

Exploring Adolescent Autism: Understanding, Challenges, and Interventions

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Abstract

Adolescent autism is a complex neurodevelopmental condition characterized by social communication challenges and restricted interests. This article explores the clinical, emotional, and cognitive changes, including the completion of the condition. While some may experience improvement in social skills and adaptive functioning, they may face heightened difficulties in increased social demand and cognitive decline [1,2].

Keywords: Adolescent autism; Social challenge; Mental health.

Introduction

During adolescence, individuals with autism undergo significant biological, emotional, and cognitive changes, completing the condition. While some may experience improvement in social skills and adaptive functioning, they may face heightened difficulties in increased social demand and cognitive decline [1,2].

Methodology

Social dynamics: Adolescence is a time of heightened social interaction, and individuals with autism may struggle to navigate the complexities of social cues, leading to feelings of isolation and clinical depression. This is often a challenging time for maintaining friendships, and nonverbal communication, in the social realm.

Identity formation: Adolescence is a time when individuals begin to develop a sense of self and independence. For those with autism, this process may be more challenging due to difficulties in social communication and rigid thinking patterns.

Mental health: Adolescence is a time of increased risk for experiencing mental health issues, such as anxiety, depression, and self-harm. This is often due to the challenges of navigating social interactions, increased academic demands, and the need for increased support and understanding [3-6].

Educational settings: The transition to secondary education can be a significant challenge for adolescents with autism, as they may struggle with the demands of a more structured and academically demanding environment. This includes increased academic demands, and the need for individualized support and accommodations for learning and social inclusion.

Challenges faced by adolescents with autism

Bullying and victimization: Adolescents with autism are at a higher risk of being bullied and victimized due to their social differences and difficulties in understanding social dynamics. Bullying can have a negative impact on their self-esteem, mental health, and academic performance, highlighting the need for increased support and understanding [7].

Transitional stress: The transition from adolescence to adulthood

can be a challenging time for individuals with autism, as they may struggle to navigate the complexities of social cues, leading to feelings of isolation and clinical depression. This is often a challenging time for maintaining friendships, and nonverbal communication, in the social realm.

Social isolation: Despite the desire for social connections, adolescents with autism may experience feelings of loneliness and social isolation. The lack of social skills and the need for social engagement can impact their emotional well-being and increase the risk of mental health issues, necessitating a targeted intervention for social inclusion and communication [8].

Communication barriers: Communication challenges, including difficulties in understanding and using language, hinder the ability of adolescents with autism to express their needs, emotions, and preferences. This can lead to feelings of isolation, misunderstanding, and social withdrawal, necessitating the implementation of a targeted communication (AAC) strategy and speech-language therapy.

Interventions and support strategies

Social Skill Training: A targeted social skill intervention aims to enhance the social competence of adolescents with autism by teaching specific social behaviors, social problem-solving abilities, and emotional recognition skills. This is often achieved through role-playing, modeling, and video-mediated social skills training, and maintenance of learned skills in naturalistic settings [7,8].

Cognitive-behavioral therapy (CBT): CBT techniques are effective in addressing the cognitive and emotional challenges experienced by adolescents with autism, including anxiety, depression, and emotional lability. Behavioral modification is a key component.

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4. Tochie JN (2020) The epidemiology, risk factors, mortality rate, diagnosis, etiologies and treatment of neonatal respiratory distress: a scoping review.
 5. Raha BK, MJ Alam, MAQ Bhuiyan (2019) Risk Factors and Clinical of Respiratory Distress in Newborn: A Hospital Based Study in Bangladesh Army. Bangladesh Med J 48: 21-27.
 6. Sivanandan S, R Agarwal, A Sethi (2017) Respiratory distress in term neonates in low-resource settings. Semin Fetal Neonatal Med 22: 260-266.
 7. Randolph AG (2009) Management of acute lung injury and acute respiratory distress syndrome in children. Crit Care Med 37: 2448-2454.
 8. Liu J (2010) Clinical characteristics, diagnosis and management of respiratory distress syndrome in full-term neonates. Chin Med J 123: 2640-2644.
 9. A retrospective study on the risk of respiratory distress syndrome in singleton pregnancies with preterm premature rupture of membranes between 24+ 0 and 36+ 6 weeks, using regression analysis for various factors. Biomed Res Int 15: 67-71.
 10. Incidence, risk factors and outcome of respiratory distress syndrome in term infants at Academic Centre, Jeddah, Saudi Arabia. Medical Archives, 73: 183.
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