



## Indicators of autism

No two students with autism present in the same way. Autism is described as a spectrum, which means that individuals are likely to have different profiles of strengths and challenges in various areas of functioning. Because of this, a diagnosis of autism requires a doctor or allied health professional (such as speech pathologists, occupational therapists or psychologists) to undertake a series of assessments to determine if your child is autistic.

Not sure if your child is showing signs of autism? Here are some things to look out for.

### 1. Social and communication abilities

Autistic children might have different social and communication skills from other children, such as:

- using eye contact only for short periods, inconsistently, or not much at all (for example, when talking with you, they may look past your face)
- using gestures, sounds, drawing, behaviours or other means to communicate, instead of using speech or words (such as using another person's hand or body to indicate what they want)
- not drawing attention to things of interest by pointing and combining this with eye contact
- finding verbal explanations or instructions more difficult to remember, instead requiring visual aids to do everyday things (such as getting ready for school)
- having difficulty responding to their name, or not responding at all
- having some challenges in starting games with classmates or preferring to play alone
- not engaging in much 'back-and-forth' conversation with others, or not asking others about their day or about the things that they like
- taking non-literal language literally, or misunderstanding common sayings (such as 'it's raining cats and dogs')
- interacting more easily with adults, or children older or younger than them, rather than children their own age
- speaking more loudly or more quietly than expected, or seeming unaware of the volume of their voice.

### 2. Interests

Autistic children might focus on their areas of special interest. Parents might observe:

- the presence of intense and specific interests, which may or may not be a topic of interest for their peers
- passionate talk about their interests, without noticing that others may not be interested (meaning the child is not responding to social cues)
- a fascination with certain ideas or topics and a reluctance to turn their attention to others.



### 3. Repetition and routines

Repetitive behaviour and/or language might be observed in autistic children, such as:

- arranging things in very specific ways or order (such as lining up toys or grouping similar things together)
- repetitive body movements, like body-rocking, hand flapping, spinning around or walking in circles
- repetitive noises like squealing or throat-clearing
- echolalia (repetition of words spoken by someone else, either straight away or phrases that have been memorised from books or TV)
- echopraxia (repetition of others' actions, out of context, such as scratching their head when you do).

Routines might also be observed in autistic children, in ways such as:

- feeling challenged by changes to routine
- feeling anxious about changing routines and uncertainty of flow-on effects
- needing things done the 'right' way, with any change to the expected routine causing distress
- ongoing and persistent distress upon separation
- feeling challenged by moving from one task to the next.

### 4. Sensory processing

Most autistic children process and respond to sensory input differently from their neurotypical peers. They may be over- or under-responsive, depending on their individual sensory processing style, the amount of sensory stimuli in the environment or other reasons, such as issues with sleep or illness.

Sensory processing differences can be observed as:

- heightened sensitivities to noise, sound or touch, such as having strong reactions to loud noises, having their nails cut, having their hair washed or cut, brushing their teeth, or bright/harsh lighting
- being distressed or seeming distracted in busy environments (such as shopping centres)
- difficulties in maintaining attention
- sensitivity to food smells, look or textures
- difficulty knowing when they're hungry or thirsty, in pain, or need to go to the toilet
- seeking out sensory input from the environment by moving a lot, touching things or making noises.

When an autistic child has their sensory needs met, it can help them to self-regulate, be comfortable and feel safe and secure, which can help them engage with school. If a child is overwhelmed by sensory input, it can cause sensory overload (sometimes referred to as a 'meltdown'). Sensory overload can also occur because of unexpected sensory input, or an accumulation of sensory input throughout the day. This can lead to feelings of emotional 'overload' and distress. Sensory overload can impact speech, impulse control, emotional regulation and thinking and learning. These skills can be 'shut off' when a child is overloaded. For example, a child who uses spoken language can become nonspeaking during these times.

If a child is not supported to regulate their senses or is unable to escape distressing sensory input, a sensory meltdown can occur, which might involve behaviours such as aggression or self-injury. To reduce the chances of sensory meltdown, it is important to try to notice when your child might be experiencing sensory overload, why this could be happening, and what you can do to help regulate your child, such as reducing or removing the sensory input, or co-regulating with them by sitting with them or giving a big squeeze hug.

## 5. Stimming

Many autistic people use stimming (such as moving, rocking, making sounds or fidgeting) as a form of sensory seeking, to keep their sensory systems in balance. This can help autistic children stay calm, relieve stress or block out uncomfortable sensory input.

Trying to stop children from stimming makes it more difficult for them to self-regulate. This can lead to sensory overload, resulting in exhaustion, shutdowns or meltdowns. It is therefore important to allow children to access things or engage in movements that help them to regulate.

If stimming or sensory seeking behaviours could be seen as disruptive in a classroom environment, engage in a dialogue with your child's teacher about how your child's needs can be accommodated in a way that decreases disruption to the class (such as fidget toys that do not make much sound, having a dedicated space where your child can move about but still be able to hear what the teacher is saying, or allowing breaks).

## 6. Motor differences

Autistic children can have hypermobility in their joints, and differences in their muscle tone (the way that their muscles work). As a result, autistic children may:

- have trouble sitting upright or sitting still on the floor
- get tired more quickly and complain of being tired when walking
- use more fingers than their peers when holding a pencil to help control it
- find it hard to develop skills such as doing up buttons and zippers, using cutlery and opening their lunch box
- fall over or bump into objects
- struggle to learn ball skills and bike riding.



Resources for families: <https://studentwellbeinghub.edu.au/parents/starting-school>