Catching the Signs Early: Autism Screening and Intervention in the Toddler Years

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Nursing 201: Nursing Care of Special Populations

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November 3, 2025

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"Autism Spectrum Disorder (ASD) is a category of neurodevelopmental disorders characterized by social and communication impairment and restrictive or repetitive behaviors" (Hyman et al., 2020 p.6). ASD can present as difficulty in forming interpersonal relationships, delayed speech or mutism and ritualized behaviors and interests. Over the years, diagnoses for autism have continued to rise in numbers, making it one of the most common developmental disabilities. "The prevalence of ASD has increased significantly over the past 3 decades and is now estimated to affect 1 in 54 children, about 2% of children in the United States" (McCarty & Frye, 2020 p.2). "Although ASD symptoms are present and recognizable early in life, the median age diagnosis in the United States in 2014 is still around 51 months" (Coulter et al., 2021p. 2387). Delayed diagnosing causes late interventional treatment, possibly leading to negative outcomes for children who have ASD. Frye and McCarty said, "One of the primary barriers preventing the implemented intensive behavioral therapy early in life is the timely identification and diagnosis of ASD" (2020 p. 2388). Early detection and treatment of ASD in toddlerhood can play a crucial part in maximizing developmental potential. "Early identification of autism spectrum disorder, through developmental surveillance and screening, allows access to ASD-specific behavioral interventions that improve long-term outcomes" (Carbone et al., 2020 p. 2024). Nurses play a key role in early identification, providing support, and helping families, which can greatly enhance the well-being of children with autism.

Manifestations of ASD generally appear in the toddler years and may be noticed as early as 18 months. "The American Academy of Pediatrics recommends universal autism spectrum disorder screening at 18- and 24- month well child check-ups and immediate referral of positive screens for expert evaluation and early intervention" (Attar et al., 2023 p.114). By administering

screenings earlier in toddlerhood, nurses and providers will be able to direct children and caregivers to the correct medical professionals to follow up with further testing if needed. Early detection allows families to seek treatment sooner, leading to better results for the children. “Early treatment of children younger than 36 months has been shown to result in positive outcomes” (Hyman et al., 2020 p. 26). Nurses are often the first to recognize the initial warning signs of ASD. Through developmental assessments that are administered at well child checkups, the nurse can identify which children are at a high risk. Thorough and accurate assessments by nurses can result in ASD being caught in earlier stages and toddlers getting the necessary intervention services sooner.

Diagnosing Autism Spectrum Disorder is a combination of parent-completed questionnaires and interactive assessments administered by healthcare professionals. A variety of screening tools including, the Modified Checklist for Autism in Toddlers (M-CHAT), the Screening Tool for Autism in Toddlers and Young Children (STAT) and the Rapid Interactive Screening Test for Autism in Toddlers (RITA-T) can be used to identify children who are at high risk for ASD. “Use of ASD-specific screeners in young children has been shown to aid in early identification and to reduce disparities in age of diagnosis, provided that the child is referred for a developmental evaluation after a positive screening result” (Coulter et al., 2021 p.). “Universal screening is recommended because symptoms of ASD can be identified in early childhood, and a diagnosis of ASD by skilled professionals is accurate in children as young as 18 months of age” (Hyman et al., 2020 p. 37). “Studies have shown that the use of the M-CHAT leads to identification of ASD at younger ages” (Carbone et al., 2020 p. 2119). Initial screenings provide a score that yields a low, medium or high risk. Follow-up screenings are recommended for children who score in the medium and high-risk categories. Nurses play an important part in

ensuring all testing is completed, so that timely and accurate results can be obtained. Nursing staff can also provide referrals and set appointments for follow-up testing as necessary. Through active participation in screenings, nurses can help increase early detection and intervention of ASD.

Early intervention is one of the key components to improving developmental outcomes for children diagnosed with Autism. According to McCarty and Frye “one common theme for treatment of ASD is that the earlier an intervention is started, the better the outcome” (2020 p. 2). Participating in early interventions can significantly enhance cognitive, language and social skills in toddlers, especially if caught in earlier stages. According to American Academy of Pediatrics, “children with milder cognitive and adaptive symptoms may be the ones most likely to have significant change with early intervention services” (Hyman et al., 2020 p. 42). Starting treatment sooner can have a positive impact on the development of a child with autism and can lead to improved behavior. “The goals of treatment of children with ASD are to minimize core deficits and co-occurring associated impairments, maximize functional independence by facilitating learning and acquisition of adaptive skills and eliminate, minimize or prevent problem behaviors that may interfere with functional skills” (Hyman et al., 2020 p. 30). “Children with ASD require significant support from the educational, medical, and social systems” (McCarty& Frye, 2020 p. 3). These children are often complex and need treatment from several disciplines this could include occupational therapy, speech therapy and possibly a behavioral specialist. Nurses, as a point of contact, provide information and education to families that have children who have recently been diagnosed with autism. They collaborate with the multidisciplinary team to create an individualized care plan to meet the needs of the toddler and family. In addition to medical treatment, the nurse provides support and comfort for the family of

a child who is newly diagnosed with ASD. By facilitating early behavioral and therapy services, the nurse serves as an advocate for the patient and family, helping optimize the developmental improvement of the patient.

Although early screening and intervention have proven to help with progression of development in ASD, there are still some barriers that propose a challenge to effectiveness of these processes. “Delayed identification may be related to several factors including low rates of ASD screening, lower performance characteristics of ASD screening instruments in “real-world” practice, and barriers to screen-positive children being evaluated for ASD in a timely fashion” (Carbone et al., 2020 p. 2120). “A barrier to universal screening is integrating screening within the workflow of well-child check-ups. Healthcare professionals often lack the time, training, and staffing needed to administer initial or follow-up screenings at well-child check-ups. According to Steinman et al., “Most PCPs omit the follow-up interview questions due to inadequate time and/or personnel to complete it or the mere lack of awareness of this critical step” (2021 p. 265). This leads to either missed or late diagnoses of autism, ultimately hindering the patient from receiving treatment sooner. Healthcare disparities like racial and language differences are another contributing factor to delayed identification and limited reporting of symptoms of autism. “Language barriers, inaccurate translations and low parental literacy may compromise use of parent-completed questionnaires. Limited understanding of cultural differences experienced by patient’s family and lack of trust of the health care provider may further limit identification and reporting of symptoms of autism” (Hyman et al., 2020 p. 41). Addressing and correcting these barriers may drastically increase the effectiveness of early screenings. Creating screening tools in multiple languages or providing an interpreter is one way to provide for communities who do not read or speak English. The biggest challenge to proper diagnosing of autism in toddlers is the

lack of identifiable symptoms in the age group. “Children with milder symptoms and/or average or above-average intelligence may not be identified with symptoms until school age, when differences in social language or personal rigidities affect function” (Hyman et al., 2020 p. 54). Providing trainings and educations so that early signs and symptoms are recognizable is essential for nurses to effectively and efficiently implement early screening.

Early screening and interventions of autism spectrum disorder in toddler years remain vital in improving cognitive and behavioral development. Detecting ASD as early as possible allows for children to receive the specialized care that is needed. These interventions significantly enhance communication, learning and social skills. Nurses play a pivotal role by administering screenings, providing referrals and educating on the multiple aspects of the disorder. Despite ongoing challenges, such as lack of time and training and healthcare disparities, nurses are still capable of ensuring early identification and interventions are accomplished effectively and efficiently. Nurses act as patient advocates and collaborate with the interdisciplinary team to provide holistic care and emotional support to the families during their journey with ASD. Research shows that the most effective treatment for autism is early intervention, therefore nurse initiation of early screening practices and early detection is the key to improvements of social and cognitive development. By implementing early screening tools and interventions, nurses contribute to the effective care of autism that can positively shape the outcome for patients and their families.

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