



Exercise for Autism

Research supports the benefits of exercise for Autism Spectrum Disorder. Emerging evidence highlights the need for effective exercise interventions for children, adolescents and young adults with ASD. Exercise not only reduces the negative health effects of inactivity, but may also assist with the management of ASD symptoms. However, as individuals may face unique challenges and barriers, there is the need for tailored lifestyle and physical activity interventions for those with ASD.

Exercise for Autism-specific symptoms:

Exercise is good for all of us. However, it may be even more beneficial for individuals with ASD. There is increasing evidence to support additional benefits such as:

- better emotional regulation
- improvements in behaviour (e.g reductions in stereotypical and repetitive behaviours)
- increased social behaviour and communication skills
- improved classroom performance, attention and compliance

Exercise for Autism-specific motor improvements:

Balance, postural endurance, gait, joint flexibility, coordination and movement speed are often more challenging for those with ASD. These challenges can be exacerbated with reduced physical activity participation, however, increasing levels of physical activity can improve motor abilities. These improvements may contribute to:

- overall physical endurance (e.g strength and aerobic fitness)
- improved motor planning
- independence and physical function for daily tasks
- self-confidence, self-esteem, and may help create feelings of 'normalcy'
- increased likelihood of a lifetime of physical activity

Exercise for Autism-specific health improvements:

Despite evidence supporting the importance of exercise for ASD, youth and young adults with ASD do less physical activity than their peers - Given that 80% of Aussie youth don't get enough exercise, this is a concern. Reduced physical activity and increased sedentary behaviour (sitting) from a young age only increases the risk of later developing:

- heart disease
- diabetes
- obesity and a number of other chronic health conditions.

How much should they be doing?

The current 'general' recommendations (for those not limited by a medical condition) are:

- Accumulate at least 60 minutes of moderate to vigorous intensity physical activity every day.
- Include a variety of aerobic activities
- On at least three days per week, engage in activities that strengthen muscle and bone.
- To achieve additional health benefits, engage in more activity - up to several hours per day.

But any physical activity is better than none!

- To reduce health risks, minimise the time they spend being sedentary every day
- Limit use of electronic media for entertainment (e.g. television, computer use) to no more than two hours a day
- Break up long periods of sitting as often as possible.

Tips and Tricks to get them moving

- reduce sitting and screen time, or at least encourage regular breaks to stand up and move!
- break physical activity up into smaller bouts across the day to make it more manageable
- encourage movement and physical activity as much as possible, with emphasis on making it an enjoyable activity
- find some thing they enjoy, or something you can do with the family such as a walk, or a bike ride
- encourage them to try different activities or equipment, such as swimming, trampoline, skipping rope - anything!
- teach them the importance of exercise, empower them to want to live an active lifestyle
- incorporate their interests either into the activity directly, or through a reward system
- see an Accredited Exercise Physiologist (you can even use NDIS funding!)

Why an Accredited Exercise Physiologist?

If you're stuck for ideas, or want some specialised advice, speak to an Accredited Exercise Physiologist (AEP).

AEPs are allied health professionals that have the expertise to prescribe appropriate exercise for individuals with ASD, and can provide a safe and specific exercise program.

An AEP will consider the following when prescribing exercise for those with ASD:

- common co-morbidities such as ADHD, obesity and epilepsy
- medication side-effects
- stage of motor development to target appropriate exercise interventions
- cognitive ability and learning style to enhance motor learning