

# Social Programming for Adults with ASD

## Disclaimer

I am not a member of the neurodiverse community nor am I on the spectrum. Previously, I was an employee in a workplace which employed a number of individuals who had been diagnosed with ASD. Over time, I was introduced to issues facing individuals on the spectrum, including employment barriers and the 'services cliff' many individuals with ASD experience once they turn eighteen and/ or graduate from high school.

## Introduction

On April 25, 2018, 25-year-old Alek Minassian drove a van onto a busy Toronto sidewalk, killing 10 people and injuring 16. Minassian was diagnosed with type one autism (formerly known as Asperger's Syndrome) early enough in his life that, in high school, he was placed in a special education class for students with Autism Spectrum Disorder (ASD): it was not clear if he continued receiving assistance as an adult, or if he was receiving appropriate support at home (Perreux, 2018). According to Oswald et al., 500,000 American youth with ASD will be entering adulthood over the next decade (2017). Considering the absence of programming which exists for the estimated 50,000 adults with ASD in North America, it is unlikely that Minsassian received the outside support he needed to achieve a good quality of life.

Minassian is allegedly a member of incel: an online group of 'involuntarily celibate' men who blame women for their sexual failings. Minassian's autism, lack of support, and subsequent radicalization by the internet indicate the paucity of community support for adults with ASD in Canada. Additionally, Minassian's autism diagnosis has prompted Autism Ontario, the Geneva Centre for Autism, Kerry's Place, and the Redpath Centre to co-author a media release denouncing the link between violent crimes and individuals with ASD: this indicates a need for an increased understanding of ASD for Canada as a whole. This report will conclude with recommendations regarding how the City of London can better serve adults with ASD, and how a raised awareness of ASD can improve city services.

## What is ASD?

In order to properly discuss Autism Spectrum Disorder, it is necessary to establish a concrete definition of autism. Autism Ontario describes ASD as "a wide range of behavioural challenges stemming from difficulty in verbalizing thoughts, managing anxiety, dealing with change, participating in group activities, disengaging from discussions on a specific topic – all leading to problems in coping with everyday activities" (2007). The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) defines ASD as "persistent deficits in social communication/ interaction across contexts" (Hyman, 2013). Sami Richa et al. (2014) characterize autism as "communication deficits, social difficulties, and the presence of repetitive behaviors, such as repeating words or actions and obsessively following routines or schedules". These behaviours increase the instances of harassment by the peers of individuals with ASD. The difficulties experienced by individuals with autism can inhibit social functioning, resulting in a gamut of negative consequences.

'Autism Spectrum Disorder' or 'ASD' is the term endorsed by a number of advocates for the neurodiverse community, including Autism Canada and the American Psychiatric Association. Previous terms, such as 'high-functioning autism', are considered dated by the medical community, and demeaning by individuals on the spectrum. Given the highly individual nature of ASD, this term is thought to be more representative of individuals on the spectrum.

## Discussion

According to Autism Ontario, more than 50,000 adults in Ontario have autism (2002). The earlier an individual receives an ASD diagnosis, the more easily they are able to connect with available community supports, although the availability and accessibility of these supports varies widely depending on a family's circumstance and geographic location. While the tools to diagnose ASD are becoming more sophisticated, a significant portion of Ontarians are not diagnosed until adulthood. There is also a drop in supports for people with ASD once they reach adulthood: at present, London offers no social or recreational services specifically for adults on the spectrum, and the majority of programming for adults with disabilities are designed for individuals with an intellectual disability (Autism Ontario, 2002).

In 2013, the fifth edition of the Diagnostic and Statistic Manual of Mental Disorders (DSM-5) was published, with an updated definition of autism. In the DSM-5, the diagnosis of 'autism' was replaced by 'autism spectrum disorder', and subdiagnoses of autism were eliminated (Hyman, 2013). This move toward an encompassing diagnosis of autism reflects the research and clinical practice which has transpired since the publication of the DSM-4. It is important to recognize autism as a spectrum, as more inclusive language is respectful to neurodiversity (Bariela, Steward and Mandy, 2016).

When the DSM-5 updated the diagnostic criteria for ASD, the criteria was rearranged into two categories: social communication and interaction, and restricted and repetitive behaviours (Hyman). Sarah Bargiela et al. characterize ASD as "difficulties with social reciprocity, social communication, flexibility and sensory processing" (2016). While the severity of symptoms in an individual with ASD varies, a general understanding of behaviours related to ASD remains consistent and recognizable throughout the research. A consistent definition of ASD and its attributes means it is easier to make spaces and outreach services more welcoming to the neurodiverse community.

Despite the number of adults diagnosed with ASD and the modified definition in the DSM-5, outreach and understanding of the neurodiverse community remains low among the neurotypical community: a lack of training and understanding has had extremely detrimental effects on individuals with ASD. In a literature review titled "Adverse childhood experiences in children with autism spectrum disorder" (2018), researchers Daniel Hoover and Joan Kaufman noted children with ASD "are bullied at a rate three times that of typically developing children" (Hoover and Kaufman qtg. Maiano et al.). In "Suicide in Autism Spectrum Disorders" (2014), Sami Richa et al. noted the difficulty of determining if ASD or other comorbid factors were the cause of suicide, but concluded that over 50% of people with ASD also suffer from depression (Richa et al., 2014). According to Lieke Wijnhoven et al., anxiety is one of the most prevalent comorbidities in children with ASD, with at least 40% of children with ASD meeting the criteria for at least one anxiety disorder (2018). It can be argued that neurodiverse individuals are frequently the victims of harassment and abuse. While improved healthcare services for ASD is integral for improving the quality of life for individuals on the spectrum, improved social outreach is equally important.

The media narrative of Alek Minassian depicts the killer as a lonely, isolated man who struggled with social interactions. While an official diagnosis regarding Minassian is not available at this time, it should be noted that he falsely claimed he had a gun, and requested the arresting officer to shoot him after he exited the vehicle he had used to kill 10 pedestrians. A suspect in pursuit who demands to be shot when confronted by an officer is a form of suicide recognized by the police. Minassian is an alleged member of incel, an online community which the director of the Toronto Sexuality Centre describes as "a group of

people who usually lack sufficient social skills and they themselves are very, very frustrated” (CTV.ca news staff, 2018). While no excuse for his actions, it can be argued that Minassian was a severely depressed person with suicidal ideation.

It is common for online relationships to play an important role in the social lives of individuals with ASD. Sarah Bargiela, Robyn Steward and William Mandy (2016) found that social media provided women with autism a platform on which they can communicate more easily. According to Bargiela et al.:

[I]n normal face-to-face communication, one would be expected to ‘read’ body language, tone of voice and facial expression, so ‘If [sic] all we have is typing for each other, then it’s completely equal’. Women talked about being able to express themselves more clearly when they didn’t have the pressure and anxiety to respond immediately, as with a face-to-face conversation. . . [U]se of messaging was also an easier and less awkward medium to express difficult emotions and access support from their friends” (Bargiela et al., p. 3289, 2016).

Bargiela et al.’s “The experiences of late-diagnosed women with autism spectrum conditions: An investigation of the female autism phenotype” (2016) examines the elevated risk of females with ASD going undiagnosed until adulthood. Though the study focuses on women who were diagnosed with ASD in or near adulthood, the conclusions of the research “are not specific to females, and also apply to males with ASD, especially those who have average and above intelligence, fluent speech and who receive their diagnosis late” (p. 3291). Bargiela et al. argue that an early diagnosis of ASD can improve an individual’s quality of life, but this sentiment is not helpful for adults with ASD, specifically adults who are diagnosed later in life and under the DSM-5 expanded definition of autism.

While people with ASD forge successful relationships online, increased screen time has been linked to depression. Jean Twenge et al. (2017) found a correlation between increased screen time and depression amongst adolescents aged 13 to 18 between 2011 and 2015. According to Twenge: “[a]dolescents low in in-person social interaction and high in social media use reported the highest levels of depressive symptoms, suggesting this group is the most in need of intervention” (p. 14, 2017). As has been identified by Bargiela (2014) and Hoover and Kaufman (2016), people with ASD are more susceptible to depression. Bargiela also identifies the use of internet forums and social media for women with ASD to navigate social relationships. In respect of these findings, there is an urgent need to create barrier-free opportunities for adolescents and adults to interact face-to-face, especially for individuals with ASD.

There are currently no free social or recreational programs offered for adult Londoners with ASD. The closest municipality which offers social programming is in Toronto: it can be concluded that no municipality is addressing the absence of outreach and programming in all of Southwestern Ontario. When considering the susceptibility of adults with ASD to isolation, depression and suicide, the lack of social programming is deeply concerning. According to a study released by the Centre for Disease Control in 2014, 1 in 68 people are diagnosed with ASD: “[t]his prevalence rate highlights the need to focus on efforts that promote quality of life [ . . . ] leisure, is important to achieving a high quality of life” (Garcia-Villamizar, Dattilo & Muela, 2017, p. 325). The current services in London for adults with developmental disabilities provide assistance for housing and employment help, but the needs of the ASD community go beyond basic means of survival.

## Available Services

Like most communities, the majority of London services for people with ASD are aimed at school-age children and youth. For this section, the websites Autism Ontario, Autism Canada, and Developmental Services Ontario were searched for London-based resources for adults with ASD. Additionally, Elsbeth Dodman, a former colleague and autism advocate, offered a list of resources, none of which were listed on either Autism Junction or Autism Ontario/ Connect Ability.

## Autism Canada – Autism Junction

Autism Canada provides a database of services for individuals with ASD. The database is divided into 25 categories (academic supports; assistive dogs and technology; Autism Canada Provincial & Territorial Member; Behaviour Services; Camps, Recreational & Social; community supports for adults; crisis/ crime victim services; dentist; diagnostic/ assessment; early intervention; financial/ funding; government agency; information and support; legal/ advocacy; mental health professional; non-behavioural therapists & services; other medical/ health services; parent/ caregiver respite and support; physician; private/ non-public school; products; research; residential; training; and vocational services) which can be searched one at a time. The search field requires an address to populate results, and retrieves results from 1 km, 5 km, 10 km, 25 km, 50 km, 100 km, 500 km, or 1000 km from the provided address. For the purposes of this search, 25 km was selected as it encompasses the radius of London as well as the surrounding area. Some categories were excluded from this search (private/ non-public schools, early intervention) as they do not relate to the purposes of this report. It was discovered that there are very few supports for individuals with ASD in London. Enclosed are some of the most concerning findings:

### *Crisis/ Crime Victim Services*

There are no specific services of this nature listed on the Autism Canada website. This is particularly troubling, considering the vulnerability of this population to harassment and abuse, as well as the registry for individuals with ASD maintained by the London Police Service. Additionally, individuals with ASD often have difficulty articulating their thoughts, meaning special training would be extremely beneficial for frontline staff dealing with individuals on the spectrum.

### *Financial/ Funding*

The only funding listed in this category is the Ontario Disability Support Program. Notably, Passport Funding is absent from this list.

### *Community Supports for Adults; Training; Vocational Services*

For these three individual categories, nothing is listed. Considering all the resources consulted for the purposes of this report, the lack of services listed under these categories is a failing of the local supports in London which provide help in these areas for youth and adult with ASD.

### *Diagnostic/ Assessment; Mental Health Professional*

For these two separate categories, there is only one result, and it is the same doctor for each category.

### *Information and Support*

There is one result for this category: London Autistics Standing Together (LAST), a grassroots organization which formed in 2016. LAST offers peer support for adults with autism

## Autism Ontario

At present, London does not have any groups with ongoing support from Autism Ontario (AO). AO holds events in London, but the majority of these events are intended for young children. The Autism Ontario website links to the Connect Ability website, which links to the My Community Hub website, which is a resource which helps adults living with disabilities learn about Passport Funding, and different services they can access. For adults with ASD, the list of Partner Agencies displays 18 resources. However, the majority of these resources are based in the GTA. Of the 18 agencies listed, only one serves the community of London specifically.

## *Christian Horizons*

Christian Horizons is a non-profit, faith-based organization which provides assistance to adults with exceptional needs. They provide staffed housing and 24-hour care. Christian Horizons works with Developmental Services Ontario's waitlist to fill vacancies.

## Elsbeth Dodman

Elsbeth Dodman is a London resident and autism advocate. She has spoken before the Provincial Advocate for Children and Youth, and has been vocal regarding the challenges facing individuals with ASD who are seeking independence (Hazlewood, 2018; Primrose, 2018). Dodman was kind enough to provide a list of resources for adults with ASD in London, and described how the lack of formal organization from advocacy groups, such as Autism Ontario, has been addressed by grassroots initiatives. It is worth noting that none of these services aim to connect post-secondary graduates with disabilities with skilled work for which they are qualified.

## *LEADS*

LEADS Employment Services is a not-for-profit employment and skills development agency. To be eligible for LEADS, an applicant must be above the age of 14 and meet the specific criteria outlined by LEADS' funders. The criteria is not immediately accessible from the website, and potential applicants are encouraged to make an appointment with LEADS' staff.

## *Accommodation Training and Networking (ATN)*

ATN provides job skills training for individuals with disabilities who are hoping to enter the workforce. They provide a variety of employment programs, including unpaid job placements and wage subsidy programs.

## *Hutton House*

Hutton House provides a variety of services for individuals with disabilities, including employment help. Hutton House advocates for its members by providing letters of reference, housing assistance and post-secondary help. The website includes several success stories from individuals with disabilities who have found employment in the community.

## *We Have Something to Say (WHSTS)*

The 'I Have Something to Say' campaign was launched in December, 2013 by the Child and Youth Advocate's office. The report includes many one-on-one interviews with youth living with disabilities, as well as some statistics regarding the employment rates for individuals living with a disability. According to the statistics quoted by WHSTS, 47% of individuals with a disability between the ages of 15 and 65 are unemployed, with only 18% stating their condition prevented them from working (WHSTS, 2016). Persons with disabilities are more likely to be employed in specific occupations, such as personal,

service, customer information service, or sales. According to Statistics Canada, only 16% of persons with disabilities between the ages of 25 to 64 have a university degree.

#### *Grassroots Social Groups*

Despite the lack of social and recreational programming for adults with autism, individuals with ASD in the London community have organized informal support networks and meet-up groups. While beneficial for the individuals who are involved in these groups, access remains an issue for individuals who are not immediately connected to group-organizers. Additionally, many people who are currently involved are experiencing barriers to employment, and with no external source of funding, these groups are limited in terms of the types of events they can organize. Finally, access to space where groups can meet regularly remains a challenge, due to the cost to rent a space.

#### *Developmental Services Ontario*

The Developmental Services Ontario (DSO) website lists community services and supports for individuals living with a developmental disability. DSO breaks the province into 9 categories, and lists regional services by city and by county. For London-Middlesex, 19 services are listed. Of these services, 3 do not have web sites listed, 3 were recommended by Elsbeth, 2 are not in London, 1 is specifically for individuals in conflict with the law, and 1 is the Canadian National Institute for the Blind – Ontario. The DSO was discovered in a response to an email placed to Christian Horizons, one of the services advertised on the ‘Connect Ability’ website. Notably, the majority of these services address a range of developmental disabilities, and virtually all of them are privatized services.

#### *Alice Saddy Association*

The Alice Saddy Association (ASA) provides a variety of supports for individuals with developmental disabilities. The ASA provides a variety of housing assistance, including Supported Independent Living (SIL), Support in Long Term Care, and the Share Your Home Program. ASA also provides employment help, volunteer opportunities, and services which require passport funding. The ASA website also includes a community events calendar which lists a number of low-cost and/ or free community events.

#### *Community Living London*

Formerly known as the ‘Association for the Help of Retarded Children’, Community Living London (CLL) has existed since 1951. They offer a variety of Passport-funded and privately funded services for adults with developmental disabilities and their families. Available services include employment help, transitional services, and advocacy. Notably, CLL offers a service called ‘Person Centred Planning’ which works with “adults over the age of 18 with a developmental disability [. . .] to create an individual life plan that identifies each person’s support goals and dreams” (‘Person Centred Planning’, 2018). CLL also offers ‘Community Access Services’ which connects adults with a developmental disability to “meaningful leisure, recreation, practical learning and volunteer opportunities” (‘Community Access Services’, 2018). These are a privatized services which are only accessible through governmental or personal funding.

#### *Anago*

According to the website, Anago has three residences located in London which provide “accommodation, daily living and community inclusion services” (‘Developmental Services’, 2013). It is worth mentioning that Anago’s website has not been updates since 2013.

### *Family Services Thames Valley*

Family Services Thames Valley (FSTV) offers counselling, group therapy and volunteer opportunities. Counselling is available on a sliding scale, based on an individual's income.

### *Goodwill Industries*

Goodwill Industries offers employment opportunities and career counselling. Goodwill also complies with the Accessibility for Ontarians with Disabilities Act (AODA) and aims to meet the needs of persons with disabilities in a timely manner.

### *L'Arche London*

L'Arche International Organization is a faith-based organization which creates homes and programs for people with developmental disabilities. To access L'Arche's day programs, there is a fee based on the support participants will require while attending the Day Participation Program. L'Arche holds a monthly potluck and a bi-weekly ecumenical worship service.

### *Participation House*

Participation House provides assisted living for individuals living with disability in London. According to their website, Participation House offers 'Recreation & Leisure' programming, such as dinner groups, scrapbooking, movie nights, arts club, day trips and seasonal events. Fees for Participation House's programming varies depending on the program.

### *Salvation Army*

Salvation Army is a Christian organization which offers support to vulnerable communities living in Canada. The website does not list any programming which is explicitly for adults with developmental disabilities.

### *Victorian Order of Nurses – Middlesex*

The Victorian Order of Nurses (VON) provides a range of care, mostly focused on independent and assisted living. The majority of programming is available for a nominal fee.

## Recommendations

There are numerous ways outreach and social programming could be executed for adults with ASD. There is a wealth of research which condones programming that emphasizes improving social interaction and leisure skills. Additionally, there are neurodiverse advocates who cite their personal experience and experimentation as methods to address the absence of social programming for adults with ASD, programming which contributes to improved social skills. The following are specific examples which have either been tested on adult populations with ASD, are recommendations made by members of the neurodiverse community at the 2017 Autism Canada Conference, or are parents who are addressing service gaps in their communities. In an effort to eliminate barriers when accessing the proposed programming, these resources should transpire in a space which is both free and accessible, such as a branch of the London Public Library or a Community Centre.

"Acting my Way Through Autism" by Jake Anthony - <https://vimeo.com/229801615>

Jake Anthony was diagnosed with ASD at the age of four. Anthony struggled to communicate and connect with other people, as well as recognize and understand emotions and body language. His mother enrolled him in an acting class, which allowed Anthony an opportunity to connect and be aware of other people. Acting also provides participants with an opportunity to "have a give-and-take way of

working and communicating” (Autism Canada, 2017). According to Anthony, acting classes were enormously helpful for him in that they emphasized the “talk, listen and react” (Anthony, 2017) of conversations.

Acting classes can easily be implemented, provided there is space, professional stewardship, and structure. Given London’s robust theatre community, the number of city-owned community centres, and the fact that the public library system contains 14 branches, establishing acting classes designed for adults with ASD is an easily attainable goal.

### Access Program

The Acquiring Career, Coping, Executive control, Social Skills (ACCESS) Program is a “group intervention tailored for young adults with autism spectrum disorder (ASD) to enhance critical skills and beliefs that promote adult functioning, including social and adaptive skills, self-determination skills, and coping self-efficacy” (Oswald et al., 2017, p. 1742). The program consists of 19 weekly sessions which tackle an important subject for an adult with ASD. Programming for an individual’s caregiver/ social coach is also provided in the most successful implementations of ACCESS programs. The topics are pre-arranged, and each session adheres to a schedule. In Oswald et al.’s study, participants demonstrated “significant improvements in the primary outcome measures of global adaptive functioning and self-determination performance” (p. 1754).

The ACCESS program would require space and professional stewardship to implement. The study group for Oswald et al.’s research was supervised by a psychologist completing postdoctoral clinical training hours and the social coach group leader had a Bachelor of Social Work, with over 25 years of experience working with persons with disabilities. The greatest difficulty in implementing ACCESS programming will be securing the help of professionals from the world of psychology, disability studies, and/or social work. While the extent of the qualifications and experience of the supervisors used in the Oswald study is not necessary, some background in disability studies is mandatory. Considering the uniqueness of individuals with ASD, the subject matter, and the value of implementing ACCESS programming, partnering with academics and professionals ‘from the field’ is strongly encouraged.

### Therapeutic Recreation

According to the American Therapeutic Recreation Association (ATRA), ‘therapeutic recreation (RT)’ is “a systemic process that utilizes recreation and other activity-based interventions to address the assessed needs of individuals with illnesses and/or disabling conditions, as a means to psychological and physical health, recovery and well-being” (ATRA, 2017). RT is currently a privatized service which improves social functioning and independence for individuals of all ages (2018). RT aims to “reduce or eliminate the activity limitations and restrictions to participation in life situations” (2018): it has grown exponentially as a career since the ATRA was founded in 1984.

Garcia-Villamizar, Dattilo and Muela (2017) executed a therapeutic recreation program designed to “increase executive function (EF), social skills, adaptive behaviours and well-being of adults with autism spectrum disorder (ASD) and intellectual disability (ID)” (2017). Garcia-Villamizar et al. emphasize the importance of leisure in improving quality of life and identify recreational therapy as a means of teaching leisure skills. Garcia-Villamizar et al. note that people with ASD struggle with leisure, meaning intervention is necessary to help teach leisure skills. ‘Therapeutic recreation’ includes screen and in-person games, wherein participants are able to practice social skills. According to Garcia-Villamizar:

“[v]ideogames, computer tasks, [and] other manual activities and games were used” (p. 334). The structured activities, overseen by professionals, had a tremendous effect on the participants of the study: Garcia-Villamizar et al. noted an improvement in executive functioning (EF) after post-intervention, a positive development which was demonstrated in increased flexibility and inhibition among the participants (2017).

Two considerations for implementing a recreational therapy programme for adults with ASD are the number of resources needed, and the individualized nature of RT. While recreational therapy encompasses a broad range of activities and exercises, Garcia-Villamizar et al. identified video games and board games in their research. One or both of these things can be secured through library services or through donations, although implementing effective RT programming with random games may be difficult: Garcia-Villamizar et al.’s study consisted of one-on-one sessions for adults with ASD. Due to the immediate need for this variety of programming, RT will need to be implemented for a group program.

[Making Public Spaces More Autism-Friendly - https://www.todayparent.com/the-most-autism-friendly-town-in-canada/](https://www.todayparent.com/the-most-autism-friendly-town-in-canada/)

Through a grassroots initiative, Channel-Port aux Basques, Newfoundland has become the first ASD-friendly town in Canada. The majority of resources are aimed at children, but several methods identified in this example can be adapted for adults. First, parents of children with ASD who reside in the area have worked closely with the municipal government to make resources more autism-friendly: this has extended to day-camp programming and providing first-responders with kits to aid a person with ASD during an emergency. Additionally, a local hotel has created a ‘calming sensory room’ for when guests with ASD feel anxious or overwhelmed. For families visiting the hotel, staff will send a slide show of the hotel and rooms so that guests can familiarize themselves with the space prior to their stay: people with ASD can struggle with change and a hotel can be a difficult adjustment. Finally, staff have received sensitivity training for dealing with patrons with ASD, and parents with ASD have spoken to day camp councillors to make camp programming more inclusive.

At the time of this report, no hotel in London explicitly offers accommodation services for people with ASD. As has been previously identified, there is no recreational programming for adults with ASD. Considering there are 1 in 66 people diagnosed with ASD in Canada (Autism Ontario, 2007), the absence of service could be making London inaccessible to some families.

#### [ASD Awareness Public Consultation Meeting](#)

The Accessibility Advisory Committee (AAC) is a necessary advisory body within municipal government. London’s AAC has made enormous strides in terms of accessibility advocacy, and making spaces more useable for individuals with accessibility issues. Considering the absence of recreational services for adults with ASD in London, the AAC is the most effective point of contact between Londoners with accessibility issues and City Council. Appeals to municipal government may be the most effective way of raising awareness about the lack of services for adults with ASD as, According Autism Ontario, “there is no consistent government policy regarding the needs for supports and services for adults with [ASD], nor agreement of which ministry/ ministries should be involved in funding those services” (2007). It is the recommendation of this report that the AAC hold a public consultation meeting where the needs of the ASD community can be heard. By consulting stakeholders, the AAC will be poised to address the Community and Protective Services Committee and City Council regarding the absence of resources for adults with ASD in the city.

Inside Out for Autism - <http://insideoutforautism.ca/>

The most direct way to address the perceived needs of the neurodiverse community is raising awareness among the neurotypical population. A greater level of understanding will combat societal barriers and lessen the isolation experienced by individuals with ASD. An effective way to raise awareness within a workplace is to offer seminars and workshops focusing on a specific topic which is not otherwise covered in the corporate training. In terms of raising awareness about autism, a step to demonstrate the City of London's commitment to better serving the ASD population would be participating in Autism Canada's 'Inside Out for Autism' campaign. Participants in the campaign choose a day between April 2<sup>nd</sup> and October 31<sup>st</sup> where they will wear their shirt inside out and raise "awareness, acceptance and funds" for the ASD community. Teams can be coordinated through the website: this year, Autism Canada is attempting to raise \$100,000 for autism research.

Parks and Recreation Master Plan -

<https://www.london.ca/residents/Recreation/announcements/Pages/Parks-and-Recreation-Master-Plan.aspx>

As Parks and Recreation considers more ways to better serve London's community, it is the hope of this report that they will consider implementing sensory rooms for the neurodiverse population, and provide training for staff about how to better address the needs of individuals with ASD. Considering the success of Recreational Therapy and other in-person group activities in research on adults with ASD, Parks and Recreation should consider implementing programming specifically for individuals with ASD: the majority of programming serves individuals with developmental disabilities in a broad sense, with nothing targeting ASD specifically.

## Conclusion

According to Autism Ontario, the cost of failing to address the needs of adults living in Canada is an estimated \$1.4 to \$8.4 billion (2007). While no breakdown is provided to explain this number, it is certainly a staggering figure. Adults with Autism Spectrum Disorder often experience a 'services cliff' (Oswald) after graduating high school. Individuals who receive an early diagnosis are better situated to access required services until the age of 18, at which point only basic services are provided, with some additional services provided for a fee. In creating an equitable community in which services, spaces and programming are accessible to all individuals regardless of ability, an investment in social and recreational programming for adults with ASD could have lasting benefits. Social programming has an added importance for a demographic which has been known to struggle socially, and whose needs are largely unaddressed by the current offerings. As a person with ASD, Alek Minassian did not have the proper support to ensure an adequate quality of life, resulting in social isolation. It can be speculated that Minassian's isolation and depression lead to his radicalization by incel. In light of the mass murder carried out by Minassian and the lack of supports for adults with ASD, to do less than the bare minimum to address the paucity of services for adults with ASD is to fail. Social and recreational programming can easily be implemented with the City of London's resources and the high level of expertise which exists within the London community. In acknowledging that this is an area in which the needs of a vulnerable group are not being adequately addressed, London can enhance the quality of life for innumerable residents.

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