



Best Practice Recommendations in Autism

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In order to guide professionals and families towards better autism care, healthcare organisations in several countries provide Best Practice Recommendations (BPRs). This article aims to summarize five national BPRs:

- The Haute Autorité de Santé (HAS, France, 2012)
- The National Institute for Health and Care Excellence (NICE, United Kingdom, 2013)
- The Centre Fédéral d'Expertise des Soins de Santé (KCE, Belgium, 2014)
- Healthcare Improvement Scotland (SIGN, Scotland, 2016)
- New Zealand Autism Spectrum Disorder Guideline (New Zealand, 2016)

Note: The scope of this article is restricted to children and adolescents, and non-pharmacological interventions.

The following list seeks to first address interventions and approaches that will not be addressed in this article. Whilst not necessarily harmful, these approaches cannot be recommended given the lack of scientific proof of their efficacy:

- Psychoanalytic and psychodynamic approaches (France, Belgium, New Zealand)

- Institutional psychotherapy (France, Belgium)
- Son Rise program (France)
- The 3i method (France)
- Feuerstein method (France)
- Padovan method, of neurofunctional reorganisation (France)
- Floortime or Greenspan method, when used exclusively (France)
- Doman-Delacato method (France)
- Neurofeedback and auditory integration therapy to address speech and language problems (United Kingdom)
- Packing (Belgium)
- Facilitated communication (Scotland, France, Belgium, New Zealand)

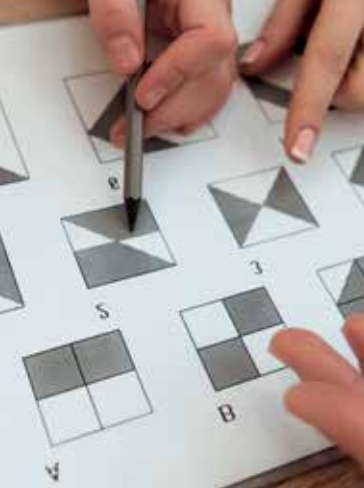
The BRPs make the following collective recommendations:

1. Early Interventio

Example:

- France: "Personalised programs based on early, comprehensive and coordinated intervention models, implemented before the age of 4" (grade B)

It is important that children and their families should have access to early intervention wherever possible.



Note: with respects to strategies aiming to decrease the frequency of problem behaviours, front line interventions should first prioritise the acquisition of new skills. Indeed, proactive learning will often indirectly reduce the frequency and intensity of problem behaviours. (HAS, France).

- United Kingdom: "It is important that children and their families should have access to early intervention wherever possible"

2. Involve parents and/or favour programs with a parental training component

Example:

- Scotland: "Parent-mediated intervention programmes should be considered for children and young people of all ages who are affected by ASD, as they may help families interact with their child, promote development and increase parental satisfaction, empowerment and mental health" (recommendations based on clinical experience of the Guideline Development Group)
- United Kingdom: "Strategies should aim to increase the parents' understanding of and sensitivity and responsiveness to the child or young person's patterns of communication and interaction."
- New Zealand: Parents should be provided with "guidance on mastering specific teaching strategies that enable them to help their child acquire new skills and behaviours, information on understanding how ASD influences their child's learning and behavior, and help in coping with emotional stress"

3. Focus on child's strengths and interests

Example:

- France: "Initial use of child/adolescent's specific interests" (to promote cognitive functioning)
- United Kingdom: "If children and young people express interest, offer a collaborative approach to treatment and care that takes their preferences into account."

4. Provide alternative communication tools

Examples:

- Scotland: "Interventions to support communicative understanding and expression in individuals with ASD should be considered"
- United Kingdom: "Strategies should include techniques to expand the child or young person's communication"
- New Zealand: "Visual supports and technology should be available to support expressive and receptive

communication and organisation according to the child or young person's individual needs (Grade B)"

5. Promote social inclusion and access to education, culture and recreation

Example:

- New Zealand: "All children and adults should have access to leisure facilities and meaningful activities tailored to their needs and interests (...)" ("Living in the Community", Grade B)
- United Kingdom: "supporting access to leisure and enjoyable activities; and support access to educational services"


6. Target the improvement of joint attention skills

Example:

- Belgium: "Core approaches to sociocommunicative difficulties ideally involve an interactive play-based psychosocial intervention (...) in order to improve the child's joint attention, engagement and reciprocity"
- Scotland: "statistically significant benefit from parent-child interaction for joint attention"

7. Consider behaviour analysis-based approaches

Example:

- United Kingdom: "If no coexisting mental health or behavioural problem, physical disorder or environmental problem has been identified as triggering or maintaining the behaviour that challenges, offer the child or young person a psychosocial intervention (informed by a functional assessment of behaviour) as a first-line treatment for behaviour that challenges."
- Belgium: "Cognitive behavioural interventions are recommended to manage anxiety disorders in children with the cognitive and verbal development required to participate"
- New Zealand: "Educational interventions should incorporate principles of positive behaviour support, particularly a focus on understanding the function of the child or young person's behaviour" (Grade A). 

For further information, the full text version of this article can be accessed online (in French) by visiting: <https://blog.francetvinfo.fr/dans-vos-tetes/2017/12/12/autisme-queles-sont-les-interventions-qui-marchent.html>