's training is often not considered important and as the child with autism grows into

teenage and then adulthood, one realizes what is lost. It is very important to start the training when the child is young. However, it is never too late. Individuals will have diverse capabilities and interests; parents and teachers must learn to generate positive and creative ways to make the training effective. And of course create an inclusive society where every individual is valued!

According to Henry Ford-

“Coming together is beginning, keeping together is progress and working together is success”.

Friends and Friendship for Life

Indu Chaswal

Autism Expert and Special Educator

A friend is someone “who knows all about you, but still loves and trusts you”, someone “who has not just heard stories about you but lived them with you”!!!!

This fits in so well into the frame of a friend for a person with autism. In neurotypical children understanding of friendship matures over time. Children with autism often have an immature and unusual understanding of friendship. An important aspect for diagnosis of Autistic Spectrum Disorders (ASD) is a failure to develop the expected peer relationships and therefore, at the time of diagnosis the clinicians observe how the child interprets and manages friendship skills.

The concept of friendship indicates there are four levels between early childhood and adolescence (**Tony Attwood, Psychologist and expert on ASD and Asperger’s Syndrome**). The four levels are as follows:

Level 1: 3 to 6 years - This is the first level of friendship skills in which the child understands the element of turn taking but there is an egocentric or simple conceptualization of friendship. Friendship is based on proximity and physical attributes. If you ask Rohan, a four year old, “Why is Samar your friend?” the response shall be “He plays with me, lives next door or is in my class”.

Level 2: 6 to 9 years - The stage brings a better understanding of social reciprocity. However, friendship at this age is based on similar likes and dislikes or on common interests. A child in this stage when asked why someone is your friend, the response maybe “Because he has lots of stickers/ we both play car race/

we go to the music class and sing together”.

Level 3: 9 to 13 years - This stage embarks greater understanding of emotions. There is increased value placed on personal attributes such as trust, loyalty and keeping promises. When asked from a child in this stage “Why is someone your friend?”, the response may be, “Because he helps me in my science project”, “He took my side when Arjun was fighting with me”, “He always waits for me after school” etc.

Level 4: Adolescence to adult - This stage highlights the transition into adulthood wherein peer group acceptance becomes more important. There is sharing of feelings and other personal information as well as a desire to be understood and accepted for differences. If asked, an adolescent in this stage, “Why is someone your friend?” the response maybe “Because he understands my point of view comfortably”, “He/ she accepts my feedback”, “He does not mind when I cannot meet him or do not take his phone calls”, “We discuss things”, “ He advises me well and takes my advice” etc.

Going with an understanding of autism, it is obvious that friendship for someone with autism is probably the most challenging aspect in social skill development. Right from early childhood peer interactions are inhibited and gradually interpersonal skills and social relationships become the most obvious and apparent difficulties. The concept of friendship, even for many high functioning individuals with autism is not easy. For them, two people sitting together, neighbours, the nearby shopkeeper; ‘are all my friends’. Challenges in making friends arise out of the core deficits of the condition; an inability to take into account the friend’s opinions, intentions, expectations, beliefs, make sense of communication (beyond words), picking of social cues like the friend not taking interest

in a conversation. They may not understand the social aspects related to giving the friend an appropriate physical, emotional and personal space. The person may end up pestering the friend who as a result starts losing interest in him/ her.

The starting point in developing of the friendship skills is to start on an assessment of the existing skills and those needed and then moving forward with a **friendly plan for enhancing friendship skills.**

3-6 years of age

In this age group, the youngster needs to identify relevant social cues and appropriate responses to those cues. Begin with activities to teach the ‘entry cues’ (e.g. when someone is giving a welcoming gesture or facial expression, or a pause in the activity or conversation). These acts can be rehearsed through a role-play. The ones playing the role of ‘friends’ and the child with autism to enter into a social interaction when another person says “Hi”, gives a smile, nods, waves or else when the others who are already interacting seem to pause.

The procedure of identifying these cues is first done in planned settings and later practicing can be in natural situations. The parent or teacher can act as a mentor or stage director, giving guidance and encouragement.

Another strategy to learn the relevant cues, thoughts, and behavioural script is to write Social Stories that can be used by the youngster to improve his/her social understanding and abilities.

6 to 9 years of age

In this age group, children develop greater cooperation skills when playing with their peers and they naturally learn to resolve conflicts. It is important that young people with autism

experience more cooperative than competitive games. Competitive games are difficult as these include winning and losing along with rules. Cooperative games are healthier; develop a team spirit by working on a common goal and eventually leading to friendships. Cooperative play also helps develop control of impulses, teaches how to communicate what they want and need. We may need to write social stories about winning and losing so that they learn to accept defeat gracefully. Other aspects of cooperative play need to be recognized. Accepting suggestions rather than being autocratic or indifferent. Giving guidance and encouragement, complimenting others and receiving compliments like, “Wow you did it!” “That was great”, “Give me a high five”, “You are smart” etc. This would even entail social politeness in speech like, ‘thank you’, ‘my pleasure’, ‘excuse me’ etc.

9 to 13 years of age

In this age group, there is usually a clear gender preference in the choice of friends. Neurotypical children at this age are friendlier with their own gender pals as interests match with them. The boys maybe into physical games and may want to have roles like that of ‘the captain of the team’. However a boy with autism may find it easier to approach girls, he can be more readily included in their activities, because girls can be more patient, maternal and supportive. However, being more comfortable and accepted by girls and spending more time playing with them, the child may pick up the prosody and body language of his female friends. This can result in further isolation from male peers. Girls on the spectrum sometimes may seem more interested in seeking company of the boys due to their interest in gadgets, mechanics and literal communication. Youngsters with autism therefore need to be guided towards friendships with both genders in a socially desired manner. Some social planning may be necessary to

ensure acceptance by both groups.

At the threshold of adolescence, children seek more companionship versus play. Rejection from peer group can cause isolation and despair. Individual neuro-typical peers who have a natural rapport with a youngster with autism can be guided and encouraged to be mentors at home, in class, on the playground, and in other social situations. Peers can be encouraged to help the friend with autism in calming down, regulating their mood by stepping in and providing assistance. Emotional peer support can be very useful. This also provides an insight into thoughts, emotions, and social relationships.

13 years of age to adulthood

When the individuals reach this stage, they usually seek friends through recreational pursuits and a transition of friendships to work mates can present some challenges to the young adults with autism. In India, due to lack of employment opportunities as well as lack of sheltered workplaces, adults with autism generally do not have friends. The individual can be desperate to have a friend and may follow anyone who shows the least bit of interest or sympathy. He can also become the recipient of deception or abuse as he fails to recognize the other person's intentions.

Relationship counselling maybe helpful, but it is essential that the professional working along the needs has the knowledge and experience with Autism. Further, in the present age of technology, Internet and Whatsapp can be excellent modes of forming distance friendship bonds. Genuine and long-lasting friendships can develop over the Internet based on sharing experiences, interests, and mutual support. Over a period of time one can learn to select friends and then meet them.

Friendships for children with autism are also very important for

social and emotional development. Friends guide to be more self-confident and perform better academically at school. Difficulty in making friends or in keeping them leads to feeling lonely and unhappy. Parents, teachers and counsellors need to empower themselves to carve the path that leads the person with autism to better friendship skills. These days there are abundant worksheets and exercises available on the internet and in books that help in developing better friendship bonds through training in perspective taking, understanding the grey facts of social life, jokes, friendly teasing versus bullying, self-disclosure etc. Some useful sites are mentioned below.

Perhaps the best and truest facts that we can share with everyone are-

A person with Autism can be the most honest, truest, simplest and the most humble friend; a friend forever.

Useful sites

- (a) Pinterest*
- (b) devzan.com*
- (c) autismteachingstrategies.com*
- (d) theautismhelper.com*

The Social Journey

Harshita Sinha

Mother & Special Educator

A lack of intuitive social ability is a hallmark of autism. You realize this the moment the child with autism comes into the world. It does not matter if the doctor has given a formal diagnosis or not, or if we have read several child manuals to guide us. Since his/her birth deep down we do see subtle signs of the missing links in social communication but we do not acknowledge it thinking (and fervently praying) that they will fade away as the child grows. You are trying to point to a bird or an airplane flying in the sky and the child does not share your enthusiasm like the other children. Response to name, eye contact all seem like a faraway target... And the rollercoaster journey continues from there...

A life that includes a person with autism is a journey, one that can be both challenging and rewarding. As my child turned two, I felt that the promises and dreams I had for my child were forever gone. And then I started to take it one day at a time by working on very short term goals like expecting eye contact for 1 sec/10 times in a day rather than having a long term goal like he will give me sustained eye contact. Working on short-term goals keeps me motivated as the baby steps as more achievable and the little success keeps you going.

Like all other goals with children with autism, social goals are also quite achievable. The golden rule is to be consistent, do task analysis of every goal (break it down into simpler and smaller steps) and teach each one at a time, use a lot of reinforcements, be very enthusiastic whenever the child shows even a little progress. Always remember that what seems very trivial for you is a mammoth task for the child because for a

child with autism being social and following the social rules is the most difficult.

Every few days sit back and take a look at your child to see the areas in social domain that need to be worked on. Make a list and then prioritize. Remember that you cannot teach everything at one go. Teach the skill you have chosen in a one on one setting first and then generalize. Make sure that it is mastered across people and across settings before you pick up another skill. Make sure that at home the child's social behaviour is what you want to it to be outside because he has a difficulty adapting to different contexts easily.

I have followed these principles always in my journey with my adorable son. Today he has incredible eye contact, is responsive to his name, interacts well consistently with family and strangers (adults as well as children), and has a very deep level of receptive and expressive language. His progress has been astounding. We are amazed every day with his growth and look forward to what tomorrow will bring.

The journey is still not over. A lot of areas like making and sustaining friends, understanding jokes and sarcasm, higher-level inference and perspective taking, staying in a conversation even if it doesn't appeal to you etc., are still missing. I make a list every month of the social skills that need to be worked upon and then work on it. We still celebrate every small success. And I am sure in the days to come he will make greater progress and go further up on the social quotient.

“Sometimes all a parent needs is to know the impossible is actually possible. Hope goes a long way when it comes to autism”.

LIST OF APPLICATIONS (APPS) FOR SOCIAL SKILLS

Compiled by Vatika Bharti, Ishani Ahuja

● Communication

1. **AAC Speech Communicator:** AAC speech communicator is an easy to learn communication method for anyone with speech disabilities. The application forms grammatically correct sentences (which are read out) from a list of pictograms that are clicked (text-to-speech). *Available for Android Phones.*
2. **ABA Therapy Aphasia Autism:** It can be used for improving social and cognitive skills deficits through real life picture cue cards for oral language practice. *Available for Android Phones.*
3. **A BuZoo Story:** A touch-free, simple intuitive hand-gestures application that aims at targeting recreation, social skills, accessibility, communication, functional skills and language in children with autism. An extremely interactive application with inclusive learning and better self-directed communication. *Available for Android phone.*
4. **Autism Mate Lite:** It is an AAC (Augmentative and Alternative Communication) application that provides a voice for children with autism, and is aimed at building the social communication and life skills. It can be personalized to each user and progresses with the simultaneously changing daily life needs of the individual. *Available for iPad / iPhone.*

5. **E-Mintza:** It is a dynamic and customizable tool for augmentative and alternative communication designed for people with autism. It displays pictograms, associated images and sounds that encourage direct and easy communication which can be customised and designed for augmentative communication using a family's own pictures. *Available for all Android phones.*

6. **Gabby Tabs – AAC:** It is a child friendly, easy to use and personalize, augmentative alternative communication application that helps and encourages non-verbal children to communicate. *Available for iPhone/iPad and all Android phones.*

7. **Grid Player:** It is an Alternative and Augmentative Communication (AAC) application that may help individuals with autism, who have difficulty speaking or have unclear speech to communicate. Sentences that the child creates are spoken back to him loudly. *Available for iPad / iPhone.*

8. **iComm:** The iComm is an application providing an affordable, custom built and an easy to use communication system using pictures and words – both written and spoken. It is ideal for children under 3 until they are able to express their needs through well-formed speech. *Available for iPad / iPhone.*

9. **JABTalk:** It is a free speech communication application designed to help non-verbal children and adults communicate. It is an easy and effective augmentative and alternative communication (AAC) device. *Available for iPhone/iPad and all Android phones.*

10. **MyChoicePad (Lite):** It is an application to improve speech, communication and language in children and adults to help them improve their key learning and communication skills. *Available for iPad / iPhone.*
11. **Quick Talk AAC:** A simple, and flexible application to use with individuals with autism as it teaches non verbal children with autism ways to express themselves, their wants and needs and learn ways to interact with other individuals in meaningful ways. *Available for Android phones.*
12. **See.Touch.Learn:** By Brain Parade See.Touch.Learn is an application that uses picture cards as an effective learning program, used to help teach new words and concepts and foster self-expression in children with special needs. It combines the effectiveness of picture cards with the power and interactivity of the iPad to help create custom exercises and lessons, automatically track the child's performance, and carry the entire library collection at all times. *Available for ipad and iPhone.*
13. **Social Quest:** Developed by a speech-language pathologist, Social Quest helps elementary, middle, and high school-aged children improve their language comprehension as they navigate through a variety of social situations. This story-based intervention application incorporates narratives about real-world situations and asks the user to identify a correct response to each social situation. As they travel on their quest, children earn 'rewards' linked to social competencies. *Available for iPad / iPhone.*
14. **SoundingBoard:** A free augmentative and alternative

communication (AAC) application which can be used to create customized communication boards of up to nine messages per screen using inbuilt symbols and pictures in the applications or adding your own photos. *Available for iPad / iPhone.*

15. **Splatter HD:** It is an extremely fun application that lets children paint randomly or make a picture. It is an art creation lifestyle application that allows children to express themselves through paint splatters. The application lets the child choose his favourite colours or touch the shuffle button to paint with a random colour on each touch. He can then save his photos or share with your friends, and when he wants to start over, shake to erase. *Available for iPhone and iPad.*
16. **Storysmart:** It is an innovative application that provides both recreational and therapeutic activities to help children with autism develop social communication, social cognition, critical thinking and narrative skills. *Available on iPad/iPhone.*
17. **Social Stories Creator:** It is great for elementary-aged or older children, who can create their own stories by uploading their own photos or adding their voice. *Available for iPad and iPhone.*
18. **Talk To Me 100® Lite:** It is a powerful, engaging tool for children who are learning to talk, or who have difficulty mastering verbal expression. An interactive teaching device, Talk To Me 100® allows the child - by pressing buttons - to see words, hear words, understand their meaning and experience the joy of communication. *Available for Android Phones.*

19. **Talking Tom Cat 2:** It is an all-time favourite of many children with autism. It serves as a very powerful tool for teaching imitation to children in the most spontaneous and fun filled manner. Tom repeats what the child says, gets into pillow fights, and reacts to a child's touch. *Available for iPad / iPhone/Android Mobile phones.*

20. **Talkingtiles:** It is an assistive communication application that can be used for communication ('AAC'), learning, daily living and social skills. It can be personalized to suit the needs of both children and adults, making it an effective learning tool to enhance an individual's quality of life. *Available for Android Phones.*

21. **TapToTalk:** It is a fun filled application with a game like format that may help facilitate speech and language development in a non-verbal child with autism. *Available for iPad / iPhone/Android Mobile phones.*

22. **WH Question Cards:** Teaches students how to correctly ask and answer WHO-WHAT-WHEN-WHERE-WHY questions. It has four entertaining learning games for each 'WH' set of cards, and includes enhanced data tracking so educators and parents can keep track of student progress. *Available for iPad / iPhone.*

● **Social Emotional**

1. **ABA Flash Cards & Games: Emotions:** A fun, simple, and easy way to learn to recognize emotions. By showing various pictures of people (mostly children) with different emotions, it teaches children to recognize different emotions. It can be modified with one's own picture and recorded voice reading the word on the cards. It covers over 20 different emotions. *Available for iPad / iPhone/iTouch.*
2. **AutismXpress:** It is designed to encourage people with autism to recognize and express their emotions. It has different facial expressions that are titled Gassy, Burpy, Angry, Sleepy, etc. that help children recognize and express emotions. *Available on the Apple iPhone, iPad, and iTouch and on most Android Mobile and Android Tablet devices.*
3. **Emotions and I:** This application focuses on helping individuals identify different facial expressions using real faces and test their understanding of emotions. Emotions include - happy, sad, scared, surprised and angry. In addition it can help the child in taking perspective / theory of mind, in a fun and simple way. *Available for iPhone/iPad.*
4. **Peek-a-Zoo by Duck Duck Moose:** It is a game application that asks children to look at different groups of cartoon animal characters and distinguish which ones are exhibiting a specific trait or behaviour ("Who is crying?" "Who is surprised?" "Who is angry?"). It aids in learning of social cues. *Available for iPhone and iPad.*

5. **Social Emotional Exchange (S.E.E.):** It is an engaging and interactive way to teach children with autism various human emotions by looking at facial expressions. S.E.E is inspired by the work of Dr. Paul Ekman's study of emotions and their relation to facial expressions. *Available for iPad / iPhone.*
6. **Social Adventures:** Created by parents, Social Adventures offers an eight-week social skills awareness program that can double as individual lessons when needed for practicing relationship behaviours and initiating interactions. This application offers valuable practice in thinking about and behaving during a variety of social situations. *Available for iPad / iPhone.*
7. **Touch and Learn – Emotions:** It helps children identify and name emotions, facial expressions, and body language. Four images of real people appear on the screen and a voice says an emotion such as ‘frustrated’. Children tap on the image of the person they think looks frustrated. Some of the images are very similar or are open to interpretation. Images can be customized using one’s own voice and photos. *Available for iPhone/iPad.*
8. **Touch-Emotions:** Specifically designed for children who may have difficulty interpreting facial expressions. The application is useful in helping them understand emotions and react appropriately in social situations. *Available for Android Phone.*
9. **What's the Expression:** It helps children with autism to learn to express different emotions such as happiness, sadness, anger, and surprise. *Available for Android.*

- **Social Skills**

1. **Find Me (Autism):** It is an application designed to help young children with autism practice simple social skills. It is suitable for play by children with an ability level equivalent to 18 months or over, and doesn't require any language or reading. It provides a child with the opportunity to play a game that relies on the sharing and understanding of how people share their thoughts with each other. It also encourages children to focus on other people and their needs – something that people with autism can find difficult. It is specifically designed to become increasingly difficult as the child progresses. *Available for iPad / iPhone.*
2. **Fireworks 123 App:** This educational application from Visuals Work teaches young children cause and effect using fireworks and the concepts of numbers 1-3, big or small, and the colours red, green, or blue. *Available for iPad & iPhone.*
3. **Kloog:** It is designed to teach children, adolescents, teenagers and young people with autism the social skills they need to operate effectively and comfortably in social situations. The application is designed to assist the user in understanding the social world in which they live and to teach social skills in a fun and meaningful way. *Available for iPad and other tablets.*
4. **Life Skills Winner:** It is an application that teaches life and social skills in an interactive way with positive feedback through a mobile device. It does this interactively via a game format. *Available for Android Phones.*

5. **Model Me Going Places:** It is a wonderful application that can prepare children for social situations that seem frightening or foreign to them. It is designed to familiarize children with locations that may be challenging, and to help teach appropriate behaviour in these locations through peer modelling. *Available for iPad/iPhone.*
6. **Puzzle piece:** An innovative application that makes use of social stories, activities, and games that are situation-specific in order to help children develop their social skills in a fun and easy way. *Available for iPad / iPhone and Android users.*
7. **Show Me Signs:** This app helps the child play and learn about environmental signs. Some sample signs included are – STOP, EXIT, ONE WAY, OPEN, BIKE ROUTE and more. *Available for Android Phones.*
8. **Social Stories plugin for TFA:** This TFA plugin allows one to create and view Social Stories that can be used to show how to behave or what will happen in specific social situations. *Available for Android Phones.*
9. **Sōsh:** Sōsh is designed to help tweens, teens, and young adults improve social skills by focusing on five essential abilities: Relating, Relaxing, Reasoning, Regulating, and Recognizing. *Available for Android Phones.*
10. **Story Maker:** A premier application for creating and presenting educational social stories for improving the social skills. *Available for iPad / iPhone.*
11. **The Social Express:** This online interactive program

addresses core deficit areas standing in the way of school, social, and life success for children with social learning challenges. It uses highly interactive visual presentation and animations to encourage children to practice social skills in an interactive way. *Available for iPhone and iPad.*

12. **The Social Express Lite:** It is a free educational program to help children and young adults facing social challenges. The program was designed to teach users how to process and react in social situations, in order to help them develop meaningful social relationships. *Available for iPad.*
13. **The Social Navigator:** It is a revolutionary social skill application developed to assist children with social and behavioural challenges like autism in adapting their behaviour and developing life long social skills. It allows the user to quickly enter the dynamics of their current social situation and instantly generates corresponding strategies and recommendations, so that the child can get their needs met in a socially acceptable manner. *Available for iPad / iPhone.*
14. **The Social Skills for Autism:** The Social Skills for Autism App “Mission Rescue Kloog” teaches children, adolescents and teenagers with autism social skills in a fun and reward driven way. The application has 17 individual lesson plans with each one covering a required social skill. *Available for Android Phones.*
15. **Touch and Say:** It is a hands-on application for the littlest of social skill learners! Touch & Say includes six activities for practicing the basic social skills of

verbalization, emotional recognition, directions, gaze and colour recognition. *Available on iPad.*

16. **Trace and Share:** It is an application that is designed to enhance social skills in children with autism by learning turn taking and sharing which is an important foundation of social skill. *Available for iPhone/iPad.*

Services at CCAW

Bio Medical Intervention

To address various medical issues in Autism and other neurodevelopmental disorders.

- ***Diet-*** GFCF, Candida Diet, Specific Carbohydrate Diet, etc.
- ***Nutritional Supplements,*** Anti-Oxidants, Chelation and others.
- ***MB12 Injections-*** is one of the treatments for children with Autism Spectrum Disorder (ASD). MB12 raises the levels of Glutathione; the substance the body uses to detoxify itself and has been shown to be consistently low in children with ASD. It helps in social, cognitive and language development.
- ***Hyperbaric Oxygen Therapy (HBOT)*** - involves inhaling 100% oxygen at greater than one Atmospheric Absolute (ATA) in a pressurized chamber. It is beneficial for children with Autism Spectrum Disorder (ASD) and other disorders.

Pharmacotherapy

For emotional, behavioural and psychiatric disorders in children, adolescent and young people.

Psychological Assessments

It is a formal assessment conducted using tools like, psychological tests, questionnaire, rating scales and interviews. It contributes to the understanding of an individual's behaviour, capabilities and personality.

Psychological Therapies

In psychotherapy, psychologists apply scientifically validated procedures to help people develop healthier, more effective habits. There are several approaches of psychotherapy followed at CCAW.

- **Arts Based Therapy (ABT)** - is the clinical and evidence based use of art forms (music, drama, and visual arts) to accomplish goals within a therapeutic relationship.
- **Eye Movement Desensitization Reprocessing (EMDR)** - is an FDA (USA) recommended trauma-based therapy effective in Post Traumatic Stress Disorder (PTSD), anxiety and depression related to any psychological trauma.
- **Guidance and Counselling-** for children, adolescents and families.
- **Social Skills Training-** Children are provided with age appropriate social skills to facilitate their interactions and communications through the mediums of Arts Based Therapy (ABT). Training for social skills are conducted both individually and in a group setting.

Computerised Cognitive Restructuring Program

- **Integrated Visual and Auditory Test (IVA)-** It is a continuous performance test, which typically assesses General Attention, Sustained Attention and Response Control, both visual and auditory, giving objective scores for all.
- **Captain's Log's Mind Power Builder-**a computer assisted gaming software that works specifically on cognitive restructuring of the brain.
- **Neurofeedback-** It is a direct training of the brain, which

displays the brain activity via the brain waves to allow self-regulation of the brain function.

Early Intervention Services (EIS)

It is available for children with Autism Spectrum Disorders (ASD) who are below the age of 5 years to help integrate them into playschool/ inclusive school set-up.

Special Education

It is a process that involves individually planned and systematically monitored arrangement of teaching procedures, adapted equipment and materials, and other interventions designed to help learners with special needs.

Speech and Language Therapy

It provides treatment, support and care for children who have specific speech, language and communication problems to enable them to communicate to the best of their ability.

Occupational Therapy

Helps regain physical function, maintain a level of physical functioning, or make accommodations for any deficits experienced to allow one to participate efficiently in day-to-day activities.

- ***Brain Gym***-It focuses on the performance of specific physical activities that activate the brain for optimal storage and retrieval of information.
- ***Sensory Integration***-is the neurological process that organizes sensation from one's own body and the environment, thus making it possible to use the body effectively within the environment.

Parenting Services

Individual sessions for parents are customised according to the needs of the parents. It includes working on their individual emotions along with parenting tips and tools like Common Sense Parenting (CSP). Therapeutic tools are used to handle trauma, stress, fears and anxiety. The aim of Parent Management Training is to enhance the parenting skills by working on the specific concerns of each family.

Online (web) Counselling

This service is for clients based outside Delhi and India who might find it difficult to come to the centre.

Training Program & Workshops

For Children and Parents

- Self Esteem workshops for children and adolescents.
- *Certificate Course for Parent Training (CCPT)* – Intensive program for parents of children with ASD to learn skills and enhance their child’s social communication.
- *‘It’s Complicated’*- workshop for teenagers on relationship and sex.
- *‘My Body is Mine’* - prevention of Child Sexual Abuse.
- *‘Nurturing minds’*- Skill training for parents of children with ADHD and Asperger’s Syndrome.
- *‘We the Families’*- A support group for parents of children with Autism Spectrum Disorders (ASD).
- *Parent Empowerment Program (PEP)*- Informative workshops for parents of children with Autism Spectrum Disorder.
- Psycho-education for parents about various mental health concerns.
- Responsible Childcare Parenting Classes
- *‘The Birds & The Bees’*- training parents on how to give sex education to their child/teenager.

For Professionals, Institutions & Schools

- ‘Full of beans’ - A holistic school program for awareness and management of Attention Deficit Hyperactivity Disorder (ADHD).
- Responsible Childcare (Certified by Love Humanity, USA) - Train the facilitator course.
- ‘*Hum Sath Sath Hain*’ - An Autism awareness community program for play schools and schools.
- Life Skills Workshops
- Sexuality & Mental Health
- ‘*The Birds & The Bees*’ - Training teachers/school counsellors on how to give sex education to children.
- Working with Child and Adolescent Mental Health (CAMHS)- Basic skills training CAMHS.
- Importance of child mental health in schools.
- Internship Program- A hands on experiential program for psychology students.



Child Mental Health Foundation

Child Mental Health Foundation was established in 2016, with a vision of nurturing children, adolescents and young persons, to foster positive mental health and psychological wellbeing, for creating happy families and a brighter society.

It is a collaboration of mental health experts from varied backgrounds such as psychiatry, psychology, rehabilitation, social work, human development and others. The sole focus of this foundation is to empower the community, to raise healthy young minds, while spreading the awareness about child & adolescent mental health. It's an elaborative journey towards nurturing children for a happy and a better future.

Its main objective is to make the community aware through various trainings and psycho education. It also aims to prepare the professionals in screening, early identification and intervention.

The organisation aims to step in the society by planning and organizing events like workshops, seminars, conferences etc. in schools, colleges and localities with varying socio-economic strata to promote a healthy and conducive scenario for understanding of mental health.

By developing a network of like-minded people it wishes to collaborate with stakeholders and provide free consultancy to institutions and governments. The foundation shall reach out to other experts for further expansion and involve members of general public for means of appropriate participations.

Upcoming Projects & Future Avenues:

1. *Hum Saath Saath Hain(HSSH)*: A non-profitable community project, developed by Centre for Child & Adolescent Well Being (CCAWE), New Delhi that aims to spread awareness about Autism in play schools. It seeks to help teachers of play schools to be able to identify early signs of Autism Spectrum Disorders (ASD) in preschoolers.
2. *Research Project*: An ongoing scientific research project that aims to identify children with various strengths and difficulties, with respect to peer interactions emotional wellbeing, behavioral conduct, and with less pro-social behavior, to increase their efficiency in a school setting. The research also includes the provision of targeting the concerns of the children through Arts Based Therapy (ABT) with statistical evaluation of pre and post results.
3. *Prevention Module for Caretakers*: Training caretakers in Children Homes into understanding and handling Developmental Disorders (ASD) and other mental health concerns. The aim is to develop empathy and a child friendly environment in children homes.
4. *Stars of the Future*: The module has been developed keeping in mind the talent that differently abled child and young people have, which is often overlooked. This programme proposes to secure the future of these talented people from the perspective of *employment*. It is an initiative to provide space for differently abled young adults to showcase their talent and further enhance it for employment for inclusion in the society that makes them more self-sufficient. The specific programme aims to provide this platform by showcasing

their talents to the corporate sectors, private organizations and government bodies through Child Mental Health Foundation (CMHF).

Associate Partners



Media Partner



Exclusive Magazine Partner



Notes

CCAW Team

Child and Adolescent Psychiatrist

Dr. Deepak Gupta

Clinical Psychologists

Ms. Sonia Puar

Dr. Komal Manshani

Child Psychologist

Ms. Shreya Tandon

Associate Psychologists

Ms. Devika Passi

Ms. Ishani Ahuja

Ms. Aakriti Khosla

Special Educator & Autism

Expert

Ms. Indu Chaswal

Special Educators

Ms. Alpana Kumari

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Speech and Language Therapists

Mr. Kumar Gaurav

Mr. Rajeev Ranjan

Mr. Kapil Sahu

Ms. Preeti Kapoor

Occupational Therapists

Dr. Inam Uddin

Dr. Saket Kumar

Dr. Dhananjay

Nutritionist

Ms. Himanshu Kapoor

Parenting Coach & EFT Trainer

Dr. Shilpa Gupta

Administrative and Support Staff

Manager: Mr. Mayank Bhardwaj

Front Desk Officers: Mr. Omkar Mishra, Mr. Arun Mishra, Mr. Manish
Deswal, Mr. Salman Ahmed

HBOT Staff: Mr. Ram Bilash Roy

Support Staff: Mr. Arjun, Mr. Rajender, Mr. Sanjeet, Ms. Reena