

## **SOCIAL SKILLS GROUP TRAINING (SSGT) PROGRAM AT THE HUMAN DEVELOPMENT CENTER**

We are a group of mental health professionals committed to providing the highest quality of psychological services. Our clinical expertise includes the assessment and treatment of problems of childhood (from infancy to adolescence) as well as adult problems (individuals, couples and families). Our services are guided by the best practices and ethical standards of the profession of psychology.

### **OUR EXPERTISE IN ASD**

One of our specializations has become the diagnosis and treatment of Autistic Spectrum Disorders (ASD) over the past fifteen years. We provide diagnostic and treatment services related to ASD for all age groups, ranging from early childhood to late adulthood. Our clients' diagnoses mostly fall within the **older** categories of Asperger's Disorder (AS), Pervasive Developmental Disorder-NOS (PDD.NOS), High Functioning Autism (HFA), Nonverbal Learning Disabilities (NVLD) and other related disorders. In addition, many clients have co-existing disorders, including Anxiety, ADHD, Mood Disorders, etc. The treatment modalities include individual, couple's and family therapy, consultations with parents, and group therapy focusing on social skills training.

### **GROUP TREATMENT OF ASD**

Although we label our program as "Social Skills Group Training (SSGT)", our group therapy encompasses a whole array of therapeutic interventions, aimed at facilitating social growth and increasing social competence. Our first group (a six-session program) started with three participants (age 10-12) in 2006. As of 2018, we have about 30 clients participating in five-six ongoing, year-round groups, ranging from a group for 8-9-year olds to a Young Adult Group for ages 22-35. In the development of our curriculum, we initially adapted social skills training interventions used with other populations because research and clinical materials for social skills training with ASD clients were very scant. Since then, we integrated emerging new methods into our group treatment approach; these new interventions satisfy the standards of Evidence Based Treatment for ASD clients (such as the Spotlight Program, developed by Lerner and Levine at North Shore Arc, in Danvers, Massachusetts).

### **OUR GROUPS**

We focus on developing a trusting relationship between the group leader and participants. We use this relationship to facilitate the development of social-emotional and nonverbal interaction skills and to establish group identity and we take participants' developmental stage, social world and individual needs into account.

For example, SSGT in the 5-year old group includes a play-based cognitive-behavior therapy approach called "Replays" (Levine & Chedd, 2007) combined with traditional play therapy and mirror work to facilitate emotion recognition and expressiveness. These approaches are integrated with small training modules of social skills such as: Listening, Using Nice Talk, Trying When It's Hard, Waiting Your Turn, Dealing with Feeling Mad, etc. (Skillstreaming, McGinnis, 2011).

In the 8-12 year old group the interventions include components of a drama-based affective relational intervention, video-based skills training, use of movies for social stories and social autopsies, and didactic

modules on the “hidden curriculum”, onset of puberty issues as well as social skills, such as Joining In, Expressing Affection, School Survival Skills, etc.

**Groups for younger and older teens** include drama-based interventions, major focus on biological and social aspects of puberty, preparation for transition to life after high school, career development, use of movies for social autopsies, and training in friendship and relationship skills.

Our **Young Adult Group** (age 22-35) focuses on the transition toward adulthood, including challenges of college studies, adult friendships and relationships, employment, independence, social awareness and coping with adult ASD issues.

## **PARTICIPATION**

Participation in our SSGT starts with a screening process aimed at finding the best fit for all participants. The screening for SSGT participation is often preceded by clinical assessment and individual sessions. The process of screening and assignment to group takes into account diagnosis, professional observations, parent comments, age, interest similarities, social skill development, degree of self-control, and safety concerns. In some cases, symptoms of other co-existing disorders (for example, ADHD) need to be brought under control before someone can join a group. Group assignment is sometimes changed to find a better fit; at the same time, the structure and content of our SSGT may not be the best match for all participants.

Each SSGT group is led by one of our mental health professionals. Our groups typically include 3-6 participants; the small group size ensures that participants’ individual needs and social growth can be attended to within the framework of the group. Groups meet once a week or bi-weekly. We also encourage and facilitate participants’ contacts with each other as well as social activities outside of group sessions, such as attending birthday parties, movies, outings, etc.

The ultimate goal of our SSGT program is to facilitate social growth and increase social competence. Each participant has an individual plan that includes short-term and long-term goals of social growth. Due to the nature of developmental delays, progress and changes may often be slow and subtle. Skills training requires a lot of repetition, reinforcement and practice at generalization across time, people and settings. We monitor individual and group goals continuously; we collect reports from teachers and significant others, and conduct assessments to track changes. Although our SSGT program was developed for the benefit of participants with mostly ASD diagnoses, we discovered, over time, that it can also be successfully applied to the treatment of other problems, including ADHD, Mood Disorder, Anxiety, OCD, etc.

## **PARENT INVOLVEMENT**

Parents of all participants receive regular feedback and are involved in our program in at least one of four ways. First, all parents receive regular email updates that include the focus of and activities during group, skills addressed, and recommended home practice. Second, parents often develop informal support groups that meet while the children are in session. Third, parents may participate in regular or intermittent parent training, parallel with their participating child’s SSGT treatment. These training sessions address a wide range

of parental concerns in the home as well as interactions with schools and other agencies. Parenting work ranges from acceptance of a young child's developmental challenges to ways to exert persistent parental "push" to help teens moving into adulthood. Fourth, those parents who do not participate in ongoing parent training receive intermittent updates on their child's or teen's social progress, the results of our regular assessment of social skills development, our review of strengths and weaknesses, and recommendations for home-based practice and interventions. This update also provides opportunities for us to obtain parental feedback.

### ***CURRICULUM HIGHLIGHTS***

The list below provides a few examples of the goals and issues our groups often work on:

*THINKING ON YOUR FEET AND BEING FLEXIBLE*

*PROVIDING CONSTRUCTIVE FEEDBACK*

*ABILITY TO READ NONVERBAL LANGUAGE*

*COPING SKILLS: RELAXATION*

*USE OF EYE CONTACT/ATTENTION*

*SELF-ADVOCACY*

*CONVERSATIONS: INITIATING, JOINING IN, MAINTAINING, ENDING*

*EMOTIONAL SELF-REGULATION: MANAGING OWN FEELINGS*

*SHOWING EMPATHY*

*LISTENING AND OBSERVING*

*DEALING WITH TEASING AND BULLYING*

*BEING A GOOD SPORT*

*BEING FRIENDLY AND BEING A FRIEND*

*DATING AND RELATIONSHIPS*

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