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Researchers recommend using combination of strategies for early diagnosis of autism in children

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The earlier that autism is diagnosed and treated in children, the better outcomes they will experience for future relationships and careers. However, most children aren't detected and diagnosed with Autism Spectrum Disorder (ASD) until around age four, with children from economically disadvantaged or minority backgrounds detected and diagnosed up to two years later, on average. For all autistic children to get the care they need, researchers as well as the American Academy of Pediatrics recommend that children be universally screened for ASD at 18 months and again at 24 months, among other strategies. A review of research and public health ramifications was published today in *Policy Insights from the Behavioral and Brain Sciences*, a Federation of Associations in Behavioral & Brain Sciences (FABBS) journal published in partnership with SAGE Publishing.

In order to successfully diagnose all children who are at risk of ASD, researchers Fein et al. recommend using a combination of strategies, such as:

- Regular universal screening in the doctor's office: ASD screening should become a routine part of pediatric care. Doctors should not wait for a child to exhibit signs of ASD or for parents to express concern.
- Screening in other settings: screening should also take place in settings other than the doctor's office, such as day care, child care, churches, and other community settings in order to help reduce disparities--as many children do not receive consistent healthcare and may miss doctor appointments.
- Better dialogue between doctor and parent about developmental concerns: screening tools, such as questionnaires, should be routinely used in doctor offices. They can serve as ice-breakers for parents who may not raise concerns on their own and for doctors who may be concerned about upsetting parents.

The researchers also recommend that government policy not continue funding early intervention using local property taxes, which results in children from

wealthy states and communities receiving more access to treatment than children in poorer areas.

They concluded: "The cost of effective early intervention is significant; however, the impact of failing to provide this intervention in long-term costs and unrealized human potential is much greater."

Source:

SAGE
