

Autism – ‘adapting practice’

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Talk

- Current practice
- Dilemmas and challenges
- Adapting practice- assessment and intervention

Task

- 5 minutes

Professional background

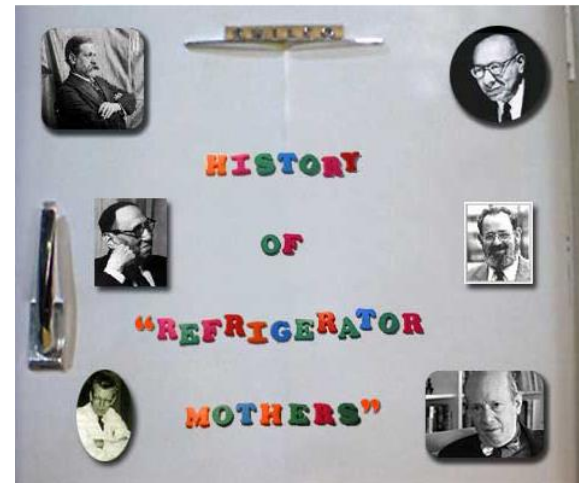
Skills and Specific training in autism assessment/intervention

Skills and Specific training in attachment assessment/intervention

Wish list for training

Introduction

- Autism spectrum disorder and terms
- Attachment disorder or difficulties
- History of autism
- Attachment and autism- a new concept?



DSM 5

1. Reactive Attachment Disorder (RAD)
2. Disinhibited Social Engagement Disorder (DSE)

Criteria for RAD (DSM 5)

- Inhibited, emotionally withdrawn behaviour towards adult care giver (rarely seeks or responds to comfort)
- Persistent social and emotional disturbances
- Extremes of insufficient care – neglect/deprivation; repeated disrupted attachments; rearing in unusual settings/institutions with high child to caregiver ratios
- Onset before age 5
- Developmental age of at least 9 months
- Does not meet criteria for ASD

Disinhibited Social Engagement Disorder

- Child actively approaches and interacts with unfamiliar adults (overly familiar)
- Socially disinhibited behaviour
- Experienced extremes of insufficient care
- Developmental age of at least 9 months

Autism and Attachment

- **Commonalities** and differences
- Aetiology - genetic and environmental
- Risk factors - e.g. prematurity, **socioeconomic status**, gender
- Clinical presentation – e.g. inflexibility, atypical play, poor social interaction, poor communication, deficits in social emotional regulation, impairments in executive function, sensory integration/processing difficulties
- Associations - e.g. depression, anxiety, cognitive difficulties

Review of literature

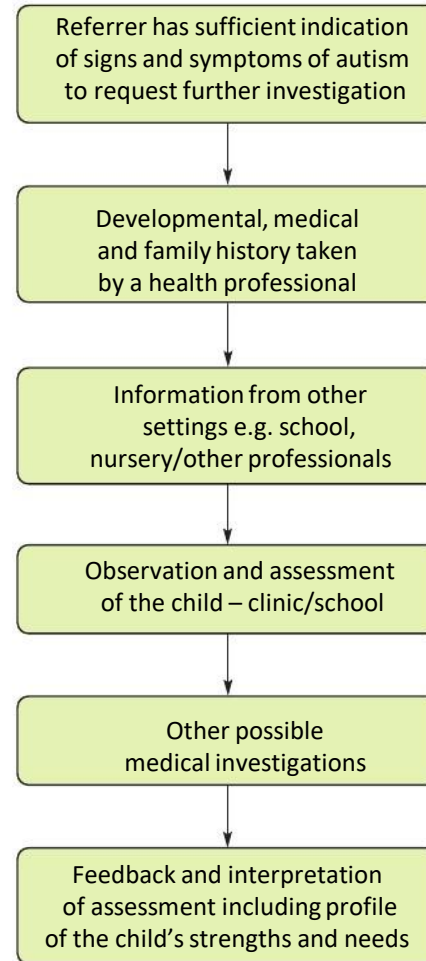
- Large proportion of children with diagnosed Reactive Attachment Disorder score highly on instruments used to diagnose ASD
- A proportion of children with ASD present with insecure attachment patterns
- Misdiagnosis, diagnostic overshadowing, co-occurrence?
- No definitive diagnostic test for ASD or attachment difficulties
- Clinical judgement as lack of specific tools
- “Attached” to your assessment

Current practice- Assessment

- ADI/3di/DISCO/Developmental history
- ADOS
- School/clinic observation
- Questionnaires/Information from other sources
- Additional –Cognitive/Language and social communication/Sensory.....
- NICE compliant
- “Clinical instinct”



Assessment Process



ABOUT ME- Autism passport. McKigney Anne Marie and Ahuja Alka

ASD Assessment -NICE

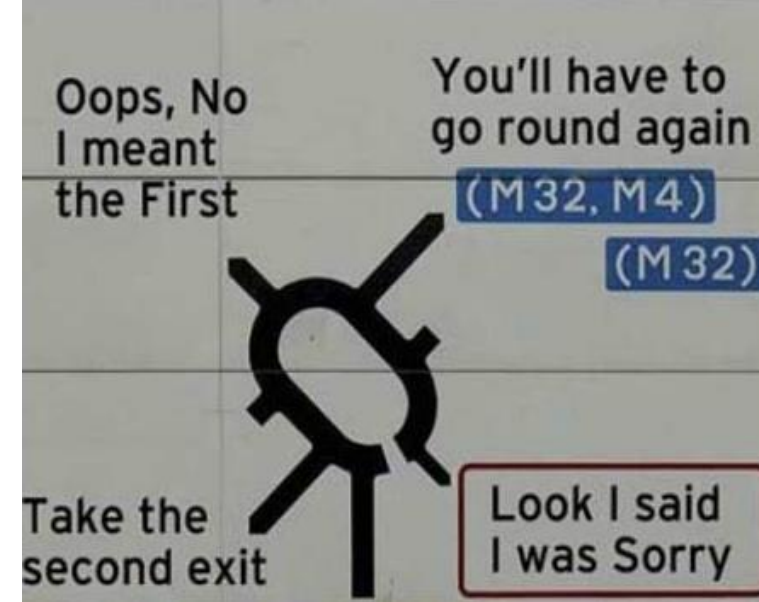
- The following elements to be included in every assessment
- Detailed enquiry about parent or carer concerns and if appropriate the child or young person's concerns
- A medical history including **prenatal, perinatal and family history** past and current health conditions
- The child or young persons experience of **home life, education and social care**
- A developmental history focussing on developmental and behavioural features consistent with ICD-10 or DSM-IV criteria (consider using an autism-specific tool to gather this information)

ASD Assessment -NICE

- Assessment through **interaction with and observation of the child or young person** of their social and communicative skills and behaviours focussing on features consistent with ICD-10 or DSM-IV criteria (consider using an autism-specific diagnostic tool to gather this information)
- **Consideration of differential diagnosis**
- Systematic assessment for conditions that may **coexist with autism**
- Development of a **profile** of the child's or young person's strengths, skills, impairments and needs that can be used to create a **needs-based management plan, taking into account family and educational context**
- Communication of assessment findings to the parent or carer and, if appropriate, the child or young person

Our journey

- Clinical demand and audit
- Reflection and discussion
- NICE and other tools e.g. Coventry Grid
- Chronology, supporting and conflicting information
- Additional assessments
- Marschak Interaction Method (MIM)

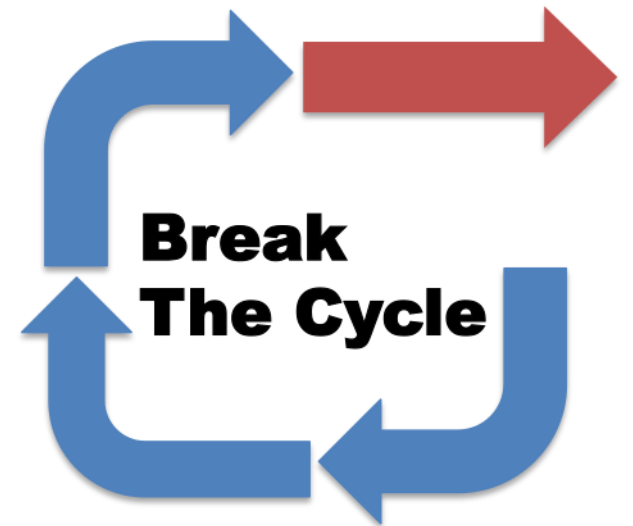


Listening Better & Understanding

- Observe and assess
- Hypothesis?
- Reflect
- Formulate
- Develop profile
- Intervention

Dilemmas and challenges

- Assessment for attachment??
- Vicious cycle of assessment
- Structured assessment and observations
- “Looked after” is not enough of an explanation
- Time investment and extensive clinical experience
- Detailed verified history and chronology
- Stigma of attachment
- Professionals feeling deskilled and under confident
- Working in silos



More challenges....

- Chicken and egg

Parent with autism and neurotypical child

Child with autism and neurotypical parent.....

- When is it helpful to have another diagnosis or not?
- Masking and diagnostic overshadowing
- Joint formulation and understanding
- “On trend”



Adapting practice- assessment

- Individual approaches
- Collaboration with family and professionals
- Outside comfort zone
- “Objective” and helpful
- Getting it right as soon as you can
- Diminishing resources and increasing demands
- Challenges of smart working and cost effectiveness

Adapting practice- assessment

- Local practice and protocols
- Investment in time and skills
- What works for your service?

Adapting practice- intervention

- Universe of interventions
- Which ones? Are they available?
- Formulation and profile
- “Evidence”
- Accepting uncertainty and embracing challenges
- “Keep on doing what you do, you keep on getting what you get”
- Training across all agencies

Why are you asking for such a high salary when you have no experience in this field?

Well, the job is so much harder when you don't know what you're doing.



ESP model

- Eclectic
- Systematic
- Pragmatic

- Individually focussed

Task

- What interventions are locally available?
- Local pathway for intervention and joint working
- Challenges and opportunities

Thank you

- Thank you to our families and our colleagues

