



**ALTERNATIVE REPORT BY THE ASSOCIATION 'AUTISME FRANCE'
ADDRESSED TO THE COMMITTEE ON THE RIGHTS OF THE CHILD IN THE CONTEXT OF
CRC'S REVIEW OF FRANCE'S FIFTH PERIODICAL REPORT.**

Autisme France

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I) PREAMBLE

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1. Definition of Autism Spectrum Disorders (ASD)

ASDs are severe and premature neurobiological disorders in child development. They are characterized by several elements of variable intensity:

- Difficulty with social communication and interaction
- Stereotyped behaviors, love of routines, limited special interests
- Often added to other disorders such as sensory sensibility, eating and sleeping disorders

Co-morbidities are frequent: epilepsy, praxis disorders, genetic syndromes...

Difficulties with communication, learning and adapting to daily life may be more or less severe. The characteristics of ASDs are identified before the age of 3 and can significantly vary from one child to another. That is why we talk about Autism Spectrum Disorders (ASD); in France, the terminology Pervasive Developmental Disorder (PDD) is frequently used.

France, according to "la Haute Autorité de Santé" (an independent public body), claims a prevalence of 1 out of 150 for ASDs: worldwide, this figure is in fact 1 person out of 100.

Anyone suffering from ASD - whatever their age - can positively evolve provided that the proposed interventions are adapted to their needs, their difficulties and their possibilities. It is absolutely necessary for them to receive regular functional assessments as well as individualized educational programs provided by trained professionals knowledgeable in the field of Autism. In order for them to develop their abilities, people with ASDs need:

- An early diagnosis based on multidisciplinary assessment: neurological, psychomotor, cognitive;
- An early-start intervention with adapted programs that have been officially recognized as efficient;
- Regular assessments and individualized educational programs;
- A type of schooling that includes tutoring within the school and some educational adjustments if necessary;
- Socialization in any places of living and institutions

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2) Presentation of Autisme France

Autisme France: 25 years fighting for people with Autism

February 1989: 1st invitation for the “creation of a movement for the right to an educational rather than a psychoanalytical care of people with Autism”, that leads to a **first constituent assembly in June 1989**, in Lyon. The first “Manifesto from parents of autistic children” is drafted. It is composed of 4 main points:

- The right to a diagnosis
- The right to education
- The right to information
- The right to compensation for deficiency (caused by inadequate support)

April 1994: Simone Veil **receives Autisme France on April 12**, and she shares with us her decision in accordance with our request, to conduct investigations (IGAS ANDEM ...) and to publish a text on autism, within a year. This promise will be kept.

June 1994: Autisme France publishes its “**Report on the experience of people with autism and their family at the dawn of the 21st century**” (« **Rapport sur le vécu des autistes et de leurs familles en France à l’aube du XXIème siècle** »). This document will greatly inspire the IGAS Report.

March 1995: (March 27) Autisme France receives from the ministry **the plan for a ministerial circular as promised by Simone Veil. We are the only entity proposing some amendments. Three of these are accepted**, in their principle (recognition that parents can freely choose the nature of care, possibility to create experimental structures, explicit recognition of integrated classes as a mode of care). **Two other amendments are denied** (freely choosing the therapeutic content, recognition of an educational alternative (SESSD) (later called SESSAD) for small children).

April 1995: General rallying within 6 days to obtain the educational alternative.

We fought this fight on our own while other parents associations, mistakenly considering that “a bad circular was better than no circular at all”, had given up right from the start.

February 1996: The bill introduced by a MP from the Loire department, Jean François Chossy is unanimously adopted on first reading at the National Assembly on 26 February. This bill, making autism a disability entitled to specific interventions has become Article L 246-1 of the CASF.

June 2001: The President of Autisme France is received first by **Bernard Kouchner** (06.01) and then, **Ségolène Royal** (06.05). The essential points reviewed are:

- Diagnoses must comply with the international classification, and when possible, must be formed before kindergarten (systematic screening).
- Access to education.
- Right to a decent life for people with Autism.
- Medical investments in the research on Autism.

Ségolène Royal Presents a “**plan to better receive and care for children and adults with Autism**”. The State Secretary commits to “take all the necessary measures so that no disabled child is maintain out of the school system starting from the next school year”.

In 2002, Autisme France also initiates a process taken over by Autisme Europe, towards European institutions.

November 2003: the European Committee of Social Rights states that France is non-compliant with its educational obligations to people with autism, as defined by the European Social Charter. The sentence will

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be reiterated and confirmed in 2007, 2008, 2010, 2012, 2013.

2009: Second White Paper about autism

2010: Autisme France participates in the steering committee for the recommendations of good practices for children and teenagers.

2012: Autisme France drafts a proposition for an ‘Autism plan’.

2013-2014: Autisme France gets greatly involved so that changes can finally be implemented:

- national recognition of our work and expertise, acknowledged presence in every body and work group
- creation of a national quality frame of reference largely based on our quality grids
- Demand to be included in mainstream schools
- respect of the guidelines for good practices when dealing with autism
- respect of the right of people in keeping with the opening of the legal protection service in 2014 (serious litigations with ‘MDPH’ (local institutions for disabled people), lack of adapted services, abusive notifications to ‘Aide Sociale à l’Enfance’ - Child social services)

The foundations of our charter and our status remain fundamental cornerstones:

- Right to a diagnosis and early intervention
- Right to life-long care through adapted devices
- priority given to the inclusion in a mainstream environment
- revision of core and continuous training
- reallocation of public money from psychiatric health service to the necessary services
- compensation for prejudice caused to people with autism and their family through abuse and lack of an adapted education.

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II Assessing the failure to respect the Convention of the Rights of the Child

Basing its findings on the Convention of the Rights of the Child (CRC), Autisme France notes that several of these rights are not respected in France, for children and teenagers with Autism Spectrum Disorder. Autisme France has listed these breaches in a document posted online on the association website:

http://www.autisme-france.fr/offres/doc_inline_src/577/Autisme_et_droits_novembre_2014.pdf

This document was sent to the Commissioner for Human Rights council of Europe as well as to the ‘Défenseur des Droits’, an independent constitutional body in charge of defending citizens’ rights.

Assessment of the 2005 law for autism - February 11, 2015:

http://www.autisme-france.fr/offres/doc_inline_src/577/Bilan_de_la_loi_2005_au_11.02.2015.pdf

1) Diagnoses are insufficiently formed

Most autistic children in France haven’t received a proper diagnosis yet. Early screening and diagnosis of autism (before the age of 2) remain insufficient. Besides - even though we have seen some improvement on this point over the last 3 years - the medical profession does not always tell parents when their child is diagnosed with ASD. This can prevent parents from taking the necessary steps for the child’s proper development, which is a violation of Article 5 of the CRC.

The observations carried out by regional health institutions, ‘Agences régionales de Santé’ show that the given diagnosis is that of an infantile psychosis in 60% of the cases. This is not a diagnosis compliant with CIM 10 and it is inspired by a psychoanalytical interpretation of autism.

http://www.ars.aquitaine.sante.fr/fileadmin/AQUITAINE/telecharger/01_votre_ars/111_Lettre_in_o_ext_Aquitaine/Lettre_externe_2014_03/01_Dossier/Plan_Regional_Autisme_2013_2017_Etatdeslieux.pdf

http://www.ars.midipyrenees.sante.fr/fileadmin/MIDI-PYRENEES/0_INTERNET_ARS_MIP/ACTU/AUTISME_1042014/Etatdeslieux__tour_de_Franceautisme.pdf

A great number of children still remain in Psychiatric Hospitals, without any proper diagnosis, nor any educational interventions. Many health professionals claim that these children (who will become adults) should be committed to these hospitals for life on the ground of their “madness”.

<http://www.hospitalite-collectif39.org/?POUR-UN-AUTRE-PLAN-AUTISME-2013>

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None of the psychiatrists' unions have backed up 'Autism Plan 3' meant at implementing the guidelines of 'Haute Autorité de Santé'. None of the health professionals' unions have backed up either the good practice guidelines from March 2012 or 'Autism plan 3' implementing them.

Refusing to diagnose is a serious matter in the sense that it prevents children from accessing the early educational interventions that would allow them to curb the aggravation of handicaps linked to autism. This refusal engenders a lack of opportunities for the children. This has also been underlined in a report by the European Commissioner for Human Rights.

237. The Commissioner observes a marked and old opposition in France between the essentially psychoanalytical approach of ASDs and PDDs recommended by some psychiatrists' and the families associations desire to access educational, behavioral and developmental methods recommended by 'Haute Autorité de Santé' (HAS).

259. The situation of people with ASD and PDD requires much attention and sustained efforts from France. The Commissioner notes the existence of insufficient ASD and PDD screening as well as a lack of adapted care for people with autism. This leads to the commitment of these people in psychiatric institutions without proper care. The authorities must dedicate more means to develop the adapted care and education of children with autism in a normal and ordinary environment.

It remains that it is still almost impossible in France to get the specificity of autism officially acknowledged.

The 'CIH disabled people guide' aimed at public services does not mention autism, which has been divided between a mental and a psychological disability by the signatory associations (associations for people with autism were, of course, NOT asked)

<http://www.social-sante.gouv.fr/IMG/pdf/Guide-pour-mise-en-ligne.pdf>

Solutions :

- **Creation of early diagnosis and intervention in every department;**
 - **Make it mandatory for health professionals to form a diagnosis compliant with CIM 10, to inform the parents about their child's diagnosis clearly and in writing and to fill the proper forms to accurately list the nature of the necessary, recommended interventions compliant with the good practices guidelines from March 2012;**
 - **Obligation to respect the diagnosis recommendations from October 2005**
 - **Punish doctors breaching the Public Health Code by refusing to form a diagnosis**
 - **Organize a national awareness campaign and develop the necessary information tools : the only existing screening brochure comes from our association:**
- http://www.autisme-france.fr/offres/file_inline_src/577/577_P_21141_2.pdf

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2) Discrimination in the access to schooling

Article 23.1 of the CRC claims “the Right of mentally or physically disabled children to lead a full and decent life, in conditions ensuring their dignity, enhancing their independence and facilitating their active participation in their social surroundings”.

The low level of schooling of autistic children is constantly reported by families and is frequently featured in newspapers:

<http://www.lest-eclair.fr/accueil/80-des-enfants-autistes-sont-exclus-des-salles-de-classe-ia0b0n5546>

<http://www.ouest-var.net/actualite/six-fours-handicap-un-enfant-autiste-encore-menace-d-exclusion-scolaire-7075.html>

<http://www.cahiers-pedagogiques.com/Scolarite-des-enfants-autistes-voyage-au-bout-de-l-enfer>

<http://autisteenfrance.over-blog.com/article-le-combat-pour-integrer-alexandre-enfant-autiste-exclu-de-la-societe-119732225.html>

<http://rmc.bfmtv.com/emission/lucas-9-ans-autiste-et-exclu-de-son-ecole-mon-fils-est-pris-en-otage-dans-cette-histoire-865415.html>

As shown in the following document:

http://cache.media.education.gouv.fr/file/2014/03/8/DEPP_RERS_2014_eleves_premier_degre_344038.pdf

Autistic children are not even identified by the National Education services: are they listed in the intellectual and cognitive handicap category? Why would they be, when 70% of autistic children have no associated intellectual deficiency? Are they listed in the psychological deficiency category? Why would they be since autism is not a mental disease?

Admittedly, schooling is often only very partial for children with disabilities and this situation is especially true for children with autism

http://cache.media.education.gouv.fr/file/8/99/5/ensel2766_annexe1_projet-personnalise-scolarisation_391995.pdf

Families must constantly visit the ‘Maisons Départementales des Personnes Handicapées’ to get the right for their children to go to school: orientation in collective devices (called CLIS or ULIS) is only available for a year and can be challenged, or the child can be excluded. The right to go to school is often denied because the orientation in a medical and social institution is often imposed on families. This forces parents to go to court in order to assert their rights and so, to get a lawyer.

Autisme France opened a legal protection department in January 2014 in order to help families to assert their rights.

http://www.autisme-france.fr/offres/file_inline_src/577/577_P_31365_5.pdf

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When children are orientated towards IME against their parents' will, they don't get to go to school, or, when they go, they go for a few hours (from 1 to 4) without following the ongoing educational program.

This particular aspect was condemned 5 times by the European Council for discrimination against people with autism.

The Committee considers, as the authorities themselves acknowledge, and whether a broad or narrow definition of autism is adopted, that the proportion of children with autism being educated in either general or specialist schools is much lower than in the case of other children, whether or not disabled. It is also established, and not contested by the authorities, that there is a chronic shortage of care and support facilities for autistic adults.

Excerpts from the 5 condemnations of France by the Council of Europe

November 2007

Follow-up of the complaint from Autisme-Europe against France (complaint no 13/2002, decision on legitimacy from November 4, 2003)

Conclusion

The committee concluded that the situation in France is not compliant with article 15§1 in terms of securing and providing access to education (mainstream and specialized) for people with autism, which is not guaranteed in an effective manner.

November 2008

Conclusion

The committee concluded that the situation in France is not compliant with article 15§1 of the reviewed charter since it is not efficiently guaranteed that people with autism can have equal access to education (mainstream and specialized).

March 2013 :

The report also specifies that several of the launched actions are not over yet and that the results obtained thanks to this plan are still being assessed. While taking into account the new measures and the fact that their effects are to be determined, the Committee notes that the report does not specify neither the impact of the previous "Autism Plan", nor the practical changes engendered by the adoption of the new definition of autism as provided by WHO. It also points out that it has received a new complaint (n° 81/2012, European Action of disabled people (AEH) v. France), registered in April 2012, pertaining to the issues children and teenagers with autism face regarding access to education and to the issues young autistic adults face regarding access to professional training. Given the lack of sufficient information about the actual inequality of access to education in mainstream or specialized environment for autistic children, The Committee considers that the report does not bring enough new elements to change its previous conclusion on this matter.

Conclusion

The committee concluded that the situation in France is not compliant with article 15§1 of the reviewed charter since it is not efficiently guaranteed that people with autism can have equal access to education (mainstream and specialized).

5th condemnation November 2013 after another complaint to the Council of Europe

http://www.coe.int/t/dghl/monitoring/socialcharter/complaints/CC81Merits_fr.pdf

In view of the report containing the decision about the merits of the complaint transmitted by the European Committee of social rights, it was concluded:

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- unanimously, that there was indeed a violation of article 15§1 of the charter concerning the right of autistic children and teenagers to education in public institutions.

Access to education, training, preparation to work-life and to recreational activities is not always possible for children and teenagers with ASD, or only if families pay for them themselves. The “Maisons Départementales des Personnes Handicapées” hardly ever reimburse them. Some families even pay so that their children’s school assistant (AVS) can be properly trained.

This discrimination against autistic children is also mentioned in a recent report by the European Human Rights Commissioner.

235. The Commissioner considers that the peculiar situation of people with ASD and PDD requires special attention. The European Committee of Social Rights has observed a violation by France of articles 15 (right of disabled people to independence, social integration and participation in the life of the community), 17 (right of children and teenagers to social, legal and economic protection) and E (non-discrimination) of the European Social Charter in two major cases in 2004³⁴³ and in 2013³⁴⁴. concerning, among others, autistic children and teenagers. In the second case, the Committee noted “the lack of appropriate measures susceptible to insure the predominance of an educational feature in the work and working methods used in institutions catering for autistic children and teenagers” (§ 119). According to the NGOs interviewed by the Commissioner, the methods of care commonly used in most institutions are a hindrance to getting out of those institutions and to the right to inclusion.

This led the European Committee of social rights to claim in 2014 in the case *Action européenne des Handicapés (AEH)v. France*, that “France financially contributes to the move to Belgium of autistic children and teenagers into proper, specialized educational establishments compliant with appropriate educational standards instead of financing the implementation of such institutions, respectful of those standards on the French territory”. CEDS, *Action européenne des Handicapés (AEH) v. France* (n° 81/2012), February 5, 2014, §§99 and 135.

249. After examining the information received by the Committee during their visit, we can note that autistic children – even though authorities advocate their insertion in schools - are particularly affected by the lack of schooling in a mainstream environment. The European Committee of Social Rights was referred to on this matter on several occasions. In 2004, in the case *Autisme-Europe v. France*, it specified that securing the right to education for children and other people with a disability constitutes a condition to allow “independence, social integration and participation in the life of the community” as endorsed by Article 15 of the Social Charter. The Committee concluded to the violation of the Charter by France mainly because “the proportion of children with autism being educated in either general or specialist schools is much lower than in the case of other children, whether or not disabled”.

262. The Commissioner encourages the French Authorities to pursue their efforts in terms of schooling of every disabled children and teenager, particularly autistic ones. It salutes the creation of a disabled pupil's assistant status and urges the authorities to implement it as soon as possible and supply a sufficient number of such positions to satisfy the need for support in schooling of disabled children in a mainstream environment. It also urges authorities to invest in training teachers in dealing with handicaps.

Solutions:

- Making segregation stop

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- Encouraging mainstreaming education by reallocating funds wasted in obsolete and toxic healthcare practices towards National Education, so that it can finance the necessary educational support for autistic children and teenagers.
- Encouraging inclusion in every children activity (leisure, sports, culture).
Inclusion implies that teachers, organizers and any actors of this inclusion must be trained in autism, that the National Education must recruit specifically-skilled educational staff with up-to-date knowledge of autism.
- Financing aids - not provided by the State - given to families to send their children to school.

1) Interventions are not in keeping with the current knowledge of autism from January 2010 by the “Haute Autorité de Santé” and with the guidelines of good practices by the HAS from March 2012

3-1 Ignorance of autism

Most day hospitals, medico-pedagogical centers, early action medico-social centers are incompetent when it comes to autism, ignore scientific knowledge of autism and reject the guidelines of the “Haute Autorité de Santé” (coordinated interventions: educational, pedagogical, and therapeutic, without psychoanalysis).

An intensive early intervention (from 0 to 4) is currently unanimously recognized as the best way to ensure an autistic child's development. The Early Start Denver Model (ESDM), an intervention scientifically proven as leading to a very significant improvement of the social and cognitive skills of children with autism and recommended by the “Haute Autorité de santé” is practically unknown in France. 6 to 8000 autistic babies born in France are not entitled to this intervention.

Teenagers from 16 years old on are considered as adults in the psychiatrist field, which means that they can be over-medicated and abused (bound and confined). This point is highlighted by the European Commissioner of Human Rights:

234. Despite questioning their merits and pointing out the fact that they are detrimental to individual freedom on several occasions, these hospitalizations – carried out against the patients’ families’ will - remain widely used and affected more than 80,000 people in 2011. A 2012 study from the Fundamental Rights European Agency has reported several testimonies claiming that the opinion of patients affected by these hospitalizations and these treatments was rarely collected and insufficiently taken into account in France. The Commissioner considers that the opinion of the person about to be committed to an internment structure must always be collected and that committing a person to such institution without their consent must be considered as a breach of freedom and must be combined with the guarantees stated in Article 5 of the European Convention of Human Rights¹⁴².

In medico-educational institutions, the follow-up care of children and teenagers is not systematically based on a functional assessment of their needs and skills. As a consequence, the goals and objectives remain too general and are not based on the specificities of the child’s disability. Besides, the administrative texts are completely inadequate since they only mention motor and sensory deficiency, behavioral disorders, poly-handicap and intellectual

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deficiency. Autism is unidentified in most classifications. Thus, institutions and services are given the “autism approval” stamp even though there is no national quality frame of reference that could clarify the quality level required in such establishments. Moreover, there is no classification for needs and services related to disability in general.

Individualized projects - although accurately delineated in the guidelines for autism from March 2012 - are hardly ever implemented or assessed. Most institutions mainly ignore the quality process and the supervision practices. The necessary staff: speech therapists, psychomotor therapists, ergo-therapists, psychologists are in insufficient number or ever hardly present.

The calls for the creation of establishments specifically dedicated to autism have raised our concern:

http://www.vivrefm.com/infos/lire/2421/justice-pas-de-sessad-autisme-pour-une-association-pronant-la-psychanalyse#complete_news_content

Projects are still mainly given to associations entirely incompetent when it comes to autism and even promoting psychoanalysis.

Given that there aren't any acceptable offers for qualitatively and quantitatively sound interventions, families are often forced to pay themselves for private practitioners and they are not often reimbursed. Psycho-therapists, ergo-therapists, psychologists are particularly necessary to autistic children but their services are not covered by the Social system “Sécurité Sociale”. These shortfalls are pointed out by the European Commissioner in a report from February 2015:

236. The Commissioner observes that, despite 3 “autism plans” providing for care and support measures and the means to implement them, associations but also national and international bodies have been regularly concerned by the lack of care adapted to people with autism.

250. In their conclusions from 2008 and 2012, The European Committee of Social Rights observed that the situation in France remained non-compliant with the Charter, in terms of an equality to access to education and professional training guaranteed in an effective way to people with autism. The Commissioner observes that schooling in a non-mainstream environment did not satisfy The European Committee of Social Rights either. Indeed, The Committee noticed violations of article 15§1 of the Charter in its decision regarding the case of *Action Européenne des Handicapés (AEH) v. France* from 2013 on the ground of a lack of priority given to public institutions for the schooling of autistic children and teenagers; on the lack of appropriate measures regarding the professional training of young autistic people in the public sector or in specialized institutions; on the lack of a predominantly educational feature in specialized institutions catering for autistic children and teenagers.

263. Finally, regarding children with autism or PDD, the Commissioner urges authorities to allow care and support mostly based on educational, behavioral and developmental methods and to encourage the schooling of autistic children in a mainstream environment.

Abuse can also occur in medico-educational institutes (see the enclosed article that advises for a dark room with padded walls to lock up the children and for elevated windows so that the children cannot see outside.)

Solutions:

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- **Obligation for the professional staff forming the diagnosis as well as for the services of the “Maisons Départementales des Personnes Handicapées” to inform parents about the social benefits to which they are entitled and to help them obtain such benefits;**
- **Creation of the profession of specifically trained support staff;**
- **Organizing genuine public service delegations for medico-social institutions in order to control the use of public money**
- **Controlling psychiatric services where implemented acts are not listed; banning inhumane and degrading treatments.**
- **Financing private practitioners whom the families rely on for the recommended interventions for autism.**

3-2 Non-compliant trainings

Article 23.4 of the International Convention for the Right of the Child:

“States Parties shall promote, in the spirit of international cooperation, the exchange of appropriate information in the field of preventive health care and of medical, psychological and functional treatment of disabled children, including dissemination of and access to information concerning methods of rehabilitation, education and vocational services, with the aim of enabling States Parties to improve their capabilities and skills and to widen their experience in these areas. In this regard, particular account shall be taken of the needs of developing countries.”

France breaches this article on a permanent basis: erroneous information about autism broadcasted even on the websites of the autism resources centers, ignorance and refusal to implement the recommended international interventions.

Here is what can be read on the site Psychiatrie Infirmière (nursing psychiatry):

<http://psychiatriinfirmiere.free.fr/definition/autisme/autisme-theorie.htm>

Wrong definition of autism, the assertion of psychoanalysis, lack of educational interventions compliant with the guidelines of the “Haute Autorité de Santé”.

The reference document on psychiatry from March 2014 says a lot about the lack of scientific processes. I reckon that the multiplicity of theoretical references allows keeping on justifying the status quo.

<http://www.psydoc-france.fr/Recherche/PLR/PLR80/PLR80.pdf>

Some psychiatric treatments imposed on children and teenagers with ASD such as “Le Packing” (wrapping the child in cold and soaked sheets until he or she calms down) and resorting to medication as the go-to solution (chemical ‘straitjacket’) constitute cruel, inhumane and degrading treatments as delineated in Article 37 of the Convention. Some children or teenagers with ASD whose difficulties are particularly serious get committed to psychiatric units which deprive them of their freedom. The psychoanalytical vision of the psychiatric unit for children and teenagers can lead to violations of children rights such as the restriction or interdiction of parental visiting rights

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as they might be considered harmful to the child. Internment often worsens the child's state through a lack of understanding of her/his needs and frequently leads to the use of psychoactive drugs.

Besides, there aren't any programs or trainings for parents that would prevent family exhaustion and the risk of abuse.

Claim against the barbaric use of 'Le Packing' (iced 'straitjacket'):

Source :

https://books.google.fr/books?id=o52XBgAAQBAJ&pg=PA296&lpg=PA296&dq=Devons-nous+%C3%A9thiquement+r%C3%A9sister+aux+recommandations+de+la+HAS+de+ne+plus+faire+de+packing&source=bl&ots=nmiu_RUCa v&sig=k9_b3CvVGI500kt4p8_gfCjXquE&hl=fr&sa=X&ei=8sPpVPu3F4LxUPr8gdAL&ved=0CCMQ6AEwAA#v=onepage&q=Devons-nous%20%C3%A9thiquement%20r%C3%A9sister%20aux%20recommandations%20de%20la%20HAS%20de%20ne%20plus%20faire%20de%20packing&f=false

Besides, The National Union of psychomotor therapists proposes in 2015:

- A training session entitled "Therapeutic wet wrapping"

Source : <http://www.snup.fr/download/2015-Stages-S27.pdf>

- A training session of wading pool therapy aimed at "psychomotor therapists and nursing staff involved in the care of autistic or psychotic patients". The Children (pre-adolescent until now) are observed, most of the time naked, by "professionals" doing nothing.

Source : <http://www.snup.fr/download/2015-Stages-S15-module4.pdf>

<http://www.critiqueslibres.com/i.php/vcrit/20450>

<http://gallica.bnf.fr/ark:/12148/bpt6k5452436z.image.r=revue+fran%C3%A7aise+de+psychanalyse.f203.pagination.langF>

In 2015, the promotion of "le Packing" and wading pool therapy for children with ASD continues in most psychomotor therapy schools.

Wading pool and Le Packing can be featured as recommended care methods on the sites of Autism resources centers, which are supposed to be places of expertise:

<http://www.crabourgogne.org/prise-en-charge.html>

Le packing has very often been denounced by family associations:

<http://sante.lefigaro.fr/actualite/2015/01/12/23249-autisme-methode-packing-soumise-test>

http://www.lexpress.fr/actualite/societe/sante/autisme-le-traitement-qui-choque_768175.html

<http://leplus.nouvelobs.com/contribution/1141302-chere-eglantine-emeve-moi-aussi-j-ai-un-enfant-autiste-le-packing-n-est-pas-une-solution.html>

<http://www.balat.fr/Le-Packing-une-video.html>

<http://troubles-du-spectre-autistique.e-monsite.com/pages/packing/avis-infirmier-sur-le-packing.html>

Continuing training proposed to doctors regarding autism are mainly psychoanalytical.

<https://www.ogdpc.fr/ogdpc/programmes>

Autisme France

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We can even – with the taxpayers’ money – make fun of autistic people by training future social workers: M. Rabanel explains that you have to create hiding spots so that autistic people don’t see you or hide.

<https://www.youtube.com/watch?v=NzGOe8PcVW4>

As a result, care in most health and medico-social institutions is based on a Freud-Lacan “Catechism”: the child chooses to be autistic, it is the subject she / he chooses to be because of a terrifying family environment; autism is a defense mechanism; and the autistic child doesn’t recognize himself/herself in his/her body, he/she refuses the language.

The resulting practices: Le Packing, wading pool, tales workshops are acknowledged as entirely ill-fitting by every single international classification guidelines.

In this respect, France may be considered as ranking even lower than developing countries since the psychoanalytical historical trend – which France leads – hinders the broadcast and implementation of educational, behavioral and developmental interventions that have been internationally approved (TEACCH, ABA, PRT, DENVER…), and recommended for years in many countries.

Solutions:

- **Improvement of core and continuing training regarding autism for pediatrician, child psychiatrists, and staff specialized in childcare;**
- **Creation of specific training with up-to-date and scientifically approved knowledge of autism in psychology colleges, nursing schools, social workers training centers, psychomotor therapy institutes etc…**
- **Compliance of the standards of Autism Resources centers – most of them still broadcast erroneous information about autism**
- **Regular organization of national awareness campaigns about autism;**
- **Prohibiting “le packing” and any other degrading and unethical practices**
- **Enforcing a quality national reference document on autism and monitor its implementation**
- **Recreating the national regulations regarding approval requests**
- **Compelling every establishment or service to respect the guideline of good practice regarding autism.**
- **Rethinking every core or continuing training. Refusing that non-compliant training be funded by public money**
- **Using educational interventions specific to ASD as much as possible in order to reduce behavioral disorders;**
- **Compelling all psychiatric staff in charge of children or teenagers with ASD to be trained in recognized scientific approaches in the field of autism and to apply them;**
- **Making support programs and customized trainings available for families as well as providing respite times and places.**

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1) Exile to Belgium

Figures regarding French pupils educated in specialized schools in Belgium by September 30, 2014:

- Kindergarten: 86 children
- Primary school : 948 pupils
- Secondary school : 1796 pupils (including 350 from 18 to 21 year old)
- Total : 2830 pupils

Half of them are autistic children whose parents look for an education adapted to their child, or simply for a school because French schools don't have the capacity to admit enough children.

There are 325 French pupils enrolled in classes officially considered as pedagogically adapted to autism. However, a large number of TEACCH¹ classes are not officially certified (because of heavy red tape processes). A lot of children are thus following a specialized education with individualized pedagogical programs but not in entirely pedagogically adapted classes. Others can also benefit from an integration project into mainstream schools while enjoying an individualized education. The ministry of the Walloon-Brussels federation hasn't carried out an actual "autism" inventory of these pupils; the typology of teaching is stated as follows:

- Type 1: Slight intellectual deficiency
- Type 2: Moderate to severe intellectual deficiency
- Type 3: Behavioral disorder
- Type 4: Motor deficiency
- Type 5: Sick or convalescent
- Type 6: Visual deficiency
- Type 7: Hearing deficiency
- Type 8: Learning disorder

Pupils with autism can be educated in any of these types of teaching according to which type they belong to, notably in case of co-morbidity.

There are 4 adapted teaching types:

- For pupils with poly-handicaps
- For pupils with autism
- For pupils with aphasia / dysphasia
- For pupils with Heavy Physical handicaps but with intellectual skills allowing access to schooling ("HPLCI")

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Out of the overall number of French pupils, we must distinguish various types of pupils:

- Cross-border pupils who only go to school in Belgium, commuting everyday between school and home, often by taxi
- Pupils enrolled in boarding schools from the WBA school system (Walloon-Brussels-education system)
- Pupils enrolled in specific support care structures (APC) whose agreement is delivered by the AWIPH (Walloon Agency for the integration of disabled people).

This exile was denounced by The European Commissioner of Human Rights.

228. The Commissioner observes that the lacks in the support care system of disabled people in France result in an exile of a significant number of disabled people to Belgium¹⁴⁰. In Spring 2014, the press revealed that several thousand disabled people were allegedly put in Belgian institutions, sometimes in indecent conditions because the French authorities are unable to offer them individualized and adapted answers¹⁴¹.

1) Abusive notification to Child Social Services

A major issue is raised when authorities in charge of placing children away from their family base their decision on the expertise of doctors strongly influenced by psychoanalysis who tend to consider families as responsible for their children's behaviors. A misunderstanding of autism can quickly engender a misinterpretation of a child's behavior and thus lead to the decision to take the child away from the family or to invasive investigations, be they administrative, educational or legal.

III. Conclusion :

Autisme France denounced the discrimination against children and teenagers with ASD in France. Because of this discrimination, of the refusal of most doctors to update their knowledge of autism, of a disregard of the Public Health Code, of a lack of specific services, children and teenagers with ASD are socially isolated. Yet, socialization is a determining factor in the development of autistic people who precisely struggle to understand social relationships. On the basis of CRC articles but also on the Convention of the Rights of Disabled People (CRDP) ratified by France, Autisme France demands that France respects the rights of children with ASD. Indeed, they are protected by law and are not fantasy subjects for Lacan/Freud psycho-therapists, and they shouldn't be isolated people, even ghettoized in institutions.

Autisme France demands that segregation stops and demands that autistic children be educated in inclusive schools, notably on the basis of article 24 of the CRDP claiming the right to education and stating that education must be inclusive on all levels:

Excluding children with ASD from mainstream education must be avoided at all costs in order to best develop their social and cognitive potential.

France must set up intensive early-start intervention services and means encouraging school inclusion (teachers and support staff specifically trained in children with ASD). France must finance private services that cannot be implemented in the public sector, or fund establishments with public money. Most autistic children are either in daycare hospitals for

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700 to 1,000 euro a day, or in medico-educational institutes for 35,000 to 80,000 euro a year.

Many studies show that early-start educational intervention facilitates schooling later. Yet, it doesn't exist at all in France. The average cost of the education of a so-called ordinary child is €7,400. It is then possible for French authorities to finance an inclusive policy, by reallocating wasted funds towards The National Education system and to finance educational support at school. France is not a poor country; it has the means to answer the needs of children with ASD in an appropriate manner and to make sure that their rights are respected, as for any other children.

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