



# THE ROLE OF OCCUPATIONAL THERAPY IN TREATING CHILDREN WITH AUTISM

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# GOALS FOR THIS SEMINAR

- **Educate** - To provide knowledge about occupational therapy, ASD and how they are connected
- **Empower** – To provide valuable resources so you can continue to explore this topic and advocate for your loved one with ASD

# WHAT IS OCCUPATIONAL THERAPY?

- An **occupation** is defined as a meaningful everyday activity
- OT supports people across the lifespan to do the activities they want and need to do
- We generally don't think about our daily occupations until we have trouble doing them
- OT helps people live life to its fullest



# OCCUPATIONAL THERAPISTS:

- Use research and scientific evidence to ensure that our interventions work
- Incorporate one's valued occupations into the intervention process
- Can work in hospitals, schools, clinics, skilled nursing facilities, community centers, mental health facilities, in the home and more

# A CHILD AND/OR YOUNG ADULT'S OCCUPATIONS MAY INCLUDE:

- playing
- being a student
- being a sibling
- interacting with friends
- completing chores or job tasks
- completing self-care activities
- managing money and time
- demonstrating independent living skills
- participating in leisure activities

# AUTISM SPECTRUM DISORDER (ASD)

- *In 2013, the American Psychiatric Association merged four distinct autism diagnoses into one umbrella diagnosis of autism spectrum disorder (ASD).*
  - *autistic disorder*
  - *childhood disintegrative disorder*
  - *pervasive developmental disorder-not otherwise specified (PDD-NOS)*
  - *Asperger syndrome*



# SIGNS AND SYMPTOMS OF AUTISM

- Loss of speech, babbling or social skills
- Avoidance of eye contact
- Preferring to be alone
- Difficulty understanding other people's feelings
- Delayed language development
- Repeating of words or phrases (echolalia)
- Resistance to minor changes in routine or
- Restricted interests
- Repetitive behaviors (hand flapping, rocking, spinning, etc.)
- Unusual and intense reactions to sounds, smells, tastes, textures, lights and/or colors

# AUTISM STATISTICS

- 1 in 59 children is diagnosed with an Autism Spectrum Disorder
- Boys are 4 times more likely to be diagnosed Autism than girls
- Parents with a child with ASD have a 2-18% chance of having a second child with ASD
- Average age for Autism diagnosis – just under 4.5 years old
- Approximately 1/3 of people with autism are nonverbal
- 31% of children with ASD have an intellectual disability (IQ under 70)



# OBTAINING A DIAGNOSIS

- The American Academy of Pediatrics recommends screening for Autism as early as 18-24 months
- Screening tool: M-CHAT (Modified Checklist for Autism in Toddlers) [www.autismspeaks.org](http://www.autismspeaks.org)
- Developmental pediatrician - typically diagnoses a child with ASD based upon specific criteria developed by the American Psychiatric Association
- There are 3 different levels of Autism based upon severity and the amount of support required

# NOW WHAT?

- SEEK SUPPORT AND RESOURCES
- Get your child a comprehensive evaluation
- The evaluation team may include: a psychologist, speech therapist, occupational therapist, physical therapist, special education teacher, behavior specialist and YOU!

**\*\*You don't need an ASD diagnosis to get a comprehensive Evaluation\*\***

# THE OT EVALUATION PROCESS

- Standardized testing – sensory, fine motor, visual motor
- Clinical observations in child's natural settings
- Review of records
- Parent report and rating scales
- Findings are summarized into a report
- Plan of care is established, including measurable goals



# SENSORY PROCESSING SKILLS

- Sensory Processing refers to the way we take in, and interpret, information we gather through our senses
- Children can be hyper (more) or hypo (less) aware of various types of sensory input
- OTs may work on desensitizing a sensory system, modifying an environment or activity, creating a sensory diet or developing sensory stories
- These are the sensory systems:
  - Visual – sights
  - Auditory – sounds
  - Oral – tastes
  - Olfactory – smells
  - Tactile – touch
  - Vestibular - movement
  - Proprioception – awareness of position and movement in the body
  - Interoception – all internal body sensations (hunger, thirst, bathroom needs, temperature)

# FINE MOTOR SKILLS

- Fine motor skills are activities that require the small muscle groups of the fingers and hands
- OTs may work on improving hand strength, coordination and endurance
- Functional fine motor tasks include:
  - Playing with toys
  - Holding rattles
  - Holding and using classroom tools  
(pencils, markers, crayons, scissors)
  - Managing fasteners
  - Picking up small items

# VISUAL MOTOR AND VISUAL PERCEPTUAL SKILLS

- Visual motor integration is the ability to control hand movements guided by vision
- Visual perception is the ability to make sense of and interpret what is seen
- Functional visual motor and visual perceptual tasks include:
  - completing puzzles
  - recognizing differences in pictures or details
  - copying lines, shapes and figures
  - handwriting tasks
  - reading in different fonts
  - forming letters and words
  - copying text
  - drawing



# ACTIVITIES OF DAILY LIVING (ADLS)

- Activities of daily living could include:
  - Brushing teeth
  - Eating and drinking
  - Using the bathroom
  - Hygiene tasks (bathing, grooming, nail and hair care)
  - Getting dressed
  - Preparing meals
  - Money management

# EARLY INTERVENTION OT SERVICES – BIRTH TO AGE 3

- Services typically take place in the home setting, sometimes in a clinic setting
- The parent/caregiver is usually present and participating in therapy sessions
- The OT supports the child by:
  - Providing direct, research-based therapeutic interventions
  - Sharing helpful resources and knowledge regarding development and milestones
  - Giving ‘homework’ for the family to do between visits
  - Collaborating with other professionals on the team to optimize carryover of skills

# COMMITTEE ON PRESCHOOL SPECIAL EDUCATION AGES 3-5 YEARS

- Services take place in the preschool, daycare, home and/or clinic setting
- The parent/caregiver is sometimes present during therapy sessions
- The OT supports the child by:
  - Providing direct, research-based therapeutic interventions to address sensory processing, fine motor and visual motor skills for play, pre-academic tasks and self-care skills
  - Sharing helpful resources to the parent and teacher
  - Giving 'homework' for the family and school to do between visits
  - Collaborating with other professionals on the team to optimize carryover of skills<sup>17</sup>



# COMMITTEE ON SPECIAL EDUCATION – SCHOOL AGED SERVICES, AGES 5-18 OR 21

- Services take place in the school setting, in the classroom, therapy space or another location within the school and can be direct or indirect
- OTs may run Life Skills Groups to develop independence with activities of daily living
- OTs may work with young adults in transitional programs and on-the-job training
- The parent/caregiver is rarely present for therapy sessions
- The OT supports the child by:
  - Providing direct, research-based therapeutic interventions to address handwriting and self-care skills
  - Implementing helpful accommodations or modifications in the classroom or on job sites
  - Collaborating with other professionals on the team to optimize carryover of skills

# CLINIC BASED PEDIATRIC OT SERVICES

- Can occur at any time from birth to age 21
- Can be initiated if a child does not qualify for services through their county or school
- Can be used to *supplement* school-based services
- Can provide services not available in another settings
  - Aquatic Therapy
  - Sensory Integration Therapy
  - Feeding Therapy
- Are subject to medical necessity review

# ADDITIONAL TREATMENT OPTIONS FOR ASD

- **Floortime** is a relationship-based therapy where the parent gets down on the floor with the child to play and interact with the child at their level.
- They meet the child at their developmental level and build on their strengths
- Floortime addresses the following six key milestones that contribute to emotional and intellectual growth:
  - Self-regulation and interest in the world
  - Complex communication
  - Intimacy, or engagement in relationships
  - Emotional ideas
  - Two-way communication
  - Emotional thinking



# ADDITIONAL TREATMENT OPTIONS FOR ASD

- Hippotherapy, or equine therapy, provides many benefits for children with ASD:
  - Relaxing tight muscles
  - Building muscle strength
  - Improving fine motor coordination
  - Sharpening hand/eye coordination
  - Improving Posture & Flexibility
  - Improving Communication
  - Gaining self-control
  - Gaining self-confidence
  - Improving concentration
  - Improving socialization

# CLOSING THOUGHTS

- OTs help children with ASD and their families improve their participation and performance in typical childhood occupations through:
  - development of skills
  - modification of activities
  - environmental accommodations
  - promotion of healthy habits, roles, and routines
- OTs can help children with ASD from birth into young adulthood
- There are many resources available to families and consumers with Autism Spectrum Disorder

# RESOURCES

- **Autism Speaks** enhances lives today and is accelerating a spectrum of solutions for tomorrow. This site has information regarding: screening (M-CHAT-R), evaluation, diagnosis and treatment, support groups, transitional services, advocacy and much more. You can search for resources by state. [www.autismspeaks.org](http://www.autismspeaks.org)
- **The Center for Autism and Related Disorders (CARD)** is one of the world's largest organizations using applied behavior analysis (ABA) in the treatment of autism spectrum disorder: [www.centerforautism.com](http://www.centerforautism.com)
- The Autism Response Team (ART) is an information line for the autism community. Team members are specially trained to provide personalized information and resources to people with autism and their families. 1-888-AUTISM2 (1-888-288-4762), En Español: 1-888-772-9050



# RESOURCES CONTINUED

- [www.therapro.com](http://www.therapro.com) - Adaptive utensils, classroom tools, oral motor tools, fidget items and Sensory Stories
- [www.therapyshoppe.com](http://www.therapyshoppe.com) - Therapeutic tools and strategies for home and school
- [www.carolgraysocialstories.com](http://www.carolgraysocialstories.com) - Social Story samples, history and resources
- [www.AOTA.org](http://www.AOTA.org) - The national professional organization of occupational therapy
- [www.autismsupportnetwork.com](http://www.autismsupportnetwork.com) - For those seeking social connection, peer guidance and a feeling of community
- [www.transitionta.org](http://www.transitionta.org) - National Technical Assistance Center on Transition (NTACT), Improving Postsecondary Outcomes for All Students with Disabilities
- [www.cdc.gov](http://www.cdc.gov) - Explains the methods for determining the prevalence of ASD

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