

How to support a child with autism in hospital

What is autism?

The Association for Autism in South Africa (www.autismassociation.org) defines autism as “a *neuro-developmental disorder that affects the processing of information in the brain. It is a complex condition that affects an individual on neurological, psychological and physical levels, and is classed as a Pervasive Developmental Disorder. The term Autism Spectrum refers to 5 identified disorders:*



- *Kanner (or classic) Autism*
- *Asperger’s Syndrome/Disorder*
- *PDD-NOS (Pervasive Developmental Disorder Not Otherwise Specified)*
- *Rett’s Syndrome*
- *Childhood Disintegrative Disorder”*

For more information on autism, refer to the following sites:

www.autismassociation.org

www.autismsouthafrica.org/

Children on the autism spectrum experience challenges in the following areas:

- Their language development and communication abilities can be impaired or even absent. They usually don’t make eye contact and are unable to interpret emotions and facial expressions.
- They lack the ability to relate to others, are perceived to be unaffectionate and often present with abnormal or inappropriate social behaviour
- It is difficult for them to see the world from the perspective of other people and to comprehend and understand changes in the environment.
- They have an unusual perception of sensory input which could either be hypersensitive (even the slightest sensory input are experienced as “too much”) or hypo-sensitive (they have to experience intensified input in order to register it).

Important aspects when a child on the autism spectrum is admitted to hospital

- It is vital to include **parents or caregivers** (hereafter only referred to as “parents”) so that they can assist in the care of these children. Every child has individual needs and reacts differently to certain stimuli and it is therefore important to get a thorough history from the parents so that the care can be adjusted according to the needs of a specific child. Specific attention should be given to the following:

- ✓ Any change can be very threatening for these children. Try and keep the routine the same as when at home and allow the child to have things on his/her own terms as far as possible.
 - ✓ Encourage parents to bring the child's favourite objects from home – it might help to present the child with these objects when he/she becomes upset, rather than trying to calm the child with comforting words or touch.
 - ✓ Items such as the child's own blanket, duvet cover, pillow and items that are usually on the nightstand next to the child's bed can help to make the child feel more secure in his hospital bed.
 - ✓ A child might dislike certain textures and it is important to clarify this with the parents so that they can bring the child's own bed linen and towels if necessary.
- Incorporate **music** wherever possible
 - ✓ These children usually enjoy listening to and making music. However, it is again very important to clarify this with the parents.
 - ✓ Playing soft music or any other music of the child's preference in the room might help with relaxation and making the child feel comfortable.
 - ✓ Music therapy might be a great benefit.
 - Admit the child in a **private room** as far as possible
 - ✓ It is very important to care for these children in a quiet environment with as little noise as possible. Soft music might help, but again it is important to check this with the parents and to find out what kind of music would be the best for a specific child.
 - ✓ The noise and presence of other children in the ward can easily lead to overstimulation which in turn could result in panic attacks and/or temper tantrums.
 - ✓ Children on the autism spectrum are often hypo-sensitive to sensory input and need to engage in sensory-seeking activities. This can at times be disturbing for the other children in the room, such as hand flapping, head banging and even biting of own hand.
 - ✓ These children might also have abnormal sleeping patterns that can keep the other children in the room awake.
 - ✓ If a private room is not available, discuss with the parents the option of ear plugs and/or earphones with music.
 - **Investigations** and **procedures** can be very threatening. It is difficult for these children to understand what is happening and they often have a heightened touch sensation (i.e. the slightest touch can feel like a burning sensation) which can make any physical contact traumatic.
 - ✓ Avoid restraining the child - rather use distraction and keep the child in an upright position as far as possible. Remember to ask the parents what will distract the child - what is distracting for one child might trigger a panic attack in the next.

- ✓ Keep any noise to a minimum - have as few people as possible in the room and assign only one person to speak to the child.
 - ✓ Certain smells can be intensified and overpowering to the child. Alcohol-based disinfectants usually have a very strong smell. Rather use an alternative disinfectant without alcohol if available. If staff members use disinfecting spray for the hands, apply this outside the room if possible.
 - ✓ Find out if bright lights will bother the child and suggest sunglasses if the child will accept it.
 - ✓ Give the child his/her favourite object for comfort afterwards instead of trying to comfort the child with physical touch.
 - ✓ Clarify the child's feelings afterwards and reassure the child by saying something like: "You are upset because we drew blood. You will feel better now."
- **Mealtimes** may be a challenge as these children are usually very sensitive towards different food textures and temperatures and might prefer certain eating utensils.
 - ✓ Gain all necessary information from the parents in order to accommodate the child.
 - ✓ Remember that certain obsessions with regards to food are common, such as that the different food portions must not touch each other on the plate or that food portions must be a specific size.
- **Communicating** with a child on the autism spectrum can be very difficult. Remember that even though a child is not capable of speaking, it does not mean that they cannot understand what you are saying.
 - ✓ Keep spoken language to a minimum.
 - ✓ Use simple, clear language in short sentences, concentrating on one concept that you want to communicate at a time.
 - ✓ Use photos of the actual equipment and hospital environment to prepare the child and to explain what is going to happen. It is usually very difficult for these children to carry one concept over to another and they would therefore find it difficult to apply a picture in a storybook to the real life situation.
 - ✓ It might be easier for a child to listen to you if he/she can walk around or make repetitive movements while you are talking.
- **Waiting times** - these children need structure and if they have to wait and don't have a clear understanding of what is happening, it can also lead to confusion and even a panic attack.
 - ✓ Make sure that the child has something to keep him/her occupied. Ask the parents about the child's favourite objects and make sure these are available to him/her.
 - ✓ Make use of a watch or timer if the child can understand time so that he/she knows how long the waiting time will be. If a child cannot

understand this concept, try and put some pictures on the wall and remove them one by one and explain to the child what will happen once all the pictures are gone.

- **Other** tips and information
 - ✓ Make sure that there is a soft light in the room during the night as it is difficult for these children to orientate themselves in the dark.
 - ✓ Weighted blankets can sometimes be used to help a child who is hypo-sensitive to touch to feel secure.