

Understanding the Three Levels of Autism

By Dr. Brett J. Novick, MS, EdD, LMFT

Understanding the three levels of autism can help parents provide their children with the correct support and interventions.

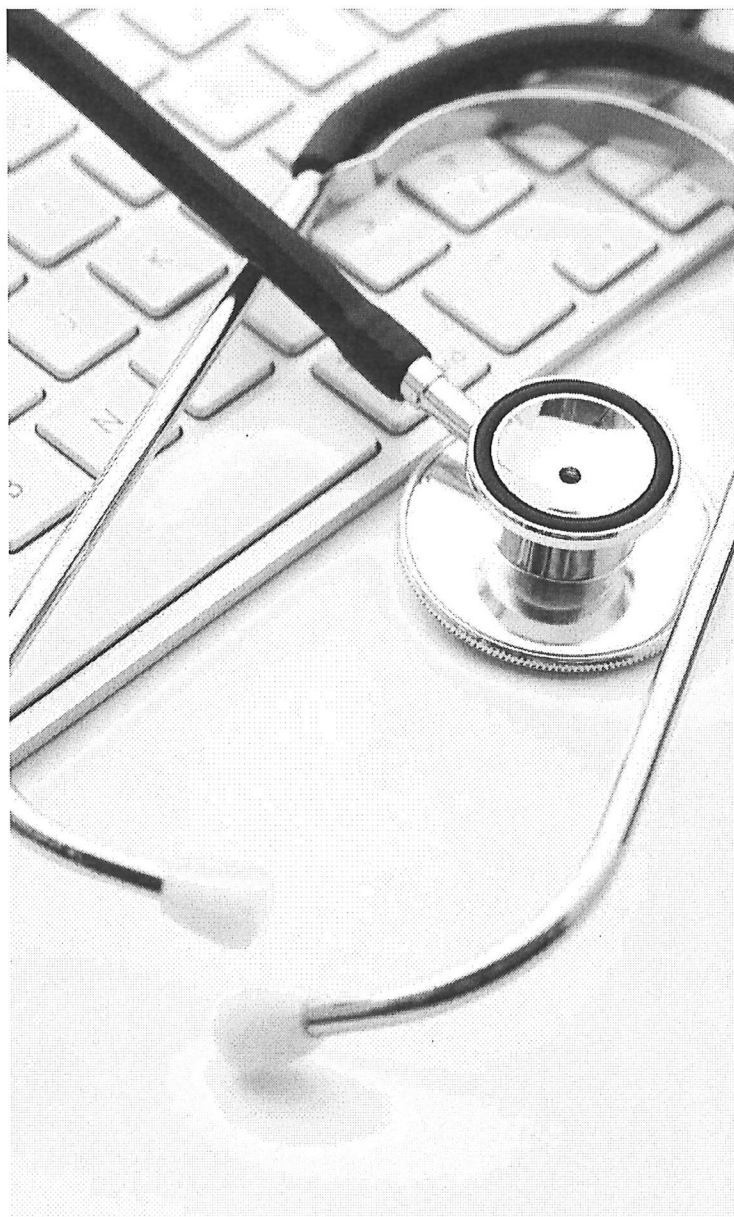
Autism spectrum disorder (ASD) can be described as a developmental disability that affects neurological development. It is often attributed to challenges with communication and many forms of social interactions. Repetitive and limited patterns of behavior may also characterize ASD as well as other subsequent learning disabilities.

Diagnosis and categorization for support

In the recent past, it was common to make distinctions between autism and what was formerly called Asperger's Syndrome. Then, the Diagnostic and Statistical Manual of Mental Health Disorders, 5th edition ([DSM-V](#)), was published, shifting the perspective of looking at autism as a categorization in terms of need and support for the individual.

One's diagnosis with ASD is now based on an individual's ability for independence versus simply their present level of functioning. It is important to note that the level of support is not always static. With the proper and intensive support, a child can be diagnosed on one level of the DSM-V and shift to a higher level.

As children develop, they can become more independent and achieve a higher level. Of course, depending on the individual and their circumstances, the opposite can also be true.



Overview of the level system

In May 2013, when the DSM-V was published, the mental health profession adopted these changes to use the tiered-level system of ASD. The leveled system was decided upon because the diverse strengths and needs of each individual with ASD were not well suited for the previous “one-size-fits-all” manner of diagnosis.

This new system allows for more accurate decisions about which therapies, supports, and services best suit an individual.

So, how does the mental health or medical professional determine these levels? Those diagnosed at level one require support. Without this support, they may have issues with social impairment, such as difficulty socializing or inflexibility in several areas.

Level two is detailed by those who need substantial support due to problems with verbal and nonverbal interactions despite having support and experiencing significant stress when having to deal with most transitions.

Those categorized in level three require the most intensive support and have significant challenges in communication skills or dealing with any form of change in their environment.

Mental health professionals or physicians make these determinations by examining two main aspects of an individual’s functioning: social communication and the level of restrictive and repetitive behaviors the person displays in various circumstances.

Again, the professional’s goal in making this diagnosis should be to determine treatment planning and the degree of care needed for the person in the immediate future.

Level 1: “Requiring support”

An individual who is considered in this first level of ASD diagnosis is classified as requiring support. Without support, such an individual will have some issues with social interaction. This may be seen in terms of the following:





- trouble with social interactions
- lessened interest in socializing with others
- challenges in engaging others in attempted socialization

Support for these individuals may include those who can help them manage emotions, decrease anger and anxiety, improve organization and social skills, and enhance self-control around others. These issues can often be addressed through social skills groups, a social-emotional learning curriculum, or counseling.

Level 2: “Requiring substantial support”

Those persons who are in this second level of ASD diagnosis are characterized as needing a moderate amount of support. In this category, they may display more challenges with social interactions, such as an inability to converse with a peer.

Additionally, they may exhibit a narrowed and intensive focus on particular areas. They also may show a marked level of anxiety or anger when having to transition from one situation to another. More intensive social skills programs and work-based learning programs often address these concerns.

Level 3: “Requiring very substantial support”

When an individual is diagnosed in this category of ASD, they require the highest level of support of those within these criteria. They may have extreme difficulty with social communication or minimal verbal skills.



Additionally, they may display significant repetitive behaviors. When transitions occur, they may also express significant anger, anxiety, or tantrums and may need one-to-one support to aid in communication.

Advocacy is often required to ensure that individuals receive all necessary and tailored services to help foster a strength-based, individualized program.

Labels are meant to have a positive impact

We should never allow a diagnosis to define the individual characteristics and strengths of those we love or with whom we work. A diagnosis is simply a label that determines a list of potential traits and potential means of treating the challenges associated with that label.

It does not define who an individual is and does not account for the changes that can be made with hard work, support, maturity, and time. The most important aspect of recognizing these labels is that support and intervention occur as early as possible to make the most tangible positive impact possible.

A simple diagnosis label can never categorize the ability to learn, grow, and hope. As parents, it is central to recognize that professionals may be the experts in dealing with specific aspects of ASD. However, they are not the experts on your child.

You know your child better than anyone and have an essential role in helping others understand your child's needs. Ideally, parents and professionals work together for the child's best interests.

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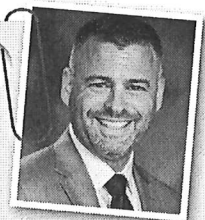
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Dr. Brett J. Novick, MS, EdD, LMFT, holds a Master's in Family Therapy and post-degree certification in School Social Work and Educational Administration. He earned his EdD in Educational Leadership. He has worked as a School Social Worker/Counselor for the last 23 years and is an adjunct instructor at Rutgers University and Stockton University. Brett has been a licensed Marriage and Family Therapist in private practice, community mental health, and substance abuse settings over the last twenty-five years. Additionally, he has supervised family counseling, school counseling, and centers for abused and neglected children, adults & children with developmental disabilities and has been a licensed foster parent.

He has authored seven educational and self-help books, two SEL and CBT children's books, and created four therapeutic games for youth. Additionally, he has written for several national educational, parenting, and mental health magazines. His latest book, *Beyond Academic Success: Creating Social-Emotional Learning Balance in Elementary Students*, has been awarded the 2024 National Book of the Year by the SSWA.

He has been humbled by awards for his work in education, with the NJEA Martin Luther King Jr. Human and Civil Rights, NJ State Governor's Office Jefferson Award for Public Service, as well as his District's Teacher of the Year and Ocean County Counselor of the Year and the NJ State Holocaust Education Commission's Hela Young Award.

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