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What is Autism?

Autism is a developmental disability with life long implications. It affects the way a person communicates and interacts with people around them. It is referred to as Autistic Spectrum Disorder (ASD) and generally appears before the age of three.

The three main difficulties children with ASD have are in three main areas called The Triad of Impairments:

- ❖ Impairment of social interaction
- ❖ Impairment of social communication (verbal and non verbal communication)
- ❖ Impairment of social imagination, flexible thinking and behaviour

ASD is a generic term which could include more than one of the following:

- ❖ Classical Autism
 - Cognitive impairments
 - Deficits in verbal and non-verbal communication
 - Deficits in social understanding
 - Difficulty in making sense of the world
 - Unusual behaviours, restricted activities

❖ Asperger's Syndrome

- Mild to severe impairments in social interaction and understanding
- Restricted and repetitive activities and interests
- Language and cognitive development **not** delayed
- Deficits in communication
- Superficially perfect spoken language but often tends to be formal, pedantic or stereotypical in content
- Literal understanding of language and difficulties with verbal humour
- Higher degree of self awareness

❖ Semantic-Pragmatic Disorder

- Noticeable delayed language development
- Poor language processing, use and understanding
- Poor conversational skills such as turn taking and topic maintenance
- Sarcasm, metaphors, abstractions, may all be taken at face value.
- Mild autistic features

❖ Rett's Syndrome

- Found almost exclusively in girls
- Significant regression after a period of normal development
- Severely impaired language and psycho-motor skills
- Severe deficits in cognitive ability

What causes ASD?

The exact cause is not yet known. It can be caused by a variety of conditions affecting brain development before, during and after birth and it can also be caused by environmental and genetic factors.

How many children are affected?

- Latest research in the UK showed that, one in every one hundred children has ASD.

- In 1978, the prevalence was four in every 10,000 children.
- ASD affects more boys than girls, the ratio being 4 boys:1 girl.

What are some of the signs of ASD?

People with ASD may have problems with social, emotional, and communication skills. They might repeat certain behaviours and might resist change in their daily activities. Many people with ASD also have different ways of learning, paying attention, or reacting to things.

A child or adult with an ASD might:

- not play "pretend" games (pretend to "feed" a doll);
- not point at objects to show interest (point at an airplane flying over);
- not look at objects when another person points at them;
- have trouble relating to others or not have an interest in other people at all;
- avoid eye contact and want to be alone;
- have trouble understanding other people's feelings or talking about their own feelings;
- prefer not to be held or cuddled or might cuddle only when they want to;
- appear to be unaware when other people talk to them but respond to other sounds;
- be very interested in people, but not know how to talk, play, or relate to them;
- repeat or echo words or phrases said to them, or repeat words or phrases in place of normal language (echolalia);
- have trouble expressing their needs using typical words or motions;
- repeat actions over and over again;
- have trouble adapting when a routine changes;
- have unusual reactions to the way things smell, taste, look, feel, or sound;
- lose skills they once had (for instance, stop saying words they were once using).

How is ASD diagnosed?

- There is no single assessment tool or checklist which will confirm the diagnosis of ASD.
- The presence of ASD is determined on the basis of interpretation of a pattern of behaviours.
- Diagnosis is carried out by a team of professionals.
- The child must be observed across various settings.

How to help

- A Speech-Language Pathologist would be able to give advice regarding communication, play and social interaction;
- Use visuals to improve communication and learning skills;
- Structure the child's environment;
- Include routines where possible.

Communication

- Get the child's attention first before you start speaking. E.g. by calling his/her name
- Simplify your language
- Use short sentences and stress keywords
- Use visuals and gestures to help the child understand the message
- Use clear facial expressions and body language
- Give explicit instructions go straight to the point
- Break activities and instructions into small steps
- Wait for a response. You might have to wait a little longer than usual
- Avoid saying NO. Use other words, such as 'enough, stop, finished'.
- Always speak to the child in a positive way
- Avoid using abstract terms and non-literal language (e.g. idioms)
- Give meaningful choices
- Avoid using too many verbal prompts
- Teach turn-taking and waiting in conversation
- Maintain structure and routine, be consistent

Useful Links

- ❖ <http://www.nas.org.uk/>
- ❖ <http://www.autismresearchcentre.com/arc/default.asp>
- ❖ <http://www.dotolearn.com/index.htm>

Local Parents' Support Group

Autism Focus Group

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