Early Childhood Development and Autism

National Nurse-Led Care Consortium and the Joseph J. Peters Institute





Zoom Orientation

1 Captions

To adjust or remove captions, click the "Live Transcript" button at the bottom of your Zoom window and select "Hide Subtitle" or "Show Subtitle."

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Questions

Please add your questions for the speaker and comments for the group into the Q&A box.

Q&A

Technical Issues

Please message Zaharaa Davood in the chat.





Accreditation Statement

Accreditation Statement: The National Nurse-Led Care Consortium is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation. This session, *Early Childhood Development and Autism*, has been approved for 1.0 NCPD contact hour.

Success Completion Requirements: To obtain the 1.0 contact hour of nursing continuing professional development, you must attend the entire activity and complete the evaluation.

Please rename yourself on Zoom with the name you used to register for the training!



The National Nurse-Led Care Consortium (NNCC) is a nonprofit public health organization working to strengthen community health through quality, compassionate, and collaborative nurse-led care. NNCC's mission is to advance nurse-led healthcare through policy, consultation, and programs to reduce health disparities and meet people's primary care and wellness needs.

Joseph J. Peters Institute (JJPI) is a non-profit mental health organization that provides outpatient, trauma-informed services to survivors of trauma as well as individuals with histories of violence and abuse. JJPI's mission is to restore hope with dignity, we do that by providing compassionate personcentered evidence-based practice interventions that provide healing and mental health wellness. JJPI is one of the few providers on a national level that provides comprehensive trauma treatment that encompasses the entire cycle of abuse.

The Philly Supporting Parenting Relationships through Outreach, Understanding, and Training (Philly SPROUT) will support children and their caregivers participating in NNCC's home visiting programs, Nurse-Family Partnership (NFP) and Mabel Morris Family Home Visit Program (MM), through mental health services provided by JJPI mental health clinicians. The program will also enhance the capacity of Philadelphia-based child and family service providers through infant and early childhood mental health (IECMH) training and learning collaboratives.



Subject Matter Experts



Kathleen Ramsey, Ph.D.

Licensed Clinical Psychologist
CHOP Center for Autism Research and Division of Neurology



Jamiel Owens

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CHOP Center for Autism Research





Center for Autism Research

Early Childhood Development & Autism through a Trauma-Informed Lens

Kathleen Ramsey, Ph.D.



What is Autism?

- Neurodevelopmental condition: Impacts how the brain functions and alters neurological development
- Can be reliably diagnosed as early as 2-years-old, though traits and behaviors can be present earlier
- Presentation tends to change over time, but children do not "grow out of" autism

What is Autism?

A complex neurodevelopmental condition, defined by:

- 1. Differences in social communication and social interaction
- 2. Presence of restricted interests, repetitive behaviors and sensory processing differences

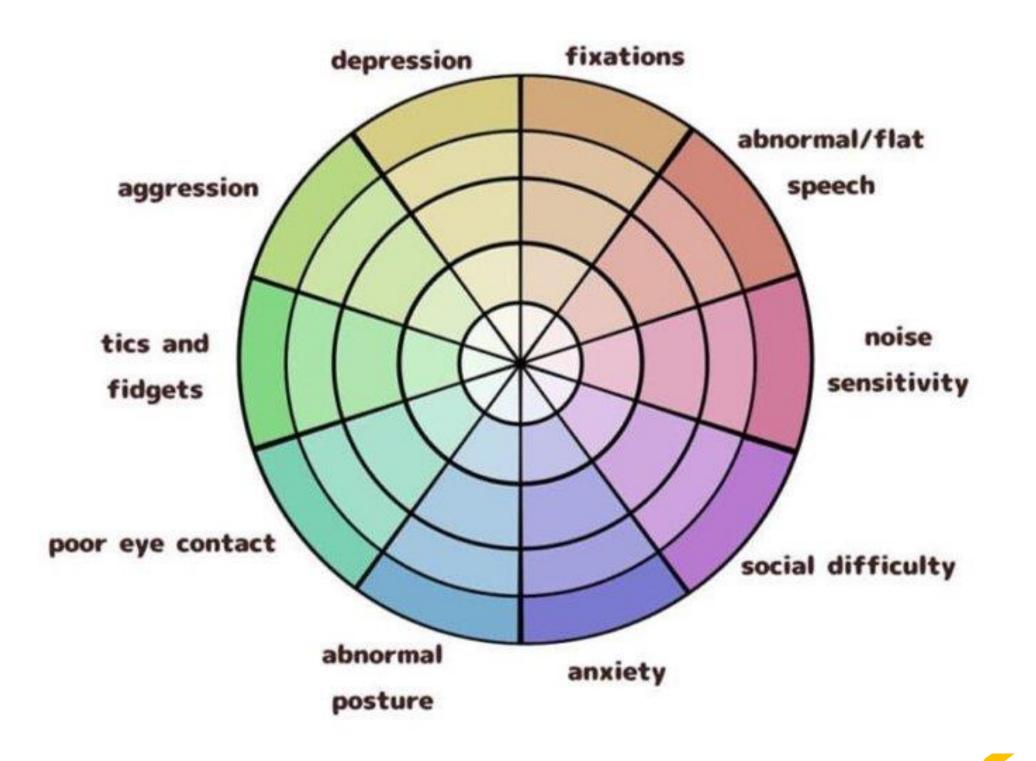
what people think the autism spectrum looks like:

What is Autism?

"less autistic" "more autistic"

what it can actually look like:

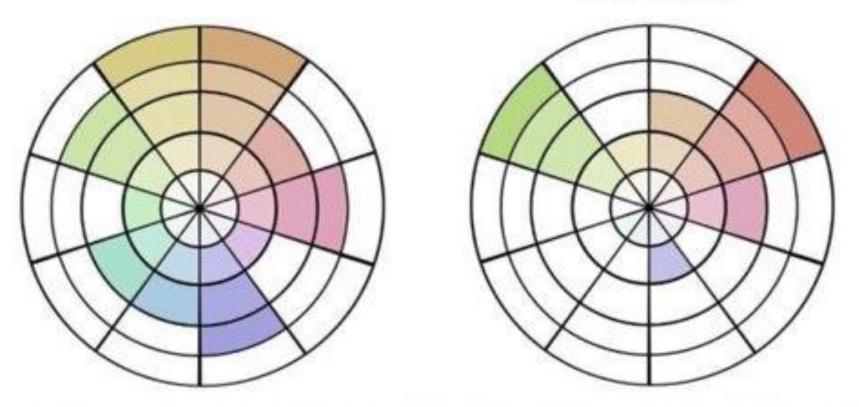
What is Autism?



What is Autism?

no two autistic people are exactly alike, but we shouldn't be reduced to "high functioning" and "low functioning" stereotypes, either.

my autism looks like this. my brother's probably looks like this.

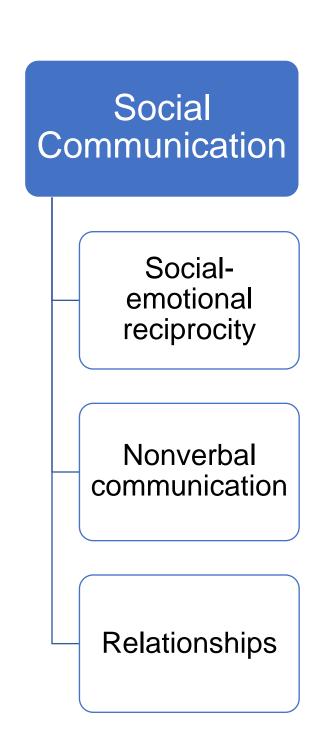


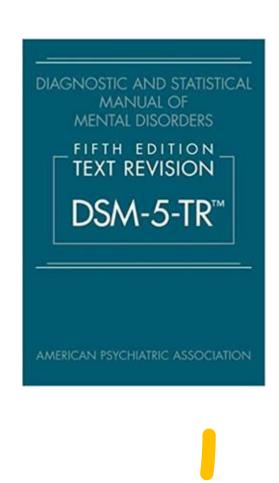
we have the same "amount" of autism, just different symptoms.

DSM-5 Diagnostic Criteria

Domain 1: Differences in Social Communication & Social Interaction

What is Autism?

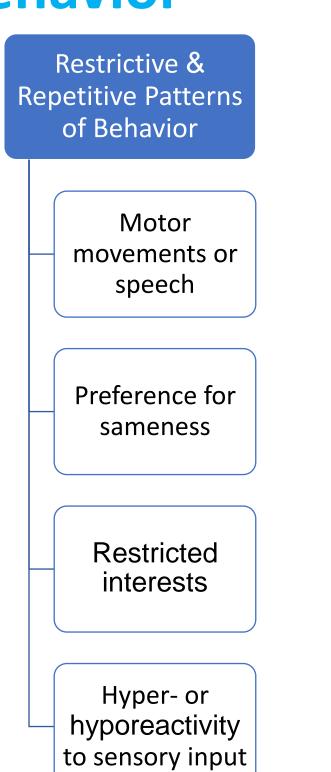


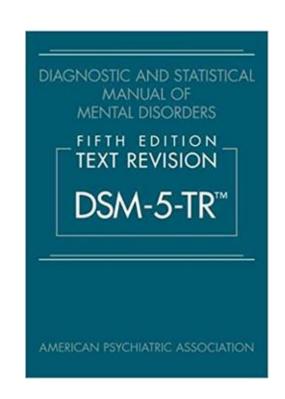


DSM-5 Diagnostic Criteria

Domain 2: Restricted, Repetitive Patterns of Behavior

What is Autism?





What causes Autism?

The exact causes are not fully understood! A combination of factors likely plays a role:

- Genetic (genetic mutations, variations, and syndromes; family history)
- Environmental (prenatal exposure to infections, medications, or toxins; birth complications)
- Neurological (differences in brain structure and function)

What doesn't cause Autism?

- Vaccines (see here for more info: <u>https://www.chop.edu/vaccine-education-center/vaccine-safety/vaccines-and-other-conditions/autism</u>)
- "Bad parenting" or different parenting styles
- Dietary factors (e.g., food dyes)
- Screen time

Can trauma exposure cause Autism?

Trauma does not cause autism, but it can complicate the diagnostic picture:

- Trauma has significant effects on child development and mental health, which can look like autism (e.g., social withdrawal, attachment issues)
- Neglect may result in a child having limited communication abilities
- Some self-stimulatory ("stimming") behaviors or need for predictability/routines may be seen in both
- Regression may be directly tied to traumatic event(s)

Can trauma exposure cause Autism?

Symptoms and behaviors associated with trauma may improve significantly with trauma-informed care and a stable, nurturing environment.

Autism is considered to be a lifelong condition, though it may change in terms of presentation and support needs over time!

Trauma + Autism

Many autistic self-advocates describe experiencing trauma related to being autistic in a neurotypical society that was not built for them.

- Misunderstanding due to social communication differences
- Social isolation and bullying
- Sensory overwhelm in everyday environments
- Lack of accommodations
- Stigma and negative stereotypes
- "Masking" autistic traits and autistic burnout
- Intersectionality





Early Signs of Autism 24-36 months

Repeating words or phrases over and over

Differences in play:

 Interest in parts of toys rather than the whole (door or wheels of toy car)

 Repetitive play (lining up toys, playing with toys the same way every time, dropping toys, spinning toys)

 Preference for playing alone or difficulty joining in play

Limited pretend/imaginative play

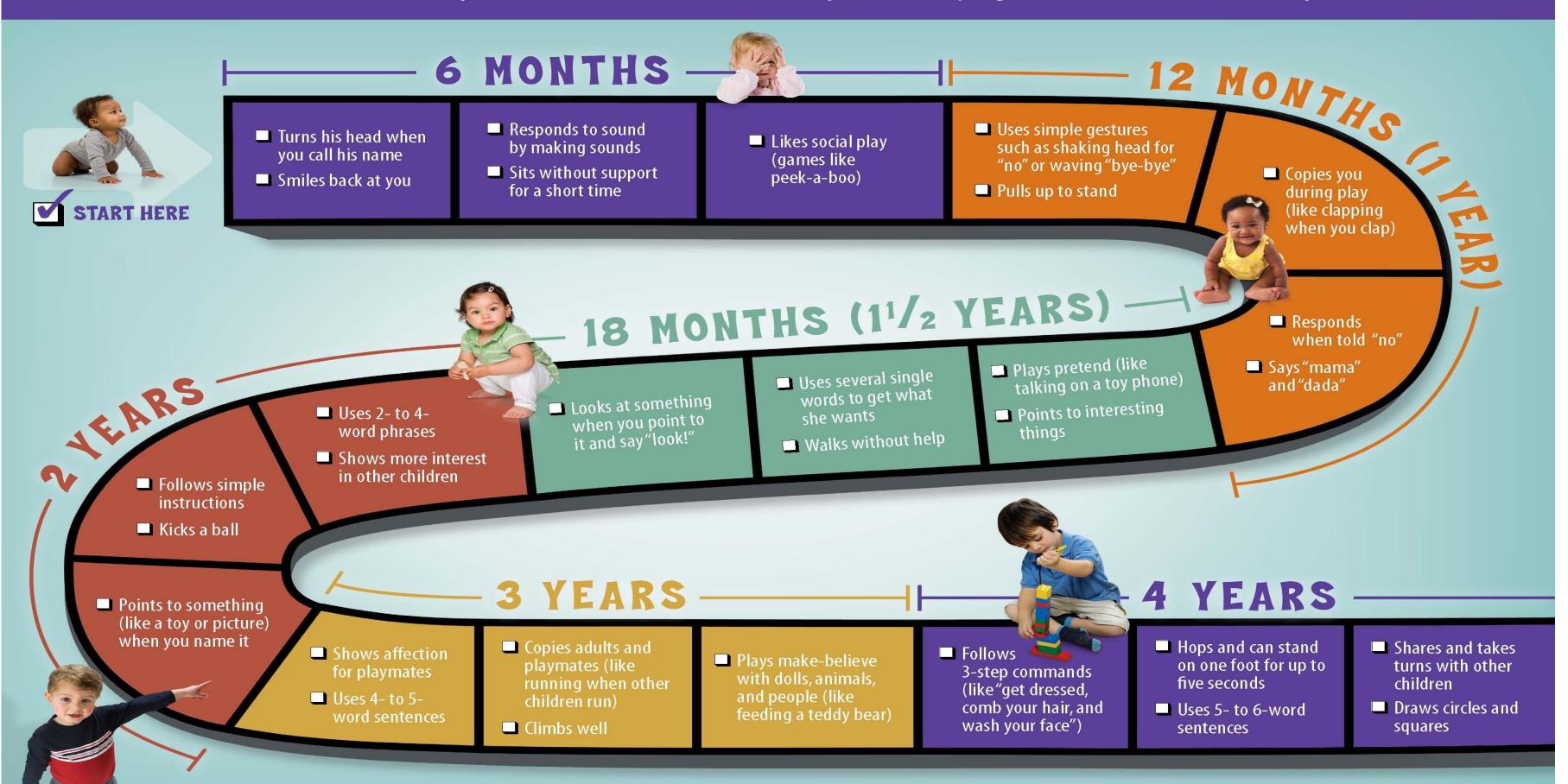


Developmental Milestones

- Physical or behavioral signs of development in infants and young children
 - Different for each age range
 - Building blocks of growth and learning
- Can include:
 - Cognitive development (thinking/problemsolving)
 - Language development (receptive & expressive)
 - Motor development (fine & gross)
 - Social-emotional development (interacting with others, understanding emotions, play)

Your Child's Early Development is a Journey

Check off the milestones your child has reached and share your child's progress with the doctor at every visit.



These are just a few of many important milestones to look for. For more complete checklists by age visit www.cdc.gov/ActEarly or call 1-800-CDC-INFO.

Developmental Delays

- Developmental delays Not gaining skills expected for age
- Associated with:
 - Genetic factors (e.g., Down syndrome, fragile X syndrome)
 - Environmental factors (e.g., low birthweight, preterm birth, parental age)
 - Underlying medical conditions (e.g., fetal alcohol spectrum disorders, autism)

Developmental Regression

- Loss of previously acquired developmental skills
- Tricky to measure:
 - Lack of consensus on definition or standardized tools to assess for regression
 - Retrospective reporting
 - Early delays prior to regression may go unnoticed by parents
 - Skill loss vs. plateau?

Developmental Regression in Autism

- Common Occurs in approximately 1/3 autistic children
 - Most have progressive decline in skills rather than abrupt
 - Part of autism onset
- Average age of regression = 24 months
- Unclear what causes skill loss, but research is examining genetics associated with regression
 - No link between regression or autism and vaccines

I'm noticing developmental differences or delays... now what?

- Talk to your child's pediatrician
 - The American Academy of Pediatrics (AAP) recommends that **all** children be screened for ASD at 18 and 24 months (usually with the Modified Checklist for Autism in Toddlers; M-CHAT-R)
- Contact your local Early Intervention (EI) agency (less than 3 years old) or school district/intermediate unit (ages 3+) to have your child evaluated
 - CONNECT Helpline: 1-800-692-7288

I'm noticing developmental differences or delays... now what?

• ECHO Autism at CHOP: While You Wait is an evidence-based virtual community that allows families of children awaiting an autism evaluation or access to developmental services to learn from a multidisciplinary group of autism and developmental experts about what they can do while they wait for that next appointment. For more information and to register, visit: https://paautism.org/event/echo-autism-chop-while-you-wait/

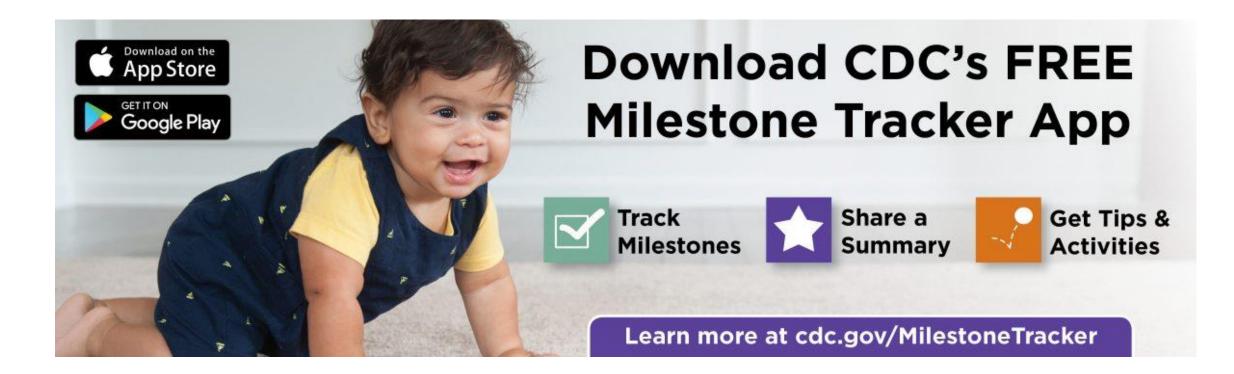
Past recordings of sessions can be viewed at:
 https://youtube.com/playlist?list=PLLqZpx2-ONuXCGIBzx 1 BkrRtj4LfuJ8

I'm suspecting developmental regression... what should I do?

- Notify your child's pediatrician or other provider (e.g., neurologist, geneticist, developmental pediatrician, psychologist)
- Provide concrete examples of skills or declining (e.g., videos)
- May prompt referral to specialist and further workup
 - MRI (brain differences)
 - Lumbar puncture (CNS disorders)
 - EEG (seizures/sleep disorders)
 - Genetic testing (genetic syndromes)

General Resources

- Centers for Disease Control and Prevention (CDC):
 - Learn the Signs. Act Early. https://www.cdc.gov/ncbddd/actearly/index.html
 - Milestone Tracker app (available on iOS and Android in English & Spanish)
- Autism Navigator https://autismnavigator.com/
- Vroom https://www.vroom.org/



The Parents corner.....

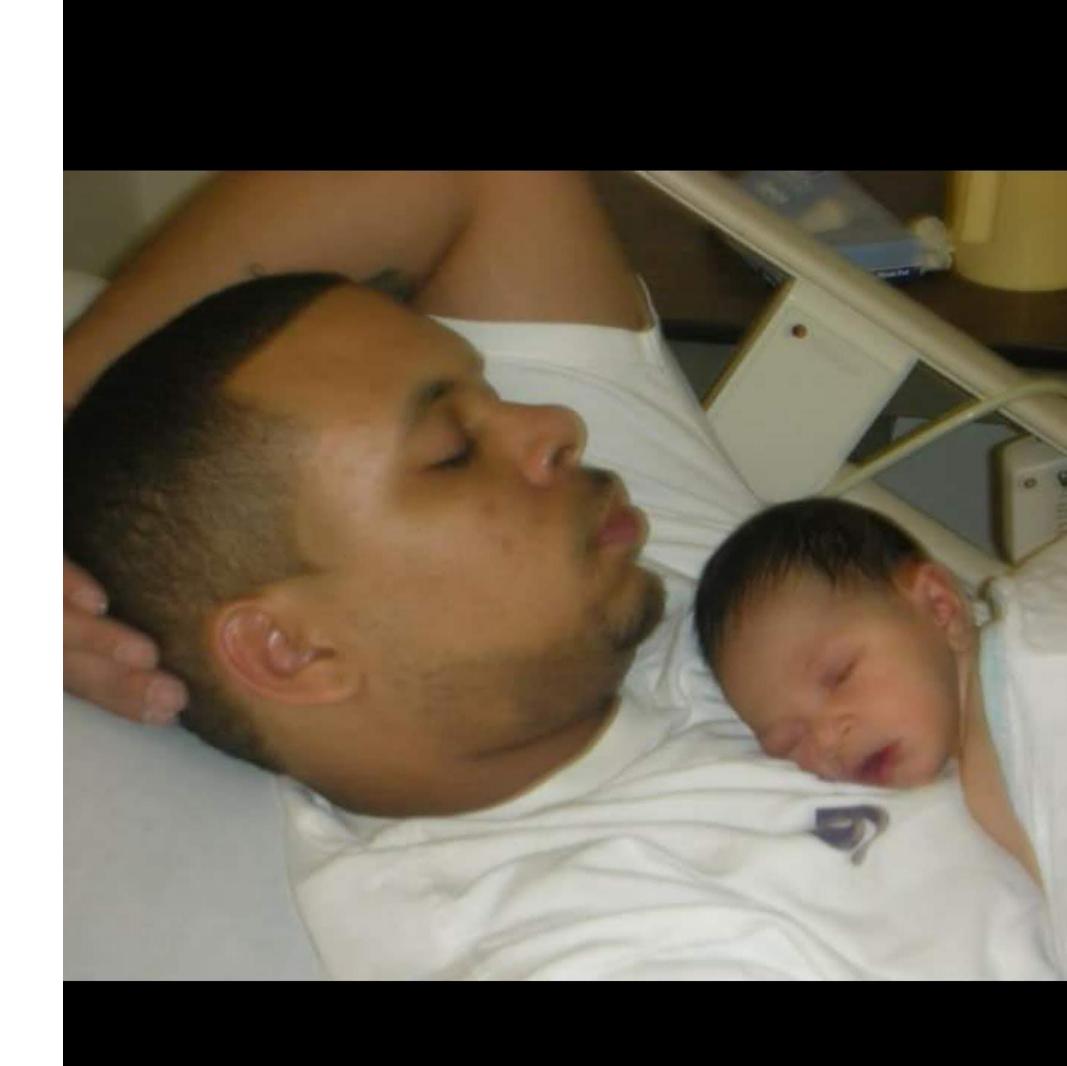
 How many people on here know a parent/are a parent to a loved one with Autism?



The Parents corner.....

The Parents Corner.....

- This is my first born, Shayne. Like many parents having a child for the first time, I was completely terrified about bringing a life in this world.
 - Past traumas
 - Unresolved anger/hate
 - The "Unknown"
 - No real training on how to raise a child



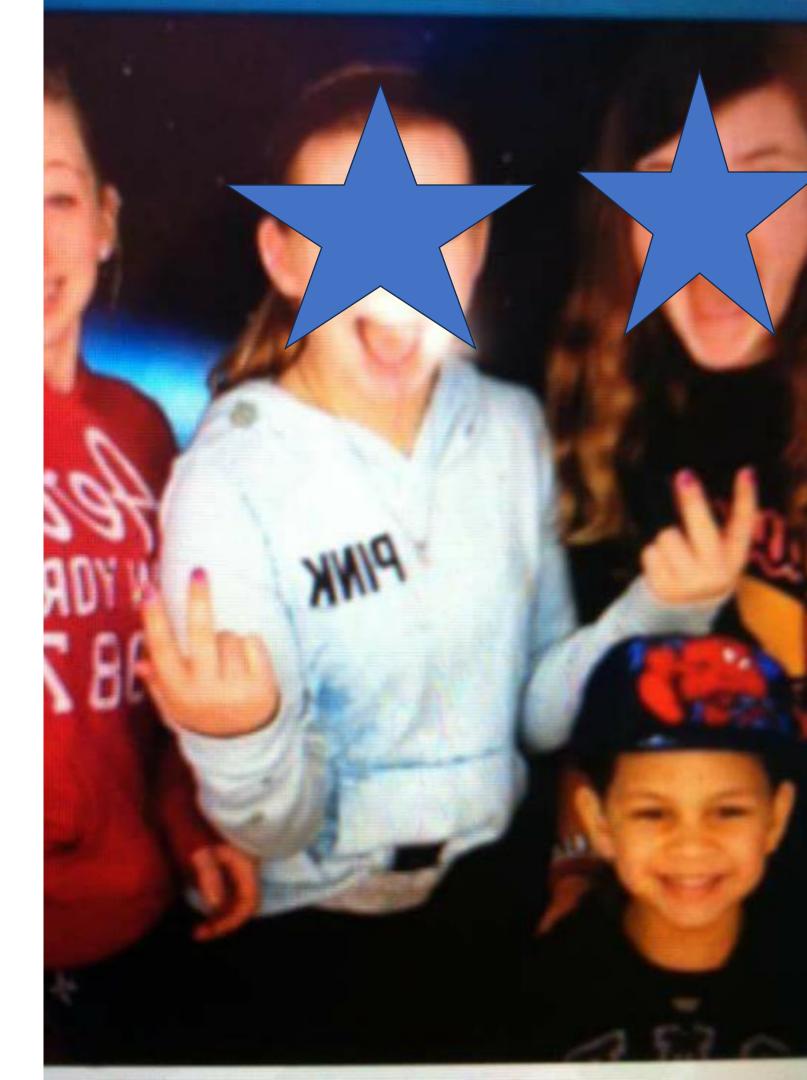


The Parents Corner.....

- The first years of Shayne's development was "normal" to the naked eye. I and his mother never considered that there was anything wrong developmentally, as we battled with things independent of him.
 - Shayne's actions in public places
 - Lack of verbal communication when wanting an item/something
 - Unusual eating habits

The Parents corner.....

- We "felt" that there was something different about Shayne. Though we also seen evidence of characteristics that were outside the scop of milestones to look out for, we did nothing but ignore it:
 - "He'll grow out of it."
 - "He's just being a boy."
 - "He just needs more discipline!"



The Parents corner....

- 2011, Shayne was diagnosed with "High-functioning Autism". I immediately took this as a personal attack on me as a man, a father, and a provider.
- Instead of speaking to my partner about her feelings, thoughts, and worries, I eternalized all of it to "I". Ultimately, separating myself from my family, and leaving them later that year for the next four years, trying to find that "restart" button on life.









- Early child development involves being "intentional" in every milestone of progression.
 - Time
 - Attention
 - Mental Health



<u>Impostor syndrome</u> in fatherhood involves feelings of inadequacy and self-doubt, often despite evidence of competence. New fathers may experience anxiety, feeling unsure of themselves and self-critical when facing challenges. These feelings can be exacerbated by social media and comparisons with other dads.

Symptoms and Characteristics:

- •Feeling Inadequate: Doubting your ability to support and raise your children effectively.
- •Self-Doubt: Worrying that you're not doing enough or others are judging your parenting skills.
- •Anxiety and Irritability: New fathers may experience anxiety and irritability.
- •Feeling Overwhelmed: Feeling like you can't handle the demands of fatherhood.
- •Perfectionism: Setting high expectations and feeling pressured to "get it right".
- •Social Comparison: Comparing themselves to other dads on social media and feeling inadequate.



<u>Imposter syndrome</u>, (we see it today!) the persistent feeling of not being good enough, can affect parents of autistic children, particularly in the context of parenting and navigating the challenges of autism. It can manifest as a feeling of inadequacy, a belief that one is "faking" it, or a fear of being exposed as an incompetent parent. Elaboration:

•Parenting Challenges:

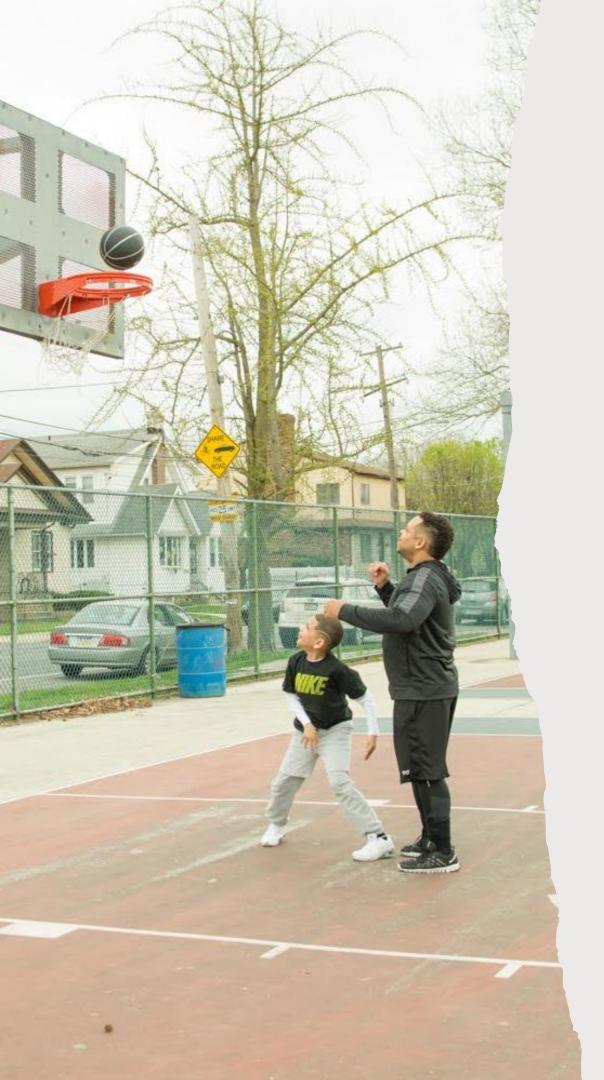
•The unique challenges of raising an autistic child, such as managing sensory sensitivities, understanding communication styles, and navigating educational and therapeutic interventions, can contribute to feelings of self-doubt and imposter syndrome.

•Social Comparison:

•Parents may compare themselves to other parents, especially those with neurotypical children, and feel inadequate or like they are not "doing it right".

•Lack of Support:

•If parents feel isolated, unsupported, or misunderstood by family and friends, they may be more prone to imposter syndrome.



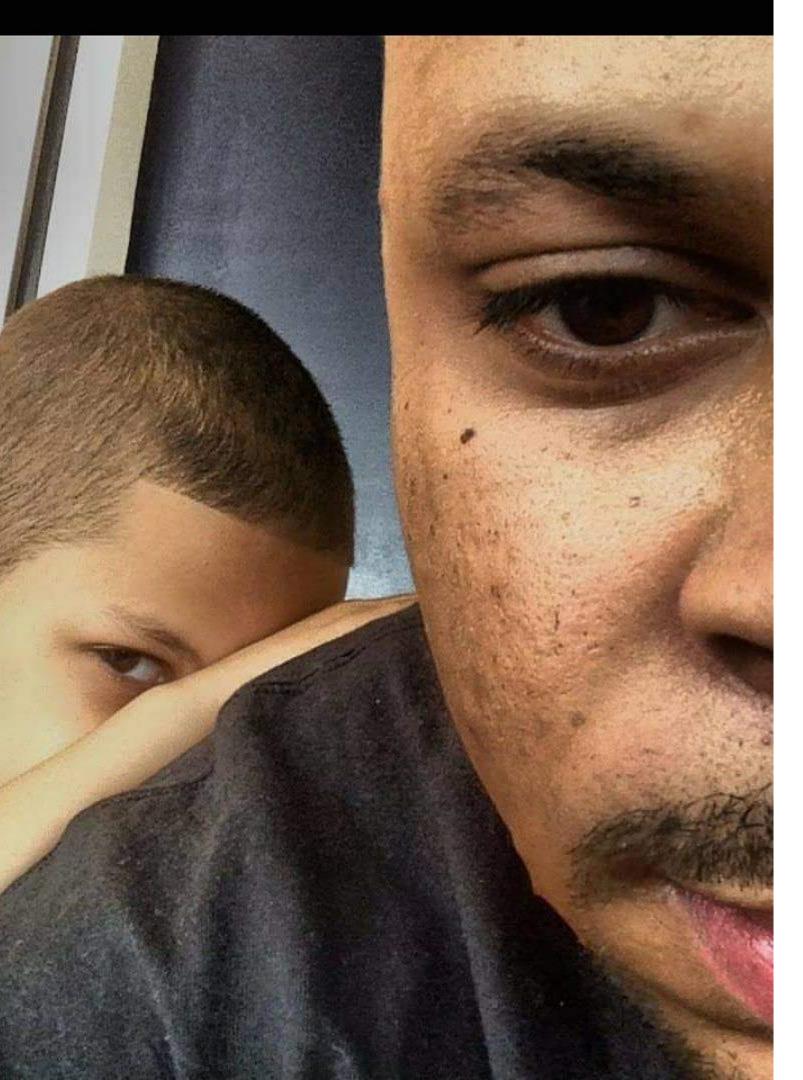
 I was able to discern the thoughts and actions of "Imposter Syndrome", by revisiting my early childhood as a special needs child myself, and a religious grounding.

This allowed me to begin the road of "repair", "advocacy", and to look at the world through the eyes of my son, Shayne.

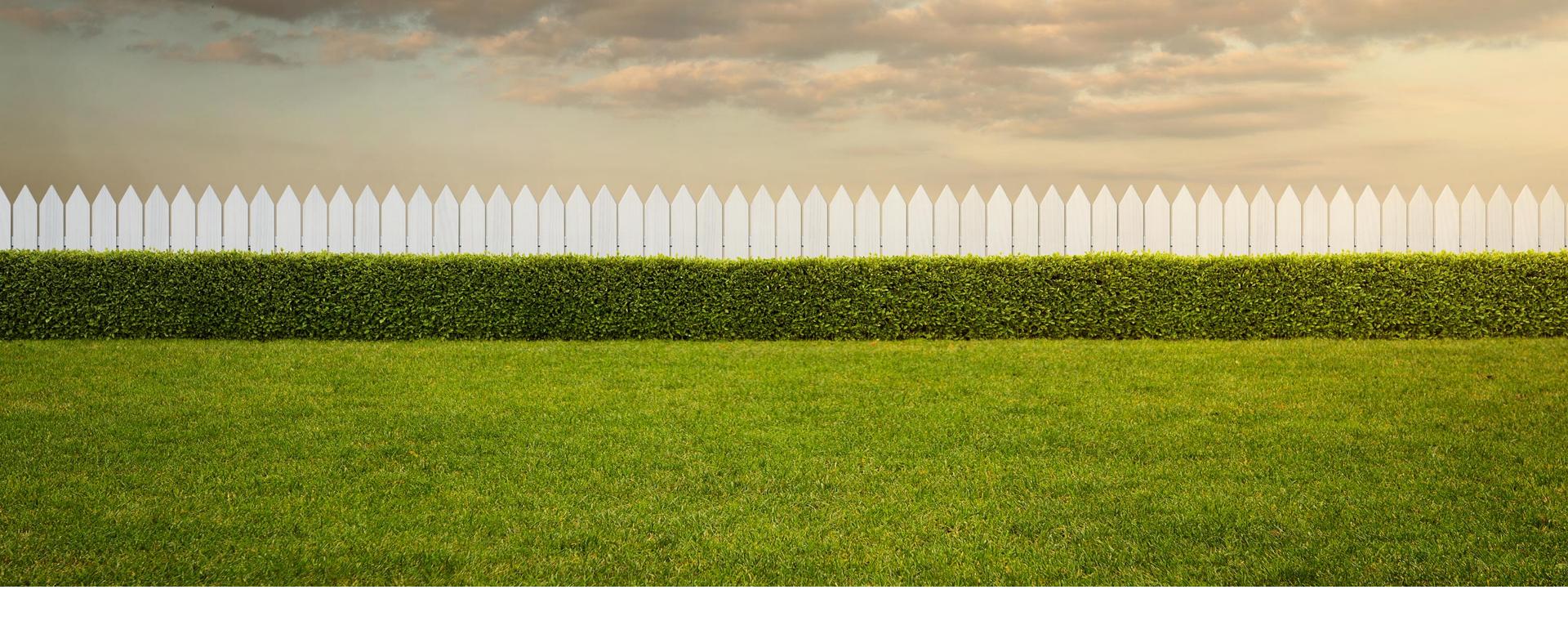


 I realized that accountability in parenthood looks different for everyone, but the basis is intentional discovery of your child (Neurodiverse/Neurotypical).





- Everyone has a story.
- Their journey must be respected and acknowledged.
- Often, there are no realistic goals after the diagnosis.
- Religious grounding is a must!
- This is a journey, not a "milestone" in developmental growth.
- Acknowledge and understand there are 3 levels of support needs in the Autism community.
- Community is rooted in love and education.
- 5 stages of grief (denial, anger, bargaining, depression, and eventually acceptance).
 - No clear-cut timeline to when a parent progresses to the next stage.
 - May not even know they are grieving ("Detective mode").



- Providers, professionals, Caregivers, remember your "Why".
- Parents, your journey is just that, your journey. Nothing is "perfect" or called to be perfect. It's meant to be an inspiration to you, those who directly benefit from it, and others you have yet to encounter.

K.I.T (Keep In Touch)

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https://www.research.chop.edu/car



Closing



Evaluation

- The evaluation link will be sent to attendees in a follow up email.
- If you are applying for the 1.0 NCPD contact hour, you must attest to attending the entire session and complete the evaluation.
- The evaluation will close EOD Tuesday, June 24, 2025.



Trainings

July 10

12:00 - 1:30 PM | How to Support Families in Crisis from a Trauma-Informed Lens

Presented by Sarah Leaman, Family Support Specialist and Chou Hallegra, Program Manager, Philadelphia Family Support Projects, Vision for Equality

July 30

12:00 - 1:30 PM | Holding and Healing: Practical Trauma-Informed Strategies for Young Children's Social-Emotional Development

Presented by Dr. Sandhyaa Iyengar, Attending Physician, Developmental and Behavioral Pediatrics, CHOP

The Philly SPROUT Project appreciates your continued engagement.

Continue learning with our upcoming trainings focused on IECMH. Scan the QR code for more details!



Upcoming Trainings & Learning Collaboratives



Contact Information



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