Early Features of Autism

by Dr Avril Brereton

Parents of children with autism often report difficulties or delays in their child’s early development prior to two years of age, yet diagnosis is often not made until a child is about four years of age or older. Placement in early intervention programmes before four years of age is thought to improve outcome for children with autism. Those children who receive a diagnosis of autism after four years of age may be missing the opportunity for early intervention.

In recent years a number of studies have sought to describe the early features of autism in infants and preschool children. Some studies have interviewed parents to establish what problems initially cause them the most concern, others have observed children in controlled play and assessment situations.

The early features of autism identified in these studies are listed below (Gray & Tonge, 2001).

1. Social interaction

   Poor social interaction
   Lack of interest in other children
   Lack of seeking to share own enjoyment
   Failure to develop peer relations
   Failure to join in activities of others
   Failure to direct adult’s attention to own activity
   Does not direct the attention of others
   Does not hold up arms to be lifted up
   Does not show affection
   Does not seek or offer comfort
   Dislikes social touch and being held
   Lack of social responsiveness
   Ignores people
   Lack of social play
   Being in own world
   Prefers being alone
   Indifferent to others
   Does not differentiate between people
Lack of attention to voices
No social smile
Lack of eye contact
Lack of gesture
Lack of facial expression
No greeting behaviours

2. Communication

Lack of verbal communication
No social chat
Lack/limited range of facial expression
No/abnormal eye contact
No or “empty” smiling
Loss of previously acquired words
Problems with language comprehension
Does not express emotion
Poor imitation
Use of other’s body as a tool
Lack of infant babble
Echolalia
No gaze monitoring
No pointing to express interest
No use or understanding of gestures

The features listed under the categories of Stereotyped and repetitive routines, behaviours and interests (3), Play and Sensory (4) and Other behaviours (5) are not necessarily present in very young children. This may be because there is a developmental process in the emergence of these autism symptoms.

3. Stereotyped and repetitive routines, behaviours and interests

Verbal rituals
Hand and finger mannerisms
Whole body mannerisms
Unusual/repetitive preoccupations
Unusual/repetitive attachment to objects

4. Play and sensory

Lack of spontaneous play
Lack of imitative play
No pretend play
Sensitivity to noise
Insensitivity to pain/cold
Unusual sensory interests
Deafness suspected
Mouthing of objects
Unusual looking at objects/patterns/movements
5. Other behaviours

- Distractibility
- Behavioural variability
- Sleep problems
- Self-injury
- Food fads
- Unusual fears
- Lack of curiosity
- Lack of response to name
- Running away
- Overly quiet
- Indifferent to animals
- Overexcited when tickled

Some of the features listed above are also present in young children with developmental delay. Therefore, studies that have compared the behaviour of young children with autism with those who have developmental delay without autism provide the best information on the features and symptoms of autism in infants and preschool children.

The absence of stereotyped and repetitive behaviour in very young children does not exclude the possibility of autism. The presence of obsessional behaviour may be dependent upon more advanced language and cognitive skills and emerge later as the child makes developmental gains. Deficits in basic communication and social skills are apparent in the first two years of life in young children with autism (Gray & Tonge, 2001; Zwaigenbaum, 2001).

Differentiating between speech delay, developmental delay and autism in young children.

Parents of young children with autism often report delayed speech as their first concern, but speech delay is not specific to autism. Delayed speech is also present in young children with global developmental delay caused by intellectual disability and those with severe to profound hearing loss. Children with speech delays or hearing loss are usually able to compensate for their limited or lack of speech by the use of non verbal communication skills such as using gestures (e.g. pointing), eye contact and facial expression to get their message across. These children also respond to praise, can empathise, imitate and engage in make believe play. Children with developmental delay will also usually attain these skills when their developmental level passes about 12 months of age. However, the child with autism continues to have ongoing problems with delayed and disordered language, social communication skills, empathy and pretend play skills regardless of developmental level (Charman & Baird, 2002). These findings have implications for early screening and diagnosis in very young children.

- The diagnostic features of insistence on sameness, distress over change in routines, adherence to rituals and routines, abnormal comfort seeking and unusual attachment to objects that are typically present in older children are often not present in preschool children.

- The range of communication problems present in older children, such as impaired conversational skills and problems with speech production are not typically present in younger children who are yet to acquire speech.
• Assessment of very young children needs to take the absence of some autism symptoms into account. Some researchers have suggested that standard diagnostic criteria should be modified for children under two to take into account the presentation of autism in infants and preschoolers.

Early identification of autism is clearly important but is not an end in itself. How we respond to very young children with autism and their families is critical. Early identification is only useful if followed up by access to early intervention programmes, parent education and support and a range of health, education and welfare services for the child and his/her family.

What to look for in the first year of life:

- Lack of social smile
- Lack of appropriate facial expression
- Poor attention
- Aversion to being touched
- Not responsive to name
- Unusual looking at objects/patterns/movements

What additional things to look for in the two year old:

- Ignoring people
- Preference for aloneness
- Lack of or impaired eye contact
- Lack of gestures (e.g. pointing to objects)
- Lack of emotional expression
- Lack of age appropriate play with toys

References

