

# Chapter 2: Introduction to Autism

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There are several different definitions of autism as the definitions serve different purposes. The introduction gives a broad general description and a global “picture” about the subject of autism. It gives a lot of information and the knowledge is easily understood.

Treatment strategies for ASD include both medical treatment and educational interventions. The medical definition is required for a diagnosis of autism and must be made by a psychologist, psychiatrist, or a physician using criteria from the *Diagnostic and Statistical Manual of Mental Disorders, DSM-IV* (see Chapter 4: Medical Aspects). The diagnosis then helps the individual to obtain needed treatments, medications, or therapies.

A medical diagnosis is not required for an education identification of ASD, nor does it automatically guarantee identification. Both definitions identify the difficulties experienced by individuals with ASD in the areas of communication, socialization, and behavior. The educational definition was designed to identify children eligible for special education services under the federal Individuals with Disabilities Education Act (IDEA) first enacted in 1991. Additionally, there is a Washington State law (WAC) describing autism. It is used to determine eligibility for special education services in our state (see Appendix 3: Special Education).

## What is Autism or Autism Spectrum Disorder?

Autism is a complex neurodevelopmental disorder occurring in 1 in 150 individuals with more frequent occurrence in boys than girls (Centers for Disease Control and Prevention [CDC] 2007). Classified as one of the five Pervasive Developmental Disorders (Diagnostic and Statistical Manual of Mental Disorders, IV, TR, 2000), autism is a neurological disorder that impacts brain development in social interaction, communication and repetitive behaviors. The onset of symptoms is generally within the first three years of life, although the presentation varies widely among individuals.

The pervasive developmental disorders encompass behavioral impairments across three domains of development:

- ◆ Qualitative impairments in social interaction
- ◆ Qualitative impairments in communication
- ◆ Restricted, repetitive and stereotyped patterns of behavior, interest and activities (Centers for Disease Control and Prevention, 2007)

There are a number of other common findings in individuals with autism that are not part of the diagnostic criteria. These may include unusual responses to sensory stimulation, behavioral disturbances and significant strengths and weaknesses in cognitive characteristics. The definition of autism has broadened so that autism is now seen as a spectrum disorder. In recent years, the conceptualization and criteria defining the condition called “autism” have evolved. For these guidelines, the panel agreed to use

the terminology of “Autism Spectrum Disorder” (ASD) which would include the disorders commonly diagnosed as Autism, Asperger Disorder, and Pervasive Developmental Disorder - Not Otherwise Specified (PDD-NOS). The majority of specialists believe that the boundaries along the continuum overlap to a large degree.

Autism is more common than previously realized, in part due to the broader definition and inclusion of higher functioning autism in recent years. Earlier studies suggested that about three to four individuals in 10,000 were affected by autism (Fombonne, 2003). Researchers observed an increase in the rate of individuals diagnosed with ASD in the past decade. The most recent estimate from the CDC is one out of every 150 children in the communities studied has an ASD (2007).

In addition to inclusion of high functioning autism, the increase in the number of people with autism spectrum disorders may also be a result of improved diagnosis. However, other possibilities are being considered including environmental and genetic factors.