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Mr Bob Buckley  
27 Fairbridge Crescent  
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Dear Mr Buckley

**Re: Early Intervention for Autism**

In reply to your letter of 30 March 2006 and on behalf of The Hon Mike Rann MP Premier and The Hon Jay Weatherill MP Minister for Disability, I wish to thank you for your well researched and considered comments on services for children with autism spectrum disorder (ASD).

The issue of early intervention for children with ASD is a key priority for the re-elected Labor Government of South Australia, with a commitment that

*“early and ongoing support to children with autism spectrum disorders and their families is an investment in the future.”*

Following the National Autism Forum in Canberra June 2005, there was a call for suggested actions where formal responsibility for ASD related issues could rest with the Commonwealth Department of Health and Ageing. The primary points noted are;

- People with ASD receive the clinical treatment they require and particularly that children receive effective early intervention upon ASD diagnosis.
- People with dual diagnosis of ASD and recognised mental health conditions receive effective treatment meeting their complex needs; and
- Adults who are severely or profoundly disabled by their autism/ASD have their health thoroughly and regularly reviewed.

Source: Executive Summary National Autism Forum Canberra June 2005

With regard to issues specific to South Australia, the following responses have been provided to your questions.

- 1 Autism SA maintains a database of all individuals diagnosed and accepting an offer of services. Data presented in the Autism SA Annual Report (04-05) certainly supports a rise in numbers. The CEO report in the Autism SA Annual Report 04-05 indicated that “Last year’s annual report indicated that 1877 people were registered for services with Autism SA. This year, this figure has grown to 2237 representing an increase of 360 clients or nearly 20%”.

2. There is difficulty in determining an accurate prevalence figure. There is currently prevalence data being collected in Australia by Dr John Wray (from WA) as part of a research grant administered by the Autism Council of Australia. This will give an indication of prevalence rates within an Australian context but there are noticeable difficulties in obtaining accurate data. The current figures cited and mainly based on overseas studies but certainly are in the 0.6% of the population range.
3. Autism Spectrum Disorder can be severe and disabling – not only for the child / adult but also for the family. However, people with higher functioning forms of the disorder and Asperger syndrome can lead effective and productive lives with the appropriate support.
4. There is not a separate or distinct disability recognition for Autism Spectrum Disorders in South Australia. Intellectual Disability Services Council (IDSC) have case management responsibility, Autism SA provide direct programs and interventions. There is separate reporting of autism through the Commonwealth State Territory Disability Agreement and outcomes measures are defined in service activity agreements with Autism SA.
5. Autism SA and Flinders University have recently signed an MOU that will focus, in part, on joint research aimed at comparing different models of intervention and outcomes for individuals.
6. There is certainly evidence that suggests early intervention leads to better outcomes and The State Government is committed to a significant investment in early intervention for autism. Current programs include, the Flinders University Early Intervention Program, the Autism SA Early Development Program and IDSCs Early Childhood Services.
7. The Government funds the Flinders University Early Intervention Program which operates on the principles of Applied Behaviour Analysis. It is a free service and, as a research program, has a rigid assessment and measurement protocol. The Government also fund the Autism SA Early Development Program and IDSC Early Childhood Services. There is no standardized reporting framework.
8.
  - a) Autism SA provides up to 6 hours of intervention per week in a group program for individuals for 12 months. The Flinders University Early Intervention research program provides up to 20 hours per week for the first two weeks of intervention and reduces significantly after that.
  - b) See above
  - c) The best practice concept is difficult in the autism area. There are a number of interventions and therapies all proposing to assist with autism. The Autism SA website is a useful resource for follow-up. (<http://www.autismsa.org.au/html/strategies/interventions.html>). What is widely accepted is that it is not a one size fits all. A variety of approaches tailored to individual needs and circumstances often determine the best practice intervention. Your letter suggests that psycho-behavioural intervention is the preferred option. It certainly has the best research evidence and that evidence suggests that intensive support (around 20 hours) in the early years is critical.

- d) Autism SA currently has an application lodged with Community Benefit Grants to establish an "Early Intervention Coalition for Autism" that will focus on bringing researchers, service providers and health care professionals together to establish an effective network that can establish agreed standards and best practice for service delivery.
9. Aside from the Flinders University Early Intervention Program, much of the intensive support is provided by private providers at a significant cost. This certainly creates access issues for a large number of families. However, there are no free services that provide the level of intensity that experts suggest is required.
10. There is an ongoing frustration with generic disability services because of the lack of understanding of autism and Asperger syndrome. Further international research into this issue would add value to this ongoing debate.
11. The State Government is committed to individualised planning for people with a disability. As before, it is not a one-size fits all or one approach that benefits all children with autism. However, the availability of a variety of approaches helps everyone. There needs to be a whole of Government approach as autism covers a range of portfolios such as health, disability and education, and it is clear that each area has a role to play.

In response to the increasing need for early intervention services, Autism SA has received an additional \$180,000 once-off funding in July 2005 to increase the number of diagnostic assessments to clear the existing waiting list. The March 2006 update from Autism SA states "Autism SA has increased its capacity in the delivery of diagnostic assessments from 6 per fortnight to between 12 – 15 assessments per fortnight."

Other initiatives which have been funded by the Office for Disability and Client Services were a further \$100,000 for family support post diagnosis which has been utilised to employ Information Officers to facilitate access to supports and services immediately after diagnosis. \$34,000 was made available to establish the Autism Info Line which was first activated in November 2005 and there remains recurrent funding for respite services.

Thank you again for your continued advocacy for people with Autism Spectrum Disorder and I trust this information informs your work with these important issues.

Yours sincerely



Sue Vardon  
CHIEF EXECUTIVE 23.5.06