

- Bowlby, J. (1951). Maternal care and mental health. World Health Organization Monograph (Serial No. 2).
- Bowlby J. (1960). Separation anxiety. *International Journal of Psychoanalysis*, 41:89-113.
- Cook, E., Kieffer, J. E., Charak, D. A. & Leventhal, B. L. (1993). Autistic disorder and post-traumatic stress disorder (case study). *Journal of the American Academy of Child and Adolescent Psychiatry*, 32:6, 1292-3.
- Howlin, P. & Clements, J. (1995). Is it possible to assess the impact of abuse on children with pervasive developmental disorders? *Journal of Autism and Developmental Disorders*, 25:4, 337-353.
- Rutgers, A. H., Bakermans-Kranenburg, M. J., Van Ijzendoorn, M. H. & Van Berckelaer-Onnes, I. A. (2004). Autism and attachment: a meta-analytic review. *Journal of Child Psychology and Psychiatry*, 45(6):1123-1134.
- Salmon, K. & Bryant, R. (2002). Posttraumatic stress disorder in children: the influence of developmental factors. *Clinical Psychology Review*, 22, 163-188.
- Scheeringa, M., Wright, M. J., Hunt, J. & Zeanah, C. (2006). Factors affecting the diagnosis and prediction of PTSD symptomatology in children and adolescents. *American Journal of Psychiatry*, 163:4, 644-651.
- Turk, J., Robbins, I. & Woodhead, M. (2005). Post-traumatic stress disorder in young people with intellectual disability. *Journal of Intellectual Disability Research*, 49(11):872-875.

## Commentary on Separation, Autism, and Residential Treatment:

### Tapping the Strengths of the ASD Parent

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Our understanding of autism and PDD's ("ASD") has leapt forward over the last two decades, but it still confounds the most experienced clinicians. Research is beginning to provide *some* scientific data on ASD, but much remains unknown.

There is solid research to refute Bettelheim's "*Refrigerator Mother*" hypothesis. Studies also report that most ASD children do not differ in early attachment behaviours from their typical counterparts. Although a subset may display "disorganized attachment", even this may be more attributable to associated intellectual disabilities. The literature on the interactions between ASD and co-morbid mental health conditions is scarce. We know these children suffer a markedly higher risk for

psychiatric disorders (often presenting in atypical patterns). Yet, the manifestation and impact of a psychiatric syndrome in a child with ASD remains largely speculative.

The best clinical research into improving the outcomes for children with ASD remains flawed, but points to the importance of early and *meaningful* support for child *and* parent development. Though informed pharmacological treatment can sometimes be very helpful, it does not replace adequate attention to the support needs of families. The case history of *J.D.* reflects the remarkable resilience of parents in spite of daunting childhood disorders, and how appropriate supports promote better outcomes for all.

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