Assessing the Physical Needs and Capabilities of Individuals with Autism Spectrum Disorders: A Multiple Perspectives Approach

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Overview

- Variants of Multisource Feedback
- New variant used for Needs Assessment
- Example of how new methods applied
- Results and Conclusions
360° Feedback

- Traditionally used for performance evaluation
- Focus on the individual from multiple perspectives
  - Self
  - Supervisor
  - Subordinate(s)
  - Peers
• Process inverted for needs assessment
• Focus on the group or agency from multiple perspectives
  • Self
  • Supervisor
  • Subordinate(s)
  • Peers
Challenges of Traditional Models

• Information may not be known from multiple sources
• Simple to complex
  • Need for more robust assessment tool
• Draw information out of environment in addition to individual’s perspectives
Background

• ASD Needs Assessments are often Problematic
  • Individuals with ASD (IWASDs)
    • Typically reluctant to communicate
    • Avoid social interaction
    • Exhibit comorbid language comprehension difficulties
Researchers often survey “others” as surrogates
  • Parents
  • Care providers
  • Therapists
  • Individuals who interact with IWASDs
• Current investigation sought information regarding:
  • Physical activity
  • Nutrition preferences, practices, and needs
• Problem of systematic variance
  • Relationship between target and respondent
  • For IWASD, relationships may result in more pronounced bias
    • Parents/Family: Advocate for IWASD
    • Activity Providers: Advocate for Physical Activity
    • Service Providers: Advocate for mental wellness
    • IWASD: Advocate for personal comfort/interests
Survey Design

• Demographic information
• Specific ASD diagnosis
• Physical activities (type, frequency, mode, and duration)
• Sources of encouragement related to physical activities
• Challenges to participation in physical activities
• Nature of physical activity related to daily living routines
• Related to physical activities, IWASDs identified preferences for:
  • Types
  • Duration
  • Potential limitations

• Service and care providers:
  • Barriers to physical activities
  • Potential strategies for real and perceived obstacles
• IWASDs expressed moderate interest in increasing physical activity
• Providers expressed growing concerns regarding inactivity/lack of activity by IWASDs
• Physical activity providers expressed need for more training in working with IWASDs
Sample Results – Physical Activity Habits

**Service Providers:**

“IWASD I serve Never or Rarely...”

- Play organized team sports (82.9%)
- Play organized individual sports (73.2%)
- Exercise (46.3%)
- Play physically active games or recreational activities with others (53.6%)

**Persons w/ ASD:**

“When I am physically active...”

<table>
<thead>
<tr>
<th>Activity</th>
<th>Usually</th>
<th>Prefer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alone</td>
<td>19%</td>
<td>16%</td>
</tr>
<tr>
<td>Either</td>
<td>25%</td>
<td>39%</td>
</tr>
<tr>
<td>Group</td>
<td>30%</td>
<td>39%</td>
</tr>
</tbody>
</table>

“I usually spend ___ hours each day...”
- TV: 0-12 (2.6)
- Video /Computer Games: 0-12 (2.3)

**Caregivers:**

“When my child is Physically Active, s/he...”

<table>
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<td>23%</td>
<td>32%</td>
</tr>
</tbody>
</table>

“I would prefer my child ___ (much) more often.”
- Play team sports (60%)
- Play sports alone (54%)
- Exercise (71%)
- Play games/activities with others (78%)
- Play games/activities alone (50%)

**Activity Providers:**

“IWASD I serve...”

- Always participate (68.2%)
- Never or Rarely need accommodation to participate (4.5%)
- Could potentially become very to extremely physically fit/professional athlete (41.9%)
Sample Results – Barriers to Physical Activity

**Service Providers:**
“Some of the barriers to physical activity among IWASD...”

- Physical Challenges
- Social/Communication Challenges
- Sensory Challenges
- Safety concerns
- Lack individual instruction
- Lack involvement of family/peers
- Lack of training
- Personal motivation
- Lack of adapted/appropriate activities

**Activity Providers:**
“Some of the barriers to offering better services to IWASD...”

- Insufficient personnel
- Lack of training for serving this population
- Lack of adapted equipment
- Class size/ lack of individual attention and instruction
- Required curriculum/ limited time

**Individuals w/ ASD (Group)**

**Persons w/ ASD:**
“I do not participate in physical activity more regularly because of...”

- Health/medical reasons or conditions
- Balance, Motor Skills
- Low tolerance to interaction with others/
- Lack of activities for me
- Other obligations
- Lack of interest

**Caregivers:**
“My child does not participate in physical activity more regularly because of...”

- Lack of motivation
- Physical challenges
- Social/Communication challenges
- Sensory challenges
- Safety concerns
- Access/Availability of activities
- Time/availability
- Cost

**Persons w/ ASD:**

**Caregivers:**
Conclusions

• Gathering accurate information from IWASDss essential for informing research and practice

• Multiple perspectives can be used in designing future physical activity programs for IWASDs

• Design promotes inclusive and accurate information gathering
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References


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