


Visuomotor Profiles in Hispanic Children with Autism

Preliminary findings and impact on disparities

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Disparities in the Autism Community

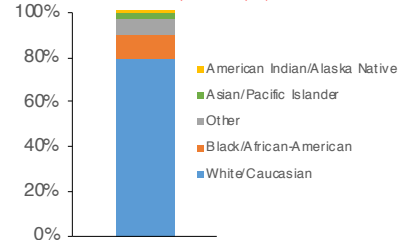
United States: **1 in 54 children**
(CDC, 2018)

Racial/Ethnic Groups

Hispanics: **1 in 99** *(CDC, 2018)*


Women & Girls

1:151 females vs. 1:37 males
(Constantino & Charman, 2012; Loomes et al., 2017)

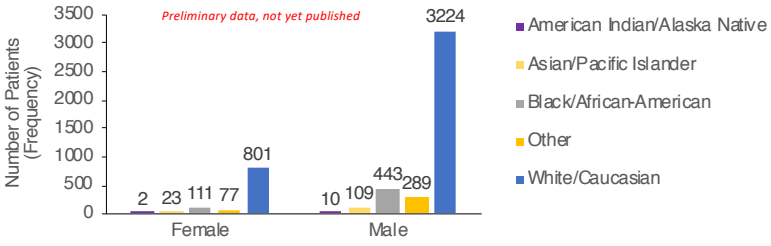


Local children's hospital EMR review:
All autism charts from 2007-2018, age 0-21
Kata, Bowman, Mauk, & Miller (under review)

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Disparities in the Autism Community



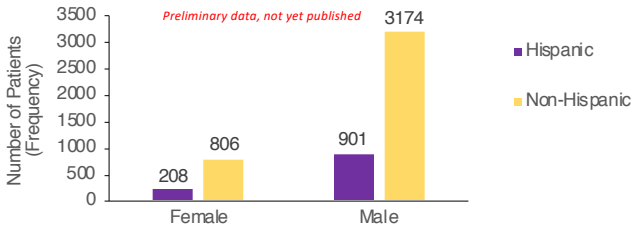
1:4 ratio of females to males
1:4 ratio of non-white children to white children

Kata, Bowman, Mauk, & Miller (under review)

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Disparities in the Autism Community



1:4 ratio of Hispanic to white non-Hispanic females
1:3.5 ratio of Hispanic to white non-Hispanic males
1:15 ratio of Hispanic females to white non-Hispanic males

Kata, Bowman, Mauk, & Miller (under review)

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Age of Diagnosis by Gender & Ethnicity

7.6 yrs in girls, 7.1 yrs in boys when symptoms are mild, despite equivalency when symptoms are severe (Chen, Marvin, & Lipkin, 2015)

8.8 yrs among Hispanic children, 6.3 yrs among white non-Hispanic children (Mandell et al., 2002)

Delayed diagnosis → later intervention → worse outcomes

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Centers for Disease Control SLAITS data

n = 840 (M = 686, F = 154)

For males (but not females), mean age of first concern was higher at poverty levels (PL) 3 and 4 for White Hispanics vs. White Non-Hispanics

Preliminary data, not yet published

- \$ PL 1: ≤ 100%
- \$\$ PL 2: 101-200%
- \$\$\$ PL 3: 201-400%
- \$\$\$\$ PL 4: > 400%

Miller, Thomi, Patterson, & Nandy (under invited revision)

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Centers for Disease Control SLAITS data

n = 840 (M = 686, F = 154)

For males (but not females), mean age of first concern was also higher at poverty levels (PL) 3 and 4 for Other Hispanics vs. Other Non-Hispanics

Preliminary data, not yet published

- \$ PL 1: ≤ 100%
- \$\$ PL 2: 101-200%
- \$\$\$ PL 3: 201-400%
- \$\$\$\$ PL 4: > 400%

Miller, Thomi, Patterson, & Nandy (under invited revision)

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Centers for Disease Control SLAITS data

n = 840 (M = 686, F = 154)

The opposite pattern existed for (c) Black Hispanic vs. Black-Non-Hispanics

Preliminary data, not yet published

- \$ PL 1: ≤ 100%
- \$\$ PL 2: 101-200%
- \$\$\$ PL 3: 201-400%
- \$\$\$\$ PL 4: > 400%

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Intersectionality & Diagnostic Tools



Minority girls at greatest risk for missed or delayed diagnosis
(Slopen et al., 2016; Alegria, Vallas, & Pumariega, 2011)

Still primarily **screening based on social symptoms**
 (e.g., poor eye contact)

- This leaves room for biases rooted in social norms
- Few objective, sensitive, specific tools available to characterize non-social symptoms
- Gold-standard diagnostic tools tailored to male symptom profile

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Toward More Objective Markers...



Atypical visual and motor control common in ASD
(Freitag et al., 2007; Lloyd et al., 2013; Miller et al., 2019; Morris et al., 2015; Mosconi et al., 2015; Mostofsky et al., 2007; Travers et al., 2013)

Visuomotor skills emerge much earlier than core symptoms,
 but are not usually prioritized for intervention *(McLeod et al., 2017)*

Critical for ADLs, communication & functional independence
(Nebel et al., 2016; Georgopoulos & Grillner, 1989)

May be a promising biomarker, less susceptible to social bias?

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Ongoing Project: Preliminary Data



Assess differences in knowledge of visuomotor symptoms of ASD and beliefs about barriers to assessment, diagnosis, and care between Hispanic and WNH caregivers and self-advocates.

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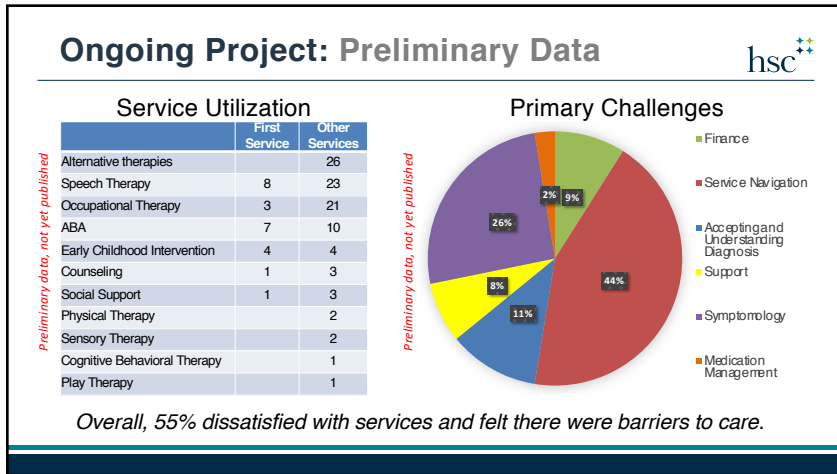
Ongoing Project: Preliminary Data



Variable	Level	Frequency	Percent	Frequency	Percent
		Hispanic		Non-Hispanic	
Race/Ethnicity	White	7	17%	23	56%
	Black/African-American	1	2%	5	12%
	American Indian/Alaskan Native	0	0%	0	0%
	Asian	0	0%	1	2%
	Native Hawaiian/Pacific Islander	0	0%	1	2%
	Other	2	5%	1	2%
	Total (n = 41)	10	24%	31	76%
Sex	Male	9	22%	24	59%
	Female	1	2%	7	17%
	Total (n = 41)	10	24%	31	76%
Household Income	Less than \$10,000	0	0%	1	2%
	\$10,000 to \$24,999	0	0%	1	2%
	\$25,000 to \$49,999	3	7%	6	15%
	\$50,000 to \$100,000	3	7%	16	39%
	\$100,000 or more	4	10%	7	17%
		Total (n = 41)	10	24%	31

Preliminary data, not yet published

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Ongoing Project: Preliminary Data

12.5% of Hispanic caregivers (relative to 7.7% of white non-Hispanic caregivers) reported motor symptoms as their first concern about their child's development.

BUT, only 12.5% of Hispanic caregivers (relative to 26.9% of white non-Hispanic caregivers) were aware that sensorimotor problems were a symptom of ASD *prior* to diagnosis.

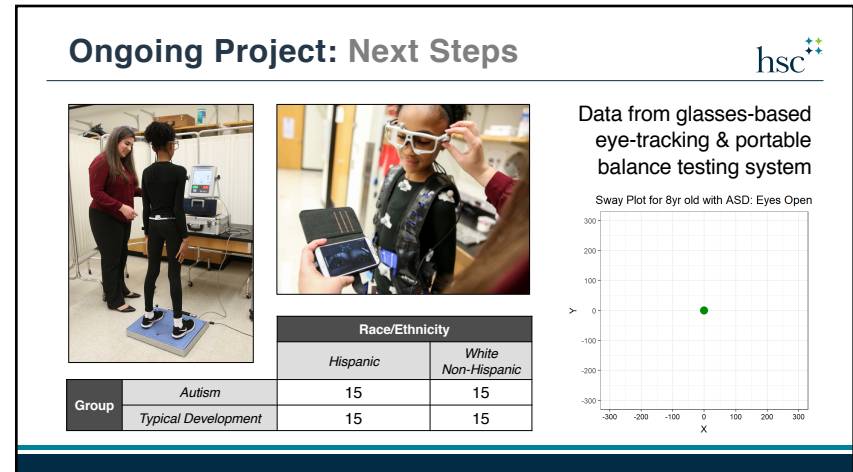
Preliminary data, not yet published

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Ongoing Project: Next Steps

Quantify differences in the visuomotor integration skills of Hispanic vs. white non-Hispanic children with and without ASD.

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Conclusions & Future Directions hsc⁺

Major disparities exist in who gets diagnosed, and when.

Families struggle with **access to and coordination of care**, especially services related to motor problems.

Untreated motor problems can significantly impact learning opportunities, independence, and quality of life.

Provider knowledge may also play a role – need to assess and potentially educate primary-care physicians and educators.

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Long-Term Goals hsc⁺

Paradigm shift away from reliance on subjective provider judgments of social skills and toward efficient, objective, quantifiable measures of non-social symptoms.

Provider awareness that underrepresented communities need **heightened surveillance and support**

Reduction in health disparities as a result of **more objective tools and increased knowledge**

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Autism does not discriminate.

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Thank you to our supporters...

Mentors & Collaborators

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Questions?

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