

SPHARC/ITAC Autism Town Hall

Discussion Guide & Notes

Use this guide to keep track of questions, notes and discussion points for the Town Hall portion after each of the topical presentations on actionable priorities and opportunities for partnership.

Presentation #1: Partnering with Primary Care Pediatricians: Identification and Diagnosis, Family Support, and Transitions of Care	
Questions I have for the presenter:	
What am I/my organization doing in this area?	
What are opportunities for partnership/collaboration that could strengthen work in this area?	

Presentation #3: Gender Differences in Autism: Awareness Helps with Early Identification	
Questions I have for the presenter:	
What am I/my organization doing in this area?	
What are opportunities for partnership/collaboration that could strengthen work in this area?	

Presentation #2: Meaningful Inclusion of People on the Autism Spectrum in Multiple Settings

Given the adult autism community perspective, our systems and providers play an integral role in supporting a paradigm shift in the perception of Autism. Although providers and change-agents frequently use terms such as ‘strengths-based’, ‘social construction of disability’ and ‘inclusion’, these terms are not substitutes for changes in beliefs and actions. It is undeniable that every provider and maternal/child health leaders goes into the field with a desire to support well-being and positive outcomes. What is questionable is how those outcomes sometimes come at the expense of the person trying to be helped, when the focus is solely on a desire to help a family achieve their goals of a ‘neurotypical’ child. Re-examining our own beliefs about interventions which seek to address ‘sensory dysfunction’, ‘language deficits’, ‘lack of social skills’ or ‘poor eye contact’ suggest that our own ‘normal’ is superior or better. In actuality, autistic individuals have often heightened sensory experiences and in other cases and decreased experience of physical pain. Aren’t these things the traits of superheroes? Our message is that ‘fix-the-individual’ approaches, especially when discussed as deficits in front of a child or parent, can lead to poor self-esteem and feelings of isolation.

- How can we, as leaders and social change agents, bring our knowledge of how to help children and families function, without sacrificing the child’s mental health in the process?
- How can we reframe the evaluation and intervention process so that we document real needs in order to obtain services, but clearly convey how the approach we are taking builds on positive aspects of the child’s repertoire?

Questions I have for the presenters:

What am I/my organization doing in this area? What successes or challenges have I encountered?

How could I modify my organizational practices to be inclusive (research, systems change, etc.)?

What systems change needs to occur to make this a reality? What are opportunities for partnership/collaboration that could strengthen work in this area?