



WORKSHOP B-2

Focus on Feelings: Teaching Emotion Understanding and Regulation

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Tracks: Challenging Behaviors, Transition/Adulthood, Educators/Clinicians, Family

ABSTRACT:

Individuals with Autism Spectrum Disorder often struggle with emotional awareness and understanding, leading to behavioral difficulties and mental health issues. This is particularly evident when emotion regulation skills have not been developed. Emotion regulation consists of the ability to regulate arousal, and use strategies to manage uncomfortable feelings, cope with everyday stress, and be able to engage in learning and interactions. In this session participants will learn about the importance of treatment for emotion deficits, and will be introduced to effective strategies for assessing and teaching basic and advanced emotion skills. Participants will also learn how to provide external supports for emotion regulation in addition to teaching the development of internal skills.

OBJECTIVES:

1. Participants will be able to discuss which of the core and secondary symptoms of ASD contribute to emotional regulation difficulties.
2. Participants will be able to discuss the importance of emotional awareness and understanding as part of a treatment plan for youth with ASD.
3. Participants will be able to assess an individual's current level of emotion skills.
4. Participants will be able to implement emotions interventions.
5. Participants will be able to implement strategies for supporting and developing emotional regulation skills.


Shana Nichols, PhD

is a licensed clinical psychologist and researcher who has worked in the field of ASD for 15 years. After serving as staff psychologist and then Clinical Director at the Fay J. Lindner Center on Long Island, NY, Dr. Nichols founded *ASPIRE Center for Learning and Development* in Melville, NY, in 2010. *ASPIRE* provides a range of services to individuals, families, schools, and organizations including direct services, consultation, workshops and training. She is also on the professional advisory board of the *Asperger Syndrome and High Functioning Autism Association of Long Island* and *Westbury Preparatory School*. She currently specializes in the experiences of females with ASD, adolescence and dual diagnosis and mental health interventions. Dr. Nichols has extensive expertise in cognitive and diagnostic assessment, treatment, consultation, and family work and she conducts applied research associated with her clinical programming. She is Director of Psychology Training at *ASPIRE*, and supervises post-doctoral and graduate level trainees in clinical psychology, school psychology, mental health counseling, social work and special education. Dr. Nichols received her PhD in clinical psychology from Dalhousie University, Halifax, Canada and completed her internship and post-doctoral training at JFK Partners Center for Autism and Developmental Disabilities in Denver, Colorado.

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ASPIRE Center

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- **Diagnosis, Assessment and Treatment**
 - Psychology, Speech Language, Behavioral Consultation, Special Education, Counseling
 - Evaluations, groups, social skills, individual and family therapy, school consultation, community outings, trainings/workshops
- 16 months to late adulthood
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This Presentation




- Why is it important to consider emotion understanding and regulation when working with learners with ASD?
- How do we assess level of emotion skills?
- How do we teach emotional understanding?
- How do we teach emotional regulation?



Let's Define "Emotional Ability"




- "The ability to perceive emotion, integrate emotion to facilitate thought, understand emotions and to regulate emotions to promote personal growth."
Salovey & Grewal (2005). The Science of Emotional Intelligence. *Current directions in psychological science*, 14 -6
- **Emotions:** useful sources of **information** that help one to make sense of and navigate the social environment.
- Individuals vary in ability to process emotional information and in ability to relate emotional processing to a wider **cognition and behavior**. This ability is seen to manifest itself in certain **adaptive behaviors**.



Types of Emotional Abilities


Mayer & Salovey (1997); Wikipedia

1. **Perceiving emotions** – detect and decipher emotions in faces, pictures, voices, and cultural artifacts—including the ability to identify one's own emotions. A *basic aspect of emotional intelligence*, as it makes all other processing of emotional information possible.
2. **Using emotions** – harness emotions to *facilitate cognitive activities*, such as thinking and problem solving. The emotionally intelligent person can capitalize fully upon his or her changing moods in order to best fit the task at hand.



Emotional Abilities Cont.

3. **Understanding emotions** – comprehend emotion language, appreciate complicated relationships among emotions. For example, ability to be sensitive to slight variations between emotions, ability to recognize and describe how emotions evolve over time.
4. **Managing emotions** – regulate emotions in both ourselves and in others. Therefore, the emotionally intelligent person can harness emotions, even negative ones, and manage them to achieve intended goals.



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Why are emotions *so* important when working with learners with ASD?

FOR EVERYONE:

- Interpersonal
 - Social skills; relationships; understanding others; empathy; conflict resolution
- Communication
 - over 75% of what we communicate is non-verbal
- Self-awareness and self-monitoring
- Behavioral regulation
- Problem-solving; coping skills
- Wellbeing; mental health; self-esteem
- Play and creativity



Impairments in Socialization

- Emotions play a *vital* role in socialization
 - Interconnected – **social is emotional**
- Very often learners with ASD want to be social but just aren't very good at it
 - This can be frustrating and upsetting!
 - Self-esteem affected
- Adults, teens, and youth all rely on their social network to share their feelings in a supportive arena
 - Often individuals with ASD lack this support
 - "Peer void"; loneliness; no normalization of feelings



Impairments in Social Communication

- *Difficulty understanding others*
 - Frequent misunderstandings of social communication can increase social isolation – loneliness, depression
- *Difficulty expressing oneself*
 - Frustration may lead to emotional distress and behavioral difficulties, shutting down
 - May be associated with deficits in self-understanding
- *Difficulty maintaining reciprocal exchanges*
 - May lead to emotional and behavioral difficulties: social isolation/estrangement anger, frustration, anxiety, depression



Behavioral and Cognitive Symptoms

- **Executive functioning deficits**
 - Cause stress, feeling overwhelmed
- **Poor cognitive flexibility** and executive functioning leads to problem solving difficulties
 - Results in limited coping skills, poor social problem solving
- **Special interests:**
 - can evoke strong emotions – Frustration/anxiety (lose a game); Angry/sad (others don't want to talk about it anymore, or ever)
 - Can create vulnerability to teasing
 - Can interfere with development of a supportive social network



Emotional Skills Deficits in ASD

- Research findings vary regarding the *kind* and *extent* of emotion impairments in ASD; emphasis: *face processing* (Tracy, Robins, Scliber, Solomon, 2011)
- *More research is needed beyond emotion identification*



Basic facial emotion recognition (happy, sad, angry, scared)



Complex understanding of *causes* of emotional experiences in self and other; how to *regulate* and *create* positive change in our *interactions* and our *internal states*

Some individuals with ASD (Clients at Our Clinic) Have Difficulties:

- Matching faces with emotional expressions
- Identifying emotions in pictures of faces
- Being able to make a _____ face (e.g., surprised)
- *Describing* how they feel in certain situations ("upset")
- Developing an *emotional vocabulary*



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Emotional Difficulties Cont.

- Knowing *why* (causes) they feel a particular emotion
- Understanding that they can feel more than one emotion in a situation
- Knowing what they *do* when they feel a certain way
- Knowing how emotions feel inside their *bodies*
- *Regulating* their emotional reactions; *coping*
- Understanding the emotional experiences of someone else
- *Sharing* emotional experiences with others
- Understanding how emotions are *connected* to situations, thoughts, and behavior



Self and other related difficulties

Emotional Difficulties Can Lead to...

- If not addressed proactively through *teaching* and *early treatment* emotional difficulties can lead to mental health symptoms, low self-esteem, and even development of co-occurring mental health conditions.



Co-Occurrence of Mental Health Concerns in ASD

- Comorbid mental health conditions are common in persons with ASD across lifespan
 - Youth (Gjevik et al., 2011); Adolescents (Bradley et al., 2004); Adults (Ghazdian, 1998)
- Most common comorbid conditions: *anxiety*, depression, ADHD, mood lability
 - 30-80% present with elevated anxiety symptoms (deBruin et al., 2007; Klin et al., 2005; Muris et al., 1998)
- Difficulties with “*life management*”
 - Poor coping skills
 - Low frustration tolerance, self-regulatory difficulties, anger
 - Poor problem-solving skills
 - Deficits in executive function



Co-Occurring Disorders

- Panic disorder
- Specific and social phobias
- Obsessive compulsive disorder (OCD)
- Posttraumatic stress disorder (PTSD; young adult)
- Generalized anxiety disorder (GAD)
- Selective mutism
- Major depression; dysphoria; suicidal ideation
- ADHD
- Eating disorders; young adult
- Bipolar disorder
- Self-injury



Risk for psychiatric hospitalizations



Conclusion: Emotional skills play an important role in most areas of functioning and contribute to social success, mental health, and self esteem.



Getting Started with Teaching About Emotions



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Where to start with feelings?

- Emotional development should be a **general target** of intervention
- Psychotherapy* is not an appropriate intervention for everyone
 - Cognitive and verbal abilities
- Behaviorally-based teaching that targets emotional development within a concrete framework:
 - ABA model
 - Structured teaching with reinforcement
 - Focused skill development
 - Systematic, hierarchical



Emotional Awareness – Assessment and Intervention



think about your
child, student, client...

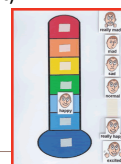
Emotional Awareness Topics for Teaching:

- Emotion Identification – *basics*
 - Self and Other*
- Emotions Vocabulary
- Range of Emotions
- Emotions in the Body – self-awareness
- Expressing Emotions
- Emotions and Situations - *why* we feel certain ways
 - Self and Other*
 - Introduction to Thoughts*
- Emotional Regulation**



Emotions Basics: Identification

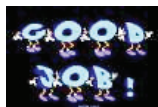
- Identifying primary and secondary emotions
- Facial expressions – self and other, non-verbal cues
- Depth of emotional vocabulary (happy-upset)
- Identifying how one is feeling
- Range of emotions



Adapting Effective Instructional Approaches for ASD to Therapy

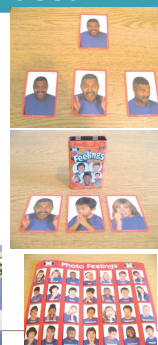
- Keep things simple
- Be concrete and specific
- Teach to multiple senses
- Use visuals always
- Repeat, repeat, repeat often
- Reinforcement
- Provide opportunities for practice – slow down
- Break tasks into smallest components
- Be consistent
- Be proactive
- Incorporate social goals

*Repetition
Repetition
Repetition
Repetition*



Teaching Approaches: Basic, Behaviorally-Based

- For learners with verbal difficulties and cognitive challenges:
 - Match to sample; familiar, unfamiliar, self
 - Show me _____. (recep)
 - How is she feeling? (exp; recep)
 - How are *you* feeling? (exp; recep)
 - How can you tell he is ____? (exp)
 - You look like you feel ____.
 - Pair pictures with words
 - Always use visuals
 - Use ladders and scales
 - Reward!!



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Teaching Approaches: Basic, Behaviorally-Based Cont.

- Structured teaching sessions *and...*
- Embed emotions learning in everyday life:
 - Model and talk about your own feelings
 - Comment on learner's feelings; comment on why you think they feel a certain way (e.g., your face is getting red, I wonder if you are starting to feel _____.)
 - Carry emotions cards with you
 - Tape emotions list to school desk
 - Use pictorial supports
 - Take advantage of naturally occurring situations
 - Work as a team with school, job, etc.



Get Creative! Multisensory!

What are 10 ways to teach feelings identification?

- Photos
- Drawing
- Video modeling
- Watch movies/tv shows
- Role-play; make faces
- Use mirrors
- Read books
- Use playdough
- Body movements, dance
- Use puppets

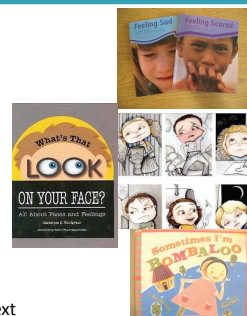


Teen girl with AS: feelings and thoughts through drawing anime



Emotion ID Skills Materials: Books

- Basic
 - make own book, personalized, visual stories
- Intermediate
 - simple language, photos
- Advanced
 - storytelling with picture books
 - pausing and interpreting
 - acting out the story
- Very Advanced
 - higher-level emotions, in context



How Are You Peeling?



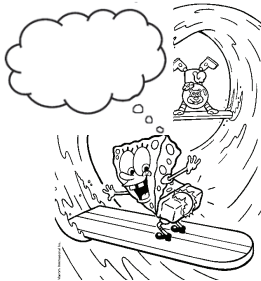
Emotion Identification Materials



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Work with Familiar Characters



Sponge Bob is surfing and his pants rip open. Sandy Cheeks can see his underwear!

How does Sponge Bob feel?

Emotions Vocabulary: Expand!!

- Good vs. bad
- Positive vs. negative
- Happy vs. upset



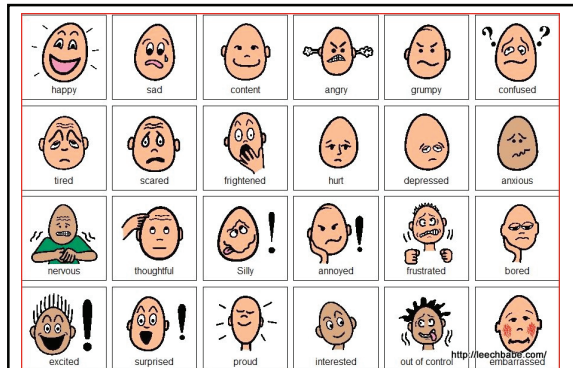
- Happy, angry, sad, scared (big feelings), primary
- Embarrassed, guilty, ashamed, loved
- Secondary, social, subtle
- Double-dip
- Scared and excited
- Changing emotions during experiences



- Important to understand learner's **unique emotional experiences**; give them a language to work with; expand

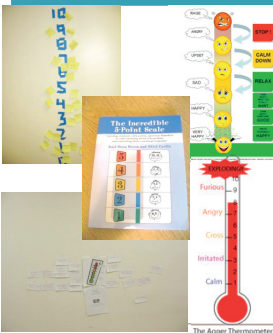
ANGER	quarrelsome adamant angry bitchy challenged combative competitive crust deceitful destructive determined envious envy evil frustrated fury greedy grouchy hate irritable infuriated lecherous mad mean obnoxious oppressed outraged paranoid pissed	diffident distracted dubious embarrassed fawning fearful flustered frightened furtive glib helpless homesick hopeless horrible hysterical intimidated isolated jealous lazy low maudlin nervous overwhelmed pain paralyzed persecuted petrified pity precarious	GRIEF	abandoned agony bitter burdened cheated condemned cruel defeated despair diminished discouraged disturbed divorced dominated empty exasperated foolish frantic grief hurt ignored imposed upon jumpy left out lonely longing melancholy miserable	nitty odd pressured rejected sad screwed up suffering thwarted troubled troubled ugly vulnerable weepy worried	childish clever contented delighted desirous eager ecstatic elated electrified enchanted energetic enraptured enjoy excited exhausted fascinated flirtation foolish free full gay glad good gratified groovy happy helpful high honored	impressed infatuated inspired joyful joyous keen kind loving lustrous naughty nice nutty peaceful pleasant pretty proud rapture refreshed relaxed relieved reverent rewarded safe sated satisfied secure settled sexy	silly stuffed sure sympathetic talkative valued vital vivacious wanted wonderful zany
	FEAR	ambivalent anxious anxious ate atrophic bald betrayed bored captivated confused conscious conspicuous contrite culpable different	pride queer relieved remorseful resented scared servile sheepish shocked shy skeptical solemn sorrowful startled strange stunned stuffed stupid tense tentative tense terrific terrified threatened tired trapped trapped uneasy united united	JOY	adequate affectionate alert almighty atoned awed beautiful bold brave calm capable charmed cheerful determined	OTHER	bored cold depressed hungry stupid tired war	

http://ai.turtlecounseling.com/blog/_archives/2005/4/7/562885.html



Receptive Emotions Vocabulary

Range of Emotions




- Thermometers, meters
- Rating scales
- Check-ins
- Monitoring in therapy session, throughout the day
- Use vocabulary you create together
- Learners with ASD often go from 0-100
- Precursor to *regulating*
- Hard to learn



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Savage Chickens by Doug Savage



DR. EKMAN'S 7 UNIVERSAL ZOMBIE EMOTIONS

General flatness, limited range; over-exaggerated expression; emotion does not match situation; responding to others' emotional states

Appropriate expression of emotions

- Verbal/non-verbal/voice
- Videotaping, watching videos (sound on and off)
- Video modeling, role-playing, mirrors

Case example: "Janet's" first therapy session

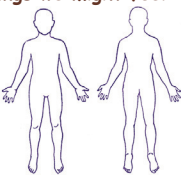
What's going on in our body? What do we do?




- **Self-awareness** often impaired in ASD:
- Awareness of **physiological states** associated w emotions – even hunger, fatigue, *body in space*
- Awareness of **what we do, how we act** when we *feel* a certain way
- Becoming more aware is first step to monitoring and then **regulating**; being able to learn **relaxation**
- Greater self-control: leads to **wellness** and **self-esteem**

Possible Anxiety Sensations: Things we might feel in our bodies:

Racing heart	Difficulty breathing
Chest pain	Nausea
Dizziness	Feeling faint
Sweating	Shaking
Numbness	Tingling
Chills	Hot flashes




Things that might happen with our thinking:

Mind going blank
Difficulty speaking
Loss of concentration
Feeling that things are not real
Feeling that we are watching ourselves from the outside


Use checklists, drawings, exercise, pictures, movies, books

Paying Attention to Our Bodies and Experiences



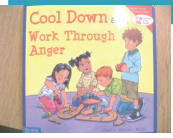





- Hungry
- Tired
- Thirsty
- Sweaty
- Headache
- Stomachache
- Comfortable/uncomfortable
- Body in clothing
- Tense/relaxed

Teaching Strategies



- Same as prior...
- Structured teaching sessions *and*...
- **Embed emotions learning in everyday life**
 - Model and talk about your own body and what you do when you feel a certain way
 - Teach the learner what he/she *does* when he/she experiences a certain emotion – comment day to day life
 - Teach learner what he/she is experiencing in his/her body – comment in day to day life (e.g., your body is very tense, I wonder if you are starting to feel ____.)
 - Normalize emotional experiences; okay to feel ____; learn how to express appropriately

Books for Teaching Body and Behavior

- Create your own simple and concrete visual stories

Practice!

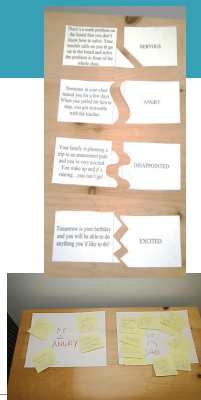
- Be rag dolls, tin soldiers, run on the spot

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Making Connections

- After being able to identify what a given emotion looks and feels like, it is important to make the connection between **situations** and **emotions**
- What happened that made you feel that way?



Teaching Examples

- Scenarios (from simple to complex)
 - Matching feelings of self and other
 - Role-playing, puppets
 - Watching video clips
- Connect statements to feelings
 - E.g. "I wish I had someone to hang out with today."
 - E.g. "Did she say to turn left or right? I don't know!"



Teaching Materials: How Would You Feel If?



Emotional Dysregulation and ASD (Prizant, Wetherby, Rubin & Laurent, 2007)

- The SCERTS® model – emotion regulation approach (ERA)
- Risk factors for emotional dysregulation:
 - Difficulties with change and uncertainty
 - Inflexibility
 - Lack of control
 - Emotional memories – linked to previous experiences
 - Sensory issues
 - Arousal
 - Social – confusion, limited understanding
 - Social – communication limitations



• Results in behavior that is really due to emotional dysregulation

Learning to Regulate Our Emotions

- Ability to regulate your emotional arousal
 - Lower your arousal, or increase your arousal as needed
- Strategies to manage uncomfortable feelings, cope with every day stress, and be able to engage in learning and interactions
- **EXTERNAL SUPPORTS** and **INTERNAL SKILLS**
 - Individuals with greater impairments may need to have more external supports in place
 - Goal is to move towards more independence and development of internal skills



Emotion Regulation Support

External Supports

- Visuals
- Choice and control
- Consistency in routine and schedule
- Calm, neutral environment
- Communicate in clear, concrete manner
- Provide scheduled breaks
- Positive support
- Directed to engage in alternative behavior

Internal Skills

- Developing social understanding
- Developing problem-solving skills
- Relaxation abilities
- Coping skills
- Able to engage in cognitive restructuring (**thoughts**)
- Developing **self-talk**
- Independently asking for breaks, asking for help



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What About Thoughts?

- Difficulties distinguishing a thought from a feeling
 - What did you say to yourself? What were you thinking: "I'm mad", "I'm frustrated", "I'm scared" (feelings)
- Thoughts are abstract
 - "no such thing as thoughts – you can't see them"
 - "I don't think, I talk"
- Limited self-awareness and monitoring –paying attention to thinking (**meta-cognition**)
 - Self-talk helps us to regulate**



Steps to Emotional Self-Regulation

- Step 1: Self-Awareness
 - (aware of my feelings and behavior)
 - Step 2: Self-Monitoring (can report how I cope)
 - Step 3: Coping Skill Development
 - Step 4: Self-Monitoring (how am I doing?)
 - Step 5: Self-Regulation – flexibly adapt to situations
 - Step 6: Ongoing Self-Monitoring (how am I doing?)
- Together with a positive behavior support plan, an emotion regulation approach (ERA) can be very effective



Teaching Self-Monitoring

- Select a target behavior connected to an emotion
 - E.g., repetitive questioning in English class (anxiety)
 - Develop ability to track occurrence of the behavior
 - You and learner record; provide feedback
 - Co-develop goals related to the target
 - E.g., ask to take a break when you begin to question
 - Practice and monitor progress
- Inner speech** – language serves self-regulatory function during problem solving (Vygotsky, 1962)
 - Impaired in ASD (Wallace, 2009)
 - Can be idiosyncratic in ASD; need to teach functional verbal mediation; use written instructions



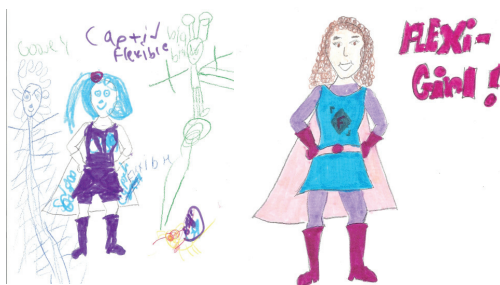
Self-Monitoring



- Feelings thermometers are a fun way to visually support the identification of feeling states and changes in feeling intensity
- Thermometers vary based on the individual's maturity level and abilities
- Self-monitoring also allows a learner to know when to use coping skills

The Anger Thermometer

Flexi-girls!



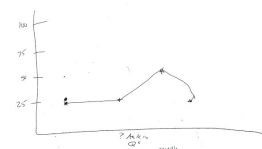
Self-Monitoring with Older Learners

- For older teens or young adults, instead of using a thermometer, a SUDS scale would be used
- We can graph the changes in SUDS throughout session
- A break mechanism ("ticket out") can be built in so that the learner can begin to recognize when feeling overwhelmed

SUBJECTIVE UNITS OF DISTRESS (SUDS) RATING SCALE

0	10	20	30	40	50	60	70	80	90	100
VERY ANXIOUS WORRYING UNCOMFORTABLE	MILD ANXIETY ON ALERT BUT FEEL OK	MODERATE ANXIETY HARD TO FOCUS HARD TO CONCENTRATE	SEVERE ANXIETY GET ME OUTTA HERE!	MOST ANXIOUS EVERYTHING!						

Adapted from Leahy & Holland, 2000



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What are you....?

- Doing right now?
- Thinking right now?
- Feeling right now?
- Wanting right now?

Exercises to promote self-monitoring in session, in class, at work and at home

You seem _____ right now because you are _____ (behavior).

- frustrated
- restless
- happy





Next steps...

- Developing **coping skills**
 - Breathing, relaxation, leisure, distraction
- Developing social understanding and thinking
- Developing problem-solving skills
- Accessing social supports when needed
- Participation in **cognitive-behavioral therapy**
 - Mental health, self-esteem, life coaching
- Participating in meaningful community life
- Developing a healthy lifestyle



Take Home Messages

- Treatment for ASD *must* incorporate developing emotional skills – for everyone, all abilities
- Emotional skills are related to all areas of functioning
- Individuals with ASD are vulnerable to developing mental health challenges; high co-morbidity, especially anxiety
- Coping with daily challenges begins with the *basics of identifying emotions and thoughts*



Take Homes Cont...

- A learner's cognitive and communication abilities will determine teaching approaches to use, and goals for independent functioning
- Be creative, use multi-sensory teaching, and realize that achieving goals takes *time*
 - adjust your expectations for rate of progress
- **Emotional regulation can be supported and taught**
 - Begins with the basics
 - Results in improved behavior and overall wellness

