Assessment of Health Care Services Provided in the Autism Centre

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Abstract: Introduction / Background: in Saudi Arabia nearly two hundred and fifty thousand autistic children, eight thousand saudi autistic child receiving treatment abroad. Health services provided to autistic child is very helpful for detection and treatment early.

Objectives:
1. Description the provided health services to autistic children in Qassim.
2. Assessment of Health services provided to Autistic children in Qassim.

Methodology
Method: Observational
Subject: Parent of autistic child.
Place : society for development and human study services on Qassim.
Samples :36patient and the provided health services 

Result:
• 50% of community is health educated about autism.
• 50% of patient's family are health educated about how to deal with their autistic child.
• 55.6% say that , there is a specialized medical staff in center, but 55.6% say no sufficient number.
• 66.7% there is no regular check up of autistic patients.
• 61.1% the psychiatric department is present there.
• 38.9% agreed that facility were suitable for their needs are considered good, 66.7 % agreed that the safety equipment’s are available.

Conclusions: 1- Improve the health education to patients family about how to deal with their autistic child .
2- Make Schedule regular check up for autistic patients.
3- Raise the level of service To meet the needs of the patients
4- There should be a be financial aid Provided by Government to help the parents to the financial cost to treat their children.

Keywords: Health services, autistic child, detection and treatment early.

1. INTRODUCTION

"Definition and Prevalence of Autism":

Autism spectrum disorders:are disorders of communication, social relatedness, and self-regulation. What may underlie autism spectrum disorders are atypical central nervous systems. The autism spectrum disorders (ASD) are more common in the pediatric population than are some better known disorders such as diabetes, spinal bifida, or Down syndrome. ASD have a certain set of behaviors that can range from the very mild to the severe. In autism, the brain also seems unable to balance the senses appropriately. Some children with autism seem oblivious to extreme cold or pain, but react hysterically to things that wouldn't bother other children. A child with autism may break her arm in a fall and never cry. Another child might bash his head on the wall without a wince. On the other hand, a light touch may make the child scream with alarm.All children with ASD demonstrate deficits in 1) social interaction, 2) verbal and nonverbal communication, and 3) repetitive behaviors or interests.
In addition, they will often have unusual responses to sensory experiences, such as certain sounds or the way objects look. Children with ASD do not follow the typical patterns of child development. In some children, hints of future problems may be apparent from birth. In most cases, the problems in communication and social skills become more noticeable as the child lags further behind other children the same age. Some other children start off well enough. It is clear that autistic spectrum disorders have effects on development in ways that affect children’s educational goals and the appropriate strategies to reach them.

Parents and caregivers are looking for ways to help their children get through the day and to help them enjoy life to the fullest. Parents and caregivers know that home life is not typical when you have a child with an autism spectrum disorder. A child with an autism spectrum disorder also requires modifications to the physical environment to allow him or her to make sense of their world. Parents and caregivers benefit from understanding that autism spectrum disorders often affects the child’s physiology (1).

**Causes of Autism:**

Autism is a neurological disorder, not the fault of bad parenting or neglect. While most experts believe that it is a genetic disorder, some claim it is caused or triggered by certain head trauma, exposure to heavy metals (as mercury–laden vaccines), food allergies or environmental pollution. Autism may have different causes and there is no consensus on this yet (2).

### 2. THE PREVALENCE

In Saudi Arabia (LOCAL): That percentage is not yet known, but some research suggests that in Saudi Arabia nearly two hundred and fifty thousand autistic child (3). Eight thousand Saudi autistic child receiving treatment abroad (4).

**Global (5a):**

<table>
<thead>
<tr>
<th>Surveillance Year</th>
<th>Birth Year</th>
<th>Number of ADDM Sites Reporting</th>
<th>Prevalence per 1,000 Children (Range)</th>
<th>This is about 1 in X children...</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>1992</td>
<td>6</td>
<td>6.7 (4.5–9.9)</td>
<td>1 in 150</td>
</tr>
<tr>
<td>2002</td>
<td>1994</td>
<td>14</td>
<td>6.6 (3.3–10.6)</td>
<td>1 in 150</td>
</tr>
<tr>
<td>2004</td>
<td>1996</td>
<td>8</td>
<td>8.0 (4.6–9.5)</td>
<td>1 in 125</td>
</tr>
<tr>
<td>2006</td>
<td>1998</td>
<td>11</td>
<td>9.0 (4.2–12.1)</td>
<td>1 in 110</td>
</tr>
<tr>
<td>2008</td>
<td>2000</td>
<td>14</td>
<td>11.3 (4.8–21.2)</td>
<td>1 in 88</td>
</tr>
</tbody>
</table>

- About 1 in 88 children has been identified with an autism spectrum disorder (ASD) according to estimates from CDC's Autism and Developmental Disabilities Monitoring (ADDM) Network (5b).
- ASDs are almost 5 times more common among boys (1 in 54) than among girls (1 in 252) -about 1.5% of people have Autism. That is roughly 46,000,000 people in the world (6).

**Local:** A committee formed by the Saudi government is preparing recommendations to provide the people suffering from autism with proper healthcare, Saudi Gazette has reported. The committee discussed various issue related to a large
number of Saudis suffering from autism currently getting treatment in Egypt, Jordan and Bahrain due to the lack of specialised centres in the kingdom. The committee plans to send the recommendations to include autistic patients in the insurance policy so that they can benefit from the facilities like speech therapy, psychological and occupational treatments.6a

Global: Many services and programs provided for autistic children in the world. These services may be covered or partially covered by private health insurance and Medical Assistance. They are as following:

**Autism Behavioral Aide Services** — one-on-one therapy to help children, teens and young adults replace inappropriate behaviors with developmentally appropriate ones.

**Autism Case Management** — designed to help individuals navigate the complex social service system. Available for residents of Hennepin and Carver County.

**Autism Consultation and Training** — consultation and training with schools, agencies and direct care staff to help develop intervention programs and strategies.

**Autism Day Treatment** — award-winning autism program that helps children develop skills to regulate their emotions and better control their behavior.

**Autism Home Services** — an intensive in-home program that helps parents find successful strategies to support their child's development.

**Autism Skills Training** — services designed to improve specific skills important to a child's daily-living activities and participation in the community. Autism Skills Training can be offered individually, with families, or in groups.

**Autism Therapy Services** — individual, group and family therapy sessions with licensed psychologists and mental health practitioners.

**Behavioral Interventions** — Following the principles of Applied Behavioral Analysis, Behavioral Interventions are incorporated into a treatment plan individualized to needs of the individual.

**Feeding Therapy** — evaluation and treatment to help children manage or overcome common feeding difficulties.

**Group Social Skills Training** — group skills training for children and teens to build social skills and coping strategies.

**Home and Community Supports** — services include in-home family support, respite care, personal support and personal care assistant (PCA) for children, adolescents and adults.

**Learn Talk Play** — an innovative small group rehabilitation program for children with social communication and emotional regulation needs.

**Music Therapy** — play and structured activities using music that help children improve academic, social, emotional, communication and physical skills.

**Occupational Therapy** — evaluations and treatment that improve children's fine and gross motor skills, self-care, and sensory integration.

**Parent Child Interaction Therapy** — available for those with autism and emotional/behavioral issues, this therapy program is designed to improve relationships and teach parents skills to manage behavior issues.

**Partnership Program** — provide support services that are not traditionally covered by county or state program funding and are often provided by unpaid family caregivers.

**Person-Centered Planning** — capturing what is important to a person receiving services in order to maintain or improve his/her quality of life.

**Physical Therapy** — play and functional activities that improve children's mobility, motor development, posture, strength, range of motion, balance, and coordination.

**Speech-Language Therapy** — play and structured activities that improve children's language and communication skills, articulation, social communication, eating and swallowing.

**TEACCH Consultation** — a structured teaching model of intervention developed at the University of North Carolina.
Therapeutic Listening — combines a sound-based intervention with sensory integrative activities to create a comprehensive program that is effective for children with sensory challenges.

Visual Consultation — assists families of children with autism spectrum disorders in designing visual supports and environments.

Autism Intervention Program The Autism Intervention Program includes:

Support services advice, information, materials, consultation and training for families to get their child ready for Intensive Behavioural Intervention.

Intensive Behavioural Intervention a structured approach that breaks down the barriers that isolate children with autism from the world around them based on the principles of Applied Behaviour Analysis uses systematic methods to encourage development and change behavior program goals are individually tailored to each child based on a thorough assessment of the child's unique strengths and needs it's practical - the focus is on developing the skills each child needs for greater independence.

Intensive Behavioural Intervention professionals work with children with autism - either individually or in small groups.

Parents are critical to the success of Intensive Behavioural Intervention, the program has a parent-training component so that parents can help their children reach their goals.

Children and youth who are receiving Intensive Behavioural Intervention don't stop receiving autism services just because they reach a certain age(6b,c).

3. RATIONAL

Propose: -Autism services center was founded on the belief that each person with a developmental disability has the capacity for growth and development, Each individual has a right to services that enhance well-being, quality of life, and opportunities to learn.

-Each should have access to the most normal and least restrictive social and physical environments consistent with his or her needs, Those with even the most challenging behaviors can respond to dignified interaction in a structured, meaningful program with appropriately trained and supervised staff and the appropriate client/staff ratio.

-Autism services center encourages the use of best clinical practices and believes everyone has the right to effective treatment.(7)

Prevalence of Autism:

In Saudi Arabia (LOCAL): That percentage is not yet known, but some research suggests that in Saudi Arabia nearly two hundred and fifty thousand autistic child. Eight thousand Saudi autistic child receiving treatment abroad.

Incidence of Autism:

Rates of autism, a developmental disorder that affects communication and social skills, are on the rise, earlier in the 20th century, the incidence of the disorder was around four or five cases per 10,000 children; currently, it's more than an order of magnitude greater, being closer to 80 per 10,000. This precipitous rise is obviously quite worrisome, more so since we're no closer to knowing the reason for the increase.(8)

Is Autism considered as a new research topic? why there is a few no. of research regarding of it?

1. Lack of awareness among the population.
2. Absence of interest of decision makers regarding Autism.
3. People are underestimation of the problem of Autism.
4. There are a multiple theories explaining, So it's having little light.
5. Community vision to this problem as a sham leading to less number of cases and so few researches.
6. Absence of great complications to this diseases, making the problem less famous.
Importance of Health Services provided to autistic child is very helpful for detection and treatment early because, research indicates that the earlier the child gains access to quality behavioral treatment, the more likely they are to have a better long term outcome.\(^{(9)}\) also, the Importance of services as following:

1. Decreasing complication
2. Good participation of the case of autism with community
3. Improving communication skills of the autism case
4. Breaking down of the vicious circle of social phobia
5. Improving training course of the case to become in dependable

So, evaluate to improvement health services.

4. METHODOLOGY

**GOAL:** assessment of provided health services to autistic children in Qassim.

**Objectives:**

1. Description the provided health services to autistic children in Qassim.
2. Assessment of Health services provided to Autistic children in Qassim government .

**Method:** Observational study.

**Subject:** Parent of autistic child.

**Place:** society for development and human services on Qassim.

**Samples:** 36 patient and the provided health services.

5. RESULTS

**Socio demographic data**

<table>
<thead>
<tr>
<th>variables</th>
<th>Variables type</th>
<th>Frequency</th>
<th>percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Autism Center</td>
<td>onaizah center, Alress center, Burayidah center</td>
<td>18, 13, 5</td>
<td>50%, 36.1%, 13.9%</td>
</tr>
<tr>
<td>Age groups</td>
<td>&lt;6, 6–12, 12–18, &gt;18, No response</td>
<td>14, 12, 6, 2</td>
<td>88.9%, 83.3%, 16.7%, 5.6%, 5.5%</td>
</tr>
<tr>
<td>gender</td>
<td>Male, Female, No response</td>
<td>28, 7</td>
<td>77.8%, 19.4%, 2.8%</td>
</tr>
<tr>
<td>Age of diagnosis</td>
<td>&lt;6, 6–12, &gt;12, No response</td>
<td>32, 2, 0</td>
<td>88.9%, 5.6%, 0%, 5.5%</td>
</tr>
</tbody>
</table>

Depending on the results of the previous table

**Note the following:**

1. aged at least 6 years constitute 38.9%, which is the majority And age group between 6-12 constitute 33.3%
2. is important to note the proportion of patients men constitute the majority by 77.8% While the proportion of women constitute 19.4%
3. Important Note: The 88.9% of the patients had been diagnosed with the disease before the age of 6 years.
38.9% say that the facilities suitable for needs are good.

66.7% say yes, the safety equipment are available.

**Regarding to results in previous table:**

-50% of community is health educated about autism
-50% of patient’s family are health educated about how to deal with their autistic child.
-55.6% say that there is a specialized medical staff in center, but 55.6% say no sufficient number.

-66.7% there is no regular check up of autistic patients.

-61.1% the psychiatric department is present there

50% of patient's parents denied they were taking any financial aid provided by Government.

- 19.4% evaluation of total health services is (poor) and 11.1% (very poor).

72.2% (yes) the center provide transport for the patients.
Regarding the table: Positive deal for center staff attitude toward child were 66.7% yes.

Regarding the table: for evaluate the extent of the child's treatment were 27.8% for Excellent 10 Good 10 Moderate 10.

Regarding the table: Evaluate the responsiveness of the child with staff were 33.3% good.

Regarding the table: Evaluate the responsiveness of the child with the parents after treatment were 38.9% good.

**Child educational level shows**

27.8% was excellent, 27.8% was good, 22.2% was moderate and 13.9% was poor. Family satisfaction with the quality of care report 36.1% was excellent 30.6% was good, 13.9% was moderate, 8.3% was poor.

**Service Level shows**

27.8% said yes, 13.9% said no and 47.2% said to some extent.

**Gender of patients**

- Male: 36.1%
- Female: 13.9%
- Others: 50%
6. DISCUSSION / CONCLUSIONS

we compare our results with a research about “enhancing public services for individuals with autism in KSA”, by Hanan Almasoud, (2011), from King Saud University.

She found that 32% no specialized medical staff in autism centers.

Our result said that 55.6% say that, there is a specialized medical staff in center, but 55.6% say no sufficient number.

Also, she found that 30% poor community awareness about autism.

But our results said that: 50% of community is health educated about autism

*50% of patient's family are health educated about how to deal with their autistic child.

Conclusions:

1- Improve the health education to patients family about how to deal with their autistic child.

2- Make Schedule regular check up for autistic patients

3- Raise the level of service To meet the needs of the patients

4- There should be a be financial aid Provided by Government to help the parents to the financial cost to treat their children.

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