Autism Outcomes Are Worse Among Poor and Minority Teens

Paul Shattuck, April 2019
We seek to be THE source for useful, trustworthy statistics

We do this by
- Stakeholder engagement
- Making great info products
- Savvy marketing

So that
- Problems are framed, awareness is raised
- Policies & Programs are grounded in data

In order to
- Support systems-, policy- and program-level efforts to generate measurable improvements in key population-level indicators across the life course
Why a Data Center?

• Billions spent on services, no population-level data on needs & impacts
  – What do people need vs. what they get?
  – What are the outcomes?

• “A needy population doesn’t count until someone counts it”

• Are we “moving the needle”? We need gauges to tell
Extra copies today

www.drexel.edu/AutismOutcomes/AutismIndicators/2018
Youth from households with low income

Struggling financially

40-46%

lived in households with income below 185% of the federal poverty level

Received public benefits

1 in 4

lived in a home that received at least one form of public assistance

Teens with ASD from the lowest income households were the most likely to have unmet health care needs.

NSCH 2016

50-99% of FPL

8%

100-199% of FPL

11%

200-399% of FPL

14%

400% + FPL

Federal poverty level

Source: National Survey of Children's Health 2016
Black teens more likely had difficulty with health and development:

- Communication
- Self-care & adaptive behaviors
- Neighborhood independence
Take-Home Points

- ASD does not affect all equally
- Almost half of youth population are in low-income households
- Poverty-disability nexus: 2-way street
- Services and outcomes are generally worse for minority youth
Recommendations

• NOT primarily a clinical issue
• Systems improvement = priority
• Transition Pathways Initiative is example of a systems approach
• Increase HRSA’s ASD budget
• Population-level data needed to see if we’re moving the needle on outcomes