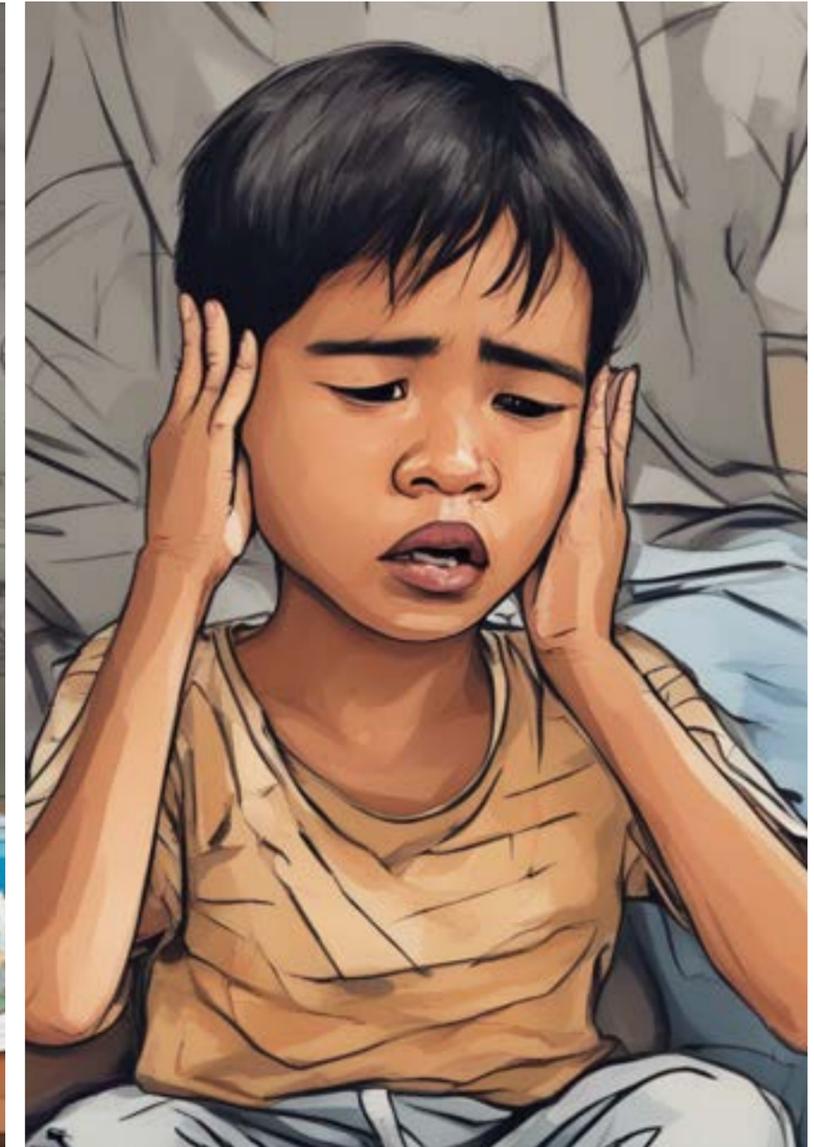


Card #1: What is autism?



Rotha is a child with autism and he perceives, thinks, feels and communicates differently from others. Autism is a developmental disorder that affects communication and behavior. Children with autism like **Rotha** have difficulty with social interaction, communication, and behaves repetitively.

Additional information

- Autism is a spectrum disorder, which means that there is a wide range of symptoms and severity.
- Autism is a developmental disorder that affects communication and behavior. A child with autism has difficulty with social interaction, communication, and repetitive behaviors.
- Autism is caused by complex interaction and combination of genetic and environmental factors.
- Autism is a chronic condition like diabetes and hypertension. It cannot be 'cured' but there are effective strategies to help and support children with autism to go to school and develop like others.

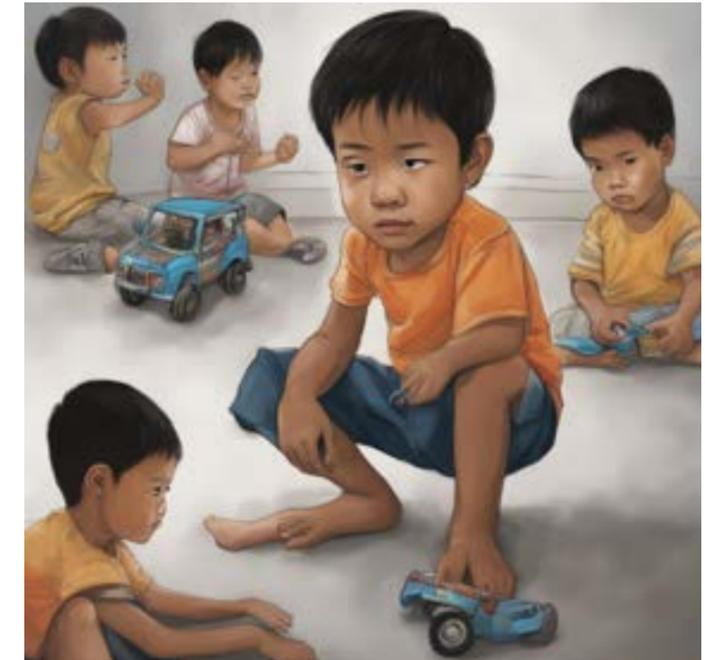
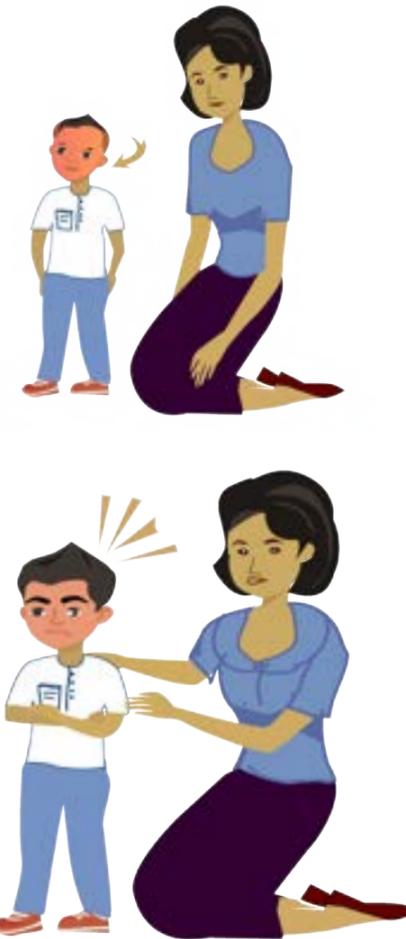
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Card #2: What are some signs and symptoms of autism?



The three main signs and symptoms of autism are:

- Difficulty to interact and engage with others
- Communication challenges (difficulty in expressing their needs and wants)
- Repetitive behavior (playing with same toys)

These symptoms can vary in severity from person to person.

Hence known as 'Autism Spectrum Disorder'.



Additional information

Children with autism like Rotha may have the following challenges during his childhood.

Rotha may not make eye contact (avoid eye contact) while his mother feeds him. He likes to be alone and NOT play with his siblings and may not respond when he is called by his mother or family members. A child with autism may not point or show things, for example when the dog passes by he will not say, “**dog**”. His language will be delayed, meaning he will have only 20 words instead of 200 words at 5 years of age (Delayed language development).

A child with autism like **Rotha** will behave repetitively doing things such as lining up toys and flap his hands to stimulate himself. He might have difficulty with changes in routine such as going to school in a different road or eating with different cup/spoon.

If you are concerned that your child may have autism, it is important to talk to your health care provider closer to your home such as village health worker/health center staff who may give strategies to help your child at home or refer for additional help.

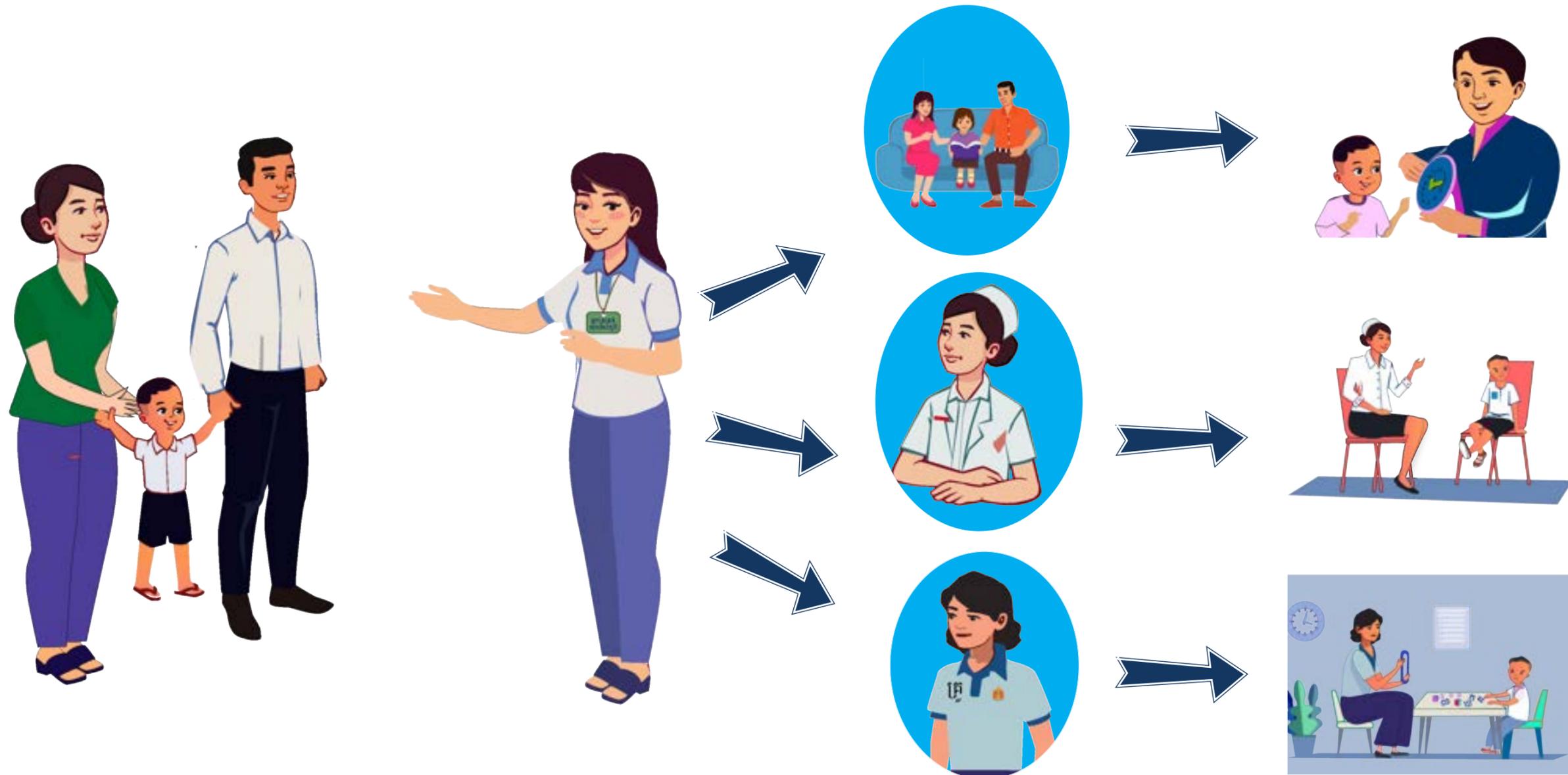
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Card #3: Early Identification



Early identification of autism is important to help the child gains appropriate developmental milestones during the critical periods of brain development. Early intervention strategies such as play-based activities at home can help **Rotha** to learn and develop skills, enabling him to start school.

Additional information

Here are some specific examples of how early identification and intervention can help Rotha:

Rotha's mother was concerned that he is not communicating as his elder sister. She contacted the village health support worker who was concerned that the child might have autism. Chanthou, the village health support worker gave suggestions to play and communicate with the child as often as possible even if the child did not interact. This can help children with autism like Rotha learn and develop language and communication skills at a younger age.

Chanthou also informed the pre-school teacher, Piseth about Rotha's condition. Piseth was understanding and supportive which helped Rotha to build relationships with his peers.

If you are concerned that your child may have autism, it is important to talk to health care staff, teacher or a neighbor who may refer to you to appropriate source/center which can confirm the diagnosis of autism. Early diagnosis and intervention can make a big difference in the life of a child with autism by enabling him/her to attend school.

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Card #4: ASD, Developmental Disorder and NOT a disease



Autism spectrum disorder (ASD) is a chronic condition, like diabetes and hypertension which may need lifelong care and support.

It is a developmental disorder indicating the child's brain development is not the same like others. Though it is a chronic condition, with adequate support and play-based intervention, a person like Rotha, can learn to communicate and relate with others. Enrolling in preschool will facilitate quick improvement and help him learn like others.

Additional information

Here are some specific examples of how Rotha is different from other children:

- **Rotha** has difficulty with social interaction, meaning he avoids looking into other's face (do not like eye contact) and uncomfortable in making conversation
- **Rotha** will also have difficulty in communication, therefore cannot express his needs in words and rather pull mother's hand to indicate what he wants.
- **Channa**, mother of **Rotha** is distressed because he behaves repetitively (doing the same thing again and again) such as piling the blocks or lining the cars and is upset when the routine is changed (behavior problem).

An understanding caregiver or a teacher can play a supportive role and encourage children with autism to learn and develop appropriate skills that will help them succeed in school.

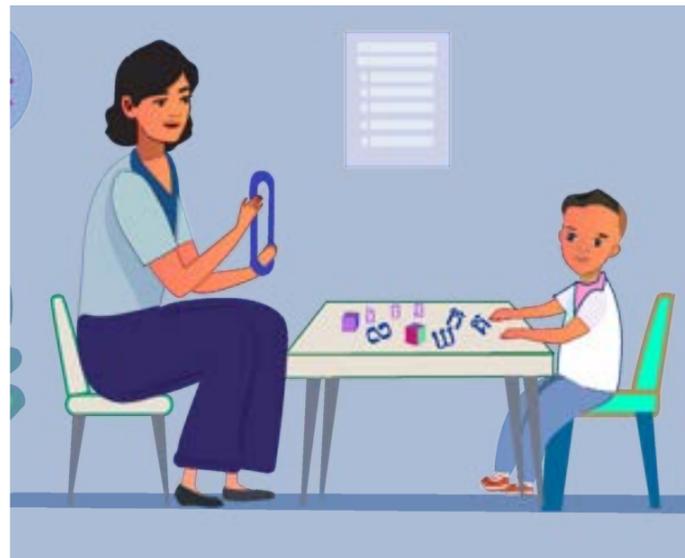
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Card #5: Types of additional problems (Comorbidities)



More than two-thirds of children with autism may have additional problems such as intellectual disability, attention deficit hyperactivity disorder, epilepsy, behavior and sleep problems (refer to diagram below). These conditions can make it more challenging for children with autism and their families. When children have comorbidities, the family need to seek additional help from psychologists, occupational/ speech therapists and physicians. These children might need medications to manage comorbidities.

Additional information

Most of the children with autism may also have other conditions, such as:

- Unable to sit at one place or concentrate in one activity such as playing with a doll. This condition is known as Attention Deficit Hyperactivity Disorder (ADHD) where the children are not able to sit and attend to what the preschool teachers say.
- **Rotha** has anxiety and cries every day when he goes to school and his mother has to accompany, otherwise he will not go to school (Separation anxiety).
- Many children have difficulty in settling down to sleep routine. **Channa** learned sleep hygiene practices such as giving a warm bath, reading a story book, avoiding watching TV two hours before bed time which helped **Rotha** to sleep better.
- Some children with autism are sensitive to noise and close their ears and some other avoid certain food because of color or texture which indicates they might have sensory processing disorder.

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Card #6 (A). No Cure, But Can Be Helped



Autism is a lifelong condition, but with adequate support and early intervention, children with autism can learn like others, make friends and enjoy schooling. It is important that the parents of **Rotha** understand that there is no cure for autism, but there are many things that they can do at home to enable **Rotha** to learn and develop social and communication skills by following simple strategies (refer below):

- Early identification and play-based activities at home
- Strategies to improve communication by constantly responding, introducing new words on day-to-day situation

Additional information

Here are some specific examples of how children like Rotha can be helped:

- Rotha's parents were concerned at 18 months that he did not communicate like other children and sought psycho-education and support from therapists. This helped him develop communication and self-help skills which enable him to enroll in preschool. Rotha's parents praised him whenever he behaved well when visitor came home and they ignored the occasional irritable behavior (temper tantrum).
- Rotha's parent always sat face to face, follow the child's action, commented and named the object he chooses which improved his communication skills.
- Occupational therapy can help children with autism improve their fine motor skills and coordination such as writing, eating, buttoning the shirt etc.

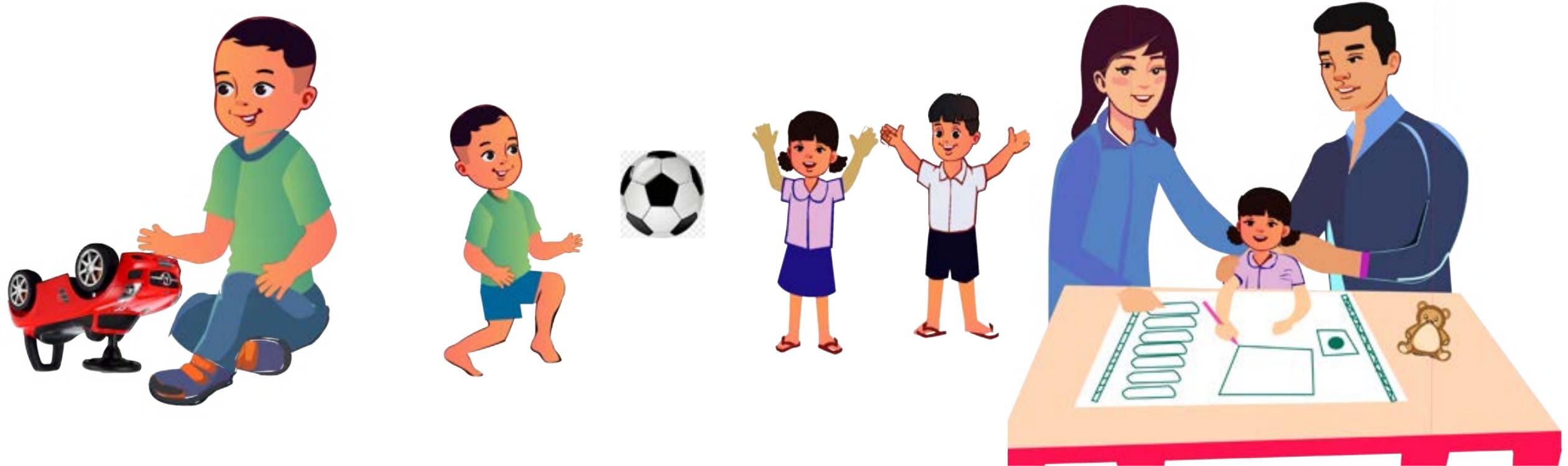
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Card #6 BA). No Cure, But Can Be Helped



- Give immediate reward to make the child behave positively and ignore unwanted behavior
- When children have sensory problem such as taste, smell, sound etc. gradually introduce activities to familiarize the sensation
- When guest comes to home, introduce social skills training such as greeting (**Chum reap sour**)
- Join support groups of families of children with autism to share as well as learn from their experience.

With the right support and help, children with autism can go to school like anybody else.

Additional information

- **Rotha's** parents modelled positive behavior such as greeting the teachers, respecting the elders etc. (social skills training).
This helped him to learn how to interact with others.
- The support groups of **Rotha** not only had children with autism but also with epilepsy, intellectual disability, Down syndrome etc. either independently or as a comorbidity. The parents feel they are NOT alone and received adequate information and support.

The parents shall not lose hope though there is no quick cure for autism. It is important to learn home-based strategies to help the child as Rotha's parents did which will make a big difference in the life of a child with autism.

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Card #7: Play-Based Intervention

Points for discussion:



Play-based intervention is a child-friendly technique that uses **‘parent-child interaction’** at home to enable children with autism develop skills appropriate to their developmental milestones (age). Play-based intervention can be used to help children with autism improve their social, communication skills and cognitive ability. Play-based intervention is a **‘fun and engaging way’** for children with autism, their parents and siblings to interact and learn together.

Additional information

The specific activities practiced by Rotha's parents using play methods at home helped him to develop necessary skills.

- **Channa** knew **Rotha** likes his pet-dog. Therefore, she introduced new words such as long legs, brown hair, friendly dog etc. which facilitated him to learn new words and interact with others without anxiety.
- The new words introduced by **Channa** through 'what is in the bag game (animals, fruits, vegetables, car etc.)' was fun activity for **Rotha**, which helped to improve his communication skills.
- **Rotha's** sister likes to play 'puzzle board games' after coming back from school. **Rotha** liked this very much which helped to improve his cognitive skills.
- Play-based intervention can be a fun and engaging way not only for children with autism to learn and develop skills but also bring the families together.

If you are interested in learning more about play-based intervention, there are many resources available online, as well as agencies providing services in Cambodia. You can consult the therapist who is trained in play-based intervention to introduce the varieties of games appropriate to developmental stages of your child.

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Card #8: More Than One Therapist Involved (school-readiness program)



More than one therapist, -speech, occupational therapists and early intervention team need to help a child with autism to gain necessary skill to start school. **Rotha** has a variety of needs and therefore require different therapists working together to make a plan that meets the child's individual needs.

'**Individualized education plan (IEP)**' helped Rotha to attend school and attain his full potential. The therapists provided **Rotha's** family the tools and support they need to facilitate learning at home and school. Working actively with the child's family ensures that the family understand and actively involved in the therapy.

Additional information

Here are some specific examples of how **Rotha** was helped by more than one therapist to enable him to be ready to go to school:

- A trained nurse assessed the ability of **Rotha** to carry out his daily activities such as brushing, taking bath and dressing, she trained the parents to impart these skills at home. This helped him to be ready to go to school.
- An occupational therapist helped him improve his fine motor skills and coordination, so that he/she can gain write, which is necessary at school entry.
- A special educator can assess whether a child with autism has ability to learn new skills and behavior in a regular school setting or he/she needs a special school.

The therapists work together (as in the case of **Rotha**) to meet the child's individual needs. This individualized plan includes goals for the child's education, as well as strategies for helping the child at home and school setting. The family can provide information to the therapists about the child's strengths and weaknesses, as well as their preferences which helps in developing an individualized plan.

When everyone, including therapists and parents work together, children with autism can make good progress.

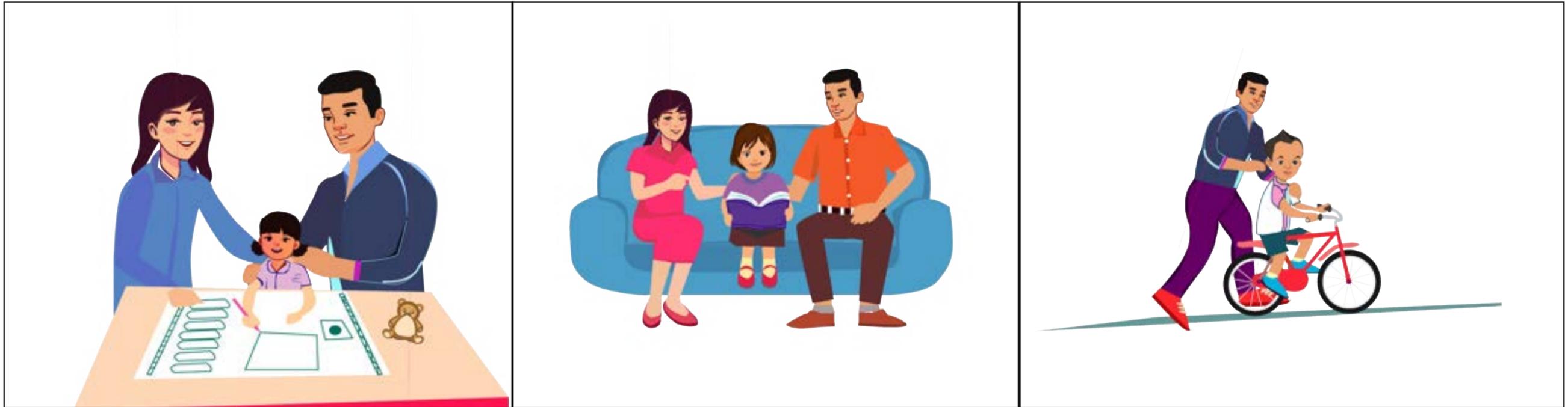
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Card #9 (A): Importance of Parents' Engagement and Quality Time



Many parents are stressed, like in the case of Rotha, with the experience of caregiving for the children with autism.

Here are some ways parents can engage with their children with autism as well as care for themselves:

- Reading stories books at a specific time every day as children with autism do not like change, playing games that all appropriate to their sensory needs **(example: avoiding games that are noisy)**
- Taking them on outing for an activity that they like such as swimming **(avoiding crowded area like supermarket)**
- Talking to them about their day with pictures/images **(visual schedule)**
- Spending time with them which enjoyable to both on a regular basis **(quality time)**

Additional information

Here are some specific examples of how parents of Rotha engaged with their child:

- Rotha's parents had a stock of story books from which he could choose a book to read together every day. This helped the family enjoy the quality times as well as developed his language skills.
- Games like pee ka boo and hide and seek was fun for Rotha during his early life which helped him to develop social skills and coordination.
- Routine outings to water-park helped Rotha to experience new things, gain motor skills as well as learn about the world around him.

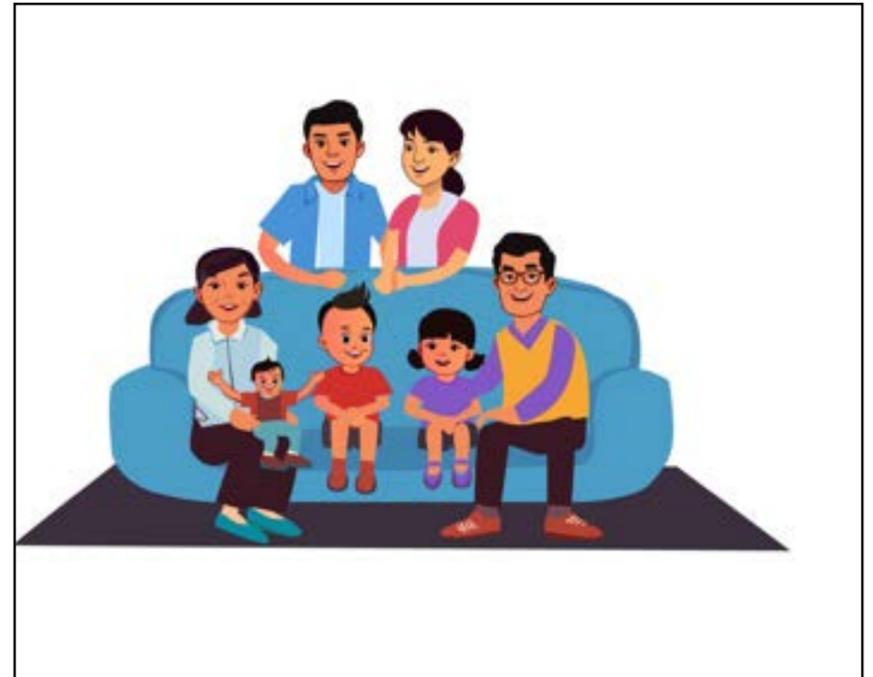
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Card #9 (B): Importance of Parents' Engagement and Quality Time



By engaging with their children on a specific time of the day that is mutually enjoyable (**quality time**) parents can de-stress themselves and build a loving relationship. **Quality time** is any time that parents spend with their children focused on building relationship and happiness such as reading a book together, playing a game or going for a walk.

Additional information

- **Visual schedules** were displayed in **Rotha's** room which made it easy to talk to him about his day. This is a great way to help him to understand different activities and transition of time and space during the day. Simply spending time with **Rotha** was fun for his sister as well as parents. This way **Rotha** came to know that he is loved by all family members and accept and value him despite his challenges.

When parents provide quality time, children with autism feel secure and loved which is essential for their development.

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How to use the cards for Awareness raising on Autism and Early Intervention (Theme 1)

1. What are these cards about (key messages):

These sets of cards explain what is 'autism spectrum disorder (ASD)', the core symptoms, the importance of early identification and intervention, early schooling and home-based intervention.

2. Who will benefit from these cards (target group):

Parents, preschool-teachers, primary health care staff, community health care workers, village and commune leaders.

3. Informing and preparing for the session (community engagement):

- Choose a quiet place
- Inform the participants in advance the location and purpose of meeting
- Good to involve a parent of autism in the discussion (peer-leader)
- Inform the village and/ commune leaders the purpose and get the consent for the meet

4. How to use these cards (Process of behavior change communication)

- 10 to 15 the ideal number of participants
- Good to have two sets of cards, in case more people turn-up
- Distribute the cards, one card each
- Allow them time for them to read by themselves before starting the discussion

5. Themes in the Level 1 set of cards (Contents):

- **Card1: What is autism?**

- Card 2: Signs and symptoms of autism?
 - Card 3: Early Identification
 - Card 4: ASD, a developmental disorder and NOT a disease
 - Card 5: Type of additional problems (comorbidities)
 - Card 6: No cure, but can be helped
 - Card 7: Play-based intervention
 - Card 8: More than one therapist involved
 - Card 9: Importance of parents' engagement and quality times
6. How to conduct, summarize and conclude the session (Participatory learning principle)
- Ask whether the participants are ready or need more time with individual cards
 - Each participant read the card or share the story on the first page
 - The facilitator gives additional information for each card (given on the rear side)
 - Give opportunity for discussion and seek clarification before moving to the next card
 - One among the participant is asked to summarize the discussion
 - The facilitator responds to questions, offer clarifications and highlights the key messages
 - Session is closed after deciding the theme, date and time for the next meet
 - The facilitator concludes by thanking the participants

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