



# Adapting One-session Treatment for Specific Phobia in Children and Adolescents with Autism Spectrum Disorder

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## DESCRIPTION

Specific phobia, an intense and irrational fear of particular objects or situations, is a common issue among children and adolescents, including those with Autism Spectrum Disorder (ASD). These phobias can significantly impair daily functioning and quality of life. When coupled with the unique cognitive and behavioral characteristics of ASD, specific phobias present additional challenges, necessitating tailored therapeutic approaches. One such promising intervention is One Session Treatment (OST), a highly concentrated form of exposure therapy traditionally effective for specific phobias. Adapting OST for children and adolescents with ASD requires a nuanced understanding of their specific needs and behavioral patterns. OST, developed by Ost and colleagues, is an intensive, single-session intervention that involves prolonged exposure to the feared object or situation, combined with cognitive restructuring and coping skills training. The core idea is to break the cycle of avoidance and fear maintenance in a controlled and supportive environment. For children with ASD, however, several modifications are necessary to accommodate their unique sensory sensitivities, communication styles, and cognitive processes. Children with ASD often experience heightened sensory sensitivities, making traditional exposure techniques overwhelming. Therefore, the adapted OST must include gradual and carefully monitored exposure levels to prevent sensory overload. This might involve starting with indirect exposure, such as discussing or looking at pictures of the feared object, before moving to direct contact. Additionally, incorporating sensory-friendly elements, such as noise cancelling headphones or calming sensory toys, can help manage anxiety during the exposure process. Communication difficulties are another significant consideration when adapting OST for children with ASD. Many children on the spectrum struggle with expressive and receptive language, making traditional cognitive-behavioral interventions challenging.

Visual supports, such as social stories and visual schedules, can enhance understanding and predictability, reducing anxiety. Using clear, concise language and checking frequently for comprehension are also essential strategies. Involving parents or caregivers in the therapy sessions can provide additional support and reinforcement, as they often serve as interpreters of their child's needs and responses. Cognitive rigidity and preference for routine, common in ASD, can also impact the effectiveness of OST. Children with ASD may find it particularly distressing to face their fears without the comfort of their routines. Incorporating elements of their regular routines into the therapy sessions can provide a sense of familiarity and security. Furthermore, the use of interests and strengths-based approaches can help engage the child more effectively. For example, if a child has a particular interest in trains, incorporating trains into the therapeutic activities can make the sessions more appealing and less intimidating. Additionally, motivational strategies are crucial when adapting OST for this population. Many children with ASD may not be intrinsically motivated to confront their fears. Utilizing a system of rewards and reinforcements that align with the child's interests can enhance motivation. This could include earning tokens for each step of exposure completed, which can be exchanged for a preferred activity or item. Collaborative planning and flexibility are vital for successful adaptation. Therapists should work closely with the child's family and other support systems to ensure that the intervention is tailored to the child's unique needs and preferences.

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## CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

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