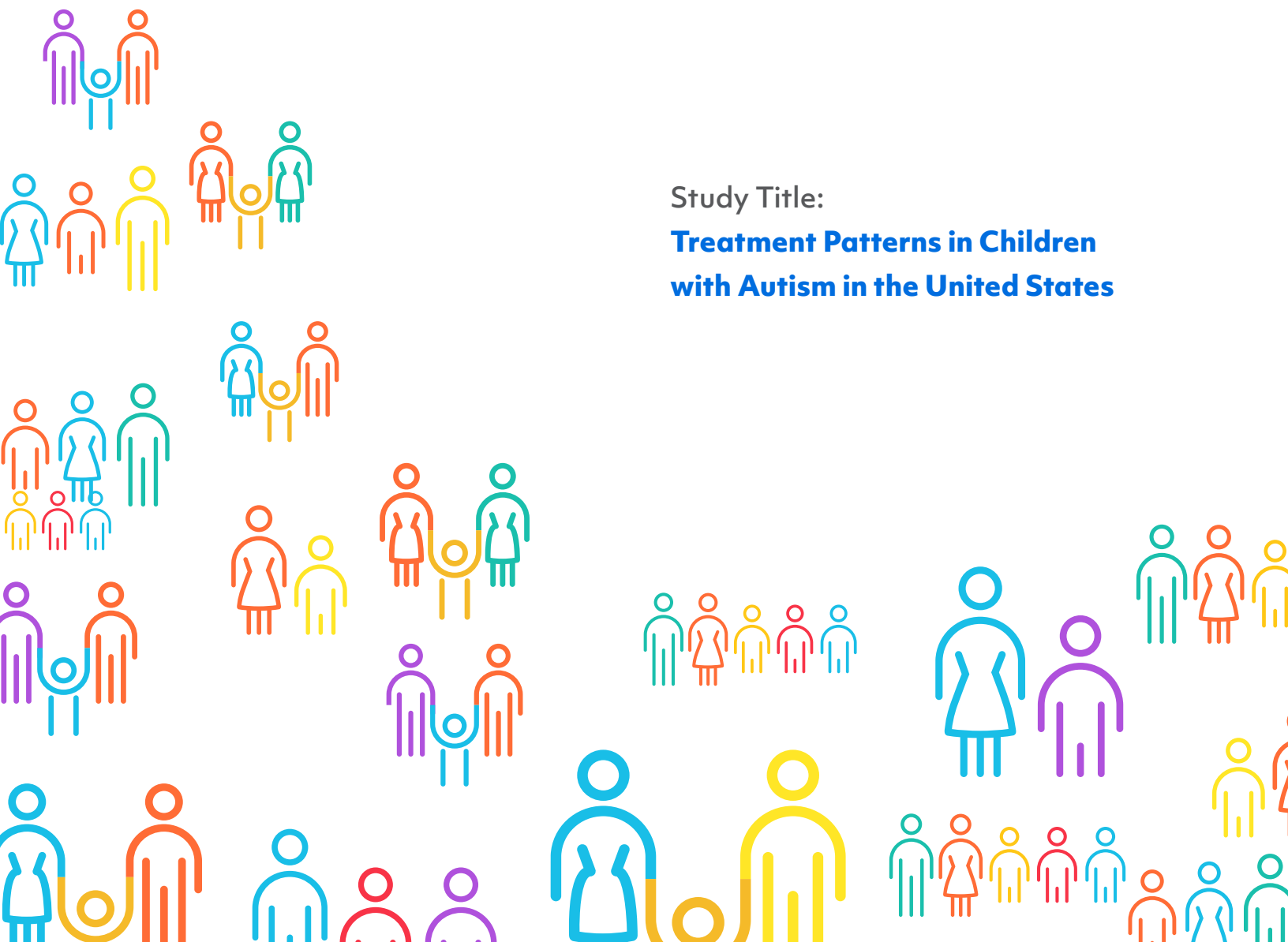




Research Match

Study Title:
**Treatment Patterns in Children
with Autism in the United States**



Treatment Patterns in Children with Autism in the United States

About SPARK Research Match

This SPARK program matches families with research studies they may want to join. These studies have been evaluated for scientific merit and approved by a scientific committee at SPARK. The program is free to researchers and families. SPARK does not endorse or conduct the studies. Families choose if they want to participate in a particular study.



More than 5,000 SPARK participants took part in a study of the treatments — other than medication — that their child with autism received in the past year. The American Academy of Child and Adolescent Psychiatry recommends using more than one type of treatment in autism spectrum disorder (ASD). The study team wanted to learn what types of treatment children ages 3 to 17 received, for how long, and what factors were associated with these treatments.

Study Team

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(Kennedy Krieger Institute, Johns Hopkins University School of Medicine, and mother of an adult with autism)

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The study, which was funded by F. Hoffmann-La Roche Ltd., was published in [Autism Research](#) in January 2019. SPARK does not have any direct relationship with F. Hoffmann-La Roche Ltd.

Findings

What treatments are used most often by children with autism from ages 3 to 17?

Almost all children (96%) were receiving at least one treatment, mainly at school. More than 40% were receiving four or more treatments.

Here are the most common treatments.¹



Speech and Language Therapy



Other (such as social skills training, academic tutoring, sensory integration)



Occupational Therapy



Behavioral (such as Applied Behavior Analysis, Discrete Trial Training, Pivotal Response Treatment)



Parent-Caregiver Training



Psychological (such as counseling, Cognitive Behavioral Therapy)



Developmental/Relationship (such as DIR/Floortime, Relationship Development Intervention)

¹ In the survey, treatments were grouped together and examples of each were provided.

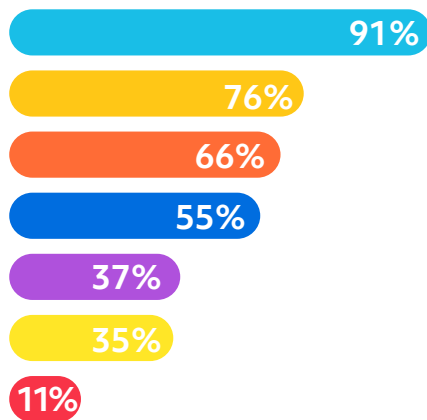
Findings

Do children of different ages receive different treatments?

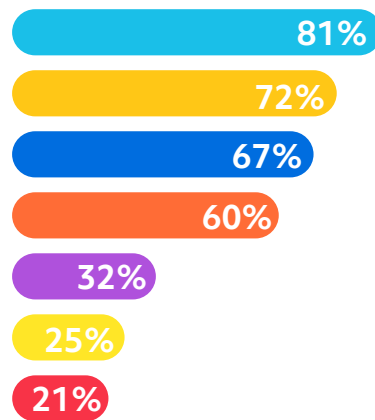
Yes. Many treatments were used most often with children ages 3 to 4, and less frequently with older children. There were two exceptions: "other" and psychological treatments were used most often with children ages 10-14 and 15-17.

- Speech and Language
- Other
- Occupational Therapy
- Behavioral
- Parent Training
- Psychological
- Developmental / relationship

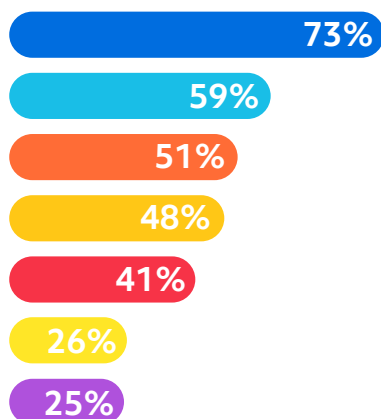
Age 3 to 4



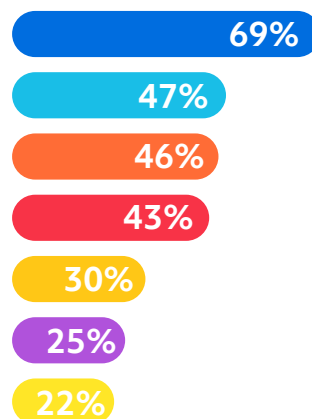
Age 5 to 9



Age 10 to 14



Age 15 to 17



Findings

Is there a relationship between where families live and the treatments their children receive?

Yes. A higher proportion of children in metropolitan areas (large cities and suburbs) received any type of treatment than did children in nonmetro areas (small towns and rural areas). Half the children in metro areas received at least 6 hours per week of therapies, while half the children in nonmetro areas received at least 4.5 hours per week.



Metro

Large cities
and suburbs

Nonmetro

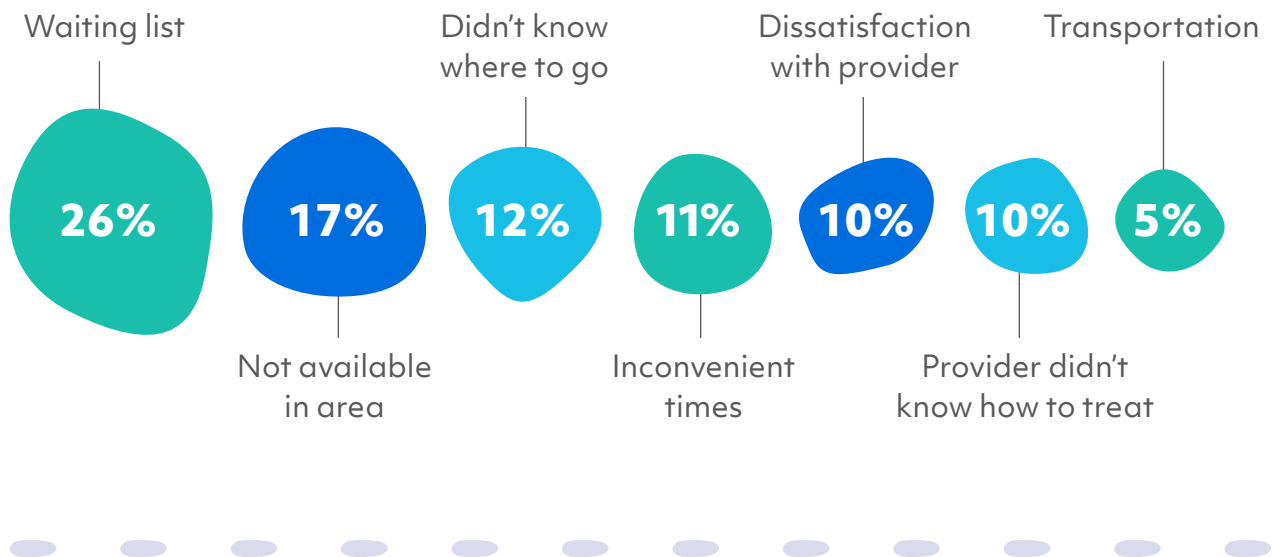
Small towns
and rural areas

| | | |
|-------|-------------------------------|---------|
| 96% | Any type of therapy | 94% |
| 57% | Behavioral therapy | 46% |
| 72% | Speech-language therapy | 65% |
| 6 hrs | Hours per week of any therapy | 4.5 hrs |

Findings

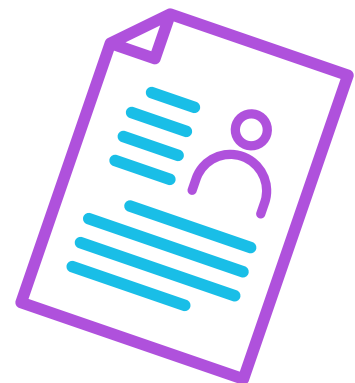
What are barriers to treatment, and do they differ based upon where families live?

Almost half of families (45%) reported a barrier to treatment, such as waiting lists for services (26%), cost (17%), or lack of insurance coverage (18%) for a therapy. Some of the barriers related to providers and availability, and how common they were differed according to where families lived. For example, people in metro areas reported more problems with long waiting lists, while people in nonmetro areas were more likely to report that treatments were unavailable.



Is there a relationship between the types of insurance families have and the kinds of therapies their children receive?

No consistent relationships were found between the types of treatments received and whether a child had Medicaid insurance only or private insurance only.



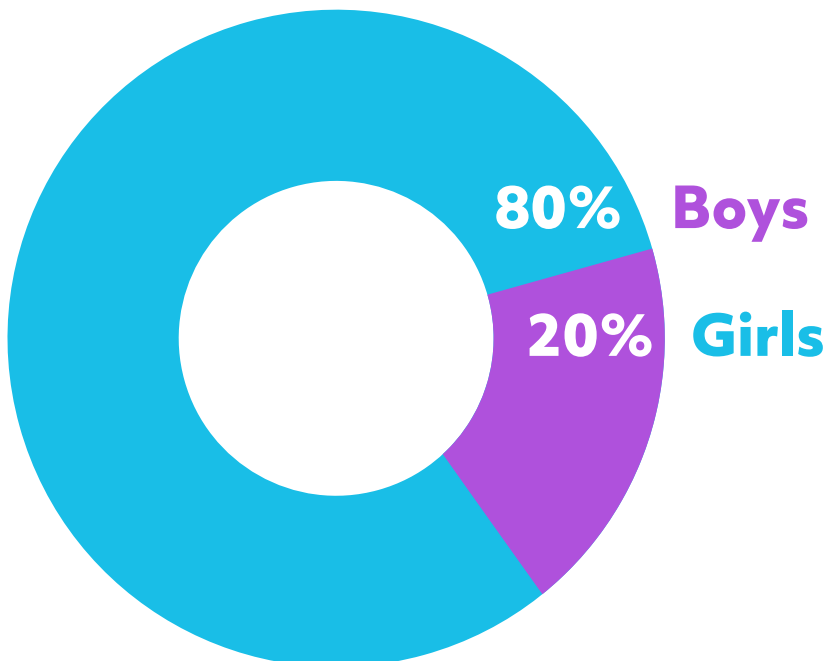
About the Child with ASD

Average Age

9

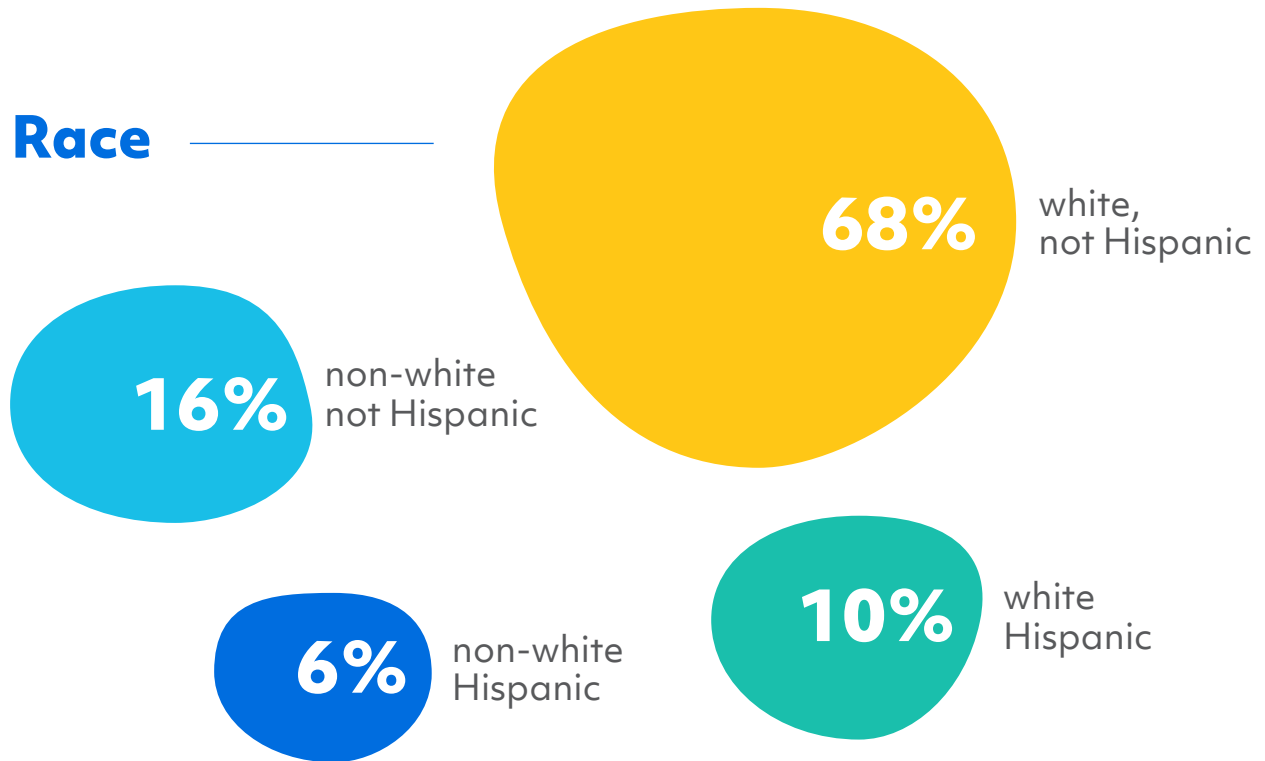


Gender

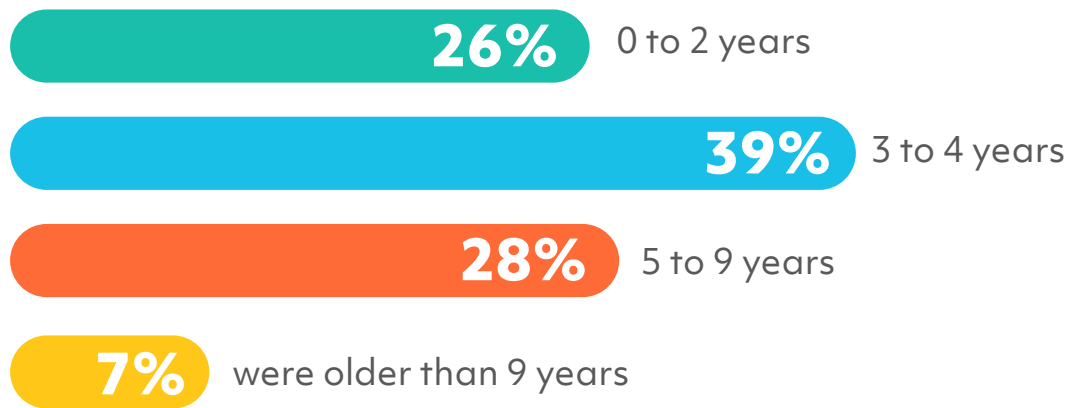


About the Child with ASD

Race

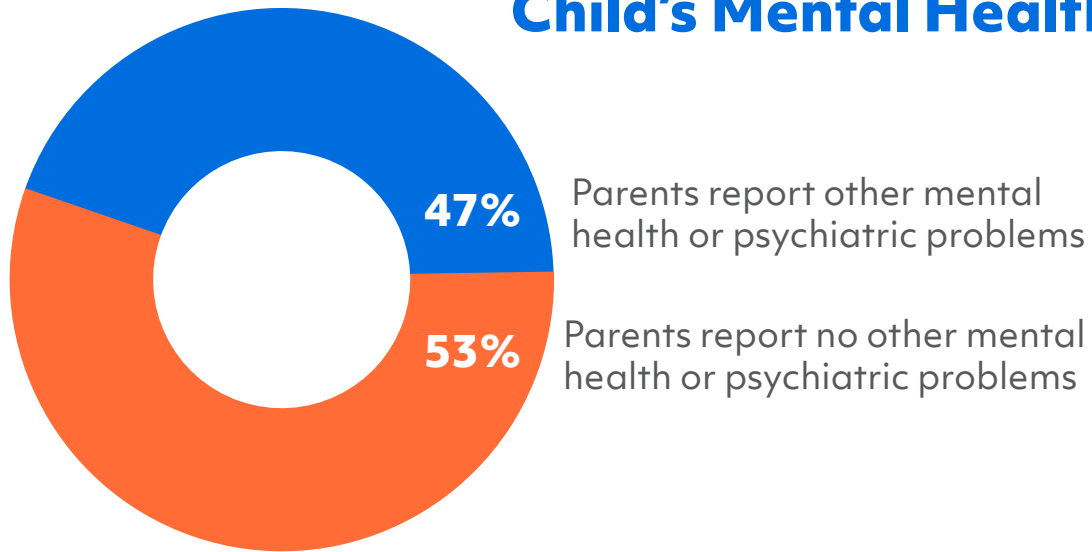


Age at ASD Diagnosis

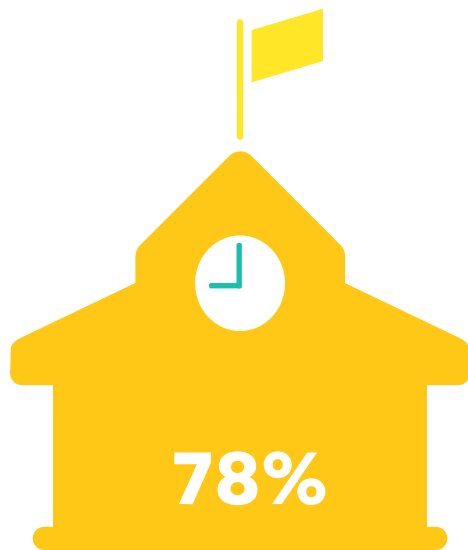


About the Child with ASD

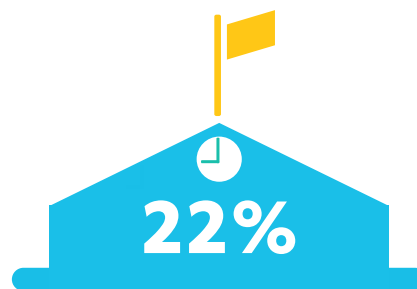
Child's Mental Health



Child's Type of School



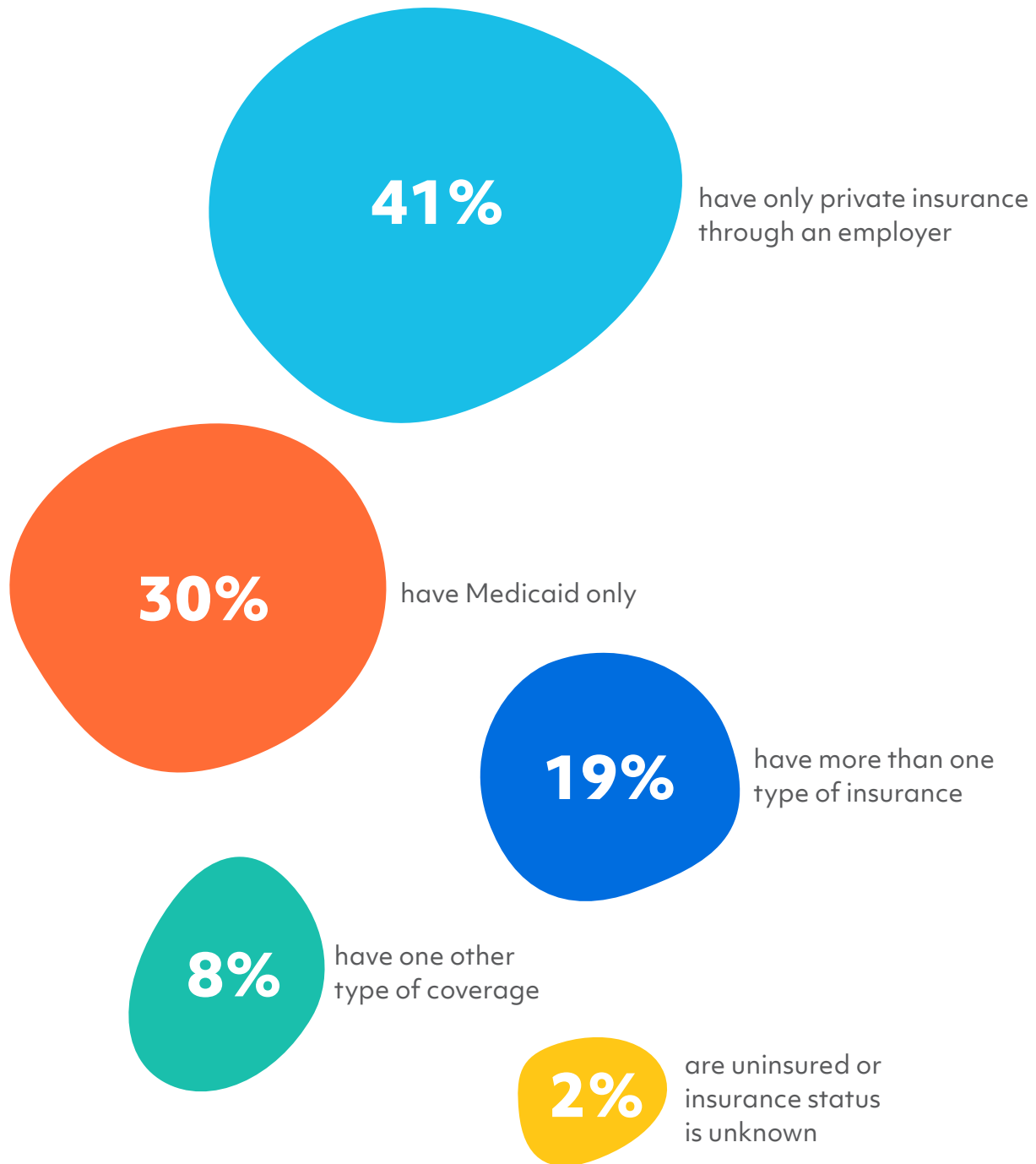
attend general education schools



attend schools with special education students only

About the Child with ASD

Child's Health Insurance

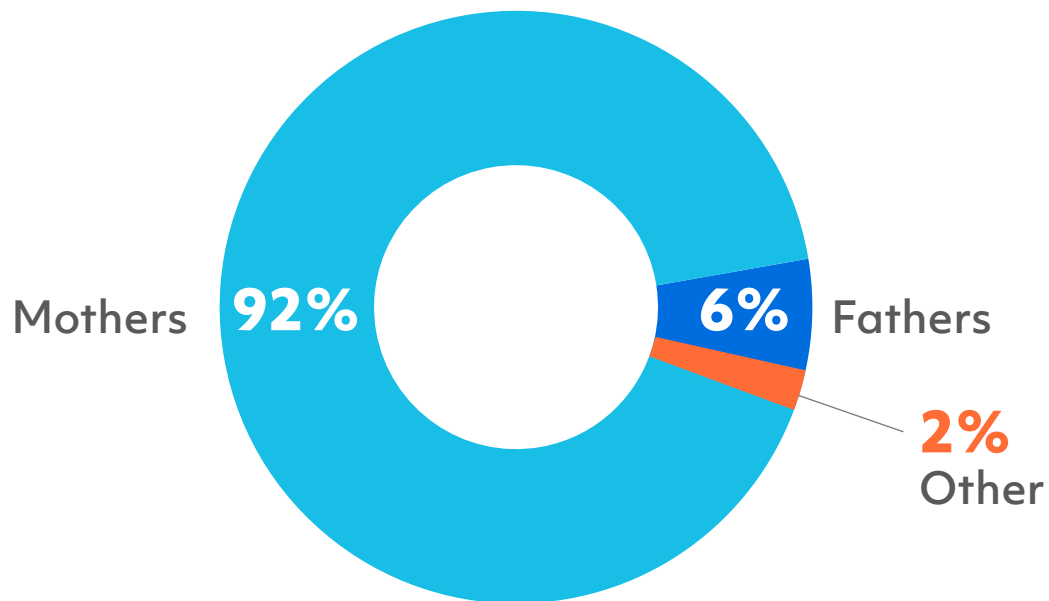


About the Caregivers Who Participated

Average Age

39

Relationship to Child

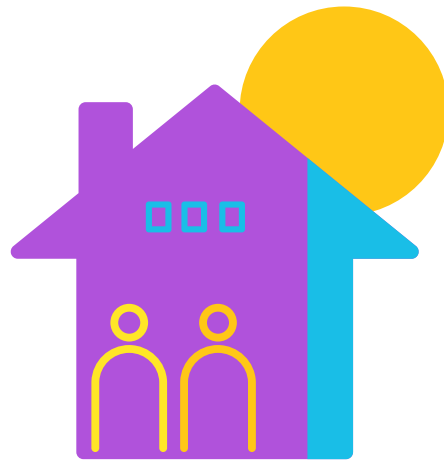


About the Caregivers Who Participated

Relationship Status

Married/living with partner

80%



Education

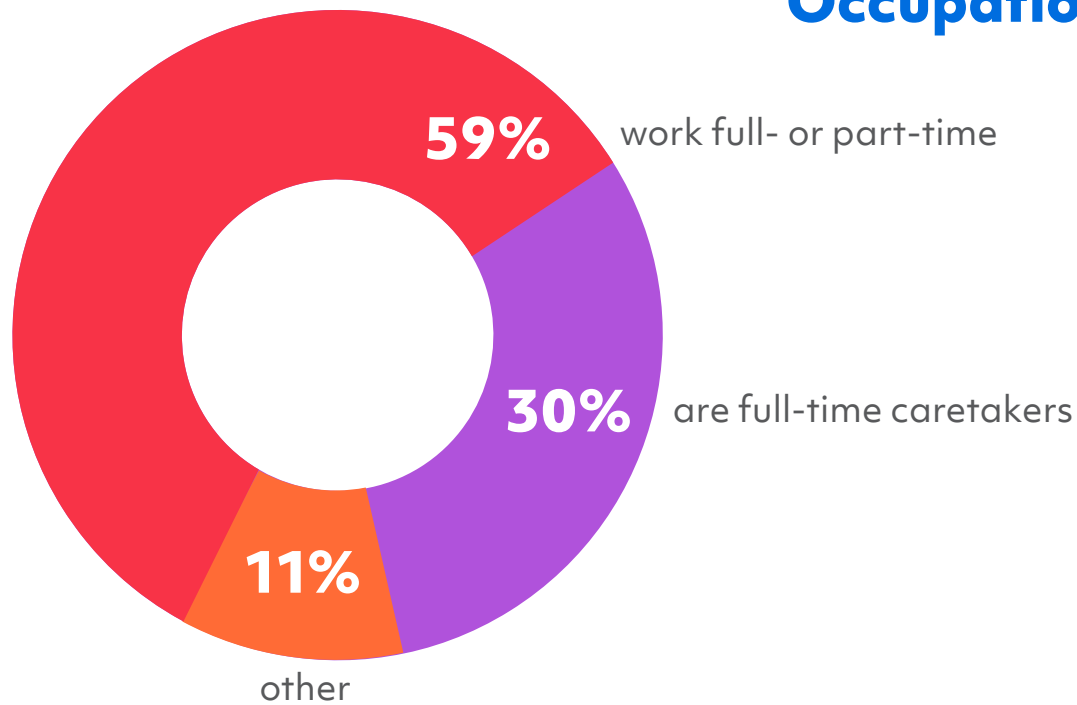
64%

completed college or higher



About the Caregivers Who Participated

Occupation



Number of Children with ASD



84%

have 1 child with ASD



16%

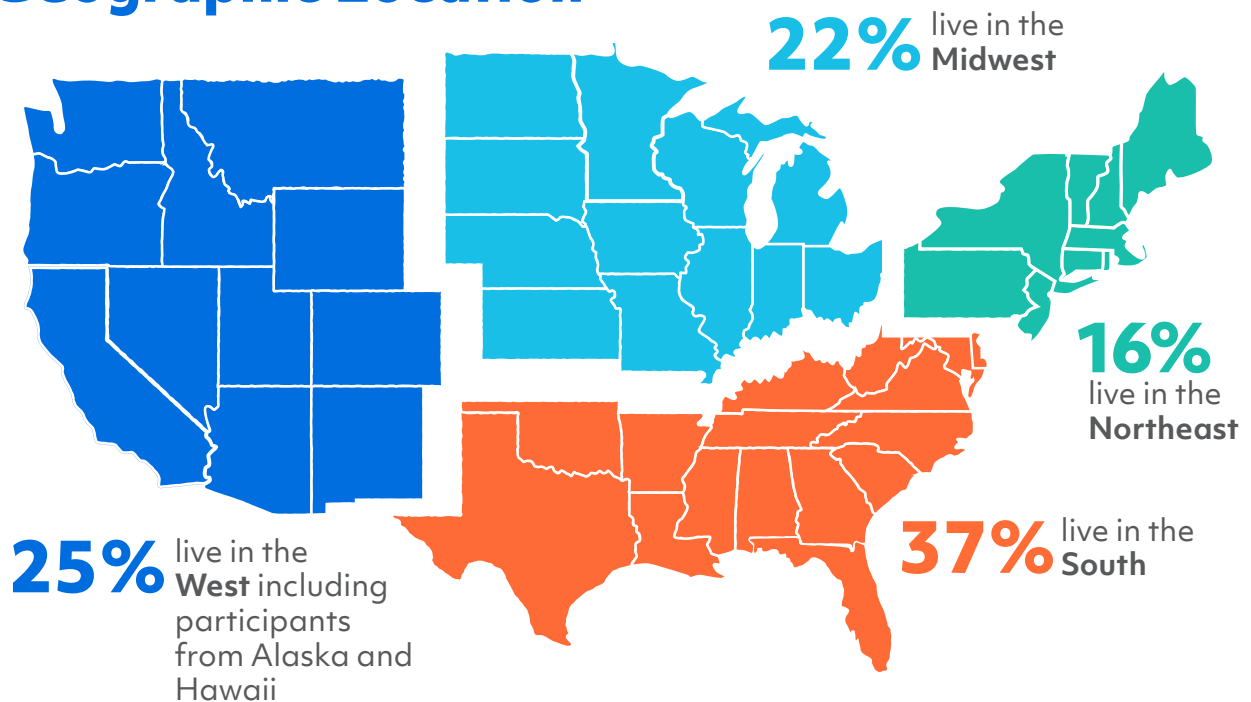
have 2 or more children with ASD

About the Caregivers Who Participated

Residence



Geographic Location





"I wanted to thank you for doing this study. We moved to a different state and we found vastly different therapies and available providers. This is a real problem for families."

– SPARK participant



How important is this topic to you and your family?

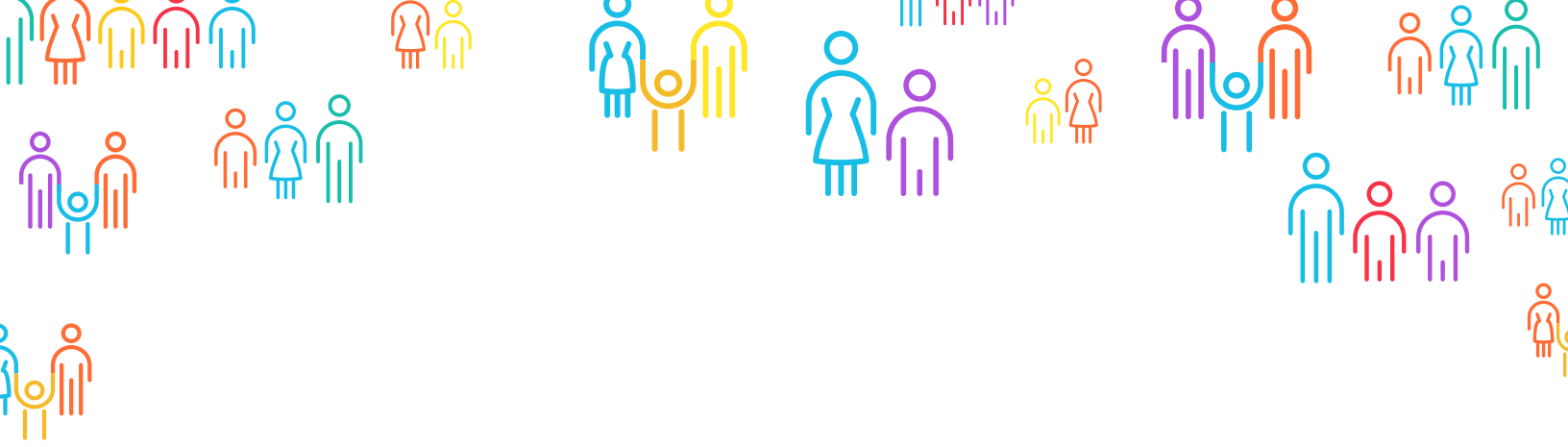


4.8 out of 5

How would you rate your experience participating in this study?



4.9 out of 5



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