

## **The Hidden Curriculum of the Social Security Application**

By Dena Gassner, LMSW

Social Security income can be used to help alleviate difficult financial circumstances and foster independence for an individual with a disability. This is because programs through the Social Security Administration (SSA) offer financial and medical resources (and, subsequently, access to work supports) for those who qualify. While not all who are disabled qualify for SSA programs – which require documentation of an inability or excessive limitation to one’s capacity to work due to disability – use of SSA programs can make a difference for many who otherwise would face poverty. Unfortunately, many individuals and their family members are unaware of the programs or face fear, shame, or embarrassment at being “in need.” Moreover, the application process is long and can be mentally and emotionally taxing; requiring one to step away from an emphasis on strengths and skills in order to focus on deficits and incapacity. However, I know first-hand of how the programs can be life changing.

### **GRIEF, SUPERSTITION AND FEAR**

I teach my current clients that SSI/SSDI<sup>1</sup> can be a steppingstone to resources and a foundation for change. It is a starting point – to financial independence, independent living or even (a return to) work. Unfortunately, the “invisible” nature of ASD – especially for those without intellectual disability and/or with spoken language – requires that the individual/representative go into painstaking, hopeless detail in the reporting to help the administrative law judge understand the disabling features. This can be painful for families and individuals but it is necessary. Social Security does not look at the *failed*

*outcomes* (i.e. unreasonably short employment, minimal wages, failure to be promoted, histories of discrimination reporting) for evidence. The disability determination reviewers want to see an x-ray, an MRI or some other concrete, clinical document. Since such lab or other test results can not be provided, the applicant with ASD must painstakingly document a history of work interference due to disability. We must paint a scary picture of what life is (or would be) without family or other support. This requires two things: setting aside any shame or anxiety about applying and detailing the worst aspects of the one's limitations.

## EVIDENCE

Relevant evidence that you should gather might include:

- A small quantity of reporting, if possible, that demonstrates that there was evidence of a developmental disability as well as current (within the last 2 years) therapeutic treatment and/or inpatient services, therapy, or use of medication for your disability
- An IEP or an educational history of an IEP or other services
- Diagnostic reports, including current documentation of ASD (preferably less than 2 years old)
- Any medical evidence such as MRIs or accident or sensory reports of any physical complications
- List of all medications
- List of all medical providers for at least the last 2 – 3 years and, if possible, one or two from childhood

Much of this evidence can be especially difficult to produce by those diagnosed late in life. A person may have something from a mental health provider regarding depression or anxiety. However, evidence of a developmental condition could be hard to find. The form for the SSI/SSDI application, likewise, poses its own challenge. At first glance, it seems to require narrow, limited black and white responses. However – with or without a diagnostic report of ASD/developmental disability – one can and should create an entirely separate document that goes into explicit detail about the limitations within the following categories. Emphasize daily living skills that could inhibit one’s capacity to work or that would interfere in the actual workplace. This is key: current providers need to articulate, within the boundaries of their practice, how challenges to daily living and/or skill usage would interfere (or have interfered) with the needed balance required to sustain employment and home life/personal care. Make a copy of all documents submitted and keep the duplicate file for yourself.

#### A. Mobility

Some with ASD do experience fatigue, pain and exhaustion due to low muscle tone or other documentable medical needs. However, more likely, we experience a *cognitive* mobility issue such as when we get lost. We can’t ask for directions, panic with environmental changes, have meltdowns when some other unexpected barrier is presented. Cognitive paralysis also may occur as an inability to function in a setting where a traumatic event took place, the inability to drive or use public transportation, the incapacity to use effective social skills to manage a vehicular accident or receipt of a traffic ticket. An

occupational therapy report identifying such motor planning issues could be helpful.

#### B. Language

A current speech pathology report may likewise be necessary. Such a report will address matters related to expressive language (such as how one might struggle to use language to communicate wants and needs in the workplace) and receptive language (or how one can be expected to receive instructions/feedback from a supervisor, coworker or member of the public). The report also could address how pragmatics – which is how one uses social nuances to communicate – may come into play.

#### C. Interpersonal skills

In addition to specific language challenges, information focused more specifically on how the ASD impacts the person's ability to get along with coworkers, clients, customers and vendors is important. If the individual has not worked, school records about ability to get along with teachers or others in positions of authority as well as fellow students will be sufficient. Teacher reporting and/or an Individualized Education Plan (IEP) can help here. Contacting former employers with the new information about this condition and asking for a painfully honest letter describing the reason for termination also can be helpful.

#### D. Work Tolerance

Typically this refers to physical capacity and limitations such as mobility, strength and endurance. Can the person lift from a stooping position, raise

objects to overhead, manage 20, 30, 40 pounds while doing so? Can they stand, sit or kneel? Can the person sustain an 8-hour day, 40-hour week? For someone with ASD, it is important to address sensory issues as well (e.g. lighting, sounds, smells). Remember to report the manner in which the intolerance is expressed and its potential or known impact in the workplace.

#### E. Work Skills

This is actual task capacity. Can the individual identify, apply, interview, secure and maintain a 40-hour per week job? Can they focus, sustain effort, interact with others? Can they keyboard, use a computer, operate a cash register? Can they do money math and count change? Can they wear a uniform? Think about actual tasks and the necessary skills here.

#### F. Self-care

This category reviews the ability to independently navigate caring for one's needs. Does the person initiate personal hygiene without a prompt or understand the need to use proper hygiene? Can he or she cook, shop and prepare foods; remember to eat; know when to stop eating? Can the individual identify when it is necessary to purchase items for personal use? Can he or she complete chores such as laundry? Parents often underestimate the black and white nature of this area. Remember, this is not a matter of "can they" but "do they" consistently do these tasks without prompting and reminders to such a level as to not interfere with the workplace expectations.

#### G. Self-Direction

Think future planning. Can the person identify what is wanted in regard to a career and execute the tasks needed to reach that goal? Can he or she manage finances? Can the individual fill out a college or employment application? Can he or she use Vocational Rehabilitation or Disabled Student Services independently?

#### H. Miscellaneous

Anything else that may be important goes here. Was there ever a hospitalization related to ASD? Is there a history of co-occurring mental health issues for which there was psychiatric care? Is there a history of suicidal thinking or actions; chronic, incapacitating anxiety or depression; hoarding or an eating disorder; etc.? Was there a second unrelated issue such as an auto accident or traumatic brain injury? Are there behavioral concerns? Concrete evidence of this nature is very valuable. Individuals who may not qualify for a single disabling condition may qualify based on the combined effect of multiple conditions.

Denial of an initial SSI/SSDI application is common but denial often is the result of insufficient evidence being provided. Do not hesitate to apply but be thorough in the process, address the advice noted above, and access assistance as needed.

About the Author

Dena Gassner, LMSW is the Director of the Center for Understanding, an agency that provides nation-wide professional, family and individual development training on autism conditions. She is a contributing author to "Scholars with Autism Achieving Dreams" and is published frequently on matters related to various reframing and practical skills needed to achieve one's individual, personal best while living authentically. She has been married for 20 years and is the mother of two, including a son with ASD.

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<sup>1</sup> Supplemental Security Income (SSI) is an income program for those with disabilities that have limited income/assets who have not worked (or only minimally) and, as such, have not paid into the Social Security system.

Social Security Disability Insurance (SSDI) is an income program for those with disabilities that have worked sufficiently to have paid into the Social Security system. The program allows one to draw Social Security benefits prior to retirement for reasons of disability.

Some individuals with limited SSDI eligibility may qualify for SSDI and SSI. Others may qualify for SSDI based on the work history of a deceased, retired or disabled parent.

For more information, go to [ssa.gov](http://ssa.gov) or contact your local Social Security office. To locate a local office, go to [www.socialsecurity.gov/locator](http://www.socialsecurity.gov/locator).