Outcome: Autismus und Wohlbefinden

Autismus und Glück: über die Lebensspanne

Peter Vermeulen, Autisme Centraal

3. Linzer Autismussymposium

Linz, 19 October 2017

Einige einfache Fragen

Wollen Sie….

Sie sicher fühlen?

Stolz sein?

Gesund sein?

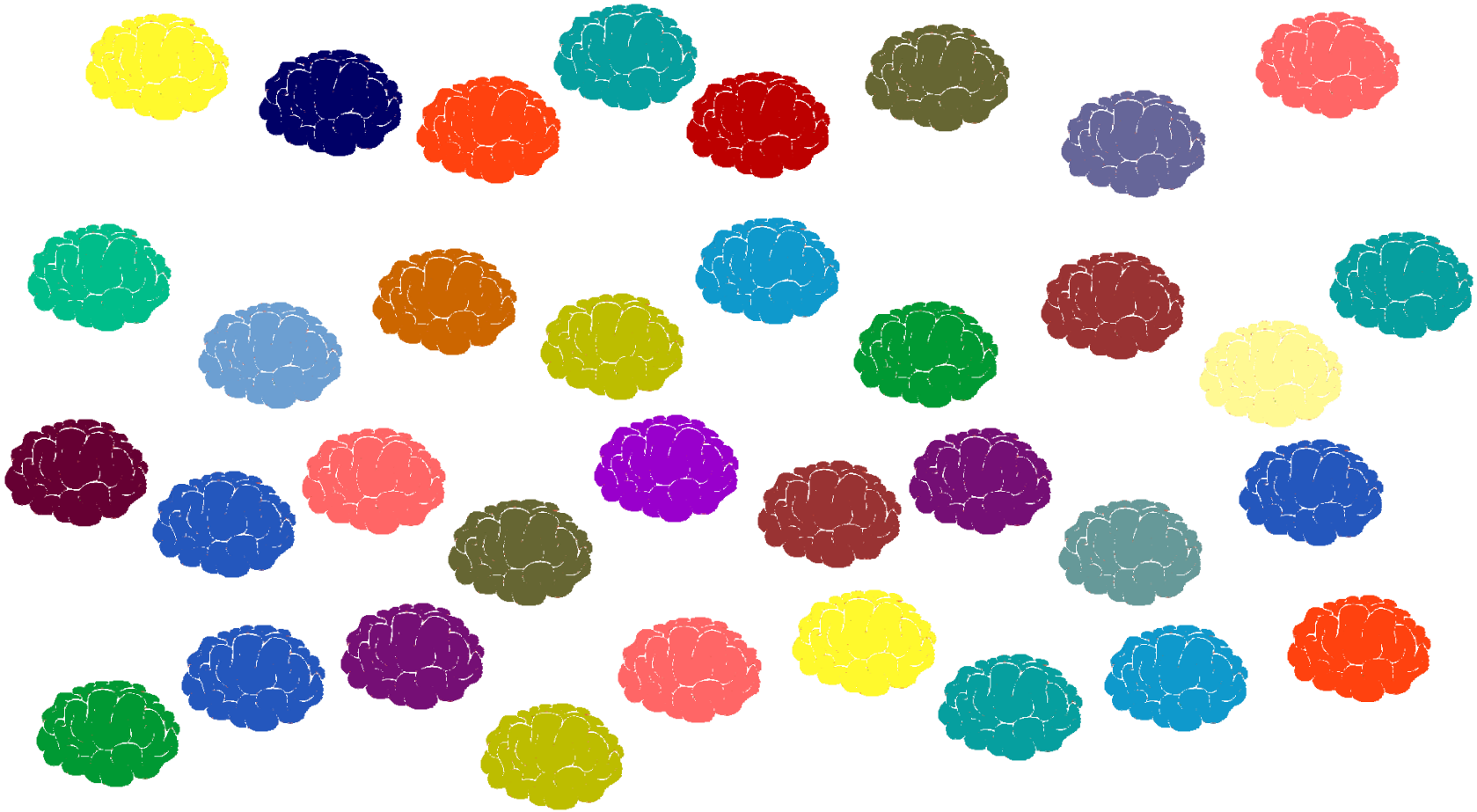
Spaß haben?

Sich sinnvoll fühlen?

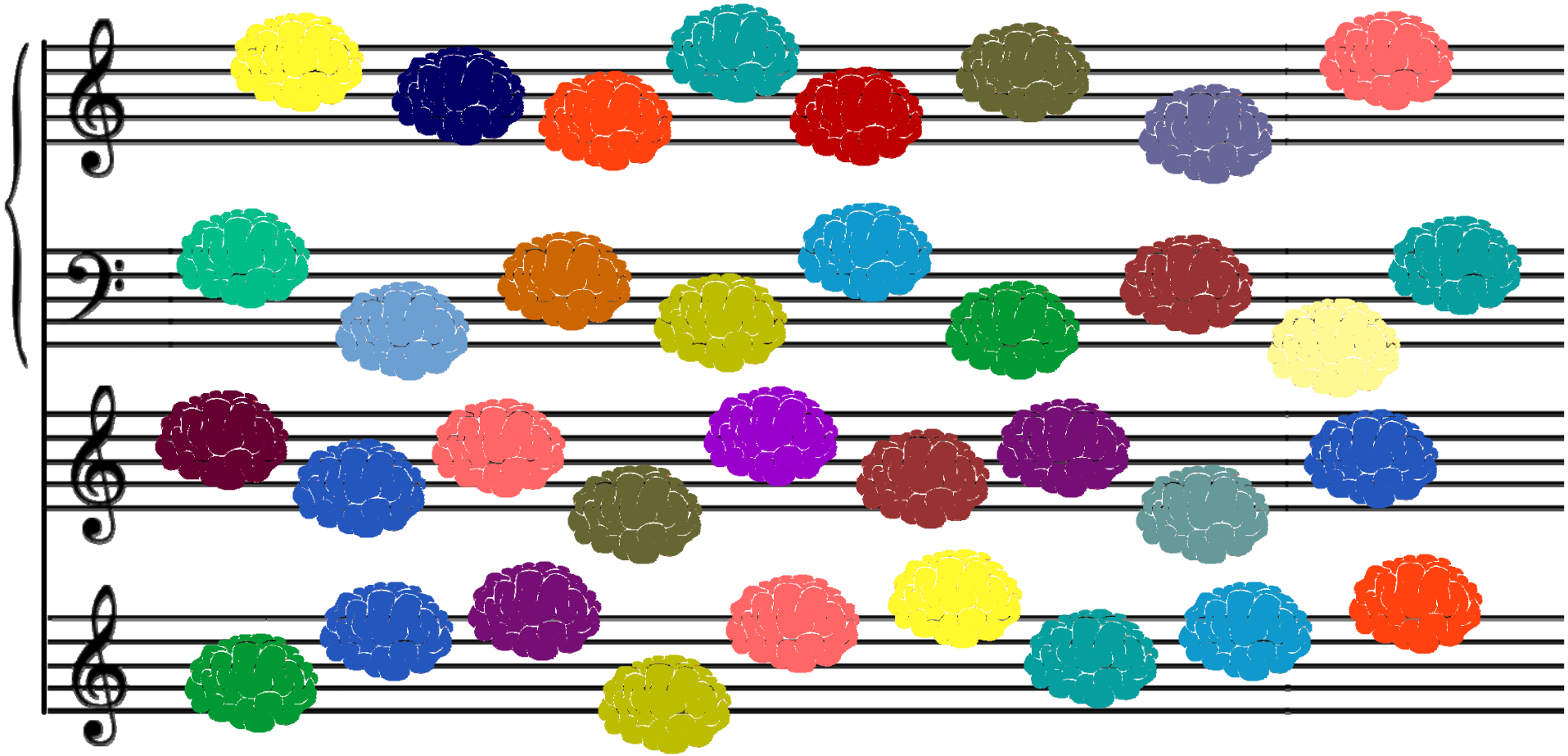
Glücklich sein?

Es wird Zeit, sich auf die Ähnlichkeiten anstatt auf die Unterschiede zu konzentrieren

Neurodiversität



Neuroharmonie

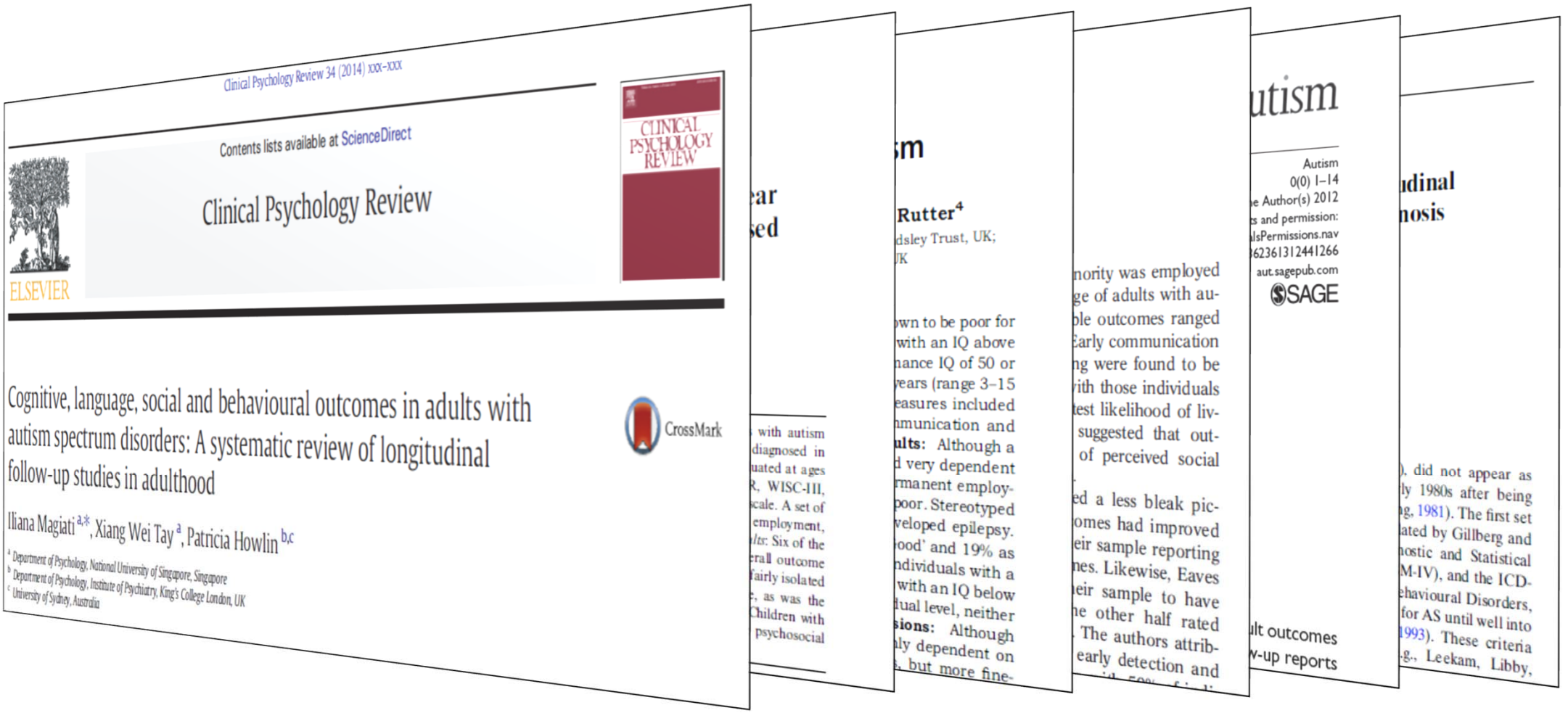


Menschliche Bedürfnisse: Maslows Hierarchie

Abraham Maslow

HAPPINESS

Outcome studien



Clinical Psychology Review 34 (2014) xxx–xxx

Contents lists available at ScienceDirect

Clinical Psychology Review

ELSEVIER

Cognitive, language, social and behavioural outcomes in adults with autism spectrum disorders: A systematic review of longitudinal follow-up studies in adulthood

Iliana Magiati [a,*], Xiang Wei Tay [a], Patricia Howlin [b,c]

[a] Department of Psychology, National University of Singapore, Singapore
[b] Department of Psychology, Institute of Psychiatry, King's College London, UK
[c] University of Sydney, Australia

Autism
0(0) 1–14
SAGE

Aber was sind die Kriterien?

Beschäftigung

Beziehungen/Freunde

Gesundheit

kognitive Fähigkeiten

Lebensort

Autismus-Symptome

Mängel von Studien

Objektive Kriterien sagen nicht viel über die **Lebensqualität** aus…

Autism after Adolescence: Population-based 13- to 22-year Follow-up Study of 120 Individuals with Autism Diagnosed in Childhood

Eva Billstedt,[1,3] Carina Gillberg,[1] and Christopher Gillberg[1,2]

Table I. Outcome in 120 Individuals with Autistic Disorder or Atypical Autism

Outcome variable	Autistic disorder N = 78	Atypical autism N = 42
Attrition	2 (3%)	4(10%)
Dead at follow-up	3 (4%)	3 (7%)
Very poor outcome	38/73 (52%)	24/35 (69%)
Poor outcome	17/73 (23%)	6/35 (17%)
Restricted but acceptable outcome	12/73 (16%)	2/35 (6%)
Fair outcome	6/73 (8%)	3/35 (9%)
Good outcome	0	0
Independence	3/73 (4%)	1/35 (3%)

Aspects of quality of life in adults diagnosed with autism in childhood

A population-based study

autism © 2011
SAGE Publications
and The National
Autistic Society
Vol 15(1) 7–20; 346066
1362-3613(2011)

Table 2 **Parent's/carer's estimation of the situation for their daughter/son/relative with ASD in aspects of quality of life/residential well being**

Category	N = *100*[a]
Very high residential well being	61
High residential well being	30
Average residential well being	5
Poor residential well being	2
Very poor residential well being	2

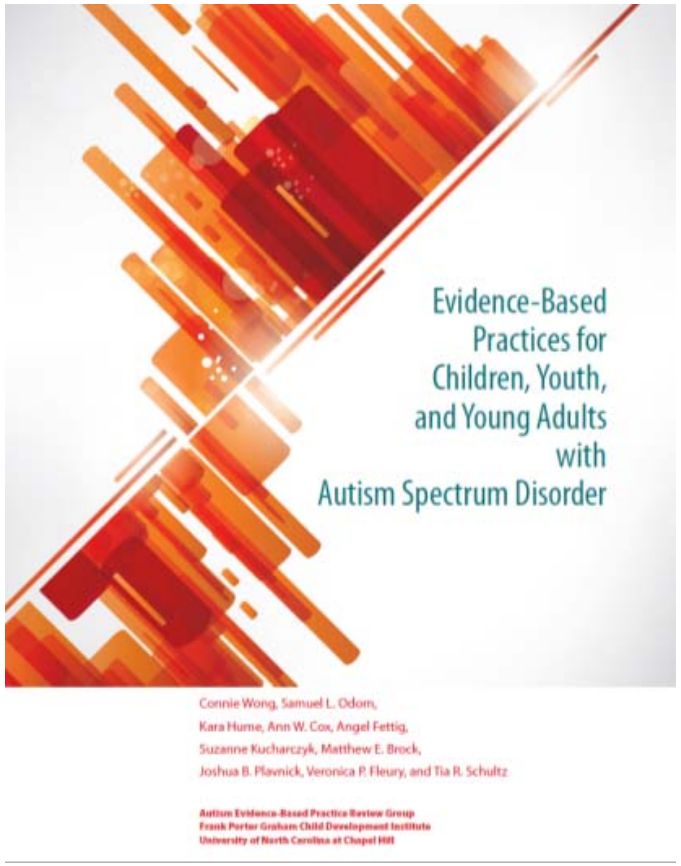
a. Missing information in 8 cases.

Messung die “outcomes” im Autismus

Objektive Kriterien:
Gesellschaftlichen Normen

Subjektive Kriterien:
Wohlbefinden

Zu wenig Aufmerksamkeit für das Wohlbefinden



Behandlungsziele

Ergebnisse bezogen auf	Studien (N = 456)
Kommunikation Fähigkeit, Wünsche, Bedürfnisse, Gefühle oder Ideen auszudrücken und Auswahlen zu treffen	182 (39,9%)
Soziale Kompetenz Fähigkeiten, mit anderen zu interagieren	165 (36,2%)
Herausforderndes/störendes Verhalten Abbau oder Beseitigung von Verhaltensweisen, die andere stören	158 (34,6%)
Spielmaterialien Verwendung von Spielzeug oder Freizeitmaterialien	77 (16,9%)
Schulbereitschaftsfähigkeiten Leistung während einer Aufgabe, die nicht im unmittelbaren Zusammenhang mit dem eigentlichen Aufgabeninhalt stehen	67 (14,7%)
Vor-schulisch/schulische Leistungen Leistung bei Aufgaben, die typischerweise im schulischen Umfeld gelehrt und angewendet werden	58 (12,7%)
Adaptive Fähigkeiten/Selbsthilfe Fähigkeiten für ein unabhängiges Leben und persönliche Hygiene	57 (12,5%)
Geteilte Aufmerksamkeit Erforderliche Verhaltensweisen für gemeinsame Interessen und/oder Erfahrungen	39 (8,6%)
Motorik Bewegung oder Motorik, umfassend fein- und grobmotorische Fähigkeiten oder damit zusammenhängendes sensorisches System/sensorische Funktionen	18 (3,9%)
Kognitive Leistungen Leistungen bei Intelligenztests, Tests zu Exekutivfunktionen, Problemlösung, Gedächtnis, Argumentation, Theory of Mind, Kreativität, Aufmerksamkeit	15 (3,3%)
Ausbildungsbezogene Aspekte Beschäftigung oder Vorbereitung auf das Arbeitsleben oder auf technische Fähigkeiten, die für eine bestimmte Arbeit erforderlich sind	12 (2,6%)
Psychische Gesundheit Emotionales Wohlbefinden	1 (0,2%)

J Autism Dev Disord
DOI 10.1007/s10803-017-3282-2

S.I. : PARENTING CHILDREN WITH ASD

Parents Suggest Which Indicators of Progress and Outcomes Should be Measured in Young Children with Autism Spectrum Disorder

Helen McConachie[1] · Nuala Livingstone[2,10] · Christopher Morris[3] · Bryony Beresford[4] · Ann Le Couteur[1] · Paul Gringras[5] · Deborah Garland[6] · Glenys Jones[7] · Geraldine Macdonald[2,11] · Katrina Williams[8] · Jeremy R. Parr[9]

Abstract Evaluation of interventions for children with autism spectrum disorder (ASD) is hampered by the multitude of outcomes measured and tools used. Measurement in research with young children tends to focus on core impairments in ASD. We conducted a systematic review of qualitative studies of what matters to parents. Parent advisory groups completed structured activities to explore their perceptions of the relative importance of a wide range of outcome constructs. Their highest ranked outcomes impacted directly on everyday life and functioning (anxiety, distress, hypersensitivity, sleep problems, happiness, relationships with brothers and sisters, and parent stress). Collaboration between professionals, researchers and parents/carers is required to determine an agreed core set of outcomes to use across evaluation research.

Keywords Young children · Outcomes · Measurement · Parents · Consultation

Interventionen für Erwachsene

Review

autism

Autism
1–15

DOI: 10.1177/1362361317698939
journals.sagepub.com/home/aut
SAGE

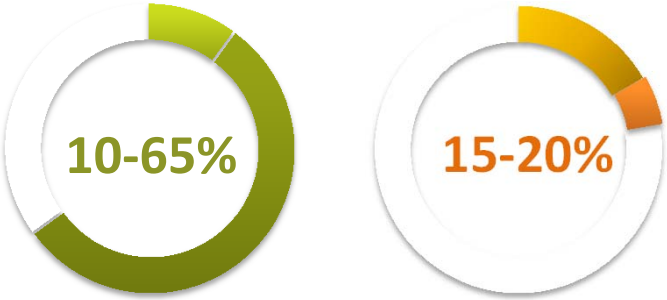
Support for adults with autism spectrum disorder without intellectual impairment: Systematic review

Theo Lorenc[1], Mark Rodgers[1], David Marshall[1], Hollie Melton[1], Rebecca Rees[2], Kath Wright[1] and Amanda Sowden[1]

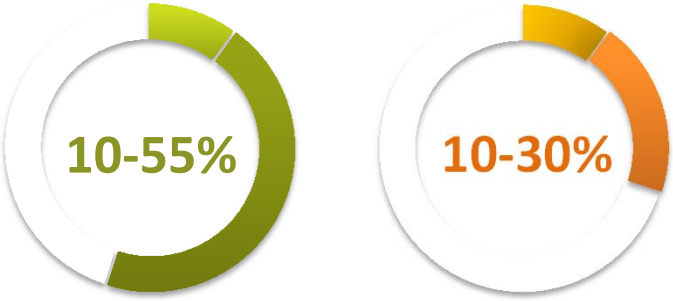
Die meisten Interventionen konzentrierten sich auf die Abschwächung spezifischer Defizite ... / ... Nur wenige Studien konzentrieren sich auf Ergebnisse, die die Auswirkungen von Interventionen auf das Leben von Menschen mit ASD, wie psychische Gesundheit, Wohlbefinden, Lebensqualität, belegen würden

Psychische Probleme bei Autismus

Angststörung



Depression



Lebenszeitprävalenz

J Autism Dev Disord (2006) 36:849–861
DOI 10.1007/s10803-006-0123-0

ORIGINAL PAPER

Comorbid Psychiatric Disorders in Children with Autism: Interview Development and Rates of Disorders

Ovsanna T. Leyfer · Susan E. Folstein · Susan Bacalman · Naomi O. Davis · Elena Dinh · Jubel Morgan · Helen Tager-Flusberg · Janet E. Lainhart

BMC Psychiatry

BioMed Central

Research article

Open Access

Psychiatric and psychosocial problems in adults with normal-intelligence autism spectrum disorders

Björn Hofvander*[1], Richard Delorme[2,7], Pauline Chaste[2,7], Agneta Nydén[3], Elisabet Wentz[3,4], Ola Ståhlberg[5], Evelyn Herbrecht[2,6,7], Astrid Stopin[2], Henrik Anckarsäter[1,2,5], Christopher Gillberg[3], Maria Råstam[8] and Marion Leboyer[2,6,7,9]

Wir konzentrieren uns hauptsächlich auf negative Gefühle

The Development of a Stress Survey Schedule for Persons with Autism and Other Developmental Disabilities

June Groden,[1,5] Amy Diller,[1] Margaret Bausman,[1] Wayne Velicer,[2] Gregory Norman,[3] and Joseph Cautela[4]

The Stress Survey Schedule is an instrument for measuring stress in the lives of persons with autism and other developmental disabilities. Development of the survey and analysis of the underlying measurement structure of the instrument is reported in three studies. Through the use of exploratory and confirmatory analysis procedures, eight dimensions of stress were identified: Anticipation/Uncertainty, Changes and Threats, Unpleasant Events, Pleasant Events, Sensory/Personal Contact, Food Related Activity, Social/Environmental Interactions, and Ritual Related Stress. These stress dimensions are highly relevant to the problems of autism and have not been addressed by other stress surveys. The information obtained from the Stress Survey can be used to plan for strategies to reduce the stress before it occurs or results in maladaptive behavior.

KEY WORDS: Autism; stress survey.

Research in Autism Spectrum Disorders 5 (2011) 377–387

Contents lists available at ScienceDirect

Research in Autism Spectrum Disorders

Journal homepage: http://ees.elsevier.com/RASD/default.asp

Anxiety in people diagnosed with autism and intellectual disability: Recognition and phenomenology

Sissel Berge Helverschou [a,*], Harald Martinsen [b]

[a] The National Autism Unit, Oslo University Hospital, Rikshospitalet, Norway
[b] Institute of Special Needs Education, University of Oslo, Norway

ARTICLE INFO

Article history:
Received 27 April 2010
Received in revised form 11 May 2010
Accepted 11 May 2010

Keywords:
Autism
Intellectual disability
Anxiety disorders
Psychiatric disorders
Adults

ABSTRACT

Anxiety seems to occur frequently in individuals with autism, but varying prevalence estimates indicate uncertainties in identifying anxiety, especially in those with intellectual disability (ID). The present study explores the recognition of anxiety symptoms and aims to provide suggestions for the assessment of anxiety in individuals with autism and ID.

Two separate samples, a community sample of 62 individuals and a clinical sample of 9 individuals, were assessed with anxiety items from a screening checklist. Each item's scores were analyzed. In addition, in the clinical sample, checklist results were compared with clinical assessments.

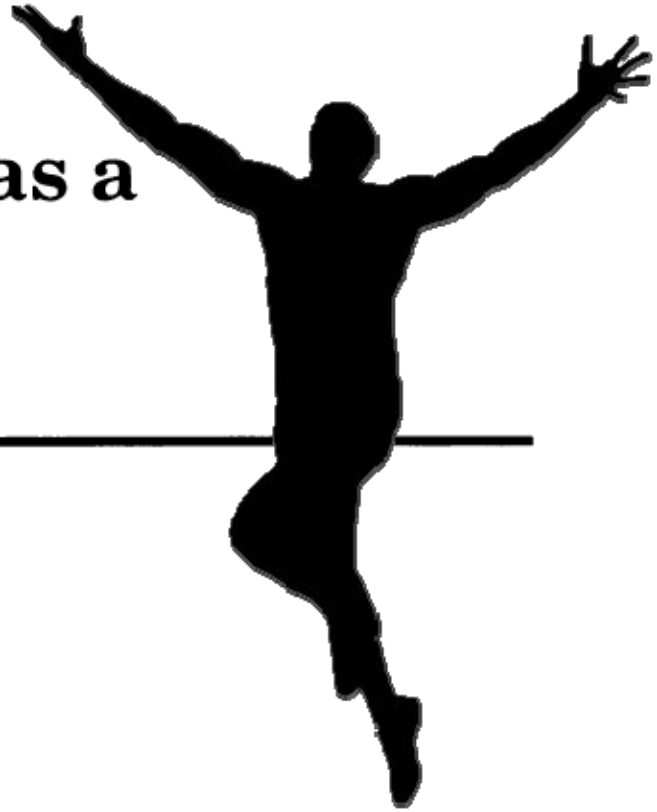
The results indicate that anxiety can be recognized by symptoms similar to those in non-autistic individuals, but signs of physiological arousal seem difficult to recognize in this population. The results imply inclusion of general adjustment problems in order to identify individuals with anxiety problems by using a checklist. For diagnostic purposes, the use of an individual anxiety assessment seems indicated.

Journal of medical ethics, 1992, **18, 94–98**

Words

A proposal to classify happiness as a psychiatric disorder

Richard P Bentall *Liverpool University*



Vorschlag: Glück als psychiatrische Störung zu klassifizieren

Glück

Angenehmes Leben

- Positive Gefühle
- Freude - Vergnügen
- Schmerzfreiheit
- Sicherheit
- Lieblingsaktivitäten

Sinnerfülltes Leben

- Zufriedenheit
- Lebenssinn
- Persönliche Entwicklung
- Anderen Gutes tun
- Lebenszufriedenheit

Warum den Fokus auf Wohlbefinden legen?

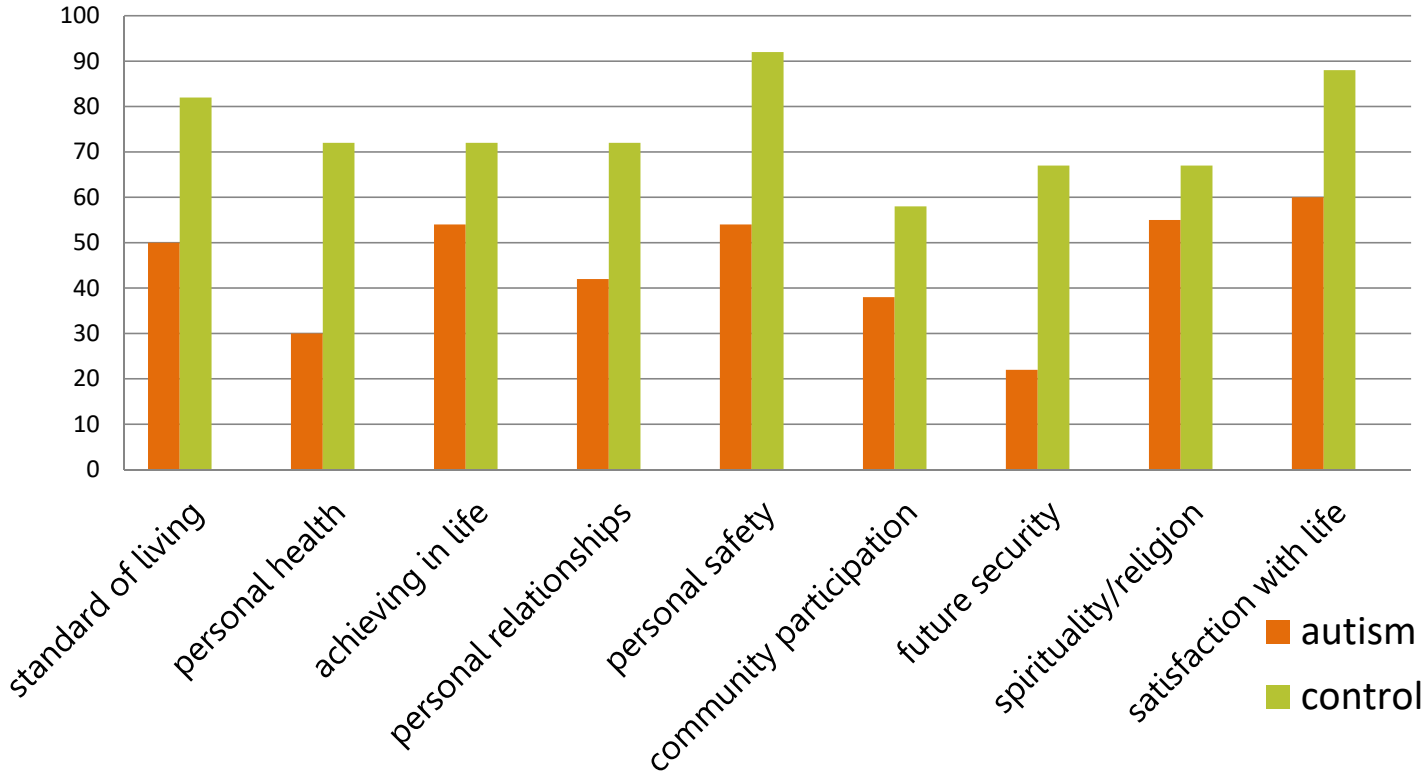
Weil das subjektive Wohlbefinden bei autistischen Menschen geringer ist.

Personal Wellbeing Index (PWI)

(Cummins et al; Deakin 2006)

PWI results: comparison of UK autism group v controls

degree of satisfaction with



Source: Richard Mills, 2016

Glückliche Menschen sind erfolgreicher im Leben

Psychological Bulletin
2005, Vol. 131, No. 6, 803–855

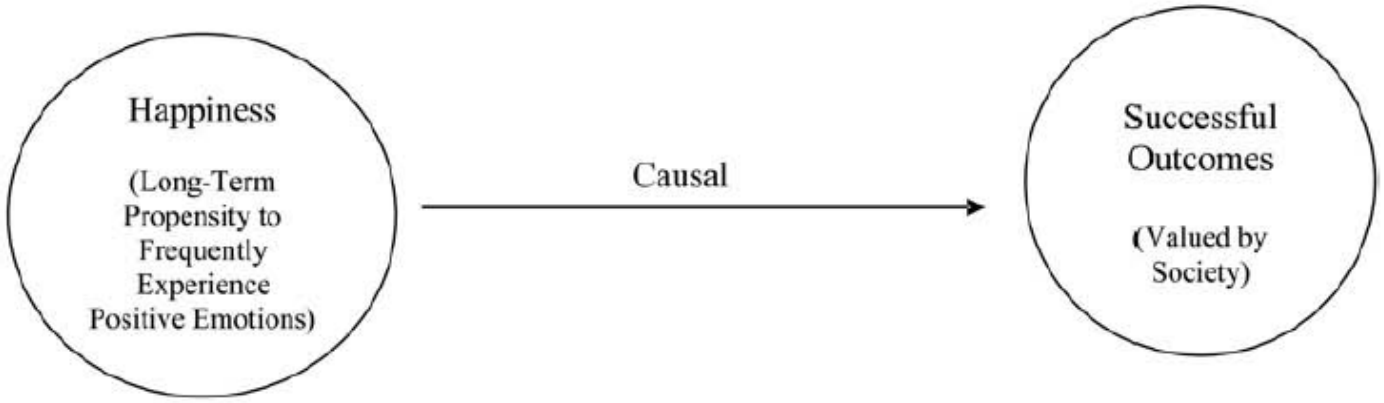
0033-2909/05/$12.00 DOI: 10.1037/0033-2909.131.6.803

The Benefits of Frequent Positive Affect: Does Happiness Lead to Success?

Sonja Lyubomirsky
University of California, Riverside

Laura King
University of Missouri—Columbia

Ed Diener
University of Illinois at Urbana–Champaign and The Gallup Organization



Warum den Fokus auf Wohlbefinden und Glück legen ?

Weil glückliche autistische Menschen bessere Ergebnisse (Outcomes) erzielen im:

Nicht weniger autistisch,
aber
“autistisch glücklich”

Früherkennung ist sehr wichtig, aber…

Manchmal wird die Diagnose **zu groß**

Oft einseitiger, problemorientierter Zugang

Wie oft lesen Sie diese Wörter in diagnostischen Befunden?

- glücklich
- Wohlbefinden
- Zufriedenheit
- Stolz
- Freude
- Vergnügen
- angenehm
- Spaß
- genießen
- fröhlich
- nett
- gutes Gefühl

Emotionales Wohlbefinden: sehr persönlich!

- Vermeiden Sie, Menschen mit ASD in die **neurotypische** Vorstellungen von Glück zu pressen
- Vermeiden Sie, Menschen mit ASD in **Klischee Vorstellungen** von Autismus zu pressen
- ALSO, FRAGEN SIE DIE BETROFFENEN!

There are tools

The Satisfaction with Life Scale

By Ed Diener, Ph.D.

DIRECTIONS: Below are five statements with which you may agree or disagree. Using the 1-7 scale below, indicate your agreement with each item by placing the appropriate number in the line preceding that item. Please be open and honest in your responding.

1 = Strongly Disagree
2 = Disagree
3 = Slightly Disagree
4 = Neither Agree or Disagree
5 = Slightly Agree
6 = Agree
7 = Strongly Agree

_____1. In most ways my life is close to my ideal.

_____2. The conditions of my life are excellent.

_____3. I am satisfied with life.

_____4. So far I have gotten the important things I want in life.

_____5. If I could live my life over, I would change almost nothing.

WHO (Five) Well-Being Index (1998 version)

Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks. Notice that higher numbers mean better well-being.

Example: If you have felt cheerful and in good spirits more than half of the time during the last two weeks, put a tick in the box with the number 3 in the upper right corner.

	Over the last two weeks	All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
1	**I have felt cheerful and in good spirits**	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
2	**I have felt calm and relaxed**	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
3	**I have felt active and vigorous**	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
4	**I woke up feeling fresh and rested**	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0
5	**My daily life has been filled with things that interest me**	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1	☐ 0

Einschätzung von Wohlbefinden

- Seien Sie vorsichtig mit Selbstberichten/Selbsteinschätzungen
  - Schwierigkeiten mit dem Selbstverständnis
  - Schwierigkeiten mit abstrakten Konzepten
  - **Kontextblindheit**

Einschätzung von Wohlbefinden

- Nicht eindeutige Fragen…
- Abstrakte und vage Begrifflichkeiten…

Einschätzung den positive Gefühlen

AUTISM STRESS INVENTORY

PART I: STRESSORS

Judge to what extent the following situations cause stress for the person with autism.

1: no stress
2: lightly stressful
3: moderately stressful
4: highly stressful
5: severely stressful

Sensory stimuli

	1	2	3	4	5
Certain kinds of light, namely…					
Certain kinds of noises, namely…					
Certain kinds of smell, namely…					
Certain kinds of tactile stimuli, namely…					
Being touched					
Being hugged					
Being kissed					
Certain kinds of food					
Other:					

Autism Good Feeling Questionnaire

The questionnaire contains items referring to all sorts of things that can give a person a good feeling. Obviously, each person is different. What gives a good feeling to one person, can be very unpleasant for another person.
Below, you can indicate the extent to which things or events give you a good feeling. For each category of items, there is place to add things that are not mentioned in the list.

Each 'item' can be scored as follows:

3: This gives me a good feeling - I enjoy this very much
2: This gives me a good feeling – I enjoy this
1: This gives me a little bit of good feeling - I enjoy this a little
0: This does not give me a good feeling – I don't enjoy this in particular (neutral, I feel nothing) or I even find this unpleasant
?: ***I do not know if this gives me a good feeling***

Obviously this list is not exhaustive. Therefore, there is room left to add things that make you feel good or that you enjoy.

Sensory aspects

	3	2	1	0		?
Certain light, namely: .:						
Certain sounds, namely: .:						
A certain kind of voice, namely: .:						
Silence						
Certain smells, namely: .:						
Certain tactile stimuli, namely: .:						
Being touched						
Being cuddled						
Being kissed						
Heat						
Cold						
Certain foods, namely: .:						
Certain beverages, namely:						
Certain items that I like to touch, namely: .:						
Certain weather conditions (please specify:.....)						
A fleece blanket around me						

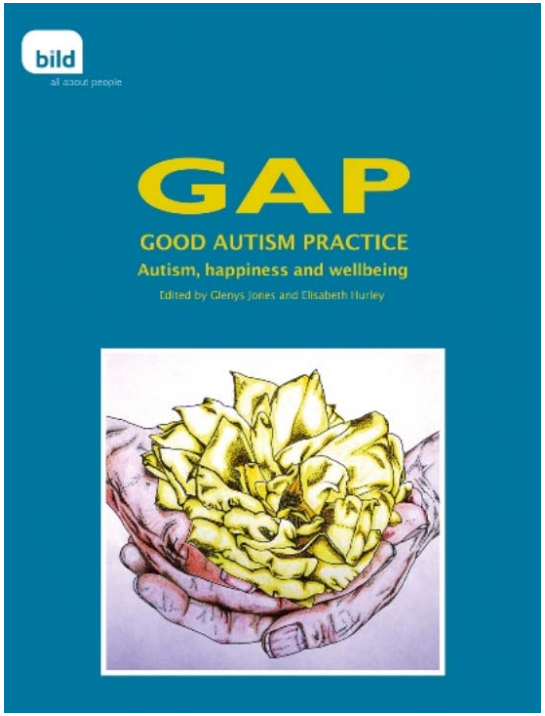
Die Praxis der Förderung von Glück bei Autismus

The practice of promoting happiness in autism

Peter Vermeulen, Autisme Centraal, Gent, Belgium

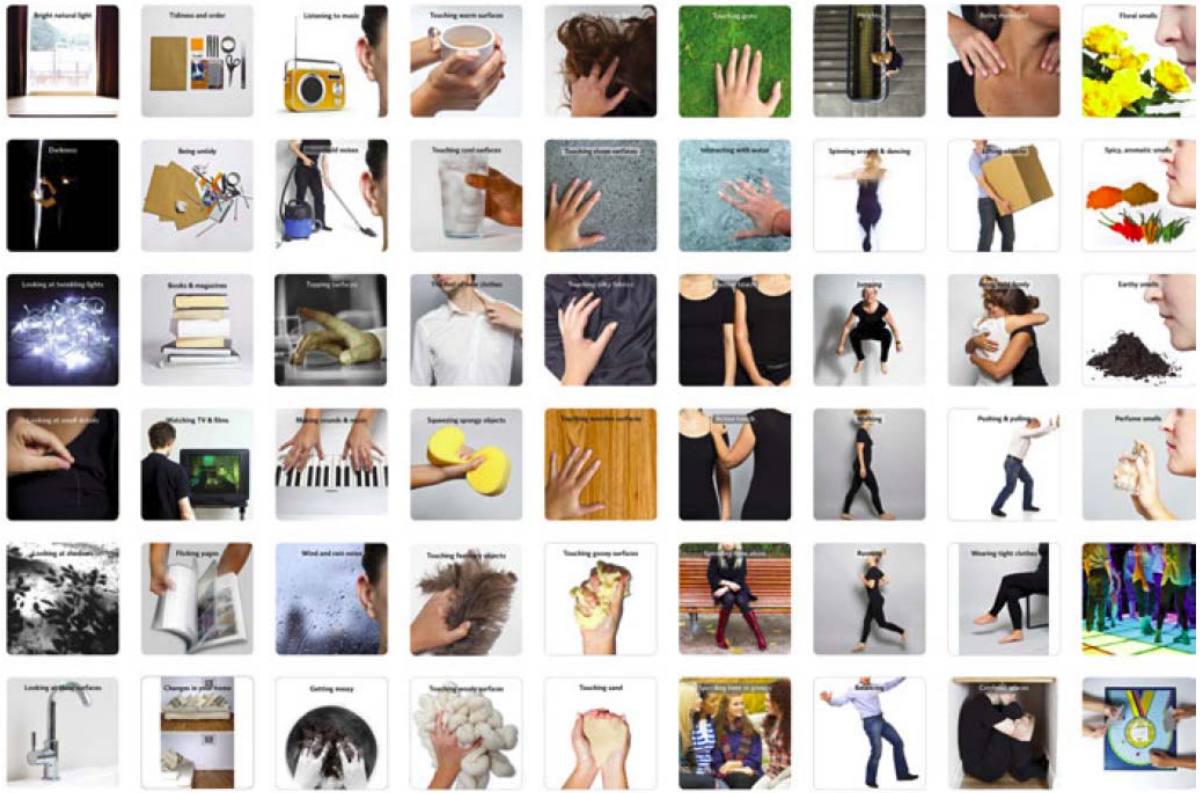
Editoral comment

Emotional wellbeing and happiness have received little attention in the field of autism. When the focus is on wellbeing, it is often from a negative perspective, namely the lack of wellbeing and quality of life in autism. Based on the principles of positive psychology, Peter Vermeulen argues for a change in focus and suggests that instead of concentrating on the lack of emotional wellbeing in people with autism, strategies to facilitate their feeling of happiness should be developed. In this article, the main focus is on the first and most important step in promoting happiness in people with autism, namely the



Assessment von sensorischen Vorlieben

Good Feeling Sensory Circuit
(Vermeulen, 2014)



Kingwood Sensory Preference Cards
(Brand & Gaudion, 2012; Gaudion, 2015)

Lebensqualität: keine Verbindung mit dem IQ und dem Schweregrad

Original Article

autism

Autism
2015, Vol. 19(2) 158–167

DOI: 10.1177/1362361313517053
aut.sagepub.com
SAGE

Quality of life in autism across the lifespan: A meta-analysis

Barbara FC van Heijst[1] and Hilde M Geurts[1,2,3]

Abstract

Autism is a lifelong neurodevelopmental disorder, with a known impact on quality of life. Yet the developmental trajectory of quality of life is not well understood. First, the effect of age on quality of life was studied with a meta-analysis. Our meta-analysis included 10 studies (published between 2004 and 2012) with a combined sample size of 486 people with autism and 17,776 controls. Second, as there were no studies on quality of life of the elderly with autism, we conducted an empirical study on quality of life of the elderly (age range 53–83) with autism (N = 24) and without autism (N = 24). The meta-analysis showed that quality of life is lower for people with autism compared to people without autism, and that the mean effect is large (Cohen's d = −0.96). Age did not have an effect on quality of life. The study concerning the elderly with autism showed that the difference in quality of life is similar in the elderly. Age, IQ and symptom severity did not predict quality of life in this sample. Across the lifespan, people with autism experience a much lower quality of life compared to people without autism. Hence, the quality of life seemed to be independent of someone's age.

Lebensqualität:
keine Verbindung mit
adaptivem Funktionsniveau

Focus on Autism and Other Developmental Disabilities

Youth With Autism Spectrum Disorders
Self- and Proxy-Reported Quality of Life and Adaptive Functioning

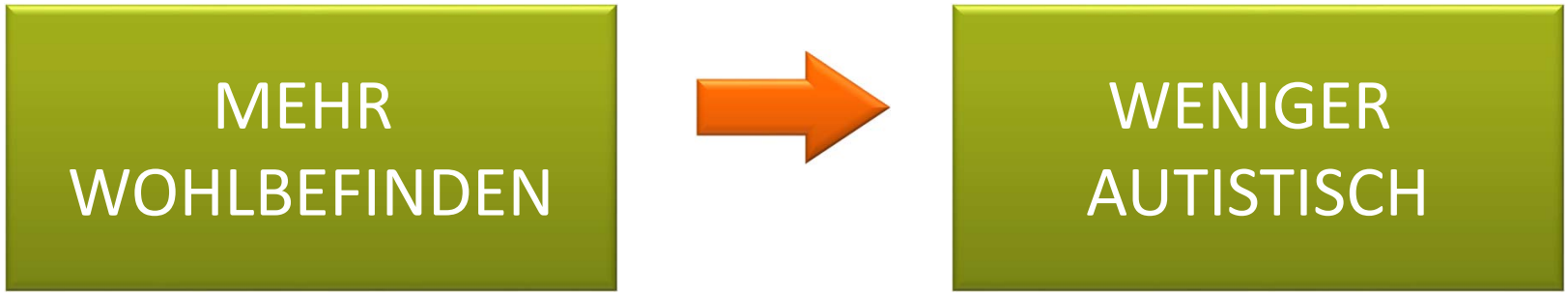
Brenda G. Clark, MD, FRCPC[1,2]
Joyce E. Magill-Evans, PhD[1]
Cyndie J. Koning, PhD[2]

[1]University of Alberta, Edmonton, Canada
[2]Glenrose Rehabilitation Hospital, Alberta, Edmonton, Canada

Geringe Korrelation zwischen Lebensqualität & Allgemeinem Adaptivem Gesamtwert.

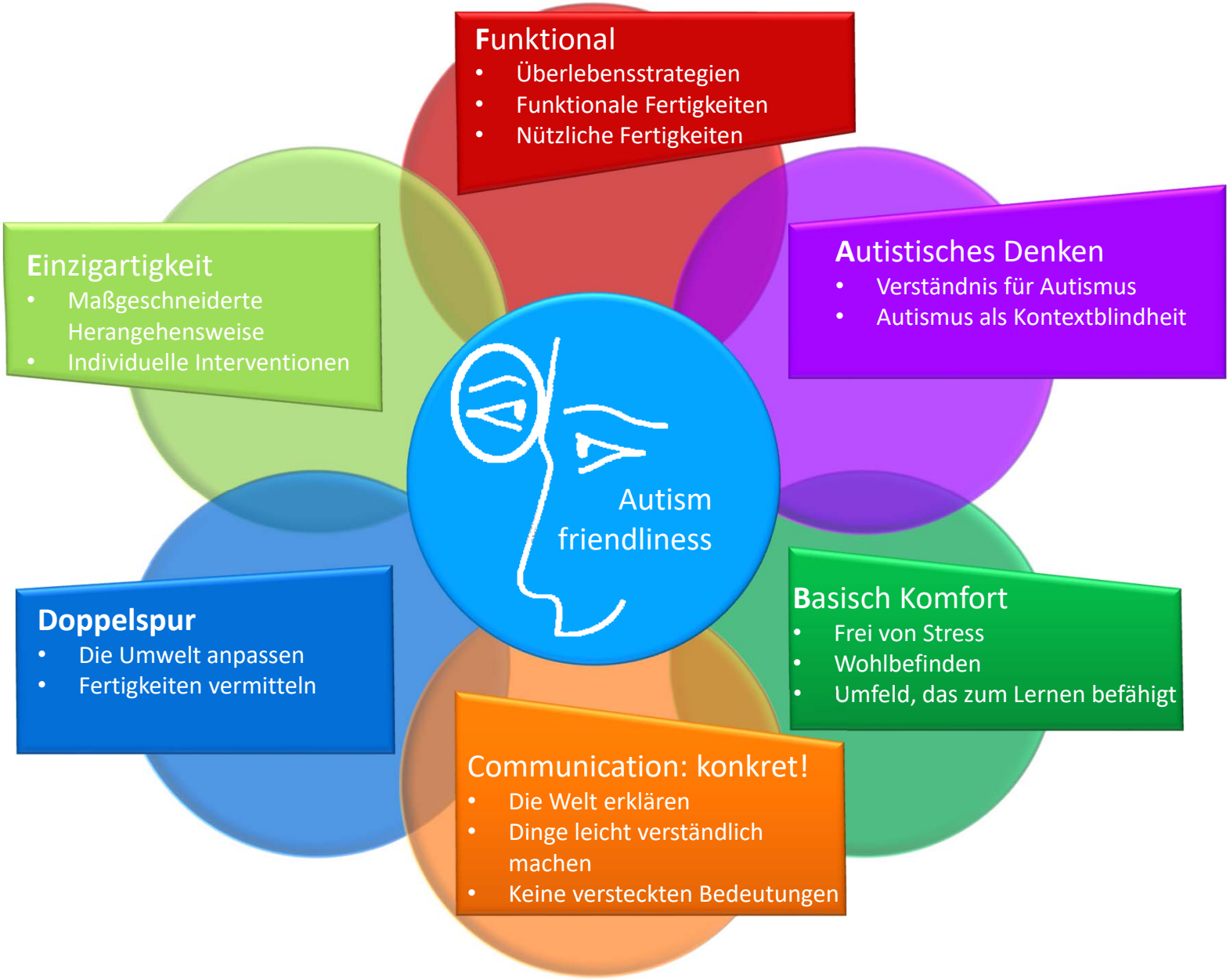
Clark, Magill-Evans & Koning (2015)

Aber es funktioniert so:



AUTISME CENTRAAL

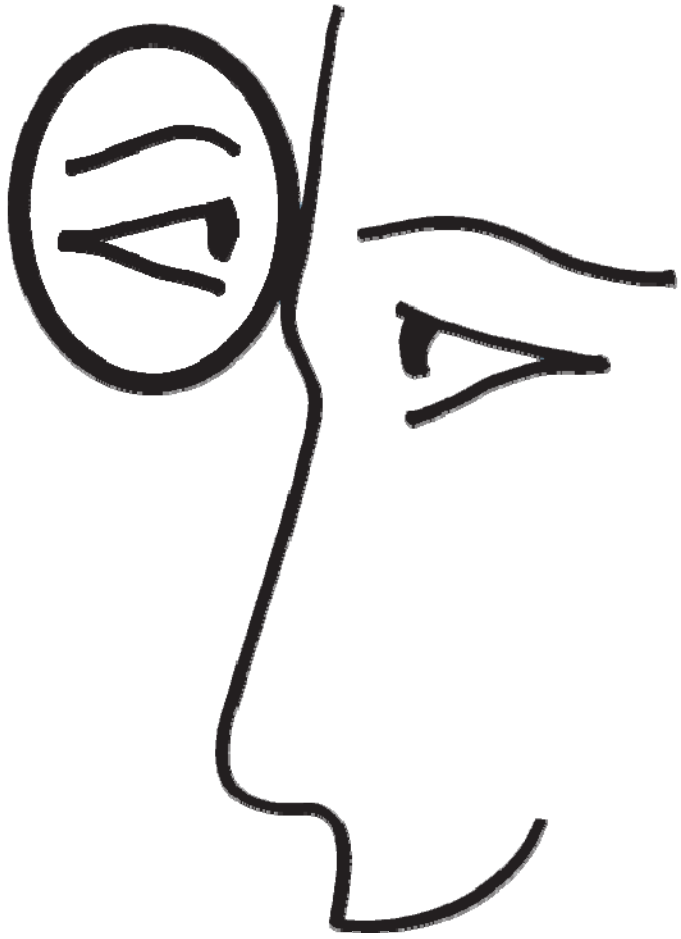
Autisme Centraal Methode



Autismusfreundliches Umfeld

Wohlbefinden

Autismusfreundlichkeit



Autismusfreundliches Umfeld

Nicht Herausforderungen und Hürden vermeiden, sondern Menschen mit Autismus helfen die Herausforderungen des Lebens anzunehmen und Hürden zu überwinden

“Glück ist nicht die Abwesenheit von Problemen, sondern die Fähigkeit, mit ihnen umzugehen”

Im Gleichgewicht

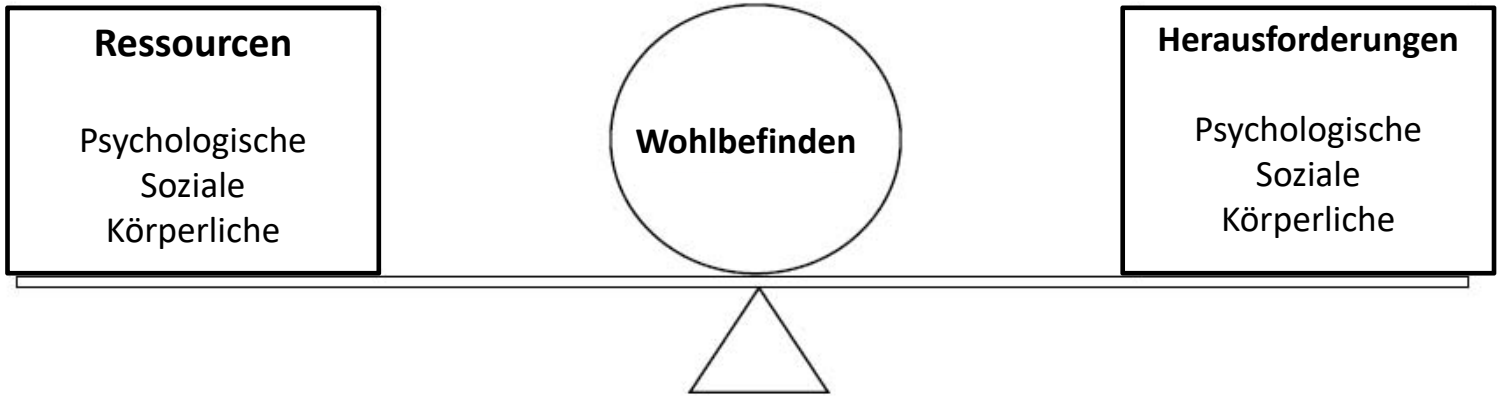
IJW Dodge, R., Daly, A., Huyton, J., & Sanders, L. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 222-235. doi:10.5502/ijw.v2i3.4

ARTICLE

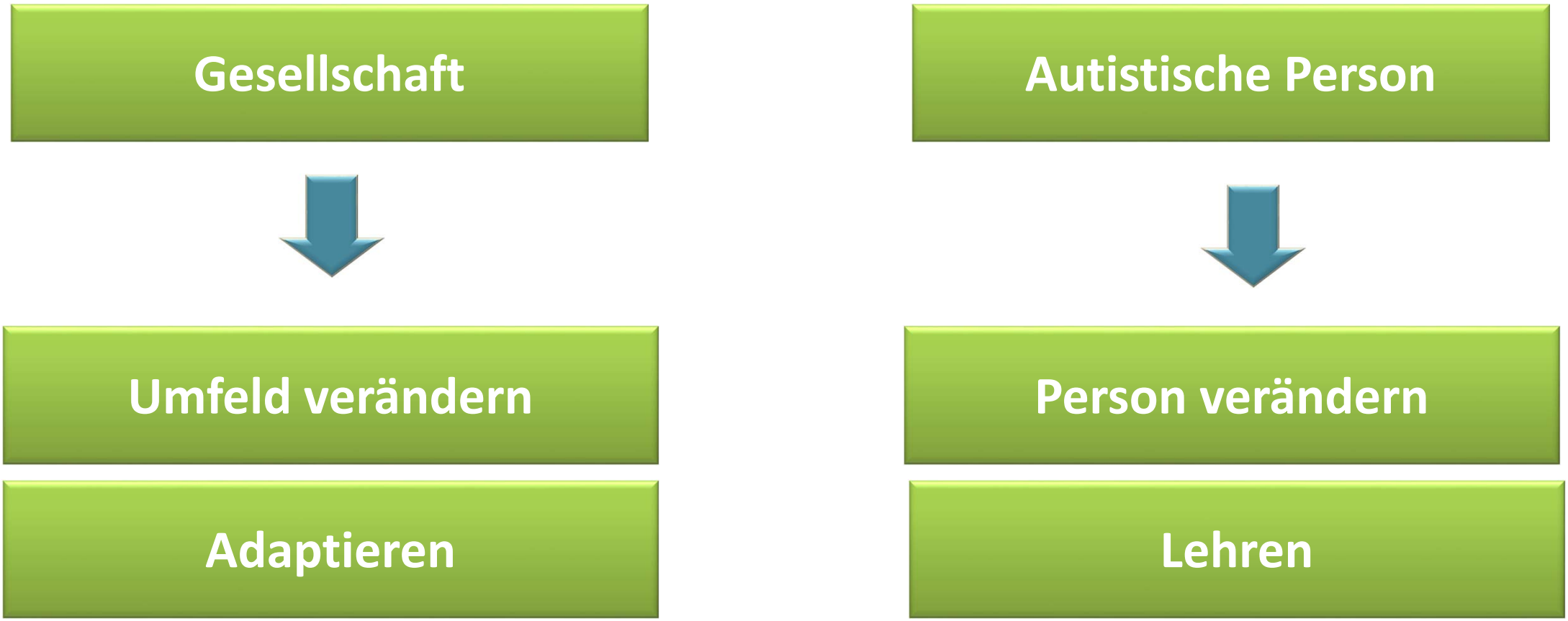
The challenge of defining wellbeing

Rachel Dodge · Annette P. Daly · Jan Huyton · Lalage D. Sanders

Abb. 4: Definition von Wohlbefinden



Doppelspur: Zweispuriger Ansatz



Autismus ist keine Ausrede

“Ich brauche hohe Erwartungen und ein hohes Unterstützungsniveau”
Ros Blackburn

“Mutter wusste einfach, wie sehr sie mich puschen kann” Temple Grandin

Vermeiden Sie Herausforderungen nicht, sondern geben Sie Kontrolle,

Vermeiden Sie Herausforderungen nicht, sondern machen Sie sie “autismusfreundlich”

Uncertainty drives anxiety, sensory issues in autism

BY **ANN GRISWOLD** / 8 APRIL 2016

Sensory overload: *Children with autism may perceive uncertainty as a threat.*

©shutterstock.com/ Kuznetcov_Konstantin

J Autism Dev Disord (2016) 46:1962–1973
DOI 10.1007/s10803-016-2721-9

CrossMark

ORIGINAL PAPER

The Relationship Between Intolerance of Uncertainty, Sensory Sensitivities, and Anxiety in Autistic and Typically Developing Children

Louise Neil[1] · Nora Choque Olsson[2] · Elizabeth Pellicano[1,3]

Wollen Sie autistische Menschen glücklich machen?

Bieten Sie zuerst
Klarheit und
Vorhersehbarkeit.

Der Rest kommt
später.

An guten Gefühlen arbeiten

- Entspannung
- Kognitive Verhaltenstherapie (CBT) (und andere Therapien)
- Mindfulness

Autismus und physische Gesundheit und Fitness

Hindawi Publishing Corporation
Autism Research and Treatment
Volume 2014, Article ID 312163, 6 pages
http://dx.doi.org/10.1155/2014/312163

Research Article

Physical Activity and Physical Fitness of School-Aged Children and Youth with Autism Spectrum Disorders

Kiley Tyler,[1] Megan MacDonald,[1] and Kristi Menear[2]

[1] *College of Public Health and Human Sciences, Oregon State University, Corvallis, OR 97331, USA*
[2] *School of Education, University of Alabama at Birmingham, Birmingham, AL 35294, USA*

Correspondence should be addressed to Megan MacDonald; megan.macdonald@oregonstate.edu

Received 31 May 2014; Revised 16 August 2014; Accepted 20 August 2014; Published 16 September 2014

Beginne zu laufen! (Oder Rad zu fahren oder zu schwimmen… oder…)

Physische Aktivitäten verringern das Cortisol Level und die Angst bei autistischen Menschen (Hillier e.a., 2010, Hillier e.a., 2011, Carraro & Gobi, 2012)

Autismus und Schlafprobleme

Research in Autism Spectrum Disorders 8 (2014) 292–303

Contents lists available at ScienceDirect

Research in Autism Spectrum Disorders

Journal homepage: http://ees.elsevier.com/RASD/default.asp

The relationship between Health-Related Quality of Life and sleep problems in children with Autism Spectrum Disorders

Jennifer Delahaye [a,*], Erica Kovacs [b], Darryn Sikora [c,1], Trevor A. Hall [c,2], Felice Orlich [d], Traci E. Clemons [e], Emma van der Weerd [a], Laura Glick [f], Karen Kuhlthau [a]

[a] Massachusetts General Hospital, Center for Child and Adolescent Health Research and Policy, 15th Floor – C100, 100 Cambridge Street Boston, MA 02114, USA
[b] Columbia Medical Center, Columbia Midtown, 51 East 51st Street, New York, NY 10019, USA
[c] Oregon Health & Science University, Child Development and Rehabilitation Center, PO Box 574, Portland, OR 97207, USA
[d] University of Washington, Seattle Children's Hospital, CAC – Autism Center 4909 – 25th Avenue NE, Seattle, WA 98105, USA
[e] The EMMES Corporation, 401 North Washington Street, Suite 700, Rockville, MD 20850, USA
[f] Tufts University, 18 Curtis Avenue, Somerville, MA 02144, USA

CrossMark

Sleep Issues in Children with Autism Spectrum Disorder

Alena Cavalieri

Sleep issues are more prevalent in children with autism spectrum disorder (ASD) than in typically developing children. Parents often seek help from providers to improve their child's ability to fall asleep, stay asleep longer, and decrease awakenings through the night. The pathophysiology of ASD, as well as sleep issues in children with ASD, are not well understood, which poses certain difficulties in choosing the most effective and appropriate treatment options. This article discusses probable causes of sleep problems in children with ASD, existing treatments, and implications for clinical practice and future research.

Difficulties related to sleep are common for many children. However, children with autism spectrum disorder (ASD) experience more sleep issues than their neurotypically developing (NTD) counterparts. Liu, Hubbard, Faves, and Adam (2006) found the prevalence of at least one sleep issue in children with ASD was on average 87%. Another study showed that 57.6% of

Lebensqualität von Autisten im Erwachsenenalter

ELSEVIER

Comprehensive Psychiatry

Volume 55, Issue 2, February 2014, Pages 302–310

COMPREHENSIVE PSYCHIATRY

www.elsevier.com/locate/comppsych

Quality of life: A case-controlled long-term follow-up study, comparing young high-functioning adults with autism spectrum disorders with adults with other psychiatric disorders diagnosed in childhood

Petra S. Barneveld[a,*], Hanna Swaab[a,b], Selene Fagel[a], Herman van Engeland[c], Leo M.J. de Sonneville[a,b]

[a]*Department of Clinical Child and Adolescent Studies, Leiden University, Leiden, The Netherlands*
[b]*Leiden University, Leiden Institute for Brain and Cognition, Leiden, The Netherlands*
[c]*Department of Child and Adolescent Psychiatry, Rudolf Magnus Institute of Neuroscience, University Medical Centre Utrecht, Utrecht, The Netherlands*

Objektive und subjektive Lebensqualität von 169 Erwachsenen mit ASS (IQ > 70), Alter 19-30.

Zufriedenheit über:

Wohnverhältnisse:	ASD < contr
Arbeit/ Ausbildung:	ASD < contr
Physischer Zustand:	ASD > contr
Soziale Beziehungen:	ASD < contr
Zukunftsperspektiven:	ASD < contr

Quelle: Barneveld et al. (2014)

Kontrollgruppe = Erwachsene mit anderen psychiatrischen Erkrankungen im Kindesalter, Zb: ADHS

Sinnvolles und zielbewusstes Leben

Was kann die Gesellschaft autistischen Menschen bieten?

Was können autistische Menschen der Gesellschaft bieten?

Beschäftigung kann therapeutisch wirken

J Autism Dev Disord
DOI 10.1007/s10803-013-2010-9

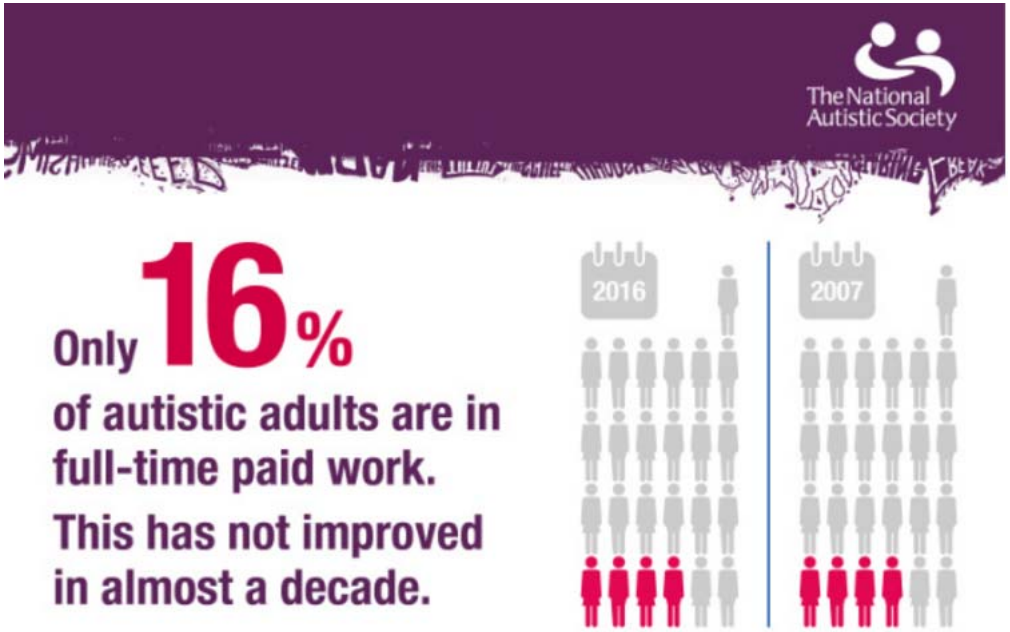
ORIGINAL PAPER

Engagement in Vocational Activities Promotes Behavioral Development for Adults with Autism Spectrum Disorders

Julie Lounds Taylor · Leann E. Smith · Marsha R. Mailick

Beschäftigung kann zur Verbesserung der autistischen Symptome führen und stärkt das Wohlbefinden und die Lebensqualität

We’re not there yet!



Nur 16% der autistischen Erwachsenen arbeiten in bezahlten Vollzeitjobs. Dies hat sich in fast einem Jahrzehnt nicht verbessert.

Ein gut gefüllter Tag

…bewahrt vor

- Langeweile
- dem Festfahren in stereotypen Aktivitäten/ Zwängen
- Sorgen und Ängsten
- herausforderndem Verhalten

…schafft Möglichkeiten um neue Fertigkeiten zu erlernen

…ermöglicht ein höheres Funktionsniveau zu erreichen

Sinnvolles und zielbewusstes Leben

Jeder Mensch mit Autismus kann dazu etwas beitragen!

Ein langes aber auch ein glückliches Leben?

Ein gesundes Leben?

Feldstudie (Vermeulen, 2012)

Geschlecht


3 5

Wohnsituation

6 1 1

Alter

40-52 year

Avg.: 44 year

Befragte Personen



5 2 1

Glück…

“Ich bin glücklich” - “sie sind glücklich”

Stolz auf konkrete Dinge

Weniger Leistungsdruck,
mehr “Spaß am Leben”

Die größte Sorge

Was ist, wenn meine Eltern nicht mehr da sind?

Glücklich altwerden mit Autismus

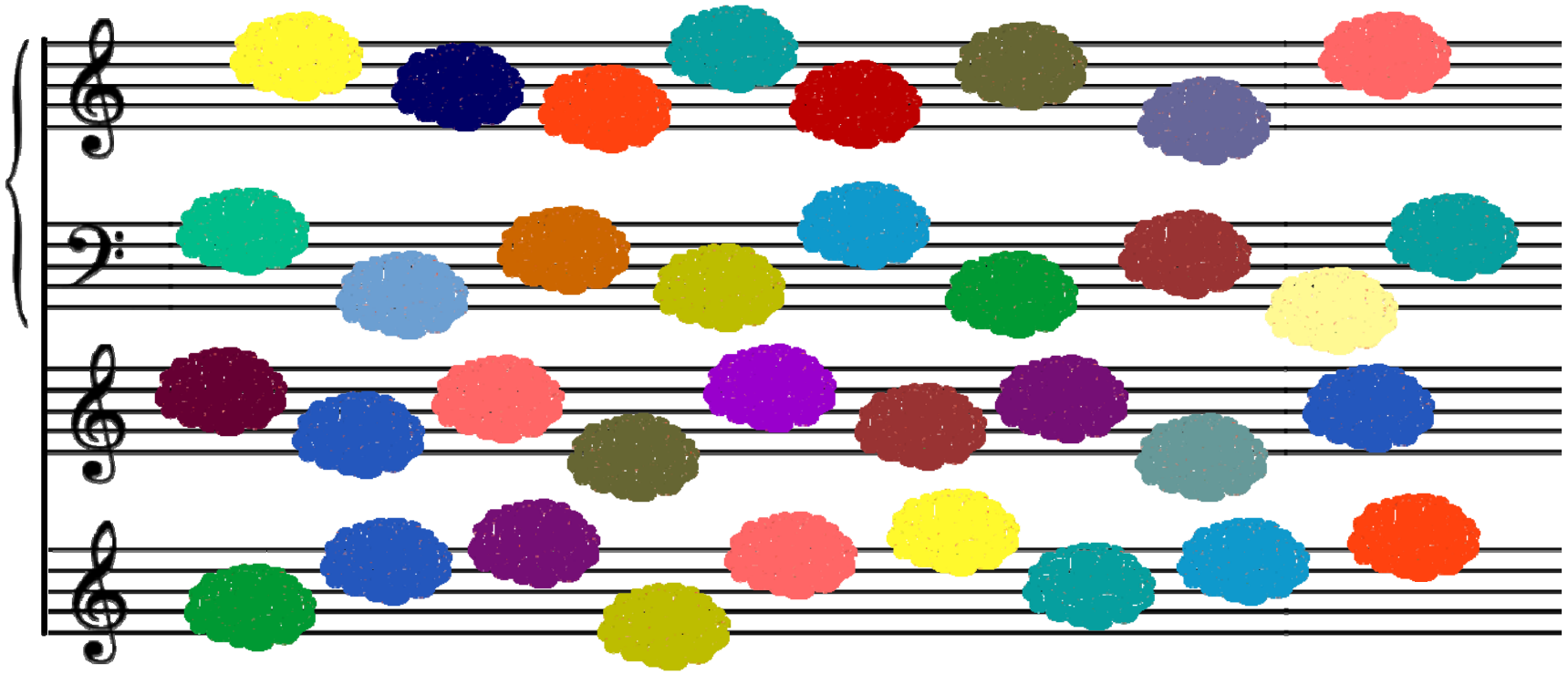
Gesund bleiben

Beschäftigt bleiben

In Verbindung bleiben

Aktiv bleiben

Neuroharmonie



A “Cheers” for every person, autistic or not

THANK YOU

FOR YOUR ATTENTION!

AUTISME CENTRAAL

www.autisme.be

peter_autisme