On August 8th Dr. Jamie Owen-DeSchryver, professor of psychology at Grand Valley State University presented information on Autism Spectrum Disorders (ASD), including Autism, Asperger Syndrome, and Pervasive Developmental Disorder (a specified set of disorders characterized by impairments in social interaction, deficits in communication, and restricted and repetitive patterns of behavior.) Dr. Owen-DeSchryver suggested that primary impairments in social behavior should be viewed as the defining feature of ASD. These social difficulties, displayed by individuals with ASD vary from individual to individual, and but might include: impaired eye gaze, poor joint attention, few verbal initiations, failure to develop age-appropriate friendships, difficulty generalizing learned skills to new settings or using newly acquired skills in the presence of new people or situations. Youth with ASD often present with a wide range of abilities and challenges.

Dr. Owen-DeSchryver discussed ASD as a brain disorder and the strong genetic influence associated with this disorder. A history of ASD as well as a solid understanding of the brain set the stage for a thorough discussion about the brain difference and the resultant differences in behavior. According to Dr. Owen-DeSchryver, the idea of social thinking and the idea of how we think about people effects how we behave which effect how others respond to us and how that effects our own emotion. Dr. Owen DeSchryver presented the idea that youth with ASD have a very rigid “black and white” thinking pattern, which may inhibit normal play, creativity and different types of social engagement. Social thinking also affects attribution (social cognition) or how we attribute meaning to what others say or do. These conclusions, about others, affect how we act around people. For youth with ASD, they have difficulty in understanding non-verbal cues and as a result might become a target for negative responses from others. Often times as a result of these social and cognitive deficits, people assume that the youth is deliberately behaving badly. Many times these deficits result in the youth not understanding what needs to be done, or not doing something unless specifically asked. Additionally, youth with ASD are poor problem solvers, may lack motivation and become stressed and anxious because of the sensory overload brought on by situations that are stressful, or require multi-tasking.

After the psychological foundation presented by Dr. Owen-DeSchryver, Scott Schuelke, an Autism Safety Specialist for the Autism Alliance of Michigan, focused his presentation on field responses. According to Mr. Schuelke people with development disabilities, including ASD, have up to 7 times more contact with law enforcement. Because of ASD many of the on duty risks and behaviors that juvenile justice professionals might encounter include ASD: not recognizing authority figures or how to respond (basic communication challenges, both verbal and nonverbal), behaviors that draw attention and can be misinterpreted, and misleading indicators of guilt (lack of eye contact, aloof or indifferent manners, changing the topic, etc…) Mr. Schuelke went on to share that many ASD youth often exhibit a lack of fear of real danger,
high tolerance of pain, sensory issues that may produce a fight or flight reaction, hypertonia, and mechanical or positional asphyxia that requires alternate restraint options and techniques.

The response strategies presented by Mr. Schuelke included how to approach and engage the ASD youth as well as techniques to reduce liability. Many of the response strategies included: approaching the youth in a quiet and non-threatening manner, check for injuries, but avoid touching the individual, speaking calmly, encourage and praise the youth, use pictures and written phrases and commands, avoid rapid pointing or waving. Mr. Schuelke also provided insights into how to de-escalate behaviors at the scene, precautions with restraints, procedures to include when taking custody of that youth, and interviewing that person. Mr. Schuelke strongly encouraged increasing ASD awareness in the community and to learn from each other.

Both presenters shared with participants that youth with ASD are more likely to exhibit problems than typically developing youth which increase the likelihood of institutionalization and result in social isolation for youth. Given that ASD youth have problem behavior that impedes positive social outcomes, the assessment of these factors that evoke and maintain such behavior is a critical first step toward providing effective responses. Additional information can be found on the DVD and handouts provided by both Dr. Jamie Owen-DeSchryver and Mr Scott Schuelke. Juvenile Justice Vision 20/20 is grateful for the time and insights provided to the participants in this training.