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Objective

Development of Autism Care Pathways in midwifery and obstetric care is fundamental to provide a multidisciplinary approach to support the complexity of autistic families needs.

80% of autistic women are not diagnosed by the time they turn 18. Therefore, many pregnant women may not have a diagnosis or support in place. Women may 'mask' or hide their needs in childhood and adulthood, leading to lifelong health inequalities impacting on psychological, physiological and sociological wellbeing of families.

In pregnancy, this may lead to crisis support and intervention from a wide multidisciplinary team. Midwives and Obstetricians need to develop care pathways to support this complex health presentation in partnership with autistic pregnant women.

Background





Can their care trajectory and outcomes be mapped and interventions monitored and accounted for?

Prevalence

1 in 44 people have autism. If your hospital has 4000 births a year up to 92 patients may be autistic.

Does this correlate to your current statistics?



Increased Prevalence:

Pre diabetes Diabetes Type 1 and 2 PCOS Hypertension **Thyroid Disorders Autoimmune Disorders** Obesity **Cardiac Arrhythmia**

Co-occuring Conditions/Considerations:

Connective Tissue Disorders Ehlers Danlos Syndrome Fragile X Fibromyalgia **Sensory Processing Issues** Learning Difficulties Dyslexia, Dysgraphia, Dyspraxia, Dyscalculia **ADHD Eating Disorders Non-Binary/ Gender Fluid**

Autism

Outcomes- Increased Prevalence:

LSCS **Pre-eclampsia Preterm labour and birth** PTSD Suicide **PN Depression** Anxiety

Increased Prevalence:

Non compliance with care and treatment Exploitation **Physical/Sexual/Domestic Abuse Social Services Intervention**





Raising autism awareness, understanding and acceptance in maternity and obstetric care and pre-registration training is key.

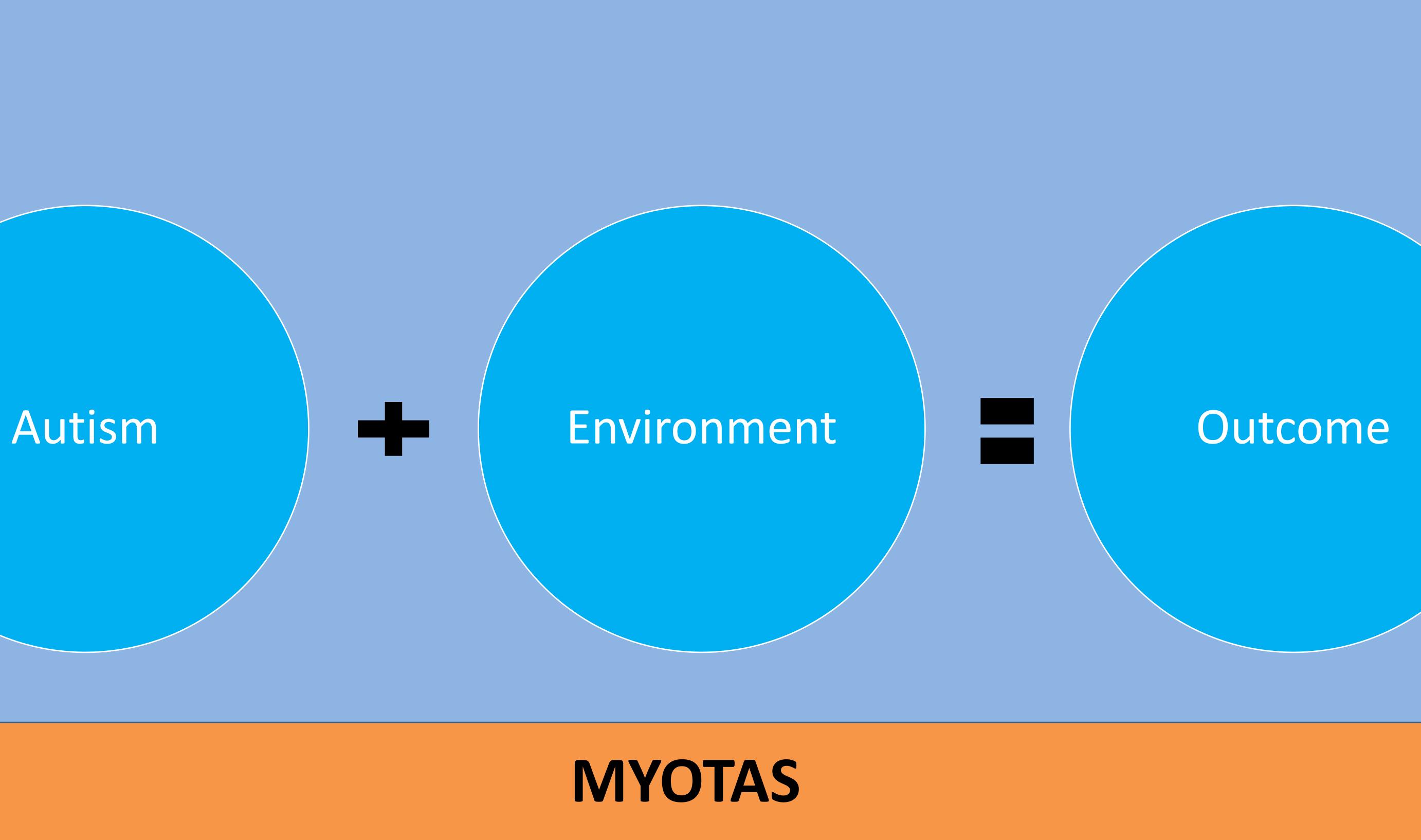
Discussion

Linking care outcomes and implementing targeted care provision is crucial to improve inequalities by exploring the medical and care needs of these women with empathy and compassion.



Dr Luke Beardon

Developing Autism Care Pathways in Obstetric Care is fundamental to address health inequalities.



MY OWN TIME AND SPACE



Sensory Issues

Communication

Extreme Anxiety

Challenges Autistic People might experience

•May have hyper or hypo sensitivity to sounds, light, tastes, touch, speech, personal space, eye contact, pain and bodily functions. Therefore, it is important to discuss in detail what their sensory needs are and adjust the environment to accommodate these needs.

•May have difficulty understanding small talk, jokes, social norms, social cues, double meanings, facial expressions and taking turns to talk.

•Autistic people may be very anxious in new places and meeting new people, anxious about changes in routine and unexpected events and transitions. •If things become overwhelming this may result in a 'shutdown' or a 'meltdown'. This can be very exhausting, lots of time and space will be needed to recover. •Some people may cope by non attendance and non compliance with medical care. Others may be highly anxious throughout pregnancy and motherhood.



STRUCTURE

POSITIVE

EMPATHY

LOW AROUSAL



SPELL Framework (National Autistic Society)

Continuity of Carer/ Personal Care Plan

- 'Tell me what you need to make it ok'

• Predictable routine and environment can help an autistic person feel calm, safe and in control.

•Be positive, kind and understanding without bias- especially in new situations and challenges. • Support the decisions and explain procedures, take their lead

 Use empathy to communicate to reduce anxiety and distress • Be accepting of behaviour that may be needed

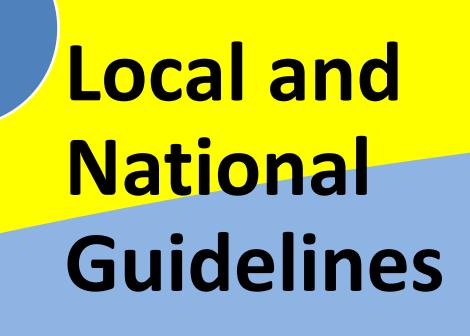
 Low sensory environment my help reduce anxiety •Low lights, sounds, no small talk, minimal interruptions

 Help create and maintain links to a support network – family, friends and professionals. •Ensure clear links and updates are in place with GP's and Health Visitors prior to discharge





Pre-Registration and Post-Registration Training



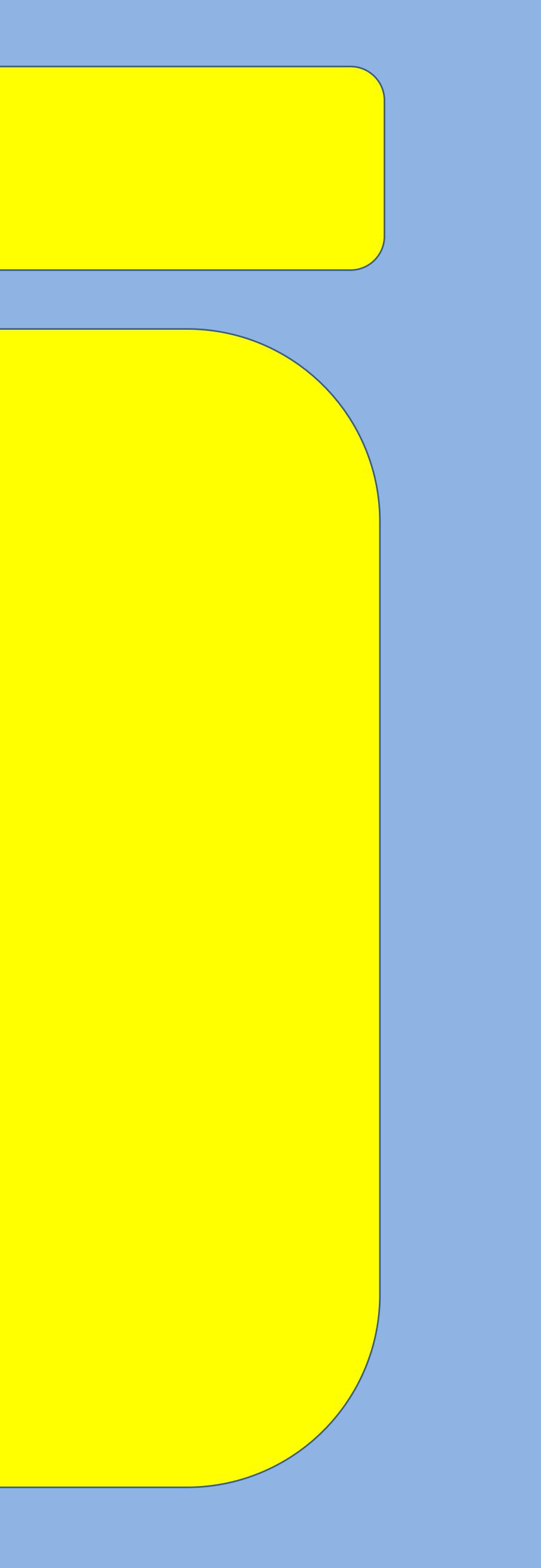
Autism Leads in Obstetrics and Midwifery National Policy Development in Maternity and Obstetric Care



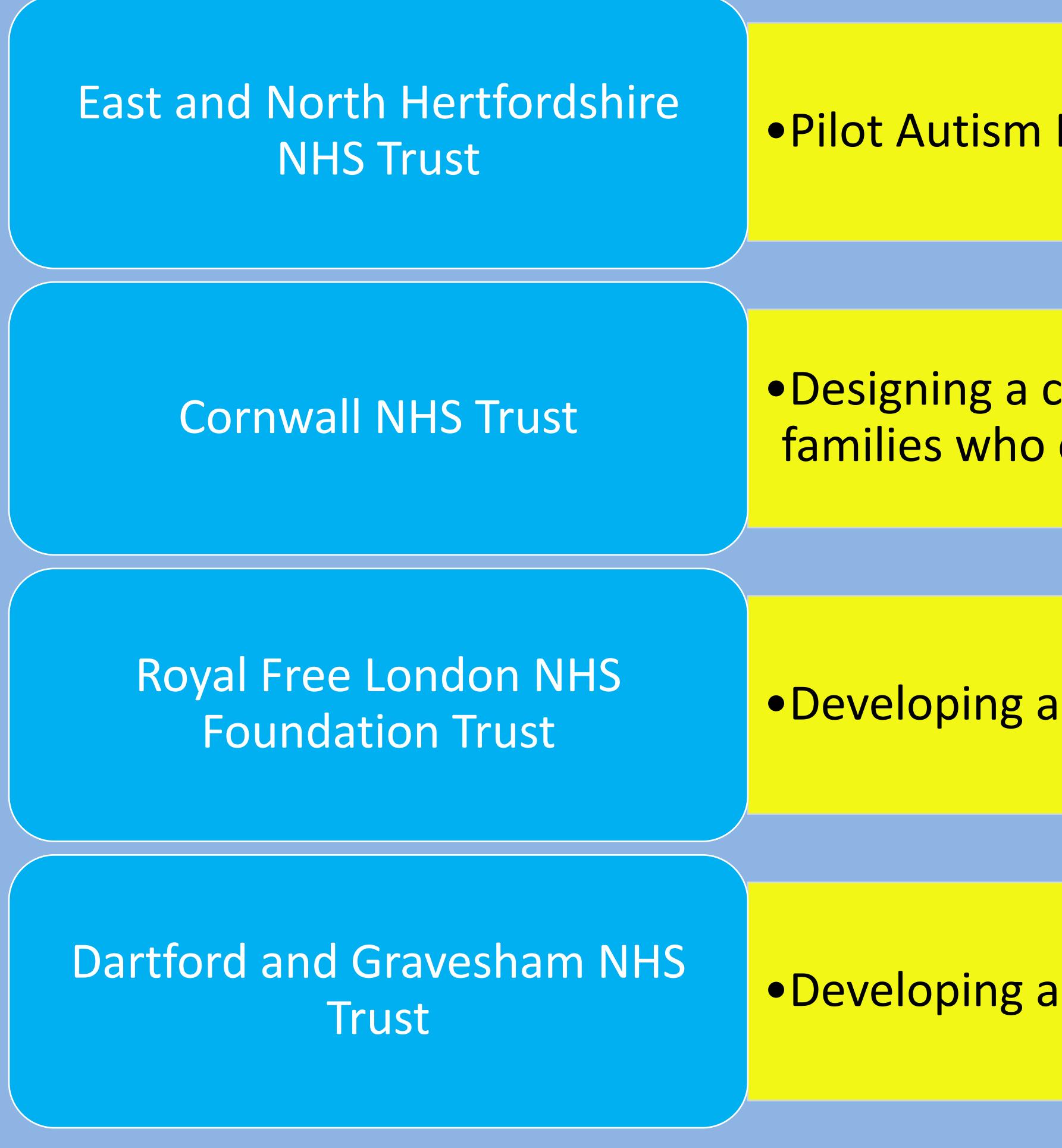
Personalised Care Plan **Continuity of Carer** > Maternity Autism Passport Screening Tools at booking (NICE recommends AQ10/AQ50 questionnaires) > Multidisciplinary Teams > Alerts on hospital notes, computer records, wristbands >Maternity Voice Partnerships – work in partnership/co-production Perinatal Mental Health Teams **Example 2 Learning Disability Leads** Guidelines **Autism Leads >Leaflets** >Mandatory Training > Accessibility for patients- consider posting videos and ward layouts Long term Care Planning with Health Visitors and GP's for autistic families

Best Practice Guidance









• Pilot Autism Midwifery Led Clinic.

 Designing a clinical change project around caring for families who experience Neurodiversity in Maternity Care.

Developing an Autism Care Pathway for Maternity

Developing a Neurodiversity Pathway in Maternity

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- https://journals.sagepub.com/doi/full/10.1177/13623613221089374
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Maternity and Autism Research Group

