Université Abderrahmane Mira de Bejaia

Faculté des Sciences Humaines et Sociales

Laboratoire de Santé Mentale et Neurosciences (LSMN)

Study Day

"Rethinking autism in the Algerian context: diagnosis, parental support, and family perspectives"

On : 03/ 12/2026

Argument:

Autism spectrum disorder (ASD) is now a global public health issue. In France, the Haute Autorité de Santé (HAS, 2018) estimates that more than 700,000 people are affected, while the World Health Organization (WHO, 2022) reports a prevalence of one (01) child in 100 internationally. While these figures are well documented in high-income countries, the situation in Algeria remains largely underestimated due to a severe lack of reliable epidemiological data, the absence of national registries, and a virtually non-existent screening system (Bendjelloul & Benhabib, 2021; Boukhalfa, 2019).

In this context, diagnosis is often made very late, well after the age of 3, or even slightly older, which seriously compromises the effectiveness of early interventions—which are unanimously recognized as crucial (Zwaigenbaum et al., 2015). This delay can be explained by several factors:

- widespread ignorance about autism among the general population and health professionals;

- persistent stigmatization, with ASD disorders often interpreted as curses, mental disorders (illnesses), or moral deficiencies (Bendjelloul, 2020);

- Extremely limited healthcare provision, concentrated in large cities (Algiers, Oran, Constantine) and virtually non-existent in rural areas;

- A lack of specialized university training in clinical psychology of autism or neurodevelopment.

In addition to structural barriers (lack of trained professionals, geographical inequalities, etc.), delayed diagnosis can also be influenced by psychological factors related to the parents themselves. As Usuelli (2018) points out, some parents go through a phase of denial or resistance when faced with their child's first atypical signs. This denial, often linked to mourning the loss of the "perfect" child (O'Brien, 2007), leads them to minimize symptoms ("he'll talk later," "it's just his personality") or reject medical recommendations. This legitimate emotional resistance, although unconscious, delays specialized consultation and, as a result, postpones the formal diagnosis, thus compromising the opportunity for early intervention, which is crucial for the child's socio-communicative development (Zwaigenbaum et al., 2015).

In a context such as Algeria, where disability is still highly stigmatized, parental denial can be reinforced by social, family, or religious pressures, making it even more difficult to accept a diagnosis that, for some, amounts to a form of "shame" or "divine punishment."

On the other hand, we are seeing programs being implemented without parental support: a therapeutic impasse.

When a diagnosis is finally made, Algerian families often find themselves left to their own devices. The few existing structures (medical-social centers, parent associations) mainly offer standardized educational interventions, inspired by ABA or TEACCH, but without cultural adaptation or psychological support for parents (Boukhalfa, 2019). These programs, although

- Question the limitations of care models focused exclusively on the autistic child, highlighting the harmful effects of an approach disconnected from the family and relational context—particularly in Algeria.

- Explore the psychological and relational consequences of an autism diagnosis for Algerian parents, through the concept of diagnostic resolution.

- Update knowledge on early interventions by comparing traditional behavioral approaches with recent relational models.

- Promote a family-centered, neurodiverse, and culturally sensitive view of autism, integrating families as full partners.

- Foster interdisciplinary and intercultural dialogue between Algerian researchers, clinicians, family associations, and international experts.

Thematic areas of the study day:

Area 1: Autism in Algeria: between institutional invisibility, social stigmatization, and family resilience

Area 2: Late diagnosis: clinical and family consequences

Theme 3: Diagnosis resolution: a neglected clinical lever

Theme 4: Innovative interventions: towards accessible and relational practices

Theme 5: Towards educational and socio-professional inclusion: between structural obstacles, family expectations, and emerging models (testimonials from associations)

Honorary Committee:

Beniaiche Abdelkrim, Rector of A-M University, Bejaia

Soualmia Abderrahmane, Dean of the Faculty of Humanities and Social Sciences

Chair of the conference: Dr. GACI Khelifa, MCA, A-M University, Bejaia.

Chair of the Scientific Committee: Dr. ABDI Samira, A-M University, Bejaia, Director of the Mental Health and Neuroscience Laboratory (LSMN)

Scientific Committee:

-Pr BENAMSILI Lamia, A-M University, Bejaia

-Pr FERGANI Louhab, A-M University, Bejaia

-Pr HADDAD Nassima, University M-M, Tizi Ouzou.

-Pr LAOUDJ Mebrouk, A-M University, Bejaia

-Pr SAHRAOUI Antissar, A-M University, Bejaia

-Dr. ABDI Samira, A-M University, Bejaia

-Dr. AMROUCHE Nassima, A-M University, Bejaia

-Dr. BECHATA Mounir, MCA, Université de Bejaia

-Dr. BENCHALLAL Abdelouahab, MCA, Université de Bejaia

-Dr. BENGUESMIA Farid, MCA, Université de Bejaia

-Dr. BOUCHERMA Samia, MCA, A-M University, Bejaia

-Dr. GACI Khelifa, A-M University, Bejaia

-Dr. GUEDDOUCHE Salima, MCA, A-M University, Bejaia

-Dr. HOUARI Amina, MCA, A-M University, Bejaia

-Dr. KHELOUFI Sihem, A-M University, Bejaia

-Dr. LAABOUDI Fatih, A-M University, Bejaia

-Dr. MEKHZEM Kahina, A-M University, Bejaia

-Dr. SLIMANI Naima, A-M University, Bejaia

-Dr. TOUATI Saida, A-M University, Bejaia

Chair of the Organizing Committee: Dr. AMROUCHE Nassima, A-M University, Bejaia

Members of the Organizing Committee:

- Dr. AIT ALDJET Megdouda, MCB, A-M University, Bejaia

-Dr. CHIBANI Lila, MCB A-M University, Bejaia

- Dr MEHDAOUI Samia, MCB A-M University, Bejaia

-Dr CHELGHOUM Anissa, MCB A-M University, Bejaia

- Mlle, KHELOUFI Sihem, docteur, A-M University, Bejaia

- Mlle, IKHLEF Noura, doctorante, A-M University, Bejaia

- M. OURARI Kaci, doctorant A-M University, Bejaia

Important dates:

- Deadline for abstract submissions: **November 10, 2026**

- Date of the study day: **December 3, 2026**

- Proposals for papers must be submitted by email to:

Références bibliographique :

- Bendjelloul, N. (2020). Représentations sociales de l'autisme en Algérie : entre croyances traditionnelles et savoirs biomédicaux. Revue Maghrébine de Psychologie, 5(1), 45–62.

- Bendjelloul, N., & Benhabib, S. (2021). Parenting stress and social support among Algerian mothers of children with autism. Journal of Autism and Developmental Disorders, 51(8), 2987–2999. https://doi.org/10.1007/s10803-020-04689-3

- Boukhalfa, I. (2019). L'accompagnement des enfants autistes en Algérie : entre carence institutionnelle et initiatives associatives. Mémoire de master, Université d'Alger.

- Dolev, S., Sher-Censor, E., Baransi, N., Amara, K., & Said, M. (2016). Resolution of the child's ASD diagnosis among Arab-Israeli mothers: Associations with maternal sensitivity and wellbeing. Research in Autism Spectrum Disorders, 21, 73–83. https://doi.org/10.1016/j.rasd.2015.09.004

- Fédération canadienne de l'autisme. (2021). Rapport national sur l'autisme 2021. https://autismcanada.org

- Haute Autorité de Santé (HAS). (2018). Recommandations de bonnes pratiques pour la prise en charge des troubles du spectre de l'autisme.

- Haute Autorité de Santé (HAS). (2023). Mise à jour des recommandations sur les interventions précoces dans les TSA.

- O'Brien, M. (2007). Ambiguous loss in families of children with autism spectrum disorders. Family Relations, 56(2), 135–146.

- Oppenheim, D., Koren-Karie, N., Dolev, S., & Yirmiya, N. (2012). Maternal sensitivity mediates the link between maternal insightfulness/resolution and child–mother attachment: The case of children with autism spectrum disorder. Attachment & Human Development, 14(6), 567–584. https://doi.org/10.1080/14616734.2012.727253

- Usuelli, C. (2018). Une lecture familiale pour la prise en charge de l'autisme : L'impact du diagnostic sur la relation parent-enfant. Mémoire de master, Université de Lausanne.

- Zwaigenbaum, L., et al. (2015). Early intervention for children with autism spectrum disorder under 3 years of age: Recommendations for practice and research. Pediatrics, 136(Suppl 1), S60–S81. https://doi.org/10.1542/peds.2014-3667

potentially effective, become counterproductive when applied rigidly, without taking into account:

- the traumatic experience of diagnosis,

- the psychological suffering of parents (guilt, isolation, depression),

- and above all, the quality of the parent-child relationship, which directly modulates the expression of autistic symptoms.

As demonstrated by Usuelli (2018) based on the concept of "diagnostic resolution" (Pianta & Marvin, 1993), parents who manage to integrate the diagnosis without denial or idealization develop a more refined interactional sensitivity, which promotes secure attachment and improves the child's social skills (Oppenheim et al., 2012; Dolev et al., 2016). Conversely, "unresolved" parents, often plagued by anger or denial, adopt more directive, intrusive, or disengaged behaviors, which hinders the child's development.

However, in Algeria, there are no mechanisms in place to assess or support this resolution process. Parents are expected to become "co-therapists" without ever being supported in their own grieving process—not for the child, but for the idealized child (O'Brien, 2007). This requirement, coupled with social pressure, economic insecurity, and the lack of respite, creates a high risk of parental burnout, particularly among mothers (Bendjelloul & Benhabib, 2021).

Given these limitations, a family-centered approach is essential, not only as a clinical alternative, but as an ethical necessity. As the Canadian Autism Federation (2021) points out, effective care must be co-constructed with families, respecting their culture, beliefs, and resources. In Algeria, this means:

- Recognize the central role of the extended family (grandparents, uncles, aunts) in providing support or stigmatization.

- Integrate cultural and religious representations of difference (e.g., autism as a divine trial, as "jnoun," etc.).

- Value informal resilience strategies already at work in families.

The HAS (2023) now recommends parent-mediated interventions (PACT, Focused Playtime), focused on the quality of interaction rather than behavioral correction. These models, which are less costly and more adaptable, could be a realistic alternative in a context of limited resources such as that of Algeria—provided they are accompanied by psychological support for parents.

This day therefore aims to reposition parents at the heart of care, not as executors, but as full-fledged subjects, bearers of skills, resilience, and experiential knowledge—in a context where their voices are too often absent.

Objectives of the study day: