



Template for Article Summary, Analysis, and Annotation

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1. Full citation

2. Trembath, D., Germano, C., Johanson, G., & Dissanayake, C. (2012). The experience of anxiety in young adults with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities*, 27(4), 213-224.

3. Abstract

Anxiety is known to be common among young adults with autism spectrum disorders (ASD), yet little is known about the nature of their experiences or the strategies they use to live and cope with their reported anxiety. In this qualitative study, we began to address this issue through two focus groups involving 11 young adults with ASD, and 10 parents and professionals. Participants in each group were asked to discuss the triggers for anxiety, the consequences of anxiety, and strategies they have used, would like to use, or have seen individuals with ASD use to manage their anxiety. The participants identified multiple personal and environmental sources of anxiety, noting the substantial impact they have on their everyday lives at home, work, university, and in the community. Their individual experiences and strategies for living and coping with anxiety are presented.

4. Summary (In your own words, that make sense when skimmed)

- a. Purpose of study- our aim was not to examine the extent to which symptoms described by participants may fit within the clinical range but rather to explore the impact of self-reported anxiety on everyday life.
- b. Framework
 - i. the factors that lead or contribute to feelings of anxiety (the triggers—sources of or situations that elicit anxiety),
 - ii. the emotional or behavioral responses that result from these feeling (the consequences—what happens when anxiety has been triggered)
 - iii. the potential approaches that alleviate the feelings of anxiety (the solutions—what anxiety-reducing strategies work for individuals with ASD)
- c. Population and sample- two focus groups involving 11 young adults with ASD





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(9 men, 2 women) between the ages of 18 and 35, and 10 parents and professionals- 3 women 1 man parents 5 women professionals and 1 woman was a professional and parent. The data were recruited through the investigators' professional networks across metropolitan Victoria, Australia.

- d. Overview of methods-
 - i. focus groups with a semistructured guide that focused on triggers, consequences, and solutions as well as asking the parents and professional how supporting young adults with ASD affected their lives
 - ii. thematic analysis- repeated cycles of analysis across six stages, using the con-stant comparative method
 - iii. to help ensure credibility of the findings, the codes and themes identified by the first author were reviewed by the second author to identify errors on the coding.
- e. Broad Topics
 - i. sources of anxiety- concern for other, interactions with others, fearful anticipation, disappointment and environment
 - ii. living and coping with anxiety- managing anxiety, avoiding anxiety
 - iii. the experience of anxiety- dynamics, impacts on young adults with ASD impacts on others
- f. Findings/Results see table 1
- g. Implications

The results of this study can be used to extend the existing literature by documenting anxiety in this adult population of individuals with ASD, as opposed to children and adolescent.

5. Critiques & Limitations

- a. Data- all qualitative, not standardized; possible sampling bias because it was people willing to participate; the group interview structure could cause





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young adults with ASD reluctance to communicate or express themselves fully

- b. Application- stress coping and experiences are very individualized so this data is hard to apply in other situations
- c. The number of participants in this research is too small and only qualitative methods was used to analysis these data. Thus, the findings from the analysis may not present a general phenomenon but just the experiences of the participants in the study.

6. Follow-Up

- a. Little Questions- How did they recruit participants? Did the social aspect of the interviews cause the participants to modify their answers at all? Are the laws in Australia different in a way that would impact the application of studies? Did the method cause the participants additional anxiety?
- b. Big Questions- What are ways of reducing or preventing anxiety for individuals with ASD? How has this data and similar data affected how universities support students with ASD?

Next Steps quantitative research; one on one interviews; research into real world ways to mediate the causes of stress in academic and professional environments; data from teachers, faculty, staff; future studies with quantitative and qualitative data should include standardized measures of anxiety to get a better characterization of the anxiety symptoms experienced by participants, thus allowing for a more detailed analysis of these experiences as well as their strategies and outcomes.

c.

d. Summary-

This article outlines the different causes of stress and the coping factors of a few individuals with ASD. This article would be useful in looking at individuals with ASD's particular experiences with anxiety and it could lead to some helpful coping methods for others

e. Tweets

- i. “[Y]oung adults with ASD spoke of escaping to online social networking sites where they could talk with others with ASD as [a]





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way of coping.”

- ii. “ The fact that unexpected change, disappointment, and environmental noise were identified as triggers suggests that the relationship between key characteristics of ASD and anxiety may extend beyond the impact of social impairment, as previously reported in the literature.”
- iii. “ Either way, the fact that each participant identified a unique set of multiple sources indicates that a “one size fits all” approach to supporting young adults with ASD is unlikely to be successful.”

Table I. Anxiety Sources, Experiences, and Strategies for Coping With Anxiety

Source, experiences, strategies	Young adults with ASD	Parents and professionals
Sources	Sound and light sensitivities Crowds Uncertainty/making decisions Delays (e.g., transport) Anticipation and disappointment Unexpected or sudden change Health concerns (germs) Public speaking Communicating with others Perceived injustice to self or others Authority (e.g., police, security) News reports and other media Meeting deadlines Making eye contact Losing things Bullying and gossip Managing finances Perceived surveillance of self Explaining diagnosis Life transition (e.g., leaving school)	Lack of sleep Crowds Uncertainty/making decisions Delays (e.g., transport) Anticipation and disappointment Unexpected or sudden change Health concerns (self and others) Public speaking Communicating with others Tone of voice Radio station not playing song News reports and other media Meeting deadlines Ambiguous/open questions Understanding social etiquette
Experiences	Increased heart rate Sweating Obsessive thoughts/behavior Emotional (e.g., crying, screaming) Frustration Nausea Distraction	Emotional (e.g., crying, screaming) Challenging and repetitive behavior Obsessive thoughts/behavior Emotional (e.g., crying, screaming) Frustration Humiliation
Strategies	Listening to music Singing Watching movies or TV Developing multiple interests Alternative therapies Study social skills resources Sleep Exercise (walk, swim, run) Journaling Looking at pictures Withdrawal (physically/mentally) Talking with trusted person Riding motorbike Self-talk Deep breathing and meditation Online social networking Computer games Drugs and alcohol	Heart rate monitors Allowing extra travel time Watching movies or TV Online learning Alternative therapies Humor Mood monitor (visual chart) Exercise (walk, swim, run) Journaling Looking at pictures Withdrawal (physically/mentally) Talking with trusted person