What is autism?

Children with autism are all very different and their autism can affect them in different ways. Because of this, autism is sometimes thought of as a ‘spectrum’ or continuum disorder. There are three different disorders that make up the group known as ‘autism spectrum disorders’ (ASD): autistic disorder, Asperger’s disorder and pervasive developmental disorder – not otherwise specified (PDD-NOS), which is also known as atypical autism. The term autism is often used interchangeably with the phrase autism spectrum disorders. In this article the term autism is used to include the three disorders on the autism spectrum, and the information and strategies provided will apply to children with any of these three diagnoses.

Autistic disorder: Autistic disorder is also known as childhood autism or classic autism. Autistic disorder is described as a lifelong, pervasive developmental disorder that is noticeable before 36 months. Children with autistic disorder show difficulties in three areas that have become known as the Triad of Impairments: social interaction, communication and restricted and repetitive interests and behaviours (American Psychiatric Association, 1994). Generally, communication problems are very noticeable. Children with autistic disorder may also have an intellectual disability.

Asperger’s disorder: People with Asperger’s disorder, which is sometimes called Asperger’s Syndrome, also have difficulties in the three areas described above, but there is no significant delay in early language acquisition, and there is no significant delay in cognitive abilities. Asperger’s is often detected later than autistic disorder because the child usually develops speech at the expected age.

PDD-NOS: A diagnosis of this disorder is made when a child has a marked social impairment consistent with an autism spectrum disorder, but fails to meet full diagnostic criteria for either autistic disorder or Asperger’s disorder. Children with PDD-NOS have marked social impairment with communication difficulties and/or restricted, stereotyped behaviours, interests and activities.

How does autism affect children?

Communication difficulties: Children with autism have difficulties using and understanding both verbal and non-verbal communication. It is often early communication difficulties that first cause parents the most concern about their child’s development and leads them to seek assistance. Children with autism generally develop speech later than other children and many children do not use pointing to show what they want. Instead they may use different forms of early communication, for example, using their parent’s hand as a tool to get something they want. Most children with autism also find it hard to understand what is said to them, even though their hearing is fine.

Many children with autism use language in a repetitive or stereotyped way, for example, repeating commercials or favourite sayings from TV. This is called echolalia, and is the repetition of another person’s speech either immediately or sometime after hearing it.

Social difficulties: Another area of difficulty for children with autism is social interaction. The challenges that children can experience in this area include limited use and understanding of non-verbal communication such as eye contact and facial expression, and significant difficulties developing friendships with other children. Children with autism often don’t share their enjoyment or interests with others. Other social problems may include not understanding other people’s emotions, and difficulties playing with others. Children with autism may appear uninterested in other people or try to interact in unusual ways.
Repetitive behaviours and restricted interests:
Children with autism often demonstrate unusually intense or focussed interests in particular objects or actions. Some children become intensely interested in certain objects, topics or activities such as trains, insects, puzzles, letters and numbers, dinosaurs or particular TV shows or films. They also often perform unusual or repetitive movements such as flapping their hands and arms or other atypical hand movements. Many children exhibit a strong need for sameness or adherence to familiar routines and rituals, and will insist that activities such as driving to the shops or bath time be done exactly the same way every time. Children with autism often display intense interest in parts of objects, for example fascination with the wheels of a toy train, with an on/off switch on a toy or with the page numbers on the corner of a book.

Early signs of possible autism
Young children with autism will show some of the following signs although no single indicator means that a child necessarily has autism. However, a child with autism will usually show several indicators from most or all of the following categories:

Behaviour
• Has inexplicable tantrums
• Has unusual interests or attachments
• Has unusual motor mannerisms such as rocking or flapping
• Is overactive and uncooperative
• Has difficulty coping with change

Communication
• Does not respond to his/her name by 12 months
• No gestures such as waving or pointing by 12 months
• Loss of words previously used
• Speech absent at 18 months
• Has no spontaneous two-word phrases by 24 months
• Has selective hearing – responding to certain sounds but ignoring the human voice

Social skills
• Looks away when you speak to him/her
• Does not return your smile
• Shows a lack of interest in other children
• Often seems to be in his/her own world
• Is unable to follow simple instructions such as “give me your shoes”

• Does not share attention, interest or enjoyment or try to get your attention to show you objects
• Lack of shared positive emotions such as joy and excitement

Play
• Prefers to play alone
• Very limited social play, such as peek-a-boo
• Play is limited to certain toys
• Plays with objects in unusual ways such as repetitive spinning or lining up

Sensory
• Afraid of some everyday sounds
• Uses peripheral vision to look at objects
• Eats a very limited range of foods
• Preoccupation with certain textures
• Walks on tiptoes


Diagnosing autism
Deciding whether or not a child has autism is known as making or giving a diagnosis of autism. This can be a difficult task, even for paediatricians and psychologists with specialised training. There are no blood tests, no single defining symptom and no physical characteristics that are unique to autism. Autism is diagnosed by observing the child or finding out about particular strengths and difficulties that each child has in different developmental areas.
Only health care professionals should identify possible indicators of autism. If a child care professional has concerns about aspects of a child's development or behaviour, it is their role to communicate this information clearly and sensitively to the child's family, and to provide support for the family to access a health care professional if they wish to do so.

The question of whether to pursue an assessment and possible diagnosis of an autism spectrum disorder is a very difficult decision for many families. Early diagnosis of autism and any associated developmental delays can, however, be a positive step. An early diagnosis of autism allows children access to specialised services and can help parents and other professionals to better support the child with more targeted or specific interventions to aid their development.

Experience and research have shown that the earlier a child diagnosed with an autism spectrum disorder can be involved in an early intervention program, the better his or her progress will be. Early diagnosis and intervention is also essential to ensure families and carers have access to appropriate services and professional support.

**Choosing appropriate interventions for children with autism**

There are many ways of helping children with autism to develop their skills. Helping children with particular difficulties is generally known as intervention or, when young children are involved, early intervention or early childhood intervention.

Intervention approaches may include:

- educational interventions, such as special small classes or one-to-one play sessions; and
- therapy interventions, such as speech pathology or occupational therapy.

All children with autism are different and each child and family varies in terms of their strengths and needs. Research confirms that there is no single approach or intervention that works for all children with autism. There is no one approach that addresses all aspects of the disorder, or fits with every family’s situation.

There are, however, some elements of early childhood intervention for autism that will lead to more effective outcomes for the child. Research has shown that whatever type of intervention families choose, the best interventions have the following elements in common (Prior and Roberts, 2006):

- Autism-specific content, focusing on the main problems in autism. This will generally mean a focus on skills development in areas including communication, social skills, play and managing behaviour
- Regular intervention activities, including services provided by professionals and activities with family members as part of everyday interactions with their child
- Family involvement, including access to education about autism and support to participate in intervention activities
- Involvement with other children who are developing typically (e.g. at preschool) and strategies for generalising skills (e.g. from home to preschool)

**Interventions available for children with autism include:**

- Group based intervention in structured classes helps children across a range of developmental areas and often specific to autism.
- Home-based early intervention focusing on capacity building in parents and supporting the child's progress across a range of developmental areas.
- Speech pathology to support development of receptive and expressive language skills.
- Occupational therapy to explore the sensory needs of the child, and to support motor skill development.
- Autism-specific, skills based intensive interventions to teach skills.
- Training programs for parents of children with autism in areas such as communication or social development.
- Families may also consider a range of services to help them cope including advice on parenting skills, counselling, support for siblings, financial support and advocacy.
- Autism Spectrum Australia has also developed the AutismPro Support Service (www.autismpro.com.au) which provides online tools, such as individualised programs, activity plans and behaviour management strategies for families and child care professionals working with children with an autism spectrum disorder.

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Many children who have autism attend ‘mainstream’ child care services. To maximise these children’s opportunities to thrive and develop in the child care setting, child care professionals need to work collaboratively with families and other professionals who are involved with the child. While it is important that individualised strategies are developed to suit each child’s strengths and needs, there are a number of general strategies that child care professionals can implement to support and assist children with autism.

General strategies for working with children with autism include:

- Simplifying verbal language and using visual supports to aid communication.
- Specifically supporting the development of children’s social and play skills.
- Maintaining an awareness of the sensory needs of the child in a busy group environment.

References and further reading


Useful websites

- Autism Spectrum Australia: www.autismspectrum.org.au
- Department of Education and Training: www.det.nsw.edu.au
- Raising Children Network: www.raisingchildren.net.au

Information for this article has been drawn from the Building foundations. Autism: your child, your family resource. The development of this information kit has been undertaken by Autism Spectrum Australia (Aspect) with assistance from the NSW Department of Ageing, Disability and Home Care. However, the information presented and the views expressed do not necessarily or at all reflect the views or information held by the Department, the NSW Government or the Minister for Ageing, Minister for Disability Services. Every care has been taken in the preparation of this publication and the information it contains is believed to be accurate. However, no reliance should be placed by any person on the information presented and it is suggested that professional advice be sought where necessary.