

## **WHAT IS AUTISM?**

Autism is a developmental disability which affects behavior, communication and social interaction. Children with autism often appear to develop relatively normally until the age of 24-30 months, then parents begin to notice delays. Mild forms of autism may resemble a learning disability, while more severe forms can involve substantial impairment of communication, learning and social abilities, abnormal responses to sensory stimuli, and self-injurious behaviors. An individual with autism may have peak skills – the ability to do one or more things exceptionally well. These skills manifest in areas such as mathematical computation, music, art or memory of data. Statistics show that out of every 10,000 children born, fifteen will be affected with autism. Boys are four times more likely to be affected than girls.

## **COMMON CHARACTERISTICS OF AUTISM**

- difficulty relating to people, objects and events;
- prefers to spend time alone, rather than with others;
- avoids eye contact;
- unusual attachment to, and use of, inanimate objects like toys, strings, and spinning objects;
- need for a rigid, highly structured routine;
- repetitive movement, such as hand flapping, head banging, spinning, and rocking – which may continue even when they cause self-injury;
- unusual responses to physical sensations – sight, hearing, touch, pain, smell, and taste may be affected to a lesser or greater degree;
- communication problems – may exhibit unusual speech patterns, use words without understanding their meaning, communicate with gestures rather than words;
- very high or low activity levels;
- impulsive behaviors – no real sense of danger;
- frequent crying and tantrums for no apparent reason;
- may persevere on a single item, idea or person.

There are great differences among persons with autism. Contrary to popular understanding, many children and adults with autism make eye contact, show affection, smile, laugh and show a variety of other emotions, but in varying degrees. With appropriate intervention, many of the behaviors associated with autism can be positively changed, and some may disappear over time. Some adults with autism live and work independently in the community while others depend on the support of family and professionals. People with autism live normal life spans.

## **WHAT CAUSES AUTISM AND HOW IS IT DIAGNOSED?**

Although no one specific cause for autism is known, current research links autism to biological or neurological differences in the brain. In some families there appears to be a pattern of autism or related disabilities, which suggests there may be a genetic basis to the disorder, although at this time no genetic indicator has been directly linked to autism.

Some older theories about the cause of autism have been proven false. Autism is not a mental illness. Children with autism are not unruly kids who choose not to behave. Autism is not caused by bad parenting. No known psychological factors in the development of the child have been shown to cause autism.

There are no medical tests (i.e. blood tests, chromosome studies, etc.) for diagnosing autism. A diagnosis must be based on observations of the child's communication, behavior and developmental levels. However, because many of the behaviors associated with autism occur in other disorders, various medical tests are necessary to rule out other causes.

Autism is referred to as a spectrum disorder, meaning that the symptoms and characteristics can present themselves in a wide variety (or spectrum) of combinations. Because the characteristics of the disorder vary so much, it is important that the diagnosis be made by a diagnostician or a multidisciplinary team with experience in autism. A brief observation in a single setting cannot provide a true picture of a child's abilities and behaviors. A multidisciplinary team may include a neurologist, psychologist, developmental pediatrician, speech/language therapist, learning consultant or other professionals knowledgeable about autism. An accurate diagnosis can provide the basis for building an appropriate and effective educational and treatment program.

## **EFFECTIVE STRATEGIES FOR OPTIMAL LEARNING**

Because of the variety and combination of behaviors which may be present in a child with autism, no single approach is effective with all individuals who have the disorder. Various types of therapies may be used, including behavior modification, speech/language therapy, sensory integration training, vision therapy, music therapy, auditory training, medication, dietary intervention and others.

Parents and professionals have learned that children with autism respond best to a highly structured, individualized program. The program, which should be structured to fit the child, will be coordinated by a team of specialists including a special education teacher, speech/language pathologist, clinical psychologist and child development specialist. The parents are also an essential part of this team.

An individualized program for a child with autism may include:

- stopping inappropriate behaviors that prevent the child from relating to and communicating with others;
- increasing attention to purposeful activity and developing perceptual skills needed for educational tasks;
- teaching the child self care skills;
- stimulating the quantity and quality of language to increase communication skills;
- teaching social skills and providing opportunities for the child to socialize appropriately with others;
- beginning training in vocational skills and community living skills at the earliest possible age;
- providing training for parents to enable them to provide continuity for the child at home and in the community.

## **TIPS**

Temple Grandin, Ph.D., an adult with autism who is an Assistant Professor at Colorado State University, and has written books on how it feels to have autism, provided a fact sheet for the Center for the Study of Autism. Some of those ideas are excerpted below;

- 1) Many people with autism are visual thinkers. Their thoughts are like videotapes running in their minds. Pictures are their first language, and words are their second language. To teach words, demonstrate them in ways the child can make into pictures.
- 2) Avoid long strings of verbal instructions. If the child can read, write the instructions down. People with autism may not remember sequences or groups of numbers (like phone numbers) because they can't make a picture of them in their mind.
- 3) Some children with autism are good at drawing, art or computer programming. These talents should be encouraged.