



WHITMIRE
& ASSOCIATES, LLC
Private Care Management

Transition to Adulthood: Growing Pains

LISTEN We listened to our 20 year-old client and his parents, teachers and therapists. During our intake process, we noted his life had been completely derailed—in a year he had moved, lost a job, and was kicked out of his college program. We heard him when he said he struggled meeting people, and felt insecure with independent living skills like grocery shopping and money management. Assessing him at job sites, during recreational activities, and when interacting with family, we saw his inability to read social and communication cues lead to poor boundaries with others, awkward conversational skills, and social alienation. We listened to his family when they expressed the strain of his insecurity and lack of independent living skills and their concern for his safety navigating the community alone.

DREAM We scheduled updated psychological testing to gather information that could provide more direction for care planning and as a result, we learned that his struggles originated from Asperger Syndrome. We collectively brainstormed goals of a self sufficiency that included job potentials and an individual living space. Our client stated his desire for more self esteem and belief of competency, so we used his ability to emotionally bond and relate to animals to motivate him to successfully volunteer at a local zoo. As he met his goals toward independent community living, he was moved into a private apartment, and the process of setting up the apartment itself became classroom on adult skills such as budgeting and time management with chores and work.

PLAN We assessed his eligibility for state and federal benefits, and the status of his special needs trust. We figured out where the greatest proportion of funds were going, and discussed whether his priority to live independently and have his own adult life was lined up with family spending. We reorganized therapeutic providers so that care was centered on the goal of independent living and not crisis management.

CREATE Recognizing client alienation and family caregiver role strain, we created a strong support network which included of a Life Skills Coach, Communication Coach, Personal Trainer and a Community Companion. Daily interactions with his Life Skills Coach and Case Manager as well as a carefully scheduled routine that included family time created the safety net our client needed to begin moving forward. His care plan focused on developing social skills, which were strengthened through his year-round participation in enjoyable community activities. He participated successfully in an Aspie social skills group, which functioned as a safety zone where he could discuss his successes and needs for improvement the following week. This focus on community building helped increase his self-awareness and acceptance while enhancing social skills.

DELIVER Currently, our client lives alone in his apartment, cares for his two cats, and cooks his meals independently. We are very proud to say he is now employed part-time, and he continues to learn new skills and practice appropriate social and work related interactions. With the support of his care team he has learned to manage his budget and independently transport himself via the public transit system in a major metropolitan city. He reports feeling much happier and far less stressed than two years ago, with a significant decrease in anxiety. He is working towards new goals such as dating and traveling.