

Possibilities and Prognosis

Great strides have been made in our knowledge and understanding of autism since 1943, when the disorder was first described. Autism was first seen as an emotional and psychological disorder. Today most professionals believe it is a biologically based disorder of the brain.

Families and professionals are finding better ways to understand autism and help those who have the disorder to cope with its many symptoms. Some symptoms may lessen as the child ages; others may disappear altogether. With appropriate intervention, many autistic behaviors can be changed, perhaps to the point that to the untrained, the individual may appear to no longer have autism. However, most children and adults with autism will continue to exhibit some degree of symptoms throughout their lives.

Some children with autism maintain an age-appropriate educational level and attend general education classes, while others need specialized educational settings and supports.

It is difficult to predict the future when a child is young, but some individuals with autism learn to live and work independently in the community. Others depend on the support of family and professionals. Adults with autism can benefit from job skills training and social and recreational programs. They may live in a variety of residential settings. Options can include living independently at home, in apartments, or with other family members, as well as supported living arrangements in group homes, supervised apartment settings, and structured residential care.

Treatment Options

No single treatment approach can take away all the traits of autism for everyone, but many behaviors can be positively changed with appropriate intervention. Sometimes the resulting changes are so significant the person appears to no longer have autism. However, the majority of children and adults will continue to show some characteristics of the disorder to some degree throughout their lives.

While some students with autism attend regular school classes, most need training in vocational skills and community living skills at the earliest possible age. Learning to cross a street safely, shop and make change, or ask for assistance are critical skills that may be difficult even for individuals with average intelligence. Skills should be taught that will enhance the person's independence, give more opportunity for personal choice and allow more freedom in the community.

To be effective, any approach should be flexible in nature, rely on positive strategies, be re-evaluated on a regular basis, and provide a smooth transition from home to school to community environments. A good program will also incorporate training and support systems for caregivers as well. Rarely can a family, classroom teacher or other caregiver provide effective habilitation for a person with autism unless offered consultation or in-service training by a knowledgeable specialist.

A generation ago, most people with autism were eventually placed in institutions. Today, as a result of appropriate and individualized services and programs, even the more severely disabled can be taught skills that will allow them to develop to their fullest potential.

Effective Treatment Approaches

Several treatment approaches have consistently been demonstrated to benefit people with autism. These approaches are described below.

1. Behavior Technology (Applied Behavior Analysis)

Principles and techniques from the field of applied behavior analysis (ABA) are very effective in the treatment of people with autism. Behavior principles help family members and professionals to be more clear in how they teach and give directions to children and adults with autism. Behavior principles

are also useful in helping people to respond productively to the unusual behaviors of some autistic individuals. Strategies based on ABA are particularly useful in evaluating inappropriate (and even bizarre) behaviors to understand what the person is communicating through the behaviors.

2. Discrete Trial Training

One form of ABA is discrete trial training. Discrete trial training is an intensive, one-on-one teaching session in which small parts of behaviors or skills are taught in short, repeated “trials.” As the skills are learned, new skills are added in a carefully planned sequence. There is evidence that Discrete trial training can be effective for some children with autism from birth through six years. The success of discrete trials depends upon the (1) individual child; (2) number of hours of therapy; and (3) curriculum or content of the training sessions.

Lovaas therapy is a widely known type of discrete trial training. Professor O. Ivaar Lovaas of the University of California at Los Angeles published a landmark study of discrete trial training. He has developed a curriculum for preschool children using discrete trials. Not all discrete trial training is the same, nor is all of it the same as the Lovaas method.

Setting up a discrete trial training program that utilizes applied behavior analysis requires a professional trained in ABA.

3. Communication Training

Because one of the main areas affected by autism is the ability to communicate, treatment programs should include methods to increase communication skills. Depending on the individual's needs, speech therapy may focus on acquiring language skills or teaching sign language. Electronic devices or picture boards may be used to help the person communicate more effectively. Teaching programs based on behavioral principles can be written specifically for the person's individual communication needs.

Communication therapy can include a combination of methods. To determine your child's communication needs, it is recommended that you have your child evaluated by a speech/language pathologist who is knowledgeable about autism.

4. Social Skills Training

Another major area associated with autism is a lack of social ability or the understanding of social cues. Individuals with autism may spend time alone instead of with others, show little apparent interest in making friends and be

less responsive than others to social cues such as eye contact or facial expressions. Social skills programming may include techniques such as helping the individual to (1) learn to recognize facial expressions and other indicators of emotions (as expressed by others); (2) communicate in social situations; or (3) wait calmly in line at the grocery store. Social skills programs need to be based on behavior principles. As with other autism treatments, social skills programming will vary depending upon individual needs.

Other Helpful Approaches

Visual Supports

Visual supports are symbols or pictures that help to signal to the person with autism what to do (the appropriate behavior) or what not to do (the inappropriate behavior). They have been demonstrated to be helpful to many people who have autism. One of the most commonly used and effective types of visual supports is the visual schedule.

Social Stories

Social stories help people with autism to deal with specific situations that are difficult for them to handle. In simple terms, the written (and sometimes illustrated) story outlines the situation. The person may tend to have inappropriate behaviors in the situation or lack the skills needed to appropriately deal with the situation. The story goes on to describe what the person should do. When written correctly and presented correctly, social stories have been shown to be very helpful to some people with autism.

Circle of Friends

A circle of friends is a group of peers who support the person with autism. The method was first used in school settings, where children were invited (but not pressured) to be in the “circle” for the student with autism. An adult facilitator explains autism to the group, at the children’s level of comprehension, providing information specific to the particular child. The facilitator encourages and guides the children as they express their concerns about the child and come up with solutions to difficulties he or she is having. When done for adults, the method may be called a Circle of Supports and usually addresses broader life issues.

Other Treatment Options

What follows is an overview of other treatment options available to individuals with autism. This is not an exhaustive list, and it is intended to provide a general overview of available options as opposed to specific treatment recommendations.

Auditory Integration Training

The technique of auditory integration training may help some individuals who are oversensitive (hypersensitive) to sounds. The individual listens to a variety of sound frequencies, coordinated to his or her level of impairment. Auditory training is performed by an audiologist trained in this method.

Diet/Vitamins

Some individuals with autism exhibit low tolerance for and/or allergies to a variety of substances, such as yeast and gluten. Although no rigorous scientific studies support the idea that dietary modifications reduce or eliminate symptoms of autism, some professionals and parents have reported positive changes in behavior following the modifications. Vitamin supplements have been reported by some parents to affect particular behaviors, such as increasing attention spans.

Facilitated Communication

Facilitated communication is a technique by which a trained professional, the "facilitator," supports the hand, arm or shoulder of the individual who has communication impairments. This method helps the individual to point to or press the keys of a communication device to spell out words.

Medications

There is no single medication to treat autism, but a wide variety of them have been prescribed to alleviate symptoms such as aggression, seizures, inattention, hyperactivity, anxiety or obsessive/compulsive behaviors. For information on the use of medications, consult a physician who has experience in treating the symptoms of autism.

Music

When used in a structured setting, music can be incorporated into the teaching of cognitive, motor and daily living skills. Effective for some individuals with autism, music therapy may be provided in a private setting or included in a child's school program.

Sensory Integration

Difficulty integrating sensory messages may not be an obvious problem for people with autism, but it appears to occur quite often. Some people have unusual sensory reactions, such as being overly sensitive to touch or less than normally responsive to pain. Sight, hearing, touch, smell and taste may be affected to a lesser or greater degree. Noises may sound too loud or too soft; colors may appear to be too bright or possibly even painful to see. Different treatments exist, depending upon the area that is affected. One approach is sensory integration therapy, which is usually provided by an occupational therapist trained in the method.

Vision

Some individuals with autism experience vision difficulties, such as poor eye contact, difficulty with visual attending, visual fixation and hyper- or hypo-sensitivity to light and/or color. Developmental or behavioral optometrists may be able to treat them. They believe that some of the unusual behaviors associated with autism may be related to visual-perceptual problems. Treatments include specialized colored or prism lenses and vision exercises.

Other Treatments

The treatments mentioned above are not a comprehensive list of all options available to individuals with autism. There are a variety of others, including therapy using animals, treatments to reduce yeast in the body and cranial-sacral therapy.

Evaluating Treatments

To help parents or other caregivers as they consider possible treatments, Dr. B. J. Freeman developed the following list of guidelines. (See our "Getting Started" packages for her entire paper, "Diagnosis of the Syndrome of Autism: Questions Parents Ask.")

Principles for Evaluating Treatment of Autism

1. Approach any new treatment with hopeful skepticism. Remember that the goal of any treatment should be to help the person with autism become a fully functioning member of society.
2. Beware of any program or technique that is touted as effective or desirable for every person with autism.
3. Beware of any program that thwarts individualization and potentially results in harmful program decisions.
4. Be aware that any treatment represents one of several options for a person with autism.
5. Be aware that treatment should always depend on individual assessment information that points to it as an appropriate choice for a particular child.
6. Be aware that no new treatment should be implemented until its proponents can specify assessment procedures necessary to determine whether it will be appropriate for an individual with autism.
7. Be aware that debate over use of various techniques are often reduced to superficial arguments over who is right, moral and ethical and who is a true advocate for the children. This can lead to results that are directly opposite to those intended.
8. Be aware that new treatments often have not been validated scientifically.

Questions to Ask Regarding Specific Treatments

1. Will the treatment result in harm to the child?
2. How will failure of the treatment affect my child and family?
3. Has the treatment been validated scientifically?
4. Do specified assessment procedures exist?
5. How will the treatment be integrated into the child's current program?

Try to avoid becoming so infatuated with a given treatment that functional curriculum, vocational life and social skills are ignored.