

# Findings raise concerns about path to autism early intervention

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A new [study](#) from researchers at Autism Speaks shows improvement towards universal early screening for autism. The report, published online today in the *Journal of the American Academy of Child and Adolescent Psychiatry*, also found that few approaches to early detection, such as screening during well-child visits, were evaluated to understand their impact on early diagnosis and access to services.

The study, which identified and examined 40 previously published studies on programs for [early detection](#) of ASD and 35 various approaches, found the need for a multipronged approach in assessing [children](#) for autism in order to increase early detection. These findings raise concerns about whether current methods are enough to reduce the average age of [autism diagnosis](#) and increase access to high-quality [early intervention](#). Early intervention is crucial for enhancing the development of communication, learning and social skills in children with autism.

"The good news is that we found universal screening for autism risk to be feasible and practical," says lead author Amy Daniels, Autism Speaks assistant director for public health research. "We also see that it seems to work best in the context of a toddler's well-child visits to a pediatrician or family doctor."

However, screening a child for autism is just the first step towards a full diagnostic evaluation and enrollment in early intervention services, Dr. Daniels notes. "We found a considerable lack of follow up on what happens to children who score at high risk for developing autism," she says.

Autism Speaks' researchers found that a limited amount of [early-screening](#) studies documented whether children assessed as being "at high risk" of having autism went on to receive a full diagnostic evaluation and appropriate services. As a result, more research is needed to determine

whether early screening reduced the time from diagnosis to early intervention. In addition, the few studies that did follow children who were screened at-risk for autism suggested that some were not receiving follow-up care. In some cases, children found to be at-risk for ASD were not being referred by their pediatrician to an autism specialist for a full evaluation.

"We need to know why," Dr. Daniels says. "Are pediatricians advising parents to take a wait-and-see approach? If so, that's a concern because the sooner children get treatment the better their outcomes."

Other potential barriers to early intervention include community shortages of specialists who can perform diagnostic evaluations and of appropriate therapy programs available.

"Early screening is an important first step," says Autism Speaks Chief Science Officer Rob Ring. "But without timely diagnostic follow through, this isn't enough to ensure that families are getting access to the quality intervention programs they want. Autism Speaks' researchers are working for families in this area by helping to understand the causes of these disconnects in order to avoid them in the future. At the same time, we are redoubling our awareness and advocacy efforts to build service capacity in communities, states and nationwide. Our government representatives and public health agencies need to work with us to meet – head on – the needs of families with recently diagnosed children."

While [autism](#) can be reliably identified in children as young as 24 months, the average age of diagnosis and early intervention remains stubbornly above 4 years of age in the United States. Autism Speaks is dedicated to improving access to quality early intervention services because research consistently shows that earlier intervention can greatly improve outcomes and quality of life across the lifespan.

Provided by Autism Speaks

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