**Autism Spectrum Disorder (ASD)** is a group of complex developmental brain disorders that can cause significant challenges in the areas of communication, social functioning, and behavior. Autism can range from mild to severe and varies from child to child. ASD typically appears during a child’s first three years of life and can be characterized by lack of or delay in spoken language, repetitive use of oral and/or motor mannerisms (e.g., hand-flapping, twirling objects, repeat words or phrases, etc.), give unrelated answers to questions, get upset by minor changes in routine, have obsessive interests (i.e., trains, dinosaurs, etc.), prefers to play alone, avoids eye contact, etc. Other characteristics associated with ASDs are hyperactivity, impulsivity, short attention span, aggression, causing self injury, temper tantrum, unusual eating and sleeping habits, unusual mood or emotional reactions, lack of fear or more fear than expected, unusual reactions to the way things sound, smell, task, look, or feel.

About 1 in 88 children have been identified with an autism spectrum disorder. ASDs occur in all racial, ethnic, and socioeconomic groups. Researchers have found that the prevalence of ASDs is significantly greater in non-Hispanic white children than among non-Hispanic African American children and Hispanic children. Furthermore, ASDs are approximately five times more common among boys (1 in 54) than among girls (1 in 252).

**Definition**

Autism Spectrum Disorder (ASD) is a group of complex developmental brain disorders that can cause significant challenges in the areas of communication, social functioning, and behavior. Autism can range from mild to severe and varies from child to child. ASD typically appears during a child’s first three years of life and can be characterized by lack of or delay in spoken language, repetitive use of oral and/or motor mannerisms (e.g., hand-flapping, twirling objects, repeat words or phrases, etc.), give unrelated answers to questions, get upset by minor changes in routine, have obsessive interests (i.e., trains, dinosaurs, etc.), prefers to play alone, avoids eye contact, etc. Other characteristics associated with ASDs are hyperactivity, impulsivity, short attention span, aggression, causing self injury, temper tantrum, unusual eating and sleeping habits, unusual mood or emotional reactions, lack of fear or more fear than expected, unusual reactions to the way things sound, smell, task, look, or feel.

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**Characteristics**

This group of developmental disorders can cause significant deficits in a child’s social interactions, communication, and behavior.

**Social Skills**
- By 1st birthday is not yet responding to name
- Avoids eye-contact
- Prefers not to play with others
- Does not share other’s interest
- Has flat/inappropriate facial expressions
- Does not understand personal boundaries
- Avoids physical contact with others
- Has difficulty having empathy for others

**Communication**
- Delayed speech and/or language skills
- Echolalia (immediately repeats words spoken by others)
- Uses few/no gestures
- Flat, robot-like, or sing-song speech
- Reverses pronouns (e.g., says “you” instead of “I”)
- Does not understand jokes, sarcasm, or teasing
- Does not engage in pretend play
- Provides answers unrelated to the question

**Behavior**
- Flaps hands, rocks body, or spins self in circles
- Has to follow certain routines
- Has obsessive interests
- Gets upset by minor changes
- Likes parts of objects (e.g., wheels, pencil erasers, etc.)
- Plays with toys the same way every time
- Is very organized
- Lines up toys or other objects in a specific order
There are several things that can be done to help an individual with autism be more successful in any setting:

- Be welcoming and supportive.
- One of the best things to do is to observe the child/youth to learn how they react in particular situations and what he/she likes and dislikes.
- Provide appropriate levels of structure and support as needed by the child/youth.
- Set clear expectations and boundaries. Be CONSISTENT!!! Develop structure. ROUTINE, ROUTINE, ROUTINE
- Recognize that the child’s/youth’s behavior IS communication.
- Develop strategies to compensate for challenges (preferred seating; additional response time; organizational supports such as written schedules, lists, labels, etc.; visual information and verbal directions).
- Be aware of the child’s/youth’s sensory needs and adjust supports and expectations as appropriate. Avoid and/or prepare for known triggers.
- Expect growth. Keep standards high, with small steps and supports to allow the child to exhibit success.
- Reward what you want to see with positive reinforcement. Use the child’s/youth’s interests to engage and motivate him/her.
- Educate peers. Promote acceptance and understanding.
- Conduct a task analysis of a task and then provide child/youth with a step-by-step picture depicting how he/she will go about completing the task.
- Provide the child/youth with a peer buddy.
- Visual social “rule cards.”

Resources:
There are numerous websites that provide valuable information related to Autism Spectrum Disorders.

- Autism Speaks at www.autismspeaks.org

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