

Sooner the Better

The Urgency of Autism Awareness



Choice. Independence. Inclusion.

envisionunlimited.org/autism

electronic press kit

1 IN 44

8 YEAR-OLD CHILDREN WERE IDENTIFIED WITH AUTISM IN 2018



**Learn the signs.
Act early.**

Based on data collected in 2018 on 8-year-old children living in 11 communities across the United States.



<https://bit.ly/ss7011a1>

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Introduction

Government data reveal that the number of children with autism spectrum disorder (ASD) is mushrooming. In 2004, the prevalence of the disorder was 1:66. By 2020, that ratio had changed to 1:54. In at least 11 states, one in 44 eight-year-olds were identified with ASD.

Experts say that the sooner children are diagnosed and receive therapy, the better their immediate and long-term outcomes are. To accomplish that, **more parents must understand ASD and recognize its signs.**

In Illinois...

**Individuals between 3 and 21 years old with
ASD increased 500% from 1999 to 2015**

	1999-2000	2014-2015
Ages 3-5	641	1970
Ages 6-21	3,689	19,867
TOTAL	4,330	21,837

*Reported by the State of Illinois, in accordance with Section 618 of IDEA to
U.S. Department of Education, Office of Special Education Programs*



What Is ASD?

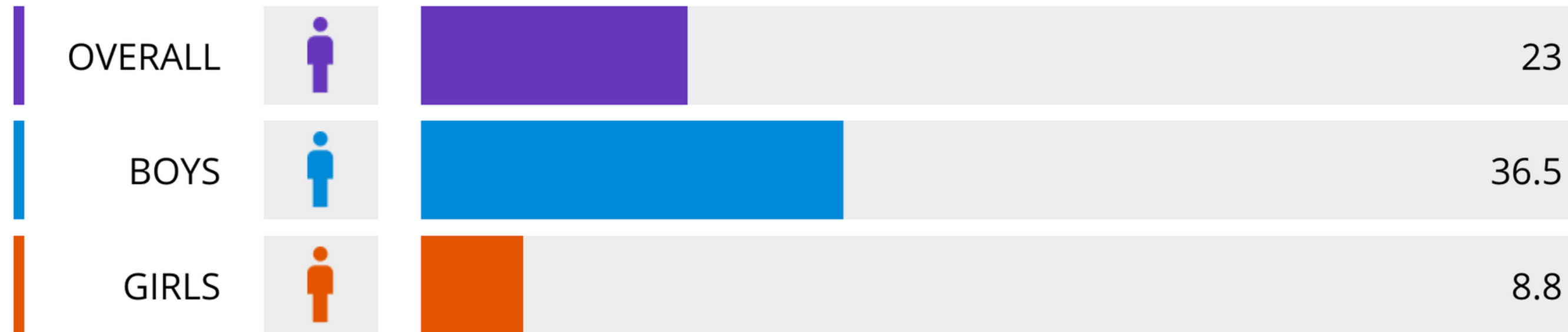
According to the Centers for Disease Control (CDC), a diagnosis of ASD now includes several conditions that were formerly diagnosed separately:

- Autistic disorder
- Asperger syndrome
- Pervasive developmental disorder not otherwise specified (PDD-NOS)

These conditions are now all called autism spectrum disorder.

Who Has ASD?

Prevalence per 1,000 Children: (2018 CDC Data)



For every 1 GIRL, 4.1 BOYS were identified with ASD.

Note: Data for transgender and gender non-binary children are not reported at this time.

**ADDM data do not represent the entire state, only a selection of sites within the state.*

†ADDM estimate = the total for all sites combined.



Minority Children with ASD Face Higher Risk

- Autism **prevalence rose almost evenly** among high, middle, low socio-economic groups.
- Hispanic children are **65% less likely** than White children to be diagnosed with autism.
- African-American (AA) children are **20% less likely** to be diagnosed.



Minority Children with ASD Face Higher Risk

- Cultural barriers often impact African American and Hispanic families' access to autism resources
- African-American children are **five times** more likely to be misdiagnosed
- Because they are diagnosed later, minority children may require **longer and more intensive** intervention



When ASD First Appears

ASD begins before the age of 3 years and can last throughout a person's life, although symptoms may improve over time.

Some children show ASD symptoms within the first 12 months of life. In others,

symptoms may not appear until 24 months or later. Some children with ASD gain new skills and meet developmental milestones, until around 18 to 24 months of age and then they stop gaining new skills, or they lose the skills they once had.





Learn the Signs

Social Communication and Interaction Skills

At 6 months old

- Avoids or does not keep eye contact

At 9 months old

- Does not respond to name
- Does not show facial expressions (happy, sad, angry, and surprised)

At 12 months old

- Does not play simple interactive games like pat-a-cake
- Uses few or no gestures (e.g., does not wave goodbye)

At 15 months old

- Does not share interests with others (e.g., shows you an object that they like)



Learn the Signs

Social Communication and Interaction Skills

At 18 months old

- Does not point or look at what you point to

At 24 months old

- Does not notice when others are hurt or sad
- Shows little interest in peers

At 30 months old

- Does not pretend in play (e.g., does not pretend to “feed” a doll)

At 3 years old

- Has trouble understanding other people’s feelings or talking about own feelings

At 5 years old

- Does not play games with turn-taking

Restricted or Repetitive Behaviors or Interests

- Plays with toys the same way every time
- Is focused on parts of objects (e.g., wheels)
- Gets upset by minor changes
- 1. • Has obsessive interests
- 2. • Must follow certain routines
- Flaps hands, rocks body, or spins self in circles
- Repeats words or phrases over and over (i.e., echolalia)
- Has unusual reactions to the way things sound, smell, taste, look, or feel
- 1. • Lines up toys or other objects and gets upset when order is changed



**Learn the
Signs**

Other Characteristics

- Delayed language skills
- Delayed movement skills
- Delayed cognitive or learning skills
- Hyperactive, impulsive, and/or inattentive behavior
- Epilepsy or seizure disorder
- Unusual eating and sleeping habits
- Gastrointestinal issues (e.g., constipation)
- Unusual mood or emotional reactions
- Anxiety, stress, or excessive worry
- Lack of fear or more fear than expected



**Learn the
Signs**

- General developmental screening should occur at the 9-, 18-, and 24- or 30-month well-child visits and whenever a concern is expressed.
- Autism-specific screening should additionally occur at the 18- and 24- or 30-month visits and whenever a concern is expressed.

Act
Early



Resources

- For Parents
- For Media

Download the CDC toolkit: <https://cdc.gov/ncbddd/actearly/index.html>



“Learn the Signs. Act Early.” has FREE child development tools

From birth to 5 years, your child should reach milestones in how he plays, learns, speaks, acts and moves. Learn more about these milestones here!

[CDC](#) Centers for Disease Control and Prevention / CDC / Mar 18



Danielle Gender-Walters, PhD
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Autism Questions?

Ask Our Experts



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ASD FAQs

Is there an ideal age to begin autism therapy?

Research has shown that ABA therapy is effective for all ages, but it is best to start as early as possible. The reason is that a neurotypical child learns skills naturally through play and social interactions. Those skills are not acquired the same way for an individual diagnosed with ASD. Therefore, they need to be directly taught these skills. When these skills are directly trained, new skills related to the taught skills can emerge on their own.

Most children are between two and six years old when they begin ABA therapy. If a child starts at age two, ABA can help them develop better communication skills and help them to have the skills necessary to be more successful in pre-school and academic settings. For older children, ABA is often part of a child's education, to teach social skills, daily living skills, and to assist in decreasing maladaptive behavior.



ASD FAQs

What if my child is not diagnosed until elementary or high school?

ABA Therapy focuses on foundational skills so that a learner has the ability to generalize these skills and be more successful in the academic setting. The sooner we can begin developing these skills, the better for the learner and their family. If a learner begins in elementary or high school, it will be more challenging for them, which is why we encourage diagnosis and therapy as soon as possible.



ASD FAQs

Is there a cure for autism spectrum disorder?

There is no cure for autism spectrum disorder. And the ASD spectrum ranges from mild to severe, so there is no one-size-fits-all treatment. Therapies must be tailored to your child's needs, and those needs may change over time.

If your child is diagnosed with autism spectrum disorder, time is of the essence. Early intervention during the preschool years can help your child learn critical social, communication, functional, and behavioral skills.

The goal of therapy is to maximize your child's ability to function by reducing the symptoms of ASD. Speak with experts and build a team of professionals to develop a treatment strategy that meets your child's and your family's needs. The family plays an important role.



ASD FAQs

How can ABA Therapy help a child diagnosed with ASD?

ABA Therapy is an evidence-based form of treatment that uses the science of learning and behavior (why and how we learn new things, as well as how behaviors are affected by the environment) to build skills and improve behavior for autistic children with other developmental delays. It can be an effective way to teach children how to communicate their wants and needs, engage with others socially, and perform skills needed to function independently.

ASD continues through adulthood, but the needs change. ABA services have also proved effective with adults.



ASD FAQs

What differentiates Envision from other ABA Therapy providers?

Envision is distinct from other ABA Therapy providers because not only do we provide individualized, compassionate care for children and adults with ASD; we are a nonprofit organization. For more than 70 years, Envision has provided care to individuals with intellectual disabilities across their lifespan. Unlike other providers, we can continue to support the learner and family, if needed, as they age.

Transitioning to adulthood can be challenging for neurodivergent individuals and their families. Therefore, having a provider that can provide a continuum of care as they enter the next chapter of their lives is invaluable.





Choice. Independence. Inclusion.

Envision Unlimited is a Chicago-based nonprofit organization founded in 1948 by parents of children with intellectual and developmental disabilities (I/DD). Today, we are Illinois' largest accredited nonprofit serving residents of all ages with I/DD, mental illness, and autism. Our 18 community hubs provide services ranging from mental health, community living, specialized foster care, and applied behavior analysis therapy for children and adults with autism, to employment assistance.

The families of more than 96% of those we serve have incomes at or below the poverty line. More than 72% are Black/African Americans; nearly 9% are Hispanic/Latinx.

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