What I’ll talk about today

• CDC’s “Learn the Signs. Act Early.” –what is it?
• The role of health care professionals (HCPs) in “Learn the Signs. Act Early.”
• How our HCP outreach strategy has changed
• Examining strategies for the future
• The importance of “the village”
Developmental Disabilities Activities at the CDC

“Learn the Signs. Act Early.” Campaign and Program

Surveillance

• Autism and Developmental Disabilities Monitoring (ADDM) Network
  • Metro Atlanta Developmental Disabilities Surveillance Program (MADDSP)

Prevention

Research/Epidemiology

• Centers for Autism and Developmental Disabilities Research and Epidemiology (CADDRE)
  • Study to Explore Early Development (SEED)

National Center on Birth Defects and Developmental Disabilities
www.cdc.gov/ncbddd

Learn the Signs. Act Early.
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Play Baby Steps Video

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“Learn the Signs. Act Early.”

Why?

• In the United States, about 1 in 110 children has an autism spectrum disorder
• About 1 in 6 children aged 3-17 has a developmental disability
• Many children with a developmental disability are not identified until after entering school
• Early intervention can have a significant impact on a child’s ability to learn new skills and reduce lifetime costs

We need to change the way we talk about child development.

“Boys just talk later than girls.”

“I’m sure it’s just a phase, she’ll outgrow it.”

“If you’d just stop babying her…”

“He’s just independent by nature.”

“Her height and weight is healthy for her age, she’s fine.”

“You worry too much!”

“Come back in 6 months…”
CDC's “Learn the Signs. Act Early.” Program

Overall Program Goal:
To promote early identification and early intervention to improve quality of life for children with developmental disabilities and their families

Three Strategies:
1. “Learn the Signs. Act Early.” Campaign
   Increase awareness, knowledge, and desired behaviors
2. “Act Early” Initiative
   Facilitate communication/coordination among systems
3. Research & Evaluation
   Identify areas for strengthening and test innovative strategies for campaign implementation

“Learn the Signs. Act Early.” Campaign

Goals:
• Increase awareness of developmental milestones and early warning signs of developmental disability;
• Increase dialogue among parents and providers about child development;
• Spur early action on developmental concerns
Target Audiences

• Primary audience:
  – All parents of children aged 4 and under

• Secondary audiences:
  – Health care providers
  – Early educators

Campaign Objectives

Parents of young children…

– Know that developmental milestones exist
– Monitor their child’s development
– Recognize some early warning signs of delay
– Know the importance of acting early
– Initiate discussion with provider about development
Campaign Objectives

Early Educators…

– Know that developmental milestones exist
– Know the early warning signs of delay
– Have self-efficacy to talk with parents about development
– Aid in monitoring development
– Have and use campaign materials

Campaign Objectives

Health Care Providers who serve young children…

– Initiate discussion with parent about development
– Are receptive to parental concern (and take action)
– Have and use campaign materials
Campaign Resources

FREE Resources
- Parents
- Health Care Providers
- Early Educators

Other FREE Materials

www.cdc.gov/actearly
1-800-CDC-INFO
Online Tools & Resources

- Printable Milestone Checklists
- Milestones Quiz Widget
- E-Cards
- Videos, PSAs
- Website linking instructions, badges, buttons
- Interactive Milestones Chart
- “If You’re Concerned…”: “What to say”, “While you wait”
- “Go Out & Play! Kit” for early educators

Learn the Signs. Act Early.

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Among Those Who Have Heard of the Campaign...

Pediatricians (Daniel et al., Public Health 2009)
- More confident discussing cognitive development with parents
- More likely to be aware of resources available for referral, treatment
- Likely to have resources to educate parents

Parents*
- Know the developmental milestones their child should be reaching for his/her age
- Ask the nurse or doctor for information about child development
- Talk with their child’s teacher about their child’s development
- Feel confident that they can find services to help

*not yet published

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…so that our communities’ dialog about child development sounds more like…

“…I noticed that too, let’s check with her doctor.”

“Did you know you can ask the doctor for a screening?”

“I feel so much better after completing that checklist!”

“See, it says here that’s typical for his age.”

“Here’s a list of milestones to be looking for until our next visit.”

“Doctor, I’m concerned…”

“Let’s have you come back soon to talk more, this is important.”

“Let’s make a few calls for more help.”
Success of LTSAE: Health care professionals must be part of the “village”!

The Role of HCPs in LTSAE

• Very important “village” people
  – Ongoing surveillance, communicate with parents about all aspects of development

• Trusted resource
  – Provide trustworthy information, anticipatory guidance, high-quality educational materials

• Make things happen
  – Receptive to parent concern: take appropriate action (education, screening, referral, etc.)
The Evolution of LTSAE’s HCP Strategy

Outreach → Engagement
Message Channel → Message Recipients
Remembering “the Village”

HCP Strategy Evolution

2002-2003
• Formative stage marked by “traditional” engagement

2004-2008
• “Traditional” outreach
• “In-boxing” as message deliverers
• Identifying preferences
• Beginning to fulfill need for more

2009- Present
• CHANGE all around!
• Outreach → Engagement
• Channel → Recipient
• Creating champions
• OVIVP!

Looking Ahead
• Capitalizing on champions
• Research for the future

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HCP Strategy Evolution

2002-2003
• Formative research
• Campaign materials content adapted from AAP publication
• Materials testing with HCPs
• Campaign “launch” at AAP meeting

2004-2008
• Physicians prefer to hear from physicians; hired Dev. Ped.
• Professional meetings; exhibits/presentations (CME)
• Message channel
HCP Strategy Evolution

Part I

2009- Present
- CHANGE all around!
- Campaign → Program
- Creating champions
- Outreach → Engagement
- Channel → Recipient
- OVIVP!

- CHANGE: new leadership, new energy, new demands = time for new strategy
  - Campaign → Program
- “Act Early Initiative”- physician champions born out of regional summits, resulting state teams
- Need for information + feasibility exam points to residency training + partnerships ripe + importance of physician developed product= ACT Curriculum

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HCP Strategy Evolution

Part II

2009- Present
- CHANGE all around!
- Campaign → Program
- Creating champions
- Outreach → Engagement
- Channel → Recipient
- OVIVP!

- Need/desire for information + feasibility exam points to residency training + partnerships ripe + importance of physician developed product and engaging physicians from ground up = ACT Curriculum
  - Shift from message channel to message recipient
- OVIVP!
  - Midlevel providers
  - Medical assistants/Administrative staff
  - Allied health professionals

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Autism Case Training (ACT): A Developmental-Behavioral Pediatrics Curriculum

- Designed to educate future healthcare professionals on fundamental components of identifying, diagnosing, and managing autism spectrum disorders through real life scenarios
- Case-based learning; seven cases each with a facilitator’s guide and optional supporting presentation and videos
- Aligns with the Developmental and Behavioral Pediatrics Competencies of the Academic Pediatric Association (APA) Educational Guidelines for Pediatric Residency Training
- Developed in collaboration with the Maternal and Child Health Bureau Developmental-Behavioral Pediatrics Fellowship Training Programs
- Endorsed by the American Academy of Pediatrics and the Society for Developmental and Behavioral Pediatrics
- Available at www.cdc.gov/actearly

HCP Strategy Evolution

- Act Early Ambassador Program
- Research to build evidence, test innovations and plan for the future

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Research

• Parents as Detailers to Increase Primary Care Provider Referrals for Early Intervention  
  Daniel Crimmins, PhD, Georgia State University  
  – Parents = channels to physicians  
  – Atlanta pediatric practices  
  – Parents as detailers to deliver LTSAE messages and materials to physicians  
  – Increase use of LTSAE materials, screening, and referrals to EI

• Helping Family Practitioners Improve Developmental Services in Primary Care  
  Laura McGuinn, MD, University of Oklahoma Health Sciences Center  
  – Oklahoma Family Practitioners  
  – 9-mo in office intervention; academic detailing, performance feedback, practice facilitation  
  – Increase surveillance, screening & referral

Research

• Project 3D: Developmental Delays and Disabilities Screening and Referral Project  
  William Schwab, MD, Waisman Center, University of Wisconsin, Madison  
  – Wisconsin Family Practitioners  
  – Develop statewide network  
  – Increase awareness, knowledge about development and Family Centered Care & Communication regarding development; increase surveillance, screening, and referral

• Involving Allied Health Care Professionals in Helping Parents to Navigate Systems for ASD  
  Lily Nalty, M.A., CCC-SLP, University of South Carolina  
  – Examining allied health professionals as VIVPs  
  – Speech Language Pathologists
Summary Points

- Don't assume altruism = action
  - Examine barriers/benefits, perceived and actual
- Don't underestimate the power of champions
  - Credibility, peer group, social norm
- Change is often good - embrace it
- Don't in-box your audience

- Give and take
- Remember all the village people!
- Do your homework
- Be innovative
- ENGAGE

Learn the Signs. Act Early.

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Thank you!

To learn more about “Learn the Signs. Act Early.” please contact me.

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.
For more information

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