



News Release

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CHILDREN WAITING TOO LONG FOR ACCESS TO AUTISM PROGRAMS, AUDITOR GENERAL SAYS

(TORONTO) Screening for autism is often occurring late, and children who are diagnosed then face long waits for access to some of the programs that could help them, Auditor General Bonnie Lysyk says in her *2013 Annual Report*. In addition, certain services are not being directed to those that may benefit the most.

“The Ministry of Children and Youth Services has quadrupled autism funding over the last decade, but there are still more children with autism waiting for government-funded services than there are children receiving them,” Lysyk said today following the release of the Report.

Intensive Behaviour Intervention (IBI) is the Ministry’s primary autism program, and the Ministry has also introduced several other programs, including applied behavioural analysis (ABA)-based services, and respite programs.

The audit found that children with autism are diagnosed in Ontario at a median age of a little over 3 years, later than the screening period of 18 to 24 months old endorsed by the Canadian Pediatric Society for children with risk factors. Then, due to long wait lists, Ontario children do not typically start IBI until almost age 7. Research has shown that children who start IBI before age 4 have better outcomes than those who start later. In addition, although scientific research shows that children with milder forms of autism have better outcomes with IBI, the program is currently available only to children assessed with more severe autism.

Following are some of the Auditor General’s other significant findings:

- ABA-based services, the only type of funded therapy available to children with mild to moderate forms of autism, allow a child to work on only one goal at a time and may not be sufficient for those who have many behavioural problems or goals to achieve. After achieving one goal, the child returns to the bottom of the wait list.
- The lead service agencies decide how to allocate Ministry funding for IBI between two service-delivery options: direct service, where the child receives service directly from a service provider at no cost; or direct funding, where the family gets funds from the lead agency to purchase private services. Wait times for IBI services can differ significantly between the two options and among regions. In one region in 2012, the average wait for IBI services under direct funding was five months longer than under direct service. In another region, the situation was reversed.
- Children discharged from IBI services in 2012/2013 under the direct-funding option received on average almost one year more of services than those under the direct-service option (35 months versus 25 months). As well, children receiving IBI under the direct-service option often received fewer hours of therapy than they were approved for.

- Children transitioning to high school and beyond receive minimal support.
- Since 2006, the Ministry has reimbursed up to 60 individuals a total of \$21 million for the cost of IBI therapy and other expenses outside of the regular service system. Per child, this represents more than double the value of services that a child in the regular service system typically receives.

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For more information and to view the full *2013 Annual Report*, please visit www.auditor.on.ca