Socialization Issues in NF-1: *Why they occur and what to do to improve them*

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Organization of Talk

- Why Consider Socialization?
- The Development of Social Skills
- The Neuropsychology of NF-1
- Why Socialization is Difficult for Youth with NF-1
- ADHD, LD, and Social Skills
- Transitioning into Adulthood
- Interventions
- Questions

Why Consider Socialization?

- One of the most frequent concerns shared with pediatricians and neurologists
 - Loneliness
 - Struggles with peers
- Impact on both learning and maturity
 - Influences participation and shared learning experiences
 - Impacts how approach and engage with peers
- Emotional functioning
 - Depression and Anxiety
- Adulthood
 - Sustained struggles with friendships and romantic partnerships
 - Affects employment opportunities

Why Consider Socialization?

- Incidence of Autism Spectrum Disorder in children with NF-1
 - 14-29% children with NF-1 rated as falling in the severe range of autism symptoms
 - Concern about specific shared vulnerabilities
- Shared neurological considerations
 - Areas of the brain most commonly impacted in NF-1 involve skills required for social competency
 - Awareness of how intervention can ameliorate potential struggles with language, social comprehension

- Socialization abilities develop within a mix of genetic, environmental, and behavioral influences
- Attachment establishes the foundation for engaging with and understanding social demands and cues
- Joint attention is a determinant of attachment
 - Facilitates engagement and interaction
 - Elicits development of pathways underlying social awareness and reciprocal interactions

- Attention underserves many of the cognitive capacities that emerge across time
 - Language
 - Visual-spatial engagement and analysis
 - Memory
 - Learning
 - Social understanding and engagement



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- Social understanding and reciprocity requires the capacity to
 - Engage with and appreciate other's thoughts and ideas
 - Associate current interactions with previous experience
 - Appreciate novelty in the context of predictability
 - Identify and then engage in appropriate social responses
 - Correct own response and understanding given feedback

- Multiple brain areas are involved
 - Attention network
 - Emotional network
 - Language
 - Receptive understanding
 - Expressive communication
 - Behavioral regulation network
 - Assessment and Choice
 - Executive Functions
 - Working Memory
 - Inhibition
 - Set shifting

- Modeling of appropriate social behavior
 - Home
 - School
 - Playground
- Shaping of social skills and understanding
 - Parents and siblings
 - Teachers
- Behavioral monitoring and correction
- Peer relationships
 - Extending the boundaries of appropriate behavior
 - Social understanding

Neuroanatomy of Social Cognition



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The Neuropsychology of NF-1

- Learning difficulties
 - Studies suggest 25-50% have learning disabilities
 - Some reports emphasize nonverbal learning disorder profile
 - Other reports emphasize verbal learning disorder profile
 - 5-10% may show mental retardation
 - North identified a 3.5% incidence of moderate to severe MR in Australia
- Speech problems
- Motor coordination difficulties
- Behavioral problems
 - Most commonly reported are ADHD-associated symptoms

Common Difficulties in NF-1

ADHD

- Social understanding and execution struggles are very common in ADHD
- Difficulties with regulation and impulse control
- Inattention to cues
- Learning disabilities
 - Language struggles contribute to difficulties with communication
 - Visuospatial analysis difficulties lead to struggles with taking in and reading nonverbal and behavioral cues
 - Processing speed struggles impact capacity to "keep up" when engaging verbally and behaviorally with peers

How Neuropsychology Influences Socialization

- Struggles with "fitting in" and "keeping up with peers"
- Impulsivity: "Making the wrong choice"
- Need for predictability
- Missing social and behavioral cues
- Immaturity
- Awkwardness secondary to awareness of physical or cognitive challenges

Relationship between ADHD, LD, and social difficulties

- Comorbidity with externalizing behaviors
 - Lower frustration tolerance
 - Oppositionality
 - Anger with "being different"
 - Struggle with making socially appropriate choices
 - Challenge with changing approach or style of behavior

Comorbidity with mood difficulties

- Depression
- Anxiety
- Low self-efficacy

Transition to Adulthood

- Capacity to manage independence
- Ability to drive or determine own transportation
- Need for accommodations in school or workplace
- Feeling confident with dating and nonromantic social relationships
- Choices about alcohol and other substances

Interventions

Early childhood

- Social modeling
- Playdates and peer opportunities
- Structured interactions with guided behavioral response

Middle childhood

- Addressing inattention and impulsivity
- Engagement in structured peer activities
- Social modeling within peer experiences
- Small group therapies on social skills

Interventions

- Puberty and Adolescence
 - Social problem solving groups
 - Social communication work, both individually and small groups
 - Structured peer experiences
 - Modeling dating and mixed gender interactions
- Late Adolescence
 - Coaching
 - Social and sexual decision making
 - Dating
 - Forming and sustaining social groups

Interventions

- Adulthood
 - Individual psychotherapy
 - Mood
 - Medication management
 - Couples psychotherapy and counseling
 - Coaching
 - Workplace social modeling
 - Managing stress and responsibilities
 - Decision making

Questions?

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