



# autism IOI

understanding the disorder is the first step in early intervention

There is considerable evidence that autism is on the rise. Prevalence rates are estimated at six cases per 1,000 births. Contrary to common understanding, autism is but one of a host of conditions referred to as autism spectrum disorder or ASD. On one end of the spectrum is *Asperger's Syndrome* and *high functioning autism*. These represent the milder forms of ASD. On the other end is *autistic disorder*. Children with autistic disorder have varying levels of impairment but are more severely involved than an individual with Asperger's syndrome.

The common characteristics that various forms of ASD share are deficits in language, cognitive functioning (restricted or rigid thinking) and social interaction. Repetitive behaviors such as odd movements of the hands or spinning of the body or objects are common. Individuals on the high end of the spectrum have deficits in these areas but have greater functional skills than those who are more severely impacted by the disorder.

Children with a diagnosis of *pervasive developmental disorder* or PDD may have some but not all of the characteristics that would warrant a diagnosis of autism. An individual with Asperger's syndrome may have above average intellectual abilities and language that sounds very sophisticated, but may still have differences in social functioning and rigidity of thought. An essential aspect of Asperger's is an obsession with a particular skill (such as video games) or thing (batteries or state capitols, for example). These individuals become quite expert in their area of interest.

Asperger's syndrome is not usually identified until an individual is older. Conversely, a criteria for autism is diagnosis prior to age three years. Parents play an important role in identifying children at risk. The first thing parents may observe is a language delay. However a language delay alone would not warrant a need for autism assessment. Studies have shown that important risk factors include lack of eye contact and responding to one's name. A lack of shared interest in discoveries is another red flag. Parents should expect even a toddler to point to interesting sights or bring her parent an interesting object (this is beyond the child's pointing to something she wants). A lack of fantasy and pretend play should also concern parents. Two and three year olds do not have sophisticated pretend skills but they should do things like pretend to feed a doll or bear.

Many parents have a feeling that something is not right with their child and this should be heeded. The earlier intervention



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can be provided, the more effective it is. So parents are advised to be proactive when they have concerns about their child's development. There are few benefits associated with waiting; instead, there are a wealth of benefits associated with early assessment and intervention. Parents should tell their pediatrician about their concerns and ask about resources for developmental testing.

Ten questions to ask yourself about your child's behavior:

- 1) Does he or she have language delays?
- 2) Resist turning to her name?
- 3) Struggle with eye contact?
- 4) Fail to respond to a word such as *cookie* or *grandma* when this thing is out of sight?
- 5) Do some things over and over like opening and closing doors?
- 6) Flap her hands?
- 7) Stare at things?
- 8) Refrain from pointing to interesting sights?
- 9) Seem happiest when alone?
- 10) Use me (or my hand) as a tool to get things?

*None of the above is by itself a concern. But if your two or three year old has a few of these behaviors, a screening may be in order.*

Resources for autism spectrum disorder  
[mercyfamilycenter.com](http://mercyfamilycenter.com)  
Louisiana Early Steps  
[autism-society.org](http://autism-society.org)  
*Could It Be Autism?* By Nancy Wiseman



*Dr. Pat Blackwell is the director of ParentSource (504.433.2428), a resource that provides play and parenting groups as well as individual consultation about parenting and child development. Visit [parentsorceone.com](http://parentsorceone.com) for calendars and more articles.*