

All about ... autism

Dr Prithvi Perepa clarifies some of the popular misconceptions about autism and outlines how practitioners can support a child with the condition

Most people will have heard the word autism these days and may have even seen programmes about autism on TV.

While this familiarity with the term can be beneficial, sometimes media representation of autism leads to stereotypes and can impact our perceptions of what the condition is and what we should do when working with a child with autism. So, first let's consider what autism is.

WHAT IS AUTISM?

Autism is a disability that impacts the ability to communicate, interact and think in a flexible way. As a result, a child with autism may:

- not always understand or use non-verbal communication appropriately, such as facial expressions, eye contact, gestures or intonation of speech
- have unusual patterns of speech and language development, such as loss of

speech, delayed speech development, and repetition of the same words or phrases (known as echolalia)

- understand language literally, which could lead to confusing and distressing situations for the child. For example, when a child is instructed to 'go and wash your hands in the toilet' and then is told off for trying to wash their hands in the toilet pot!
- find it difficult to interact with other people for anything other than their needs and interests, such as to share their knowledge on a specific topic or ask questions about a topic
- find it easier to interact with adults rather than playing with their peers
- have limited pretend or imaginative play, especially when the roles have to be shared with other children
- find coping with changes – such as a change of staff or activity – difficult to deal with
- engage in the same activities over and over again or engage in body



PHOTOS ADOBE STOCK

Some children with autism can exhibit sensory problems, such as with touch



One symptom of autism is the child finding

movements which could appear unusual, such as rocking back and forth or spinning round and round

- find it difficult to process sensory information (such as touch, smell, taste, vision and hearing), which could mean that they appear to be ignoring this information in some situations and at other times appear to be over-reacting. For example, a child who does not cry when they fall but will cry when asked to touch playdough.

The Unique Child

Autism is often referred to as a spectrum, and you may have heard phrases such as Autism Spectrum Disorder or Condition. This means that while all children will show differences in the areas of communication, interaction and flexible thinking, how these differences manifest themselves and impact each child will be different.

It is important, therefore, to understand the uniqueness of each child with autism and not make any assumptions based on your experiences of someone else with autism.

ARE THERE MORE CHILDREN NOW WITH AUTISM?

It is considered that one child in every 100 in the UK could be on the autism



it difficult to play with their peers and easier to interact with adults

spectrum. This is certainly higher than it used to be 20-30 years ago.

However, it is hard to provide a conclusive answer to whether there is a genuine increase in the number of children with autism. It is likely that there is a combination of factors which are leading to this perception.

Increased awareness

First, there is an increased awareness of autism. This means that more parents and professionals are likely to notice unusual behaviours and seek a diagnosis of autism. Along with this, there are also more professionals who are trained in diagnosing autism, which means that it is

NW conference and show

Dr Prithvi Perepa will be among the speakers at *Nursery World's* online conference on the EYFS, and at the *Nursery World Show 2021*.

'The Future of the EYFS: Rethinking priorities and practice' will take place online over four consecutive days, 9-12 November. Each two-hour, live session will feature three early years experts.

Opening the conference will be Dr Julian Grenier, head teacher of Sheringham Nursery School and Children's Centre and lead on the revised *Development Matters* guidance.

Other experts include Penny Tassoni, on the place of adult-initiated learning, Stella Louis on the planning cycle, and Anne O'Connor on self-regulation. Dr Perepa will be giving pointers on how to support children with emerging

special needs, in particular those with Autistic Spectrum Disorders.

The *Nursery World Show*, to be held in Islington, London on 5-6 February, will feature masterclasses on the revised EYFS and children's health, as well as a programme of seminars on topics ranging from loose parts and behaviour to role play and education for sustainable development.

Dr Perepa will be giving advice on how to meet the emotional and learning needs of children with Autistic Spectrum Disorders.

For full programmes and to register:

→ www.eyfs-conference.com/programme

→ www.nurseryworldshow.com/london/programme

MORE INFORMATION

- The Autism Education Trust has some useful guidance for early years settings, such as standards and progression frameworks, www.autismeducationtrust.org.uk/product-category/early-years
- The National Autistic Society has a wealth of information which is useful to understand autism, www.autism.org.uk/about.aspx
- <https://mchatscreen.com> has the free download version of M-CHAT, which is a screening tool for autism
- Cumine V, Dunlop J and Stevenson G (2010) (2nd edition) *Autism in the Early Years: A Practical Guide*. Routledge
- Perepa P (2013) *Understanding Autism in the Early Years*. Open University Press

relatively easy to get a diagnosis once differences are noticed.

Diagnostic criteria

Secondly, the diagnostic criteria for autism have changed over the years. Autism was recognised as a condition in the 1940s, when it was associated with severe withdrawal from the world and was often associated with learning difficulties. While some people with autism could have learning difficulties, or other associated conditions such as ADHD, we also recognise now that some could have autism without any intellectual disabilities.

The terms Asperger's syndrome or 'high-functioning autism' were used to describe such children until recently when the new diagnostic criteria (known as 'DSM-5') stopped using these terms. This widening of the diagnostic criteria over years means that children with some of the differences who would not have been diagnosed with autism in the past would be now.

Girls and boys

In the past there was also a feeling that autism was more likely to occur in boys, and therefore girls who exhibited autism characteristics might not have been identified with the condition. Our understanding has changed now and there is more identification of girls with autism.

WHAT ARE THE CAUSES OF AUTISM?

The cause of autism is still unclear and there are a number of studies which are trying to identify why it occurs. What is



At SEND to Learn Nursery in Blyth, Northumberland, several children with autism attend the setting (above and below)

often reported is that there is some level of heritability, which means there is likely to be more than one member with autism in a given family, although these may not be immediate family members. This suggests there is some genetic predisposition.

Studies of identical twins supports this view, because if one of the identical twins has autism, it is more likely that the other one will too. However, it is also observed that sometimes families do not seem to have any history of autism, which indicates that some other environmental or biological factors could be contributing to this. What these are is still unclear.

Research has established that vaccines such as MMR are not contributing to the cause of autism, but other factors are still being explored.

HOW DO YOU SUPPORT A CHILD WITH AUTISM?

While the potential causes and increase in the number of children with autism are an interesting subject to discuss, what most of us want to know is how to support a child with autism within our settings.

It is likely that as one of the first professionals who observes and records a young child's behaviour on a regular basis, an early years practitioner is more likely to identify unusual behaviour patterns.

Early observations and diagnosis

There are screening tools, such as the Modified Checklist for Autism in Toddlers (M-CHAT), which are available online and can be used to record some of your observations. However, the diagnosis of autism can only be undertaken by a

qualified professional and you need to broach the subject sensitively with parents for them to seek this.

It might be advisable in some instances to discuss your observations with other external professionals who could be visiting your setting, such as an early years advisor or speech and language therapist, who can then make a referral.

As diagnosis is a complicated procedure, it could take months before a formal diagnosis of autism is provided. However, some strategies can be put in place to help the child to learn to communicate and interact with others. Since a child with autism can find the world a confusing

place, it is up to us how we support them to make sense of it.

Some useful pointers for supporting children

- Keep your language simple and direct. For example, ask a child to wash their hands in the sink, not in the toilet.
- Some children with autism may struggle to understand when an instruction is being given to them. Make sure you gain the child's attention before giving an instruction. You could do this by calling their name, for example.
- Children with autism can find verbal instructions difficult to follow. It is



PHOTOS AT SEND TO LEARN NURSERY DAVE CHARNLEY

case study: Salma

As well as showing how difficult it can be to identify some behaviours associated with autism, the case of Salma also demonstrates the importance of seeking professional advice and the vital support that early years practitioners can provide to a child with autism.

Salma joined the nursery when she was three years old. Her mother had recently separated from her father. The staff at the nursery thought that Salma's initial inability to settle in the nursery was because of the changes in her family. Karen, one of the staff members, was appointed as Salma's key worker and slowly Salma started following Karen and playing with her.

Salma was interested in all 'girly things'. She loved shiny books and material and spent a lot of time looking and feeling these. She also enjoyed playing in the dressing-up area and could be there for a long time.

Behaviours

While Salma looked settled, the nursery staff noticed there were some patterns of behaviour which were unusual. Salma very rarely interacted with any of the other children. She would often run after them, but not really play with

them. She would also get distressed when Karen was not around and would not be calmed by any other member of staff.

Karen noticed too that Salma could recite all the stories which were familiar to her, yet when asked a question about a story, such as 'What do you think the princess felt like?', Salma looked perplexed and did not know how to respond.

The nursery shared their concerns with the local authority early years advisor when she came for her visit. The advisor suggested that they record their observations in a proforma and start putting some strategies in place.

Strategies

Following the advisor's recommendations, the nursery started expanding the network of adults that Salma interacted with. They created a 'now and next' card which showed the activity that Salma was going to do first and the following activity, along with the member of staff who would be with her.

Through this process, the nursery started introducing two more members of staff who would interact with Salma at regular times.

Karen started drawing Salma's

attention to the different facial features which indicate a specific emotion of a character.

Karen also started playing a follow-the-leader game of emotions along with other children, where each child took turns to show an emotion and say its name, and the others had to copy it. Salma started to interact with other children during these sessions and to show and recognise happiness.

Next steps

On her next visit, the early years advisor brought along her colleague from the SEND team. The nursery staff shared their observations and reflections with them. The two advisors suggested a meeting with Salma's mother.

During the meeting, Salma's mother was relieved to know that the nursery was also concerned about Salma and mentioned that she was unsure whether she was being an over-anxious mother as Salma was her first and only child.

The advisors mentioned that Salma's fascination with shiny objects could be related to her sensory perception, and a referral to the local social communication team was agreed at the meeting.

useful if visuals, such as picture cards, symbols and written instructions are combined with verbal instructions. Visual information is static, which means that a child can refer to it as and when required.

- Some children with autism can find a setting with limited structure and lots of options challenging to cope with. Providing some indication of the structure of the day or activity by using visual timetables can make the world more predictable and easier to manage for the child. Providing limited options at a given time can also help the child to engage with the activity before proceeding to the next one.
- Using structure can also be helpful for the child to interact with other children in the setting. For example, using a sand-timer to explain how long each child has a turn on the bike could help the child to learn to take turns.
- Some children with autism can find it difficult to concentrate on what is being said if they are forced to give eye contact. Rather than demanding eye contact, think of how else the child can show that they are paying attention (such as nodding their heads) and teach these as alternatives.

- An early years setting can lead to sensory overload for some children. Provide safe and calm places that the child can use when required. This could be a quiet reading corner, a small tent, or a calm place in the playground.
- As we all know, children enjoy learning when they are interested and motivated by the topic or the activity. Therefore, use the interests and strengths that the child has and build on these for learning and for building friendships.

Toileting skills and sleep patterns

Some children with autism can find learning toileting skills difficult and can take longer to become independent. In addition, some children can also struggle with sleeping and may have irregular sleeping patterns or limited sleep. Referral to a nurse or a medical professional may be required, as well as following clear toileting and sleeping schedules.

Home and away

Some children with autism differ their behaviours in different contexts, which could mean that some of the behaviours observed in the nursery settings may not be exhibited by the child at home or vice versa.

Collaborating with the family and working together in identifying any areas of concern and also strategies which work is important to help the child to learn to generalise what they are learning to different situations.

Case study: key messages

The case of Salma (see box, above) shows how hard it can be to identify some of the behaviours associated with autism in the early years, especially given the many and varied ways in which autism can present itself. It is, therefore, important to seek professional support when required.

The case study also indicates that children with autism are capable of learning if appropriate support is put in place. It is our role as early years practitioners to understand the needs and strengths of each child, whether or not they have a diagnosis of autism, and provide them with an environment that is conducive to learning and developing themselves. ■

Dr Prithvi Perepa started his career as a special needs teacher and is currently a lecturer in autism studies and a member of the Autism Centre for Education Research at the University of Birmingham