

Welcome to...

Ethical Considerations in Vocational Testing of Adults with Autism Spectrum Disorders

with Steve Becker, Ph.D.

American Board of Vocational Experts
April 10, 2016
8:00-9:45 a.m.

Professional Codes of Ethical Conduct

This workshop covers ethical codes of conduct for the following organizations:

- ✓ American Board of Vocational Experts (ABVE),
- ✓ Commission on Rehabilitation Counselor Certification (CRCC),
- ✓ National Board for Certified Counselors (NBCC), and the
- ✓ Certification of Disability Management Specialists Commission (CDMS).

Topics in slides will refer to the Ethical Codes of Conduct of each organization by its abbreviation, such as (ABVE).

Today's Program

8:00 Introduction to Autism Spectrum Disorder
8:10 How ASD Affects the Process of Evaluating
8:30 Areas of Focus (10 minutes each):

1. Competencies
2. Informed Consent
3. Test Selection
4. Adapting Testing Procedures
5. Formulation/Interpretation
6. Discussion of Results/Recommendations

9:30 Best Job Matches
9:35 Questions
9:45 That's all, folks!



A Brief Introduction to Autism Spectrum Disorders (ASD)

- A lifelong developmental disability
- Prevents understanding of interpersonal relationships
- Occurs along a spectrum from High-Functioning ("HFA," Level 1, DSM-5) to Low-Functioning ("LFA," Level 3, DSM-5)
- Focus today: Clients with HFA



A Brief Introduction: General Characteristics

- Very socially naïve
- May appear shy, withdrawn
- Avoidant (expecting negative judgment)
- Comorbid depression common
- Thinking: polarized (black-white)
- Affect: constricted
- Pedantic (lecturing) style of speech
- Restricted patterns of interest (like video games)



A Brief Introduction: Strengths

- ✓ Average-above average intelligence
- ✓ Attentive to details
- ✓ Focused
- ✓ Visual learner
- ✓ Long attention spans
- ✓ High codes of moral behavior
- ✓ Agree willingly to testing



How ASD Affects the Process of Evaluating

- ❖ Be prepared for a lack of reciprocity
- ❖ Expect avoidant eye contact
- ❖ May observe a lack of facial expression
- ❖ May need to initiate each step in the process
- ❖ Check for comprehension of directions
- ❖ May observe adherence to a routine
- ❖ May hear verbal perseverations



1. Competencies Needed by Evaluators

- Experience with clients with HFA
- Accept HFA as a disability
- Slow pace, check for understanding
- Ability to talk in a flat monotone
- Differential diagnosis: ADHD, Major Depression, Personality Disorder

(ABVE R6.1., R8.1.; CRCC D.1.a., 4.a.; NBCC 22; CDMS R.P.C.1.01, 1.04)



2. Informed Consent

- "Informed consent" implies that the client understands "the *nature* and *anticipated course* of therapy, fees, involvement of third parties and limits of *confidentiality*" (APA)
- Terms must be explained using words that the client understands.
Ex: "I will be using a series of short interview questions to help me get to know you better. There are no right or wrong answers."
- Must check for understanding
- Must define role(s) of third parties

(ABVE R1.2.; CRCC G.1.a.; NBCC 69)



3. Test Selection

- ❑ HFA is best evaluated using the following:
 - ❑ Intelligence: **WAIS**: exchange "Information" for "Comprehension" subtest
 - ❑ Executive Functioning: **BRIEF**: Watch for elevated Inhibit, Shift, Emotional Control, Self-Monitor, Initiate, Plan/Organize scales
 - ❑ Personality: **Millon Clinical Multiaxial Inventory (MCMI)**: identifies "Clinical Personality Patterns"; differentiate Axis II (Personality Disorders) from HFA; Note elevated Avoidant, Schizoid, Depression scales
 - ❑ HFA: **Autism Diagnostic Observation Schedule (ADOS Module 4)**
 - ❑ Interests: **Self-Directed Search (Holland and Messer, 2013)**
 - ❑ Aptitudes: **Differential Aptitude Tests (Psych Corp, 1990)**

(ABVE R6.1.; CRCC G.5.a.; NBCC 33)



4. Adapting Testing Procedures

1. Arrange transportation with parent or third party due to failure to note and initiate.
2. Spend time with the client prior to testing, in order to prove your trustworthiness (not automatic).
3. Try to meet the client's safe parent (often mother) with the client, in order to improve your safety and trustworthiness.
4. Tell the client your plan: what you will be testing, how long the session will be, number of planned sessions, what the *social expectations with you* will be.
5. Always take a detailed psychosocial history.
6. Do not adapt standardized testing procedures (e.g., WAIS).



Taking a Psychosocial History: Focus Questions

1. How did you and your parents get along growing up?
2. Whom did you feel closest to growing up? Now? Why?
3. Who has helped you the most growing up? Now?
4. Tell me about your friendships in Elementary School? High School? College? Now?
5. Did you date much in High School? College?
6. Describe the closest relationship you ever had with an adult.
7. Did you ever have a girl/boyfriend? How did you spend time together?
8. How important is it to you to have friends?



Taking a Psychosocial History: Relationships

1. What does friendship mean to you?
2. How is a friend different from a close friend?
3. Why do people want to have friends?
4. What do these words mean?:
 - a. Love
 - b. Intimacy
 - c. Closeness
 - d. Give and take (reciprocity)
 - e. Reading a situation
 - f. Personal boundary



5a. Formulation/Interpretation

1. Review the Psychosocial History for a pattern of:
 - a. Unusual clinginess to the Safe Person throughout lifespan
 - b. Preferred isolative play
 - c. Avoidance/Aggression during periods of transition (Elem->High School->Job or College)
 - d. Lack of interest in making friends
 - e. Focus on academics in Middle School/High School/College
 - f. No/minimal dating experience
 - g. No/minimal close romantic relationships

(ABVE R6.1.; CRCC G.1.b.; NBCC 44)



5b. Formulation/Interpretation

1. Review the Psychosocial History.
2. Check for lack of social comprehension in:
 - a. **WAIS** Comprehension subtest
 - b. **ADOS**
 - c. Behavioral rating scales (e.g., **ASRS**)
 - d. Case notes
3. Differentiate patterns of autism from:
 - a. ADHD: (**BRIEF**, etc.)
 - b. Avoidant or Schizoid Personality Disorder: (**Millon**)
 - c. Obsessive-Compulsive Disorder (presentation, behavior patterns)

(ABVE R6.1.; CRCC G.1.b.; NBCC 44)



5c. Formulation/Interpretation

1. Review the Psychosocial History.
2. Check for lack of social comprehension.
3. Differentiate patterns of autism.
4. Determine validity of vocational interests. Many adults with HFA base interests on their cloistered home life, thus lacking adequate awareness of the world of work to render valid interests ("I want to make video games.")

(ABVE R6.1.; CRCC G.1.b.; NBCC 44)



6. Discussion of Results/Recommendations

- Deliver the debriefing with a family member, the Safe Person if possible.
- Be careful not to assume a level of understanding of terms, especially those about interpersonal relationships.
- Discuss effects of HFA on:
 - Career awareness
 - Ability to search for a job
 - Competitive vs. Supported Employment
 - Reasonable accommodations

(ABVE R6.1.; CRCC G.1.b.; NBCC 44)



Common Vocational Problems

- Planning/organizing a job search
- Need for safety
- Need for control
- Need for initiation by others
- Open-ended interview questions
- Interpersonal relations during interviews



Best Job Matches

- A safe, stable job with a lot of repetition and monotony, with little stress to produce a quota,
- A job with minimal need for interpersonal contact,
- A job where performance expectations are clear and change infrequently,
- A job with an employer who is comfortable with a more withdrawn, shy personality style, but still a loyal and eager-to-please type of employee,
- A job that demands less multitasking and unexpected changes in routine,
- A job where the client interacts with the same group of people most days (as opposed to retail sales or customer service),
- A job using a computer frequently,
- A job demanding excellent analytical skills, especially data analysis, such as quality control,
- A job offering a place where the client can retreat (escape) to when s/he is feeling too stressed out to maintain on-task behavior, such as a break room separate from the client's work station, or a locker area, and
- A job with a stable sequence of tasks to be done in a predetermined order.



Questions?



Want help for employers?

Check out this NEW book from Steve:



An Employer's Guide to Successful Employment of Workers with High Functioning Autism or Social Challenges

- How to Interview
- Hiring Practices
- Working Relationships
- Resolving Problems



About Steve Becker...

- **Dr. Steve Becker** is a Vocational Evaluator with over 30 years experience with clients with developmental disabilities. He is a Certified Rehabilitation Provider for the State of Washington.
- He worked as a job coach from 1973-1984 and has taught a social skills and sexuality class for teens and adults for over thirteen years.
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