RDI®
Relationship Development
Intervention:
Re-examining the core deficits of autism and building relational competence in children on the autism spectrum

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What We Will Cover

- Research regarding quality of life for individuals with ASD
- How Development Differs in Autism vs. Typical Infants
- Core Deficits of Autism
- Basic Principles of RDI
- Videos of RDI in Action
- Resources
# Recent studies of Quality of Life for ASD adults

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<thead>
<tr>
<th>Study</th>
<th>N</th>
<th>Job</th>
<th>Independence</th>
<th>Peers</th>
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<tr>
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# Quality of life for adults with HFA/AS

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<td>Engstrom</td>
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IQ and language do not predict success for people with ASD’s

- IQ scores below 70 predicted poor outcome. However, adults with IQ’s over 100 were less successful than those with IQ’s between 70 and 100 (Howlin, 2004).

- Adults with early language delays did as well as those with no language impairments (Howlin, 2003).
What factors keep people with ASD from Attaining a Quality of Life?
Research findings re: universal deficits of ASD

- Attention Shifting
- Appraisal
- Cognitive set shifting
- Concept Formation
- Planning efficiency
- Deeper comprehension of meaning when reading
- Self-Awareness
- Self-Monitoring
- Self-Regulation
- Executive Functions
- Personal Episodic Memory
- Intersubjectivity (shared understanding/perspective taking)
- Declarative communication
- Initiating Joint Attention
- Communication repair
- Use and understanding of prosody and gesture
- Providing listeners with context
- Understanding the speaker’s “direction” in conversation
- Understanding other’s desires and intentions
- Emotional expression in appropriate context
- Responding to others distress
- Social Referencing
- Recognizing maintenance actions and rewards of friendship
Emotion Sharing

Facial gazing provides a feeling of safety

Provides important information to the parent

Leads to contagious, shared pleasure

Basis of self regulation
Joyful emotion sharing is addictive for both child and parent.
Shared Laughter Becomes a Motivating Factor for Facial Gazing

By 4 months, babies become “excitement addicts,” initiating interaction to obtain increasingly greater doses of novelty.
10 months old

Curious & interested in other’s reactions.
Leaving the Pathway

- The ASD infant’s innate drive for exploration, discovery and mental growth is thwarted.

- Avoidance of environments and persons perceived as increasing uncertainty, without appraising the situation.

- Cognitive capacity is channeled exclusively into acquisition based learning & performance.
**NT Experience**

Initial Regulatory State  
↓  
Experience of Uncertainty  
↓  
Expectancy of Competence  
↓  
Active Mental Engagement  
↓  
Assimilation/Accommodation  
↓  
New Regulatory State  
↓  
Growth of Trust & Self Efficacy

**ASD Experience**

Initial Regulatory State  
↓  
Experience of Uncertainty  
↓  
Expectancy of Insufficiency  
↓  
Active Avoidance  
↓  
Return to “Known” Information  
↓  
Desire for “Static” State  
↓  
Loss of Trust & Self Efficacy
Research Findings Regarding Core Deficits of ASD

**Appraisal**

Evaluating the significance of our environment on a moment-to-moment basis, to:

- Determine value and meaning
- Evaluate relevant contextual factors
- Shift and re-allocate attentional resources
- Distinguish between important and peripheral changes, based on current needs and context
- Determine degree of safety in uncertain situations
Appraisal

- Without appraisal there is no way to make sense of our environment, except in a highly rigid, unchanging manner.

- Flexible appraisal allows moment-to-moment “best-fit” evaluation

- We are innately opportunistic creatures. We “troll” for opportunities to meet goals whenever we experience the safety to do so

- A positive initial appraisal is a “go” signal for opportunity trolling
Research Findings Regarding Universal Deficits of ASD

Episodic (Autobiographic) Memory

A representation of an event, strongly anchored by an emotional appraisal.

- Used to anticipate our future
- Organized around subjective meaning
- We create a meaningful representation
- Used for reflecting, reminiscing, preparing, motivating, persevering, analyzing, planning
Functions of Episodic Memory

- Recalling positive outcomes that follow hard work
- Recalling prior recovery from difficulties & setbacks
- Reviewing past decisions & their impact
- Recounting shared positive experiences
- Recalling similar experiences for empathizing
- Making decisions based on intuition and “gut” feelings
- Reviewing to avoid making future mistakes
- Developing future goals
- Realistic appraisal of time and difficulties
- Realistic appraisal of strengths and limitations
- Integrating episodes into a more coherent sense of personal identity
- Determining whether you can trust someone
Research Findings Regarding Universal Deficits of ASD

Executive Functions

Ability to:

- Reflect on past experiences
- Project future outcomes based on current choices
- Evaluate the wisdom of past choices, and the relative wisdom of possible current and future choices
- Organize self
Common Complaints

- He knows how to do this, I watched him do it yesterday!
- She learned it perfectly in her social skills class but doesn’t use it anywhere else!
- He knows all the presidents and the dates they were in office, but he can’t remember these simple instructions.
- He can tell me exactly what he should have done, so he must have made a deliberate choice to disobey!
- It’s just manipulation because she’s just fine until you ask her to do something she doesn’t want to do, then she throws a fit!
Research Findings Regarding Universal Deficits of ASD

Self Regulation

- Child must be in a state where s/he is capable of taking in new information, absorbing it and making sense of it
- A well regulated child feels good, is ready to connect and engage with you
- A dysregulated child needs to become focused on the task of self-regulation before new learning can occur
- Significant gains in ability to self regulate occur by 2 years of age in NT children
- Results from structural maturation of right frontolimbic areas of the brain
- Represents emergence of complex and efficient delay and inhibition operations
- Is influenced by dyadic, affective filled verbal and joint attention processes
Research Findings Regarding Universal Deficits of ASD

Self Awareness

Awareness of self and other, coherent view of how one is unique.

- Self evaluation and analysis
- Monitor own subjective state
- Use productive self regulation strategies, regulate attention, behavior & emotion
- Take responsibility
Research Findings Regarding Universal Deficits of ASD

Creative Thinking
Ability to:

- Generalize
- Improvise
- Hypothesize
- Speculate
- Pretend

- Symbolize
- Summarize
- Synthesize
- Create
- Generate
Research Findings Regarding Universal Deficits of ASD

**Intersubjectivity**

*Inter*=Happening between people

*Subjective*=Our unique appraisals, perceptions, thoughts, feelings, memories, strategies, and dreams

The **Intersubjective Relationship** is the primary gateway to complex cognitive, communicative, emotional, and social functioning.
Levels of Intersubjectivity

- **Primary Intersubjectivity- “Doing the Dance”**
  - First 9 months of life
  - Child learns to coordinate actions and emotions with you – to be an active participant in interactions
  - Child and parent engage in intense face-to-face interpersonal interactions.
  - Child registers when she is in tune with caregiver or out of tune = synchronization
  - Emerging ability to detect and respond to another persons emotional responses to things and events
  - The motivation to please is at the end of primary intersubjectivity.
Levels of Intersubjectivity

- Secondary Intersubjectivity—“Borrowing Perspectives”:
  - 9 months-15 months
  - Child uses the parent as a guide, learns from and “borrows” parents perspective on life.
  - Objects & events can be a focus between people and can be communicated about (joint attention)
  - The relationship is a testing ground for finding ways of connecting thoughts, ideas and feelings
  - Child interested in/responsive to what another person does with things and feels toward things
Levels of Intersubjectivity

• Third-Level Intersubjectivity—"Understanding intentions":
  • 15 months-24 months
  • Child begins to discover they have their own mind, “intrasubjectivity.”
    • Focus on internal processes: intentions, perceptions, thinking, and emotional reactions to things.
    • Recognize own ideas may be different from yours
    • Begin to consider your reactions and how you might interpret their actions.
  • Child can now
    • Carry perspectives in their head
    • Begin to share their intentions with you so you do not misinterpret their actions.
    • Realize people make decisions prior to acting
    • Use awareness to understand how their actions impacts others. This allows them to regulate their behavior.
    • This is where intentionality, identification and communication repairs are observed (appraisal)
Levels of Intersubjectivity

- **Fourth-Level Intersubjectivity—“Sharing minds”:**
  - 24-36 months
  - Child does not need a actual object to make a connection from your mind to my mind. You both can have a conversation about what is not there, what is in my mind and your mind, a sharing of what’s in our minds. This is when conversations, collaboration, and co-creation are observed.
Levels of Intersubjectivity

- Fifth-Level Intersubjectivity—“Reminiscing”:
  - You and child can discuss what’s in your minds in relation to the past, present and future (episodic memory).
  - Reminiscing, reflection and planning together are observed.
Research Findings Regarding Universal Deficits of ASD

Declarative Communication

- 70-90% of how we communicate; approx 2% of how a person with ASD communicates
- Right hemisphere-based
  - Emotional intent processed & made
  - Context
  - Spatial relations
  - In NT—assymetrically larger
The form of communication is determined by the intention of the speaker.
Research Findings Regarding Universal Deficits of ASD

Joint Attention

- Requires ability to:
  - read and process nonverbal cues
    - Eye contact
    - Facial expression
    - Tone of voice
- Results in an understanding of the mental state of another person
Research Findings Regarding Universal Deficits of ASD

Social Referencing

- The ability to socially monitor people in order to predict what they are going to do next
- Requires the ability to read affect, emotions, intentions, and understand the subtle reciprocities
- Entails understanding the private world of what people feel
Research Findings Regarding Universal Deficits of ASD

“Mindsight”

- The ability to create representations, in our own minds, of the elements of the subjective experiences of others
  - Intentions
  - Emotions
  - Focus of attention
  - Beliefs
  - Attitudes
  - Thoughts
  - Perceptions
  - Memories
Goals of RDI
The goal of remediation is providing an opportunity for Quality of Life

- Independent living
- Full, rewarding employment
- Close friendships
- Reciprocal family relationships
- Marriage
Being successful depends on being able to…

- Be genuinely interested in others
- Read and respond to social cues
- Shift attention to the most important environmental information at any given moment
- Recall past experiences and derive personal meaning from them
- Recall other people’s past experiences and infer what personal meaning they may have derived
- Project future outcomes based on current decisions
- Be motivated to continually learn all of the above
RDI® Goals

- Restoring the competence of adults in their natural role as guides
- Igniting the child’s primary motivation for challenge and discovery
- Developing children’s competence through internalization of complex mental processes
- Normalizing life
RDI® Goals

- Most children on the spectrum feel very unsuccessful in the face of change and challenge.

- Our goal is to create experiences and memories of success in the face of challenge, so that the child can develop a sense of personal and interpersonal competence.

- The parent is the guide. The child develops trust and seeks to learn from the parents’ perspective and modeling, in order to gain competence.
Principles of RDI
RDI is parent based

- Primary work is between the parent and the child.
- Adult is in charge, responsible for guiding and pacing. Child is the apprentice.
- Healthy family functioning is essential. Time is set aside each day for guided interaction.
Build Motivation

- Build motivation through interaction, not reward…competence and connection are the rewards!

- Teach functions before skills. Functions provide the purpose for developing the skill.

- Memory is more important than behavior in building motivation. Build motivation by creating strong, positive episodic memories through:
  - Celebrations (instead of praise)
  - Review
  - Photographs, memory books
  - Journaling
Tools
What is a successful activity?

- We want the child to think.
- The child needs to actively engage with his/her environment.
- This is not a stimulus-response engagement, this is an active “mental engagement.”
- Mental engagement means that the child is an active partner in solving the problem.
Specific components of a successful activity:

1. **Frame** – parents make choices about the activities, tasks and materials that support engagement and competence.

2. **Spotlight** – child’s attention is directed to a very specific moment (for experiencing and encoding of a memory), and to critical elements of the interaction or activity, in order to support appraisal, social referencing or some other objective.

3. **Appraisal** – the child must analyze the situation and determine what his/her role is.
Specific components of a successful activity:

4. **Productive Uncertainty** - the child is offered a cognitive challenge.

5. **Scaffolding** - how much help does s/he need?

6. **Competence** - the child recalls the experience as a success.

7. **Transfer of responsibility to the child** - the child gradually assumes a greater role in “carrying the load” for generalization to other settings. Parent masks assistance, rather than correcting errors.
References

Resources

Carrie Sheppard, MEd., LMHC, RDI® Program Certified Consultant
MindSource Center
Covington, WA (253) 859-3505 carrie@mindsourccenter.com

Going to the Heart of Autism: 2-day workshop in Seattle
October 5-6, 2007 register at www.rdiconnect.com

Connections Center, Houston, TX website: www.rdiconnect.com

Autism & Asperger’s: Solving the Relationship Puzzle, Steven Gutstein, PhD
Going to The Heart of Autism: RDI Training DVD, Steven Gutstein, PhD