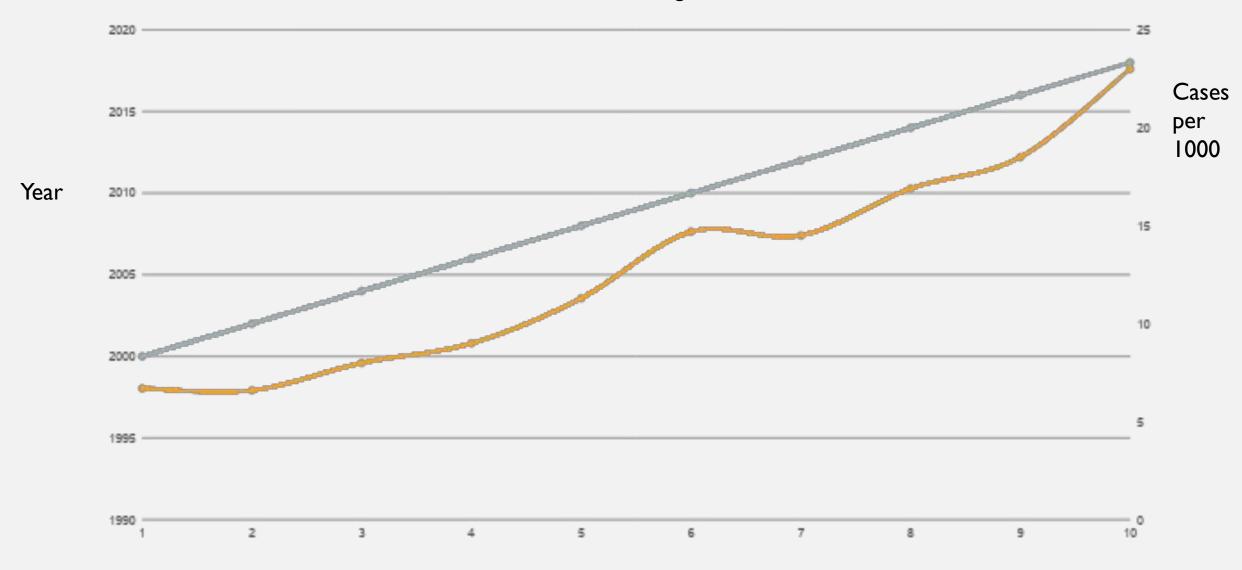






## Prevalence of autism in school age children



- 1966 Lotter reported 0.45 per 1000 (0.48 Camberwell survey)
- 1970 Presentation to National Autistic Society by Hans Asperger on Autistic Psychopathy
- 1967 Wing and Gould 0.48 per 1000
- 1980 Tantam awarded MRC Fellowship to study Asperger syndrome (supervised Uta Frith)
- 1980 clinic for adults suspected of autism
- 1980 DSM 'Pervsive developmental disorders' DSM-IIIR Adopts Wing and Gould's triad of impairments and Spitzer condition of social impairment
- 1981 Wing on Asperger syndrome
- 1981 Tantam at American Psychiatric Association, 'Should Asperger syndrome be in DSM-IV?
- 1988 Tantam invited paper in JCPP
- 1999 Fombonne 0.7 per 1000 autism prevalence
- 1994 DSM-IV included Asperger disorder

## EFFECTS OF WIDENING CRITERIA

- Taking in a much wider group:
  - Less severely affected child
  - Adults
  - People with normal intelligence
  - People who wished for a diagnosis but who were less disabled

#### Community prevalence of anxiety disorders up to 33.7%

# INCREASED AWARENESS OF MENTAL HEALTH ISSUES—IN AUTISM TOO

- 2022 meta-analysis of anxiety in autism in children 11.1%.
- Community prevalence of anxiety disorders up to 33.7%
- Anxiety in autistic adults estimate in Autism Spectrum Disorder through the Life Span 39.4 %
- Anxiety increases in adulthood
- Underrecognized

## INCREASED AWARENESS OF MENTAL HEALTH ISSUES—BUT LAGGING BEHIND IN AUTISM

- Some may be preventable by preventing bullying
- Makes symptoms of ASD manifest
- Also creates possibility of recovery

## WHAT I NOTICE IN MY PRACTICE:

- Consistently high levels of anxiety with very low variance from session to session compared to NT clients
- Very little time away from the background noise of anxiety causes frequent burnouts and shut down
- This leads to a feeling of inadequacy which easily spirals
- Often a sense that the goal is to 'overcome' the anxiety and that this would be seen as being 'functional'
- Sometimes the anxiety can become the special interest

## COMMON SOURCES OF ANXIETY

#### External

- Bullying/harassment
- Isolation/Minority Stress
- Social Pressures
- Sensory Issues
- Change
- Managing tasks/responsibilities esp. in relation to executive function

## COMMON SOURCES OF ANXIETY

#### Internal:

- Grappling with the absurdity of life
- No inherent sense of meaning or a shifting sense of meaning
- The tension between trying to belong and individuating
- Acute awareness of finiteness
- Awareness of the complexity of self and a desire for this to be simplified
- Awareness of the vastness of choice and freedom

## **ANXIETY AND AUTISM**

- Autism may not be life-long
- More or less manifest according to anxiety leading to particular crisis periods: aet 7, early adolescence, late 30s

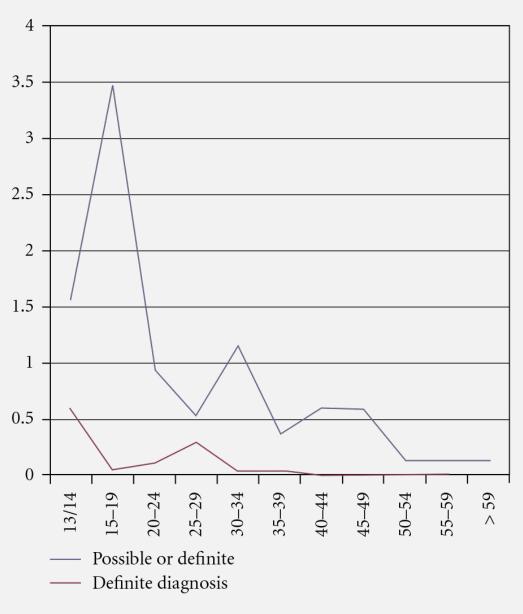


Figure 1: Age-related prevalence of HFPDD in males per 1000 population of the city of Sheffield in that age group.

## **AUTISM IS NOT AN ILLNESS**

 Being autistic does not mean you have an illness or disease. It means your brain works in a different way from other people. It's something you're born with or first appears when you're very young...Autism is not a medical condition with treatments or a "cure". But some people need support to help them with certain things."

https://www.nhs.uk/conditions/autism/what-is-autism/#:~:text=Autism%20is%20not%20an%20illness,re%20autistic%20your%20whole%20life

## WHAT IS NEEDED?

- Not just about standard anxiety mitigation or working with the external triggers
- Affirmative care which recognises the inherent intelligibility in autistic anxiety
- Philosophically informed support
- Safe Spaces for respite from anxiety