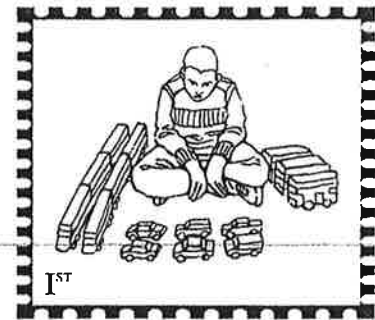


About this factsheet

This is one in a series of factsheets for parents, teachers and young people entitled *Mental Health and Growing Up*. The aims of these factsheets are to provide practical, up-to-date information about mental health problems (emotional, behavioural and psychiatric disorders) that can affect children and young people. This factsheet gives details about the causes and effects of autism and Asperger syndrome, as well as offering practical advice about how to get help if you think your child has one of these disorders.



Introduction

What are autism and Asperger syndrome?

Autism and Asperger syndrome are developmental disorders that are due to abnormalities in the way the brain develops and works.

Autism shows itself in the first 3 years of life. Asperger syndrome is a less well-defined condition and may not be recognised until after a child starts school.

What are the signs?

Children with autism or Asperger syndrome have difficulties in three main areas:

- socialising
- communication
- behaviour.

Sometimes these problems are noticed soon after birth, but more often they become apparent after a year or two of apparently normal development.

Socialising difficulties

These depend upon the child's age, developmental level and how severely they are affected. Children with autism tend to ignore other people or appear insensitive to others' needs, thoughts or feelings. They do not make the usual eye contact or use facial expression in social situations. They are less likely to use gestures such as pointing to communicate. They tend to find it difficult to cooperate, share or take turns with others. They prefer to play alone, and show no interest in imaginative play. They get on best with understanding adults. Socialising with other children and forming friendships is hard for them. Children with Asperger syndrome have similar but less obvious problems.

Communication difficulties

Not being able to communicate properly is a particularly handicapping aspect of autism, and often the one that first causes concern. Nearly all affected children have language problems – both in understanding and in speaking. More severely affected children might never learn to speak or to communicate in other ways. If they do begin to talk, children may simply echo what they have just heard or speak in an odd way.

Children with Asperger syndrome are not slow to learn to speak. However, their language may be somewhat formal and sound rather adult.

Unusual behaviour

Children with autism or Asperger syndrome prefer familiar routine and tend to resist change, which they find difficult and unpleasant. They may also have unusual interests, such as in maps or electronic gadgets. They may be very sensitive to tastes, smells and sounds. They may also have odd body movements such as hand-flapping or finger-twiddling.

Sources of further information

- The National Autistic Society provides information and advice for parents and families. 393 City Road, London EC1V 1NG; tel: 020 7833 2299; helpline 0870 600 8585; fax: 020 7833 9666; e-mail: nas@nas.org.uk; website www.nas.org.uk.
- MENCAP. National Centre, 123 Golden Lane, London EC1Y 0RT; helpline 0808 808 1111; e-mail help@mencap.org.uk; www.mencap.org.uk.
- The *Mental Health and Growing Up* series contains 36 factsheets on a range of common mental health problems. To order the pack, contact Book Sales at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG; tel: 020 7235 2351, ext. 146; fax: 020 7245 1231; e-mail: booksales@rcpsych.ac.uk, or you can download them from www.rcpsych.ac.uk.

Any attempt to stop these activities and interests can cause furious protest and distress. When upset, these children may have tantrums, be hyperactive or injure themselves. Some children have special talents or gifts for drawing, music or calculation.

What are the causes?

Little is known about the causes of autism and Asperger syndrome. They appear to be genetic conditions.

Where can I get help?

The first step is to find out the reason for a child's social and communication difficulties. Your general practitioner will be able to advise you and to make a referral to your local child psychiatrist or developmental paediatrician. An educational psychologist, speech therapist or occupational therapist may also be needed.

Making the correct diagnosis requires a detailed developmental history, medical and psychological reports, and assessment of the child's social and communication skills and intellectual abilities. A physical examination and simple blood tests can also be helpful.

Coping with daily life

Most parents find that obtaining a correct diagnosis is an important first step. A child's puzzling behaviours become more understandable and it is easier to work out what help they need, now and in the future. It will also help identify what type of skills need to be worked on, e.g. how to play, share and communicate.

Education, with speech and language therapy, offers the most effective way of making sure that

a child with autism reaches their full potential. The type of education needed should be decided after a detailed assessment has taken account of the child's strengths, difficulties and needs. Depending on what resources are needed, a child may do best in a mainstream school that provides support for children with communication difficulties, or in a special school for children with autism.

Children with Asperger syndrome often also require individual help, usually in a mainstream setting. They have to learn about the social 'rules' that most of us pick up without thinking. They need guidance on how to manage conflict and upset feelings. They need feedback on how they are getting on with other people. Unstructured situations, such as break and lunch-times, can be particularly difficult times for these children. They can be vulnerable to bullying, particularly in mainstream secondary schools.

Parents have a very important part to play in providing the love, understanding and consistency that their child needs. Many find that life at home goes more smoothly for everyone if they use similar strategies or approaches to those used by teachers or other professionals. However, a child's behaviour can vary enormously in different environments. Advice from a clinical psychologist or child psychiatrist (see Factsheet 31 about child and adolescent psychiatrists) might be needed if behavioural problems become severe. Occasionally, medication can help as part of a care plan.

Social services may have a role to play in providing practical support and help for the child and family. They can provide help in the home, respite care, and advice on attendance and disability allowances. Many families also value support from their local Mencap or autism society.

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