

Treating ASD: Frequently Recommended Therapies

Communication, speech and language

One of the key components of autism is communication, speech and language development. Some individuals may be preverbal, while others may speak very well but with poor social conversational ability. Regardless of the level at which individuals with autism use language, they all will have some level of social- communication challenge. Speech and language therapy can begin as early as 18 months of age. Some common difficulties in this area are:

- Not speaking at all
- Difficulty answering questions or telling a story
- Lack of reciprocity ("back-and-forth") in conversation
- Unnatural tone of voice ("prosody") or use of unusual vocal sounds
- Repeating what another person says ("echolalia")
- Difficulty understanding abstract meanings or words out of context
- Poor use and understanding of eye contact, body language/ nonverbal cues
- Repeating memorized words or phrases in a rote manner, sometimes in context

A speech language pathologist (SLP) is trained to work on speech, language, and communication, nonverbal communication, and sometimes feeding. They can help with many issues, such as:

- Requesting help and appropriately protesting
- Initiating and maintaining play
- Conversation skills to help build relationships
- Recognizing verbal and nonverbal cues

- Learning appropriate times for specific communications (hello, goodbye, etc.)
- Augmentative and alternative communication (AAC): Ways for a child who does not speak to communicate through a variety of systems including a Picture Exchange Communication System (PECS), computers, letter boards and tablets.

Occupational therapy

Individuals with ASD can often benefit from occupational therapy (OT). An occupational therapist works with people to increase their skills in the “occupation” of living (i.e., playing and school for children). They help to identify things that are keeping the person with ASD from fully participating in the typical activities of daily life (eating, grooming, safety, playing, writing, typing, going to school or work, etc.).

Many people with ASD have trouble processing sensory information or being able to take in information around them in an effective way (touch, smell, sight, sound). For example, they may get overwhelmed by loud noises or the way things feel on their skin. This can make it difficult to regulate their behaviors, attention, and emotions. Sensory integration (SI) Therapy addresses these issues, and OT is usually the primary specialty involved in making treatment plans in this area.

- OT is a common therapy that school age children receive at school.
- It can occur at home, in a clinic, or in the community.
- This therapy is very individualized and based on the needs of each person.

Some examples of what an OT might do:

- Plan games that increase hand-eye coordination
- Adjust sensory input to improve ability to process (wearing headphones if it is too loud)