AUTISM FACT SHEET

What is Autism and Autism Spectrum Disorders (ASD)?

Autism is a perplexing developmental disorder that typically appears during a child's first three years of life. Autism is four times more prevalent in boys than in girls and is no associated with any racial, cultural, or economic background. The developmental disorder is neurologically based and each child will be affected differently, demonstrating combinations of behaviors that range from mild to severe. The term Autism Spectrum Disorder (ASD) is used to capture the wide diversity of manifestations of the disorder. Once considered rare, ASD now occurs in as many as 1 our of every 500 people. Within the broad category of ASD are Pervasive Developmental Disorders (PDD) which include Autism and Asperger's syndrome. Children with ASD diagnoses will have difficulties in communication, reciprocal social interactions, and play. A young child with ASD is likely to have limited or no verbal language, difficulty playing with other children, repetitive or restrictive interactions with objects, and may resist change in routines. They may repeat body movements, like hand waving or rocking, or play with a toy in an unusual manner, such as spinning wheels on a car. Although ASD is defined by a certain set of behaviors, children can exhibit any combination of the behaviors in differing degrees of severity.

What causes Autism Spectrum Disorders?

Unfortunately, no one specific cause for ASD has been determined. Current research suggests that the primary cause is linked to biological or neurological differences in the brain. It is thought that multiple causes will eventually be identified. While researchers are exploring many alternatives, we do know that ASD is not caused by poor parenting, nor is it a mental illness.

What are some red flags that may signal ASD?

ASD is a combination of developmental concerns, and no one behavior means a child has ASD. However, common warning signs may include:

- Slow or no verbal language development
- Difficulty initiating or maintaining an interaction (starting or taking turns rolling a ball)
- Echo-like speech (repeating words just heard or words from songs/TV shows)
- Limited pretend play
- Tendency to play alone
- Disinterest in drawing adult attention for social interaction (i.e., doesn't "show-off")
- Repetitive motor actions (lining up blocks or cars, sorting and resorting)
- Inconsistent responses to sounds (seems deaf and overly sensitive)
- Difficulty with imitation
- Limited use of alternative forms of communication or interaction (few facial expressions and gestures, limited eye contact)
- Extreme or intense sensitivity (e.g., giggling, crying, or tantruming without apparent reason)
- Resistance to change in routines or interruption of activities

Where Can I begin to learn more about ASD?

Autism Society of America (ASA) 800-328-8476 <u>www.autism-society.org</u>

The National Information Center for Children and Youth with Disabilities (NICHCY) web site: www.nichcy.org/index.html

A Parent's Guide to Autism Bv CharlesHart: Pocket Books. 1993.

What should I do if I have concerns about my child?

- 1. Call Babies Can't Wait at 800-229-2038 or 770-451-5484 if your child is under age three.
- 2. Contact your local school for children over age three
- 3. Contact your primary care physician

How is ASD diagnosed?

There are no medical tests to diagnose ASD. A child must be observed by a professional team experienced in determining the child's communication, behavioral, and developmental profile.

Is there a cure for ASD?

Currently, there is no "cure," in the medical sense, for ASD. There is a link to differences in the brain of a child with ASD, and therefore, it may not be cured. However, successful educational treatments have been developed over the past 30 years which can positively change many of the behaviors and deficits associated with ASD. Early intervention is important to improving long term outcomes. The earlier, the better.