

Special Communities Special Education

Technical Assistance Advisory SPED 2014-1: *DSM-5 Changes and the Impact on Students with Autism Spectrum Disorders (ASD)*

To:

Administrators of Special Education, Parents, and Other Interested Parties

From:

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Date:

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I write this advisory in response to some significant changes in the Diagnostic and Statistical Manual of Mental Disorders (DSM), which is a key diagnostic tool.

While special education eligibility is not a medical decision or a diagnosis, making a determination of eligibility often includes medical assessment and diagnostic terminology. In the past, the Department of Elementary and Secondary Education (Department) has emphasized that eligibility for special education is an educational determination¹ made by a Team of people familiar with the child and with assessment information available about the child. However, the DSM is used by health care professionals in the United States and much of the world as an authoritative guide for making diagnoses. Therefore, changes to the DSM deserve special mention.

The purpose of this advisory is to:

- a. Confirm that changes in the DSM-5 diagnostic categories do not alter a student's current eligibility status or IEP, nor does it change any of the federal and state laws or regulations related to the determination of special education eligibility or services.
- b. Provide some detail on the changes to the DSM.

Background DSM-5 Changes:

The latest version of the DSM, the DSM-5, modifies previously separate DSM sub-categories of diagnoses in the area of Autism; including, Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS), Asperger's Disorder and Autistic Disorder. All these subcategories are no longer separately named in the DSM-5; they are now subsumed under the broad classification of Autism Spectrum Disorder.²

This diagnostic name change may be alarming to parents of students with these current diagnoses who worry that their children's eligibility for special education services will be affected based solely on the DSM-5 changes. It is important to note, however, that the DSM-5 Committee stated that all individuals who currently have a DSM-4 diagnosis of Asperger's Disorder, PDD-NOS, or Autistic Disorder should be given the diagnosis of Autism Spectrum Disorder.³ This technical change in diagnostic category in the DSM-5 will not alter a student's current eligibility status or IEP, in part because there is no substantive change in the DSM-5 with respect to the criteria for each disorder, but also because special education eligibility and IEP determinations are based on federal and state special education regulations, which include definitions of "disability" for purposes of special education eligibility.⁴

Readers are reminded that the definition of "autism" in the Massachusetts Special Education Regulations (MSER) explicitly defers to the definition of autism that appears in the federal Individuals with Disabilities Education Act regulations. It states that "autism" is "a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences." 34 CFR §300.8(c)(1). The federal "autism" definition, and thus, the Massachusetts definition, is unaffected by the changes to the DSM-5. As such, a student's eligibility and IEP remains the same as well.

The DSM-5 contains a new diagnostic category called Social Communication Disorder. Students who struggle with social (pragmatic) communication will typically fall into one of two diagnostic categories in the new DSM-5: Autism Spectrum Disorder (ASD) or Social Communication Disorder (SCD). According to the DSM-5, ASD must be ruled out before a diagnosis of SCD may be given.⁵

School personnel and parents should be knowledgeable about what the DSM-5 SCD diagnosis means and not confuse it with the MSER definition for "communication impairment." The MSER definition does not include difficulties with social communication and would most likely not be an appropriate disability identification for students presenting solely with social communication issues. Some evaluators may give students with social (pragmatic) communication difficulties the DSM-5 diagnosis of SCD, and not ASD. For these students, IEP Teams making an eligibility determination will most likely need to crosswalk to the MSER definition of autism, not communication impairment, to analyze whether that definition fits the evaluative information available to the Team. As in all eligibility determinations, the Team will also need to consider whether the student's disability negatively impacts the student's ability to make effective education progress.

For students on the autism spectrum, readers are also reminded that G.L. c. 71B, §3⁶ requires IEP Teams to consider seven areas of need when developing the IEP of a student on the spectrum.

1. The verbal and nonverbal communication needs of the student.
2. The need to develop social interaction skills and proficiencies.
3. The needs resulting from the student's unusual responses to sensory experiences.
4. The needs resulting from resistance to environmental change or change in daily routines.
5. The needs resulting from engagement in repetitive activities and stereotyped movements.
6. The need for any positive behavioral interventions, strategies and supports to address any behavioral difficulties resulting from autism spectrum disorder.

7. Other needs resulting from the student's disability that impact progress in the general curriculum, including social and emotional development (e.g. organizational support, generalizing skills, practicing skills in multiple environments).¹

Conclusion:

If a student has a diagnosis on the autism spectrum, his or her eligibility for special education services in Massachusetts does not change due to recent changes in the DSM-5 related to children on the autism spectrum. The DSM-5, although widely used, is only one diagnostic tool. Additionally, federal and state special education laws and regulations, not the DSM-5, prescribe the criteria for the listed definitions of disability, such as autism.

1 See "Is Special Education the Right Service" at: <http://www.doe.mass.edu/sped/docs.html>.

2 American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Washington, DC, American Psychiatric Association, 2013. Discussion of Autism Spectrum Disorder occurs beginning on p.51

3The diagnostic criteria in DSM-5 for ASD identify two key areas: "persistent deficits in social communication and social interaction across multiple contexts..." as well as "restricted, repetitive patterns of behavior, interests, or activities..." The DSM-5 provides significant detail on both of these areas, and indicates that either of these criteria may be met through information provided "currently or by history." See also: <http://www.dsm5.org/Pages/Default.aspx>

4See Section 28.02(7) of the Massachusetts Special Education Regulations.

5The DSM-5 definition of social (pragmatic) communication disorder includes persistent difficulties in the social uses of verbal and nonverbal communication. Because social communication deficits are one component of autism spectrum disorder (ASD), it is important to note that social (pragmatic) communication disorder cannot be diagnosed in the presence of restricted repetitive behaviors, interests, and activities (the other component of ASD). See also: <http://www.dsm5.org/Pages/Default.aspx>

6 See also Technical Assistance Advisory 07-1 at: http://www.sped/advisories/07_1ta.html