

IRL Social Skills:

A Radically Different Approach to Social Skills Coaching

Mara McLoughlin, MS, CCGSLP Owner IRL Social Skills



- What the research shows about social skills in autistic teens and adults and why explicit instruction and direct practice is necessary to address them
- The role parents/providers play in learning social skills
- How IRL Social Skills delivers the PEERS curriculum
- In-person vs. telehealth outcomes during the COVID-19 pandemic
- Long-term outcomes of participation using PEERS

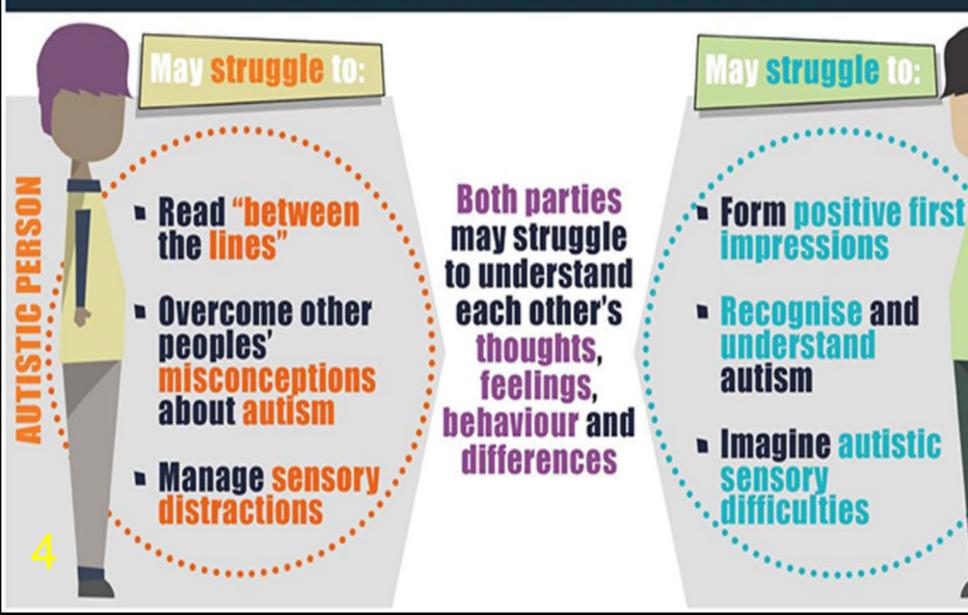
Spoiler Alert!





Double Empathy Problem

THE DOUBLE EMPATHY PROBLEM





DUTY OF CARE

Given the strong evidence base of PEERS, in combination with recent findings to support using PEERS via teletherapy, IRL Social Skills utilizes a 100% virtual format to serve families of autistic and other neurodivergent teens and adults who struggle socially and want to learn concrete rules and steps to making and keeping friends, handling disagreements and rejection, and dating etiquette. We also teach brain education and interoception skills, as called for by the actually autistic community.



Autistic Social Communication

- Use repetitive themes
- One-sided conversation
- Difficulty providing relevant information
- Make unexpected leaps in topics
- Pedantic style of speaking
- Different speech prosody
- Difficulty interpreting verbal and nonverbal social cues



Consequences

- Greater social isolation
- Fewer close meaningful friendships
- Poor friendship quality
- Fewer romantic relationships
- More dependence on caregivers
- Less likely to live independently
- Higher under- and unemployment
- Less post-secondary education
- 9x the suicide rate
- Average life span 38 54 years

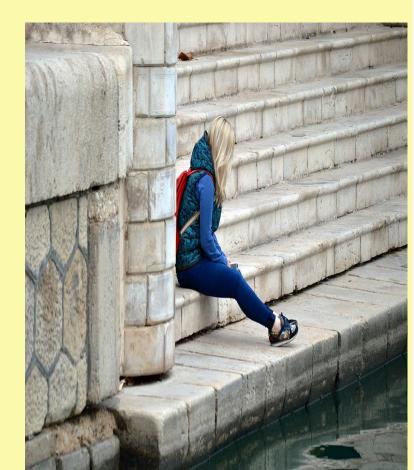




Peer Rejected/ Socially Isolated

Peer rejected—they try, but are pushed away; they disrupt, try to tell jokes, they have bad reputations; often co-occurs with ADHD, impulse control problems, dysregulation

Socially isolated —wallflowers, shy, withdrawn; often co-occurs with anxiety and depression





Employment and Postsecondary Education

- More than 50% who had left high school (2016 2018) had no participation in employment or education
- Compared to peers with other disabilities, autistic young adults had the lowest rate of employment.
 Only 58% ever worked during their early 20s
- Only 35% had attended college
- Only 55% had held paid employment during the first
- 9 6 years after high school

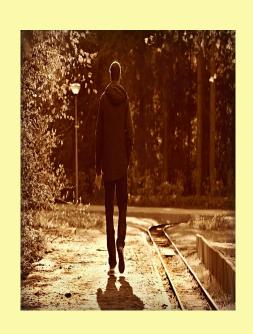


Autism Services Cliff' and Lack of Research

- Access to services greatly diminishes

- Gap in service delivery and access to evidence based interventions

- Among the limited evidence-based interventions for teens & adults, most have focused on young adults (18-24) 10





Highly Effective, Proven Social Skills Coaching for Autistic Teens and Adults

- Most interventions focused on young children
- Social demands change and INCREASE over the lifespan
- Interventions are failing to meet the changing and increasing social demands across development

NEED: ACCESS TO SOCIAL SKILLS SUPPORT THAT ACTUALLY WORKS



Friendships as a Buffer and Protection

Having 2-3 close friends:

- Predicts later adjustment in life
- Buffers the impact of stressful life events
- Protect against victimization
- Improves:
 - Self-esteem
 - independence
- Decreases:
 - Depression
 - Anxiety





Social Skills Coaching: the PEERS® Difference

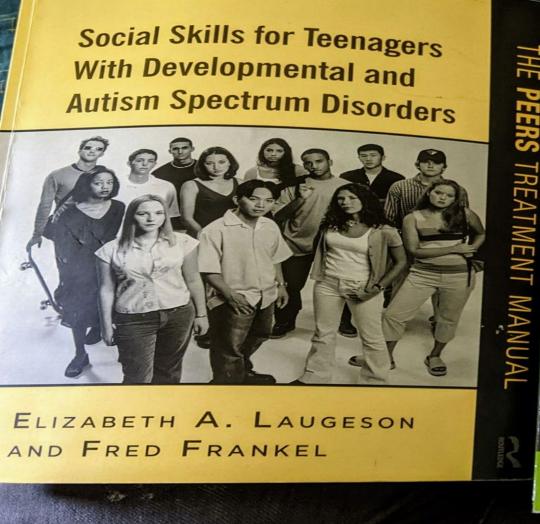
- "Social skills training" common with autistic children
- Very few programs for autistic teens and adults
- Most programs don't use proven curricula
- Often fail to account for the autistic thinking style
- Amount is too low
- Do not teach social skills that socially successful people use
- No homework assignments
- Skills don't carryover to other social arenas
- Do not include parents or teachers in treatment
- Do not determine durability of treatment over time

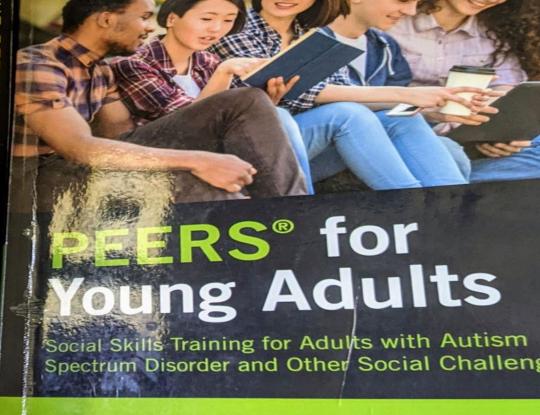


Why Choose IRL Social Skills?

Program for the Education and Enrichment of Relational Skills (PEERS)

- Developed at UCLA in 2004
- Translated into 12 languages
- Used in 125 different countries
- IRL Social Skills modified curriculum for ableism



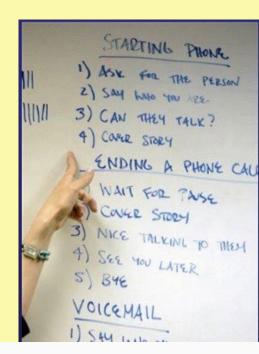




Development of PEERS® Rules and Steps of Social Behavior

- Ecologically valid social skills (what socially successful people do in real life!)
- Common social errors committed by autistic teens and adults
 (Don'ts)
- Create rules around ecologically valid skills and common social errors

Break steps down into concrete parts





Romantic Relationships

- Fewer romantic relationships
- Less likely to marry
- Greater incidence of stalking behavior
- Less sexual knowledge and awareness
- Greater risk for sexual exploitation and victimization
- Higher risk for financial exploitation



PEERSD for Adults

- Friendship and romantic relationship skills
 - Finding/choosing good friends and romantic partners
 - Conversational skills
 - Starting/entering/exiting conversations
 - Effective use of humor
 - Get-togethers
 - Dating etiquette
- Managing conflict/rejection
 - Dating etiquette
 - Handling arguments
 - Handling direct bullying
 - Handling indirect bullying
 - (cyberbullying, rumors and gossip)

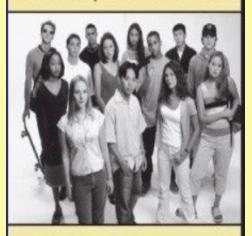




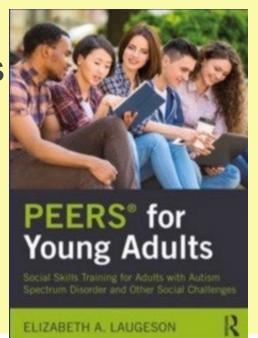
PEERS® for Teens/Adults

- Parent/Caregiver-Assisted
- Sessions taught at the same time
- Autistic person has to be socially motivated
- Addresses core social challenges
- Focuses on friendship/relationship skills
- Teaches ecologically valid social skills
- 16-week curriculum
 - 120 minute weekly sessions
 - Library of video role play demonstrations
- Evidence-based
 - Autistic teens in middle and high school
 - Autistic adults
 - 18 Anyone who is struggling socially

Social Skills for Teenagers with Developmental and Autism Spectrum Disorders



ELIZABETH A. LAUGESON AND FRED FRANKEL





The role of parents/ social coaches

- Concurrent social coaching groups (two groups, separate Zoom rooms)
- Parent/social coach helps the lessons extend beyond the length of the program
- Direct instruction with the Socratic method
- Role play videos (ineffective/effective)
- Behavioral rehearsals (practice skills
 - with coaching)
- Homework assignments



Learners session format

- 1. Supplementary education (nervous system and autistic neurotype education, mindfulness, interoception skills) 15 minutes
- 2. Homework review 15 minutes
- 3. Direct instruction 30 minutes
 - a. Concrete rules
 - b. Role playing and modeling
- 3. Socialization activity (20 minutes) behavioral rehearsal
- 4. Reunification (10 minutes) assign and negotiate homework
- 5. Taught entirely via Zoom





Parent/social coach session format

- 1. Supplementary education (nervous system and autistic neurotype education, mindfulness, interoception skills)
 - 15 minutes
- 1. Homework review 60 minutes
 - a. Troubleshoot homework problems
 - b. Individualize treatment
- 2. Review didactic lesson 15 minutes
 - a. Distribution of social coaching handout
- 3. Homework assignment 5 minutes
 - Troubleshoot potential homework issues
- 4. Reunification (10 minutes)
 - Assign and negotiate homework





IRL Social Skills: What Makes Us Stand Out

 Interdisciplinary team of middle school & high school special educators and clinicians (speech-language pathologists, occupational therapists, mental health professionals) who either identify as autistic/adhd or have autistic/adhd children

 Trauma-informed supplementary education to address self-regulation and alexithymia (the struggle to identify how feelings feel in the body)



- Seven speechlanguage pathologists —all special educators (3 bilingual English-Spanish, one bilingual English-Russian)
- Two occupational therapists
- Two mental health professionals
- One SLPA in training (trilingual English-Spanish-Russian)
- One direct support worker















Tommy, SLP Luke, OT

Amy, SLP

Sebastian, DSW

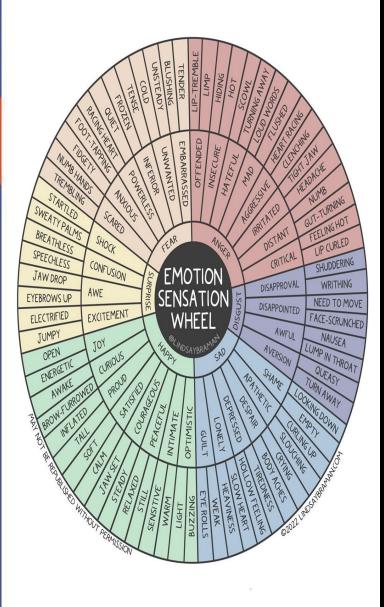
Kristen, LPC Corinna, DSW Kera, SLP

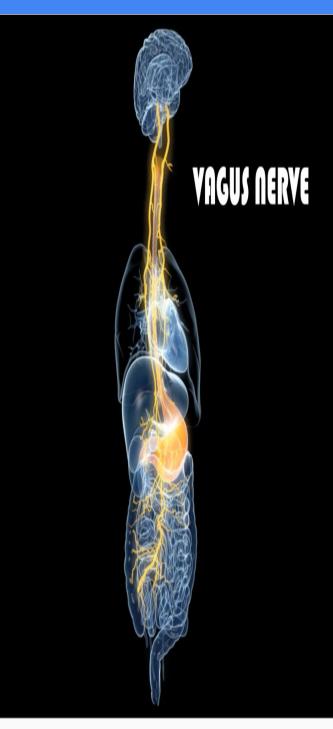


Sample Supplementary Materials

BRAIN, MIND, AND BODY
IN THE HEALING OF TRAUMA







BESSEL VAN DER KOLK, MD



IRL Social Skills Testimonials

14/14 Five-star Google reviews (and counting)!

O

Trevor Cable

★★★★ 12 weeks ago

Going into the class my son and I didn't know what to expect but in the end we couldn't be happier with the results. This is going to sound silly but my son, who can't pay attention for more than a couple of minutes to anything, not once complained about spending close to two hours a week in this class. From day one he was ready each week to jump into the class. I realized that he needed instruction on social skills from someone other than my wife or myself. Before the class if we tried giving him advice on friendship or god forbid dating he'd quickly walk away. In the class he participated and took the information seriously. We actually saw him applying the topics learned in real life. We couldn't believe it. I highly recommend this class to young adults and their parents.

We follow the recipe (with minor adjustments)

—and we get great results!

UCLA PEERS® Telehealth Outcomes: (In-Person vs. Telehealth Delivery)

(Estabillo, Moody, Poulhazan, Adery, Denluck & Laugeson, 2021

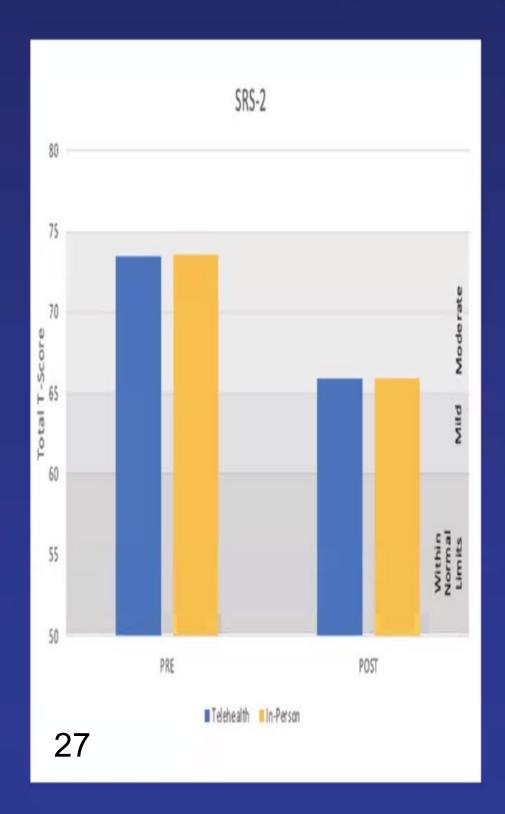
- Teens 12 17 years old
- Compared data from PEERS inperson groups to telehealth groups during 2020-2021

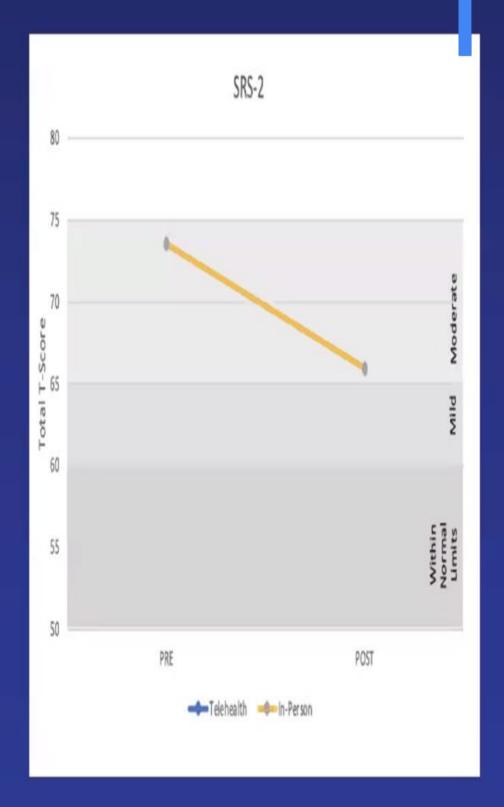
Measures:

- Social Responsiveness Scale, 2nd Edition (SR22)
- Social Skills Improvement System (SSIS)
- Quality of Socialization Questionnaire (QSQ)
- Test of Adolescent Social Skills Knowledge (TASSK)

(Estabillo, Moody, Poulhazan, Adery, Denluck, & Laugeson, 2021)

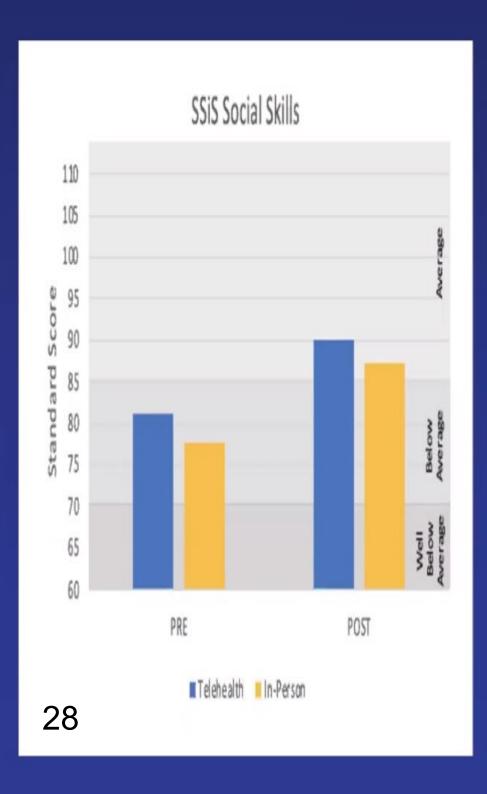
Social Responsiveness

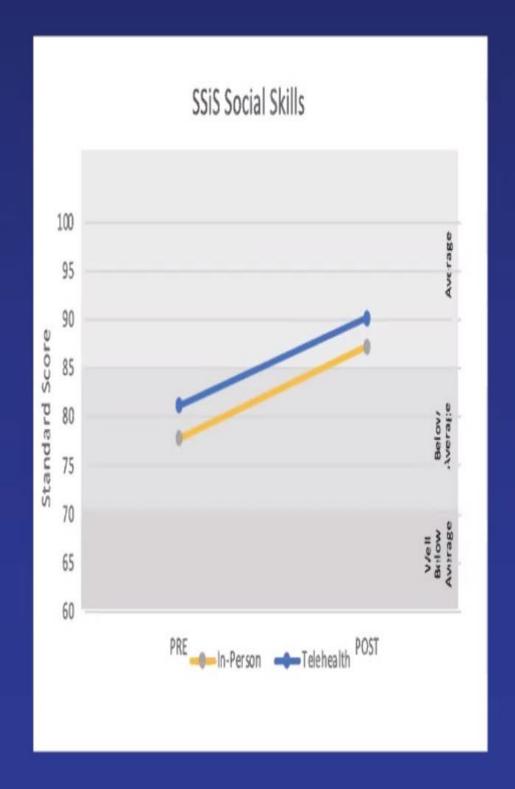




(Estabillo, Moody, Poulhazan, Adery, Denluck, & Laugeson, 2021)

Overall Social Skills

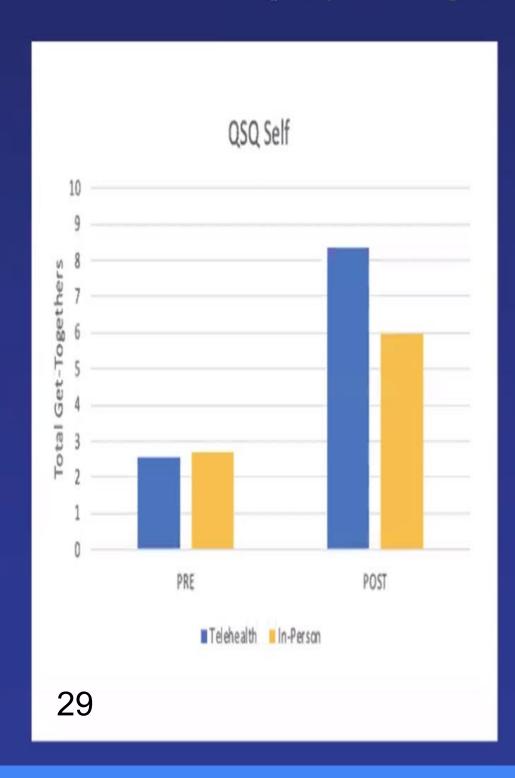


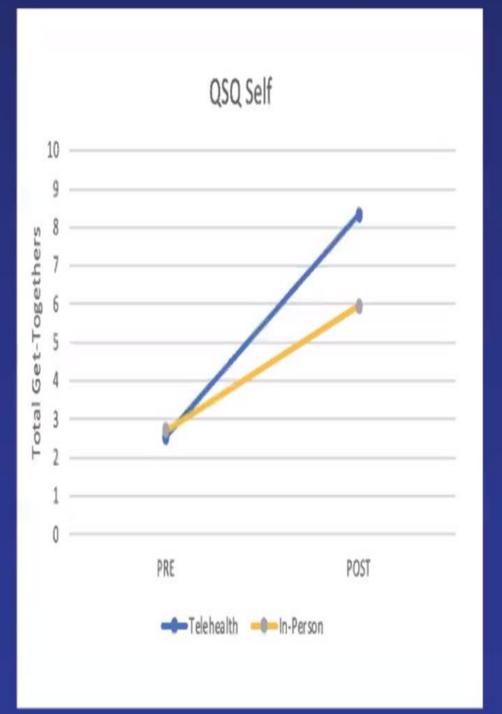


(Estabillo, Moody, Poulhazan, Adery, Denluck, & Laugeson, 2021)

Social Engagement – Self-Report

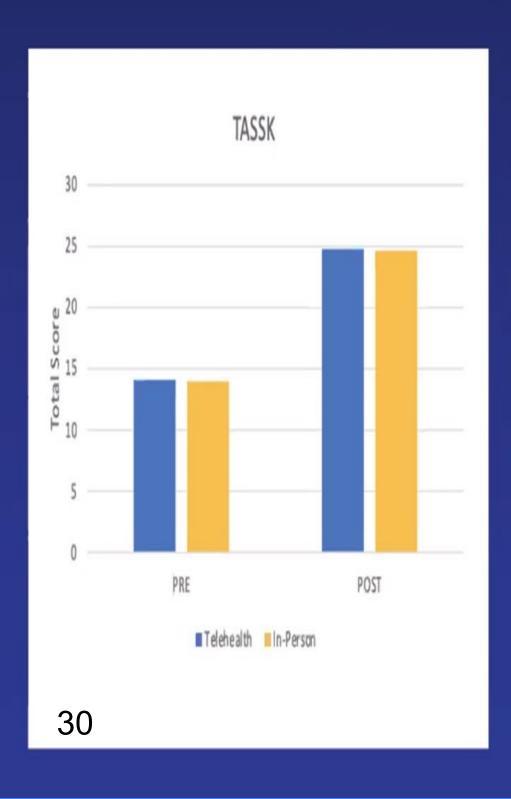
(Frequency of Get-Togethers in the Previous Month)

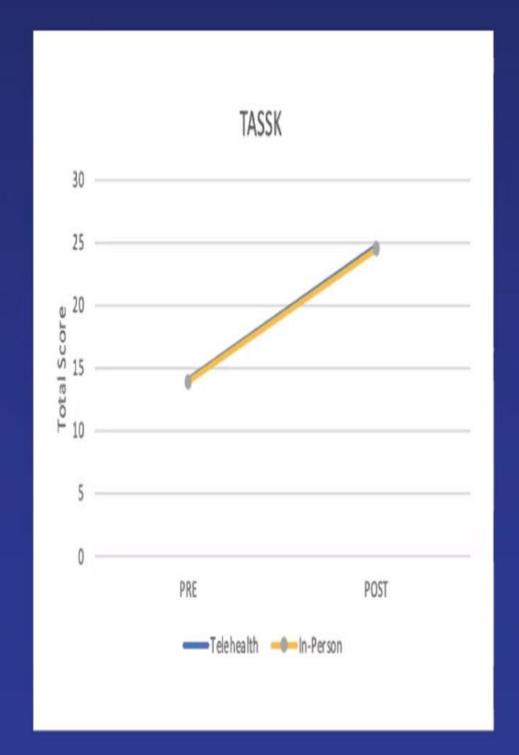




(Estabillo, Moody, Poulhazan, Adery, Denluck, & Laugeson, 2021)

Social Skills Knowledge





PEERS® Evidence-Base Outside of the United States

RESEARCH ARTICLE

A Randomized Controlled Trial of the Korean Version of the PEERS® Parent-Assisted Social Skills Training Program for Teens With ASD

Hee-Jeong Yoo, Geonho Bahn, In-Hee Cho, Eun-Kyung Kim, Joo-Hyun Kim, Jung-Won Min, Won-Hye Lee, Jun-Seong Seo, Sang-Shin Jun, Guiyoung Bong, Soochurl Cho, Min-Sup Shin, Bung-Nyun Kim, Jae-Won Kim, Subin Park, and Elizabeth A. Laugeson

Journal of Education & Social Policy

Vol. 3, No. 4; October 2016

Examining the Efficacy of an Adapted Version of the UCLA PEERS® Program with Canadian Adolescents

Loredana Marchica M.A.

Miranda D'Amico Ph.D.

Centre for the Arts in Human Development Concordia University 7141 Sherbrooke West Montréal, Québec Canada H4B1R6

RESEARCH ARTICLE

A Randomized Controlled Trial evaluating the Hebrew Adaptation of the PEERS® Intervention: Behavioral and Questionnaire-Based Outcomes

Shai Joseph Rabin, Sandra Israel-Yaacov, Elizabeth A. Laugeson, Irit Mor-Snir, and Ofer Golan ©

Journal of Autism and Developmental Disorders https://doi.org/10.1007/s10803-018-3728-1

ORIGINAL PAPER



Learning How to Make Friends for Chinese Adolescents with Autism Spectrum Disorder: A Randomized Controlled Trial of the Hong Kong Chinese Version of the PEERS® Intervention

Kathy Kar-Man Shum¹ · Wai Kwan Cho² · Lourdes Mei Oi Lam² · Elizabeth A. Laugeson³ · Wai Shan Wong² · Louisa S. K. Law²

EMPIRISCH ONDERZOEK

Nederlandse hertaling van de PEERS-training

GABRINE JAGERSMA, SAKINAH IDRIS, SOPHIE JACOBS, BJORN JAIME VAN PELT.

Journal of Aution and Developmental Disorden. https://doi.org/16.1007/n10803-018-3859-4

ORIGINAL PAPER



Age as a Moderator of Social Skills Intervention Response Among Korean Adolescents with Autism Spectrum Disorder

Jung Kyung Hong¹ - Miae Ch² - Gulyoung Bong¹ - Ju-Hyun Kim¹ - Georiho Bahn¹ - In-Hee Cho⁴ - Hee Jeong Yoo^{1,5}

6: Springer Science - Businers Media, LUC, part of Springer Nature 2018

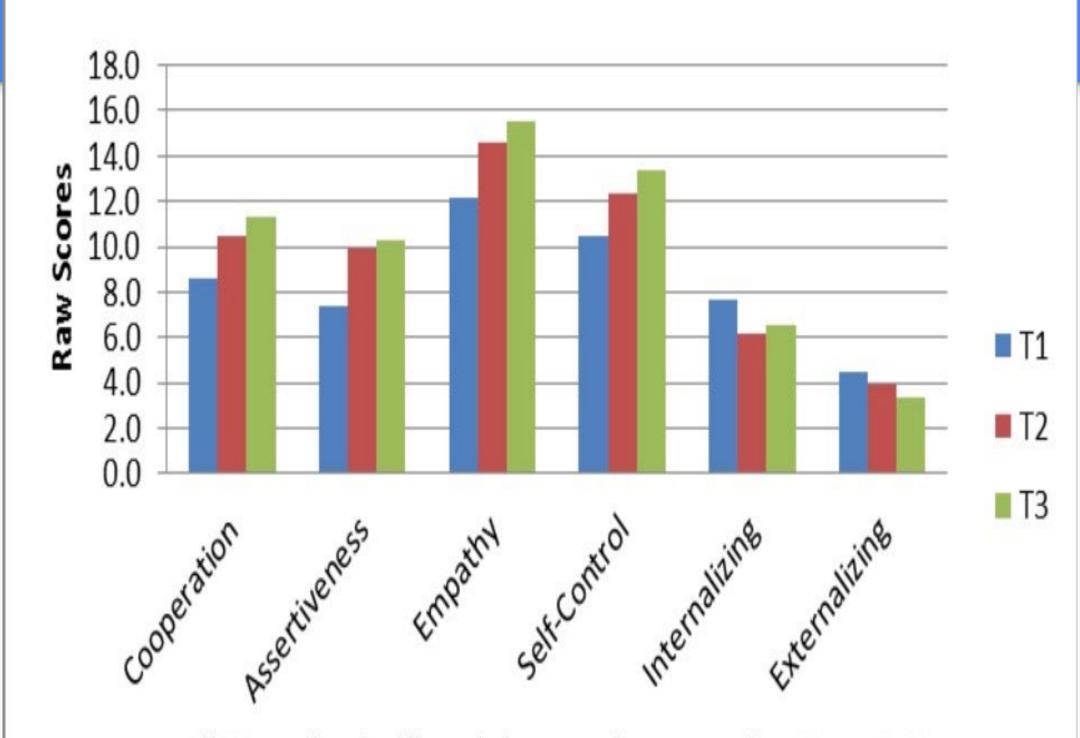
PEERS® Research Snapshot: LongTerm Follow-up Study

(Mandelberg, Laugeson, Cunningham, Ellingsen, Bates, & Frankel 2013

- Data collected 1-5 years post-treatment
- Pretest
- Post-test
- 1-5 year follow-up
- 53 of 82 potential subjects (64% response rate)
- No significant differences between participants and non-participants at baseline
- Average age at follow-up: 17.5 years old, 11.4 grade level
- Average time to follow-up: 29 months

PEERS® Research Snapshot: LongTerm Follow-up Study

SSRS Subscales



All T3 results significantly improved compared to T1 - p<0.01

Changes in Depressive Symptoms Among Adolescents with ASD Completing the PEERS® Social Skills Intervention

Authors

Authors and affiliations

Hillary K. Schiltz , Alana J. McVey, Bridget K. Dolan, Kirsten S. Willar, Sheryl Pleiss, Jeffrey S. Karst, Audrey M. Carson, Christina Caiozzo, Elisabeth M. Vogt, Brianna D. Yund, Amy Vaughan Van Hecke

Original Paper

First Online: 21 November 2017



Abstract

Depression is a common concern among people with autism spectrum disorder (ASD) and is often associated with social skills and relationship challenges. The present data, from a randomized controlled trial, examined the effect of PEERS® on self-reported depressive symptoms via the Children's Depression Inventory (CDI) among 49 adolescents with ASD. Findings revealed that many CDI subscale scores declined (p's < 0.05) and were related to direct social contact on the Quality of Socialization Questionnaire at posttest (p's < 0.05). Exploratory analyses uncovered that suicidality was less evident following PEERS®. Findings support the notion that social functioning and depression may be intimately intertwined in ASD; therefore, bolstering social skills in ASD may positively influence other domains of functioning, including mental health.

Improving Social Anxiety and Social Responsiveness in Autism Spectrum Disorder through PEERS®

Reina S. Factor (a), Christine T. Moody, Katherine Y. Sung & Elizabeth A. Laugeson

Pages 142-159 | Published online: 10 Jan 2022

66 Download citation

https://doi.org/10.1080/23794925.2021.2013138



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ABSTRACT

Autistic individuals often experience anxiety at higher rates than typically developing individuals, which could worsen social impairment. While anxiety is highly linked to social skills, social anxiety symptoms have not often been investigated within the context of social skills interventions. The present study compared changes in social anxiety and social responsiveness in 154 adolescents and young adults on the autism spectrum participating in the Program for the Education and Enrichment of Relational Skills (PEERS®) social skills intervention. Results indicate that social anxiety symptoms significantly improved following

Relate

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Mental F Youth w Disorder Develop

Introduc

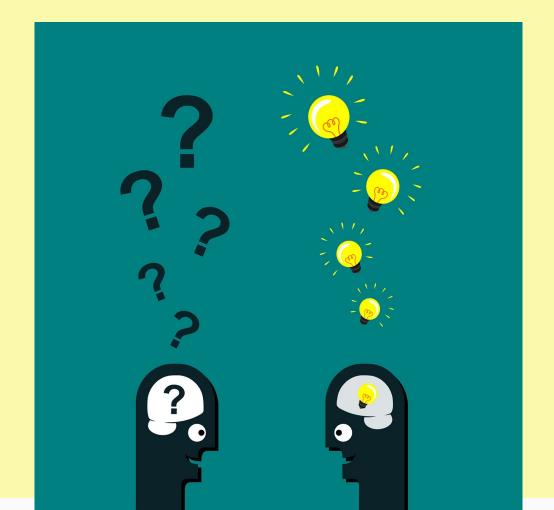
Meghan Evidence-Adolescer

Published



Thank you for coming to this talk!

Questions?





IRL Social Skills team of speech therapists, occupational therapists, and mental health professionals teach UCLA's Program for the Education and Enrichment of Relational Skills, or PEERS®. This social skills program is proven to help socially struggling, motivated adolescents and young adults and their social coach (parent/caregiver) how to make and keep friends.

The program specifically addresses the following skills:

- Conversation
- Entering and exiting conversations
- · Effective use of humor
- Arranging get-togethers
- Handling direct and indirect bullying
- Dating
- Nervous system education and interoception skills actively supported by the autism community

We're different than other social skills providers in that we provide this highly effective program using a social approach — not a behavioral approach.

\$ 2,400 for 16 weeks of expert social skills coaching by licensed, neurodivergent humans mara@irlsocialskills.com



YOUNG ADULT CLASSES

(age 16-22) meet Thursdays July 28 - November 10 4:30 - 6:15 pm Pacific Time

ADULT CLASSES

(age 23+) meet Tuesdays June 21 - October 4 4:30 - 6:15 pm Pacific Time

TEEN CLASSES

(age 11 - 16) meet Mondays July 11 - November 7 (no class 9/05 or 10/31) 4:30 - 6:15 pm Pacific Time What exactly is a social skill?

Turns out, this can actually be problematic to define. But we know when we or our loved ones have lagging social skills — because we see them, or ourselves, struggle to initiate, cultivate, and maintain relationships with others. And this causes so much pain.

What are the social skills problems, then? And what do we do to solve them?

First, let's break down the word "skill" before further defining social skills. Merriam-Webster defines "skill" as "the ability to use one's knowledge effectively and readily in execution or performance."

How do we learn any skills: cooking, playing guitar, archery, gardening, drawing, acting, writing, dancing? While some people learn these skills by reading books, watching videos, or using apps to increase their knowledge of the special interest, and then make the time to practice with the goal of mastery in mind, there's another critical component necessary for success: the talent of our teachers.

Malcolm Gladwell's 2011 blockbuster book, *Outliers*, referenced research by Dr. Anders Ericsson and the "10,000-Hour Rule" — that people who wish to master a skill need to put in a significant time commitment. But Gladwell left out a vital piece of that research. A recent article and podcast with <u>Dr. Ericsson says good teaching matters</u>, not just practice.

In addition to having the motivation to make a concerted effort, we usually learn when someone further along on their journey of mastery teaches us. An undeniably important factor in skill acquisition is how good the teacher is!

For those who struggle socially, herein lies the conundrum. When a human is peer rejected and socially isolated — and they get ineffective, decontextualized social advice from parents and professionals — how do they get the practice necessary to develop and enhance their social skills?

The key features of the optimal conditions for improving skills of any kind are:

- 1. The task must be well-defined with a clear goal and be fully understood by the participant.
- 2. The participants need to be able to perform the task by themselves.
- 3. The participants need to gain immediate informative and actionable feedback on each performance of the practice task that allows them to make appropriate adjustments to improve.
- 4. The participant needs to be able to "repeatedly perform the same or similar tasks"

5. The practice task must be designed and performed in accordance with individualized instruction and guidance of a teacher.

"To assure effective learning, subjects ideally should be given explicit instructions and be supervised by a teacher to allow individualized diagnosis of errors, informative feedback, and remedial part training.

Deliberate practice is when you have a teacher who actually knows more about effective training guiding the student to develop. What's even better is that our intensive, 16-week program also teaches parents and other family members these same skills, and how to teach these skills to their learner using our methods of instruction. We even record every session weekly and make those videos available for review in the passcode-protected member area of our website, so that all class members can review the videos and reinforce their learning and enhance their coaching skills by watching us.

A highly unique component of our program is the inclusion of the parent or other responsible adult in the role of social coach (usually the parents, because they make the best social coaches). Our model involves simultaneously occurring groups for social coaches that meet in tandem with young adult or teen groups. Essentially, while our learners are being taught social skills in one group with two of our esteemed coaches, the caregivers attend a concurrent group to learn how to assist their learner in the development and maintenance of relationships.

Why do we do this? Because training social coaches helps the skills generalize, or carry over, to other environments. The social coaches can provide social coaching in natural social settings and situations. This way, the durability of the social skills lasts long after the class has ended. These caregivers are also integral to ensuring completion of the practice homework assignments, and can help troubleshoot any barriers to homework completion. Finally, the caregivers help the teens and adults to find an accepting source of friends — based on their special interests — in which they can practice initiating, cultivating, and maintaining relationships in real life.

Our social skills classes make it easier for anyone to function in any upcoming social situation — to communicate more effectively and with more ease across contexts — at work, at a get-together with people you don't know (e.g. a new source of friends based on your special interest), as well as in our most intimate relationships. Whether you or your loved one is autistic or otherwise neurodivergent, like most of the IRL Social Skills teachers, you will learn skills that improve your quality of life and relationships.

Social skills for autistic and other socially struggling humans in the way we teach this program has this desired outcome: to have real friends, with whom they share common interests and with whom they can relax and be held in positive regard.

Our world is inherently social. Any mammal who nurtures their young is social! Humans are mammals, and regardless of neurotype, we need each other to survive. Social skills classes for young adults include conversation skills, dating skills, and conflict resolution skills. We are here at this moment in time because what we bring to the world is necessary to our survival and the survival of the planet. And for that — we're going to need to use skillful means, with clear communication and collaboration.