

## DOCUMENT RESUME

ED 450 531

EC 308 289

TITLE Colorado Resource Guide for Autism Spectrum Disorders.  
INSTITUTION Colorado State Dept. of Education, Denver.  
PUB DATE 2000-06-00  
NOTE 17p.; Developed by the Colorado Autism Task Force.  
AVAILABLE FROM Colorado State Dept. of Education, State Library and Adult Education Office, 201 E. Colfax, Denver, CO 80203; Web site: <http://www.cde.state.co.us>.  
PUB TYPE Guides - Non-Classroom (055)  
EDRS PRICE MF01/PC01 Plus Postage.  
DESCRIPTORS \*Autism; \*Early Identification; \*Early Intervention; \*Eligibility; Incidence; Infants; Preschool Children; Preschool Education; Special Education; \*Student Characteristics; \*Symptoms (Individual Disorders)  
IDENTIFIERS Colorado

## ABSTRACT

This brochure provides information on autism to enable Colorado parents and educators to recognize early symptoms in young children and to provide for early intervention. Sections of the brochure address: (1) the different types of autism; (2) basic facts about autism; (3) early indicators of autism; (4) the spectrum of autism; (5) how autism is identified; (6) characteristics of autism disorder, including difficulties with social participation, problems with communication, delays in developmental rates and sequences, cognitive impairments, unusual sensory processing, and behavioral problems; (7) the federal definition of autism; (8) Colorado eligibility criteria for autism; and (9) competencies of Colorado Regional Autism Specialists. A resource list of Colorado organizations, on-line Internet resources, related reading, family and personal accounts, and periodicals is provided. (CR)

EC

ED 450 531

# Colorado Resource Guide for Autism Spectrum Disorders

EC 308289

U.S. DEPARTMENT OF EDUCATION  
Office of Educational Research and Improvement  
EDUCATIONAL RESOURCES INFORMATION  
CENTER (ERIC)

- This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.



Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

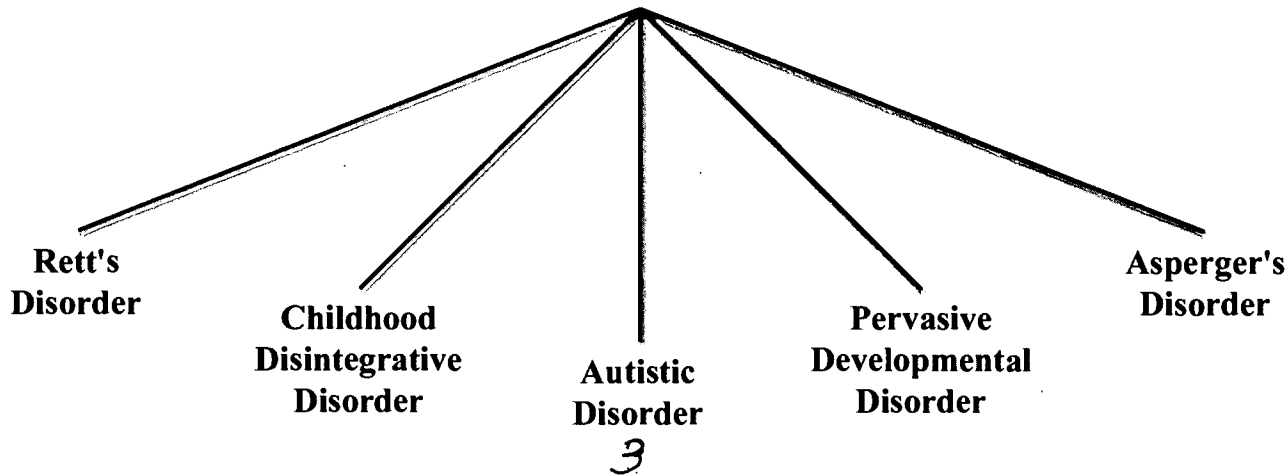
Developed by the  
Colorado Autism Task Force

PERMISSION TO REPRODUCE AND  
DISSEMINATE THIS MATERIAL HAS  
BEEN GRANTED BY

Bolt

TO THE EDUCATIONAL RESOURCES  
INFORMATION CENTER (ERIC)

# Autism Spectrum Disorders



# Autism

- Is a life-long developmental disability resulting from a neurological disorder that affects brain functioning.
- Usually occurs during the first three years of life.
- Affects 1 of every 500 births.
- Interferes with communication, interaction and sensory processing.
- Can have symptoms ranging from mild to severe.
- Is more common in boys than in girls.

## Possible Early Indicators of Autism

1. The child may appear to be deaf. Does not have typical startle response. Does not turn when you come into the room. Seems unaware of sounds in the room, etc.
2. May be an extremely "good" baby-seldom cries, is not demanding, and seems very content to be alone - OR is a very fussy, colicky baby who cries a lot, has sleep problems and is not easily comforted.
3. May "hand gaze," looking at light through fingers, or may have other self-stimulatory behavior.
4. May be a fussy eater.
5. Does not have an anticipatory response. Does not raise arms to be picked up. Does not seem to want to be held.
6. Seems to avoid actively looking at people.

Seems to "tune out" a lot. Is not aware of what is happening around him/her.

8. Wants things to "stay the same." May have difficulty adapting to winter coat or boots. Wants to wear the same clothes. Does not want furniture or toys to be "out of place."
9. Does not begin to talk or use words in a communicative way at the appropriate age. Fails to develop language, or uses echolalic speech without really understanding the meaning of the words.
10. Often seems to be a perfectionist. Wants everything to be "just right." If he/she tries to make something work and it does not, he/she gets upset and will quit, or will become angry and will not try the activity again.
11. Often has "splinter skills" in areas like music, can do puzzles extremely well, has excellent gross motor skills, or is very interested in numbers and letters.
12. May have very high tolerance for pain. May get hurt but not come to an adult for comfort.
13. May become very upset by changes in routine.
14. May not spontaneously imitate the play of other children
15. May have difficulty applying information from one setting to another.
16. May experience extreme sensory sensitivity.

# **The Spectrum of Autism**

## **What is Autism?**

Autism is a life-long disability that begins sometime during the first three years of a child's life. Autism is a neurologically based disorder; it affects the way a child communicates, interacts with other people and perceives and reacts to the world.

Patterns of behavior that are characteristic of autism include impairment of reciprocal social interactions, impaired communication skills, repetitive behaviors and a restricted range of interests. Not all children with autism behave in the same way. This is what is meant by the "spectrum of autism." Each child might display a different combination of behaviors ranging from mild to severe.

Other disorders related to autism are Rett's Disorder, Childhood Disintegrative Disorder, Pervasive Developmental Disorder and Asperger's Disorder. The term "autism" is generally used to describe the spectrum of these related disorders.

## **What Causes Autism?**

Researchers have not found a specific cause for autism. Evidence indicates that there are genetic factors involved and that there are biological and/or neurological differences in the brains of children who have autism. Autism is not a form of mental illness. It is not something that is caused by bad parenting or by any other psychological influences in the child's life. Children with autism are not choosing to behave badly.

## How is Autism Identified?

Families seeking a diagnosis from some medical communities report frustration. Diagnosis is difficult for some medical personnel who have limited training or exposure to autism because it is not a common disorder and because the characteristics vary widely.

There are no medical tests for diagnosing autism. However, because many of the behaviors associated with autism are shared by other disorders, a doctor may complete various medical tests to rule out other possible causes. In order to be diagnosed accurately, a child must be observed by professionals skilled in determining communication, social, behavioral and development levels. A brief observation in a single setting cannot present a true picture of an individual's abilities and behavior patterns. At first glance, the child may appear to have mental retardation, a learning disability or problems with hearing. A medical diagnosis is not required for special education services, but it can provide for better understanding, direction and guidance for families.

*Parents who have concerns about their child's development should contact their local school district. For children birth through age five, parents should request an evaluation by contacting their school district's Child Find coordinator. For an evaluation of a school-age child, parents should contact the principal at their child's school.*



# Characteristics of Autism Disorder

A child identified with autism will exhibit characteristics under A and B, and one or more characteristics under C through F:

## *A. Social Participation*

The child displays difficulties or differences or both in interacting with people and events. The child may be unable to establish and maintain reciprocal relationships with people. The child may seek consistency in environmental events to the point of exhibiting rigidity in routines.

## *B. Communication*

The child displays problems that extend beyond speech and language to other aspects of social communication, both receptively and expressively. The child's verbal language may be absent or, if present, lacks the usual communicative form, which may involve deviance or delay, or both. The child may have a speech or language disorder or both, in addition to communication difficulties associated with autism.

## *C. Developmental Rates and Sequences*

The child exhibits delays, arrests or regressions in motor, sensory, social or learning skills. The child may exhibit precocious or advanced skills development, while other skills may develop at normal or extremely depressed rates. The child may not follow developmental patterns in the acquisition of skills.

#### *D. Cognition*

The child exhibits abnormalities in the thinking process and in generalizing. The child exhibits strengths in concrete thinking while difficulties are demonstrated in abstract thinking, awareness and judgment. Perseverant thinking and impaired ability to process symbolic information may be present.

#### *E. Sensory Processing*

The child exhibits unusual, inconsistent, repetitive or unconventional responses to sounds, sights, smells, tastes, touch or movement. There may be a visual or hearing impairment, or both, in addition to sensory processing difficulties associated with autism.

#### *F. Behavioral Repertoire*

The child displays marked distress over changes, insistence on following routines, and a persistent preoccupation with or attachment to objects. The child's capacity to use objects in an age-appropriate or functional manner may be absent, arrested or delayed. The child may have difficulty displaying a range of interests or imaginative activities, or both. The child may exhibit stereotyped body movements.

*Adapted from Madison Metropolitan School District -  
Autism Eligibility Criteria*

# The Federal Definition of Autism

The Individuals With Disabilities Education Act [IDEA 300.7 (c)(1)(i)] defines autism as "A developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age three, that adversely affects a child's educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movement, resistance to environmental change or change in daily routine, and unusual responses to sensory experiences. The term autism does not apply if a child's educational performance is adversely affected primarily because the child has an emotional disturbance.

# **Colorado Eligibility Criteria for Autism**

School districts in Colorado may use the IDEA educational eligibility criteria to determine a child's eligibility for special education services. The disability "autism" is a subcategory of "Physical Disability" in Colorado.

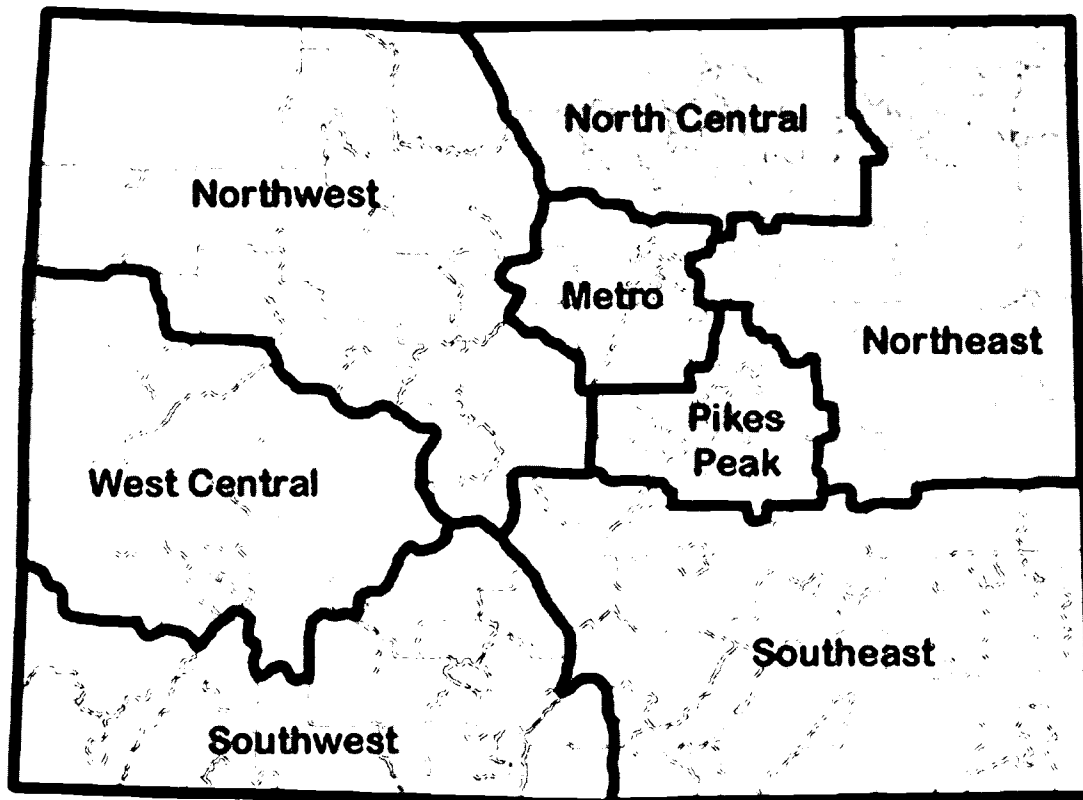
School district personnel who suspect that a child may have autism are responsible for informing the child's parent(s) of the suspected disability. Observations that led the assessment team to this conclusion should be discussed. The school district should also inform the parent(s) of their choice to seek a medical evaluation. However, a medical evaluation is not required for determining educational eligibility for special education services.

# The Colorado Autism Network

Colorado Autism Resource Specialists have received advanced training in the following areas of competence:

- Characteristics of autism and its implications
- Current trends and theories in autism
- Identification process and autism criteria for eligibility for services
- Comprehensive assessment of family strengths and needs
- Planning and objective measurement methods for the IFSP (Individual Family Service Plan) and IEP (Individual Education Plan)
- Assessment of social and communication skills, and intervention with autism
- Assessment of behavior, and intervention with autism
- Consultation skills and knowledge of resources

# The Colorado Department of Education's Regional Service Map



*To access the services of regional Autism Resource Specialists, contact  
the Colorado Department of Education at (303) 866-6694  
[www.cde.state.co.us](http://www.cde.state.co.us)*

# Resources

## Colorado Autism Contacts

*Autism Society of America, Colorado Chapter*  
5031 W. Quarles Dr.  
Littleton, CO 80128  
(303) 978-1440

*Autism Society of the Pikes Peak Region*  
Alison Seyler  
918 Crown Ridge Dr.  
Colorado Springs, CO 80904  
(719) 630-7072

## On-Line Internet Resources

*Autism and Brain Development Research*  
<http://nodulus.extem.ucsd.edu/abdrl.html>

*Childhood Disintegrative Disorder (Heller's Syndrome)*  
<http://info.med.yale.edu/chldstudy/autism/ccd-info.html>

*Pervasive Developmental Disorder*  
<http://info.med.yale.edu/chldstudy/autism/pdd-info.html>

*Rett's Disorder*  
[http://www.familyvillage.wisc.edu/lib\\_rett.htm](http://www.familyvillage.wisc.edu/lib_rett.htm)

## Related Readings

*Asperger's Syndrome: A Guide for Parents and Professionals*  
- Tony Atwood

*Higher Functioning Adolescents and Young Adults with Autism*  
- Ann Fullerton, et. al

*Targeting Autism: What We Know, Don't Know, and Can Do To Help*  
- Shirley Cohen

*Teaching Children with Autism*  
- Kathleen Quill

*The Effects of Autism on the Family*  
- Eric Schopler and Gary Mesibov

*Understanding the Nature of Autism*  
- Janice Janzen

*Using Visual Cues to Improve Communication*  
- Linda Hodgdon

## Family and Personal Accounts

*Crossing Bridges: A Parent's Perspective on Coping after Diagnosis of Autism/PDD*

- Vickie Satkiewicz

*Emergence: Labeled Autistic*

- Temple Grandin

*Let Me Hear Your Voice*

- Catherine Maurice

*Mixed Blessings*

- William and Barbara Christopher

*News from the Border*

- Jane McDonnell

*Nobody Nowhere*

- Donna Williams

*Somebody Somewhere*

- Donna Williams

*The Sound of a Miracle*

- Annabel Stehli

*There's a Boy in Here*

- Judy and Sean Barron

*Thinking in Pictures*

- Temple Grandin

*Without Reason*

- Charles Hart

## Periodicals

*Autism Research Review International*

4182 Adams Ave.

San Diego, CA 92116

*Focus on Autistic Behavior*

Pro-Ed Journal

8700 Shoal Creek Boulevard

Austin, TX 78757-6897

*Journal of Autism and Developmental Disorders*

Plenum Press

233 Spring Street

New York, NY 10013

*The Morning News*

Carol Gray

Henison Public Schools

2140 Bauer Road

Jenison, MI 49428



A publication of the  
**Colorado Department of Education**



**Developed by the  
Colorado Autism Task Force  
(303) 866-6694  
[www.cde.state.co.us](http://www.cde.state.co.us)**

**June 2000**

**Colorado Board of Education**

Clair Orr, Chairman  
4th Congressional District  
Kersey, Colorado

Randy DeHoff  
6th Congressional District  
Littleton, Colorado

Patricia M. Chlouber, Vice Chairman  
3rd Congressional District  
Leadville, Colorado

Patti Johnson  
2nd Congressional District  
Broomfield, Colorado

Ben L. Alexander  
Member-at-Large  
Montrose, Colorado

Gully Standford  
1st Congressional District  
Denver, Colorado

John Burnett  
5th Congressional District  
Colorado Springs, Colorado



**U.S. Department of Education**  
Office of Educational Research and Improvement (OERI)  
National Library of Education (NLE)  
Educational Resources Information Center (ERIC)



## NOTICE

### REPRODUCTION BASIS



This document is covered by a signed "Reproduction Release (Blanket) form (on file within the ERIC system), encompassing all or classes of documents from its source organization and, therefore, does not require a "Specific Document" Release form.



This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").