

ASM MEMBERSHIP



- INDIVIDUAL/FAMILY MEMBER \$25.00
 - STUDENT \$25.00
 - PROFESSIONAL \$150.00
 - AGENCY/ORGANIZATION \$200.00
 - LIFETIME \$1,500.00
 - DONATION \$ _____
- TOTAL: \$ _____

NAME _____

ORGANIZATION _____

ADDRESS PLEASE CIRCLE HOME OR WORK _____

PHONE _____ E-MAIL _____

INFORMATION ABOUT THE INDIVIDUAL ON THE AUTISM SPECTRUM

NAME _____

MALE/FEMALE DATE OF BIRTH DIAGNOSIS

- CHECK WHICH BEST DESCRIBES YOU:**
- INDIVIDUAL ON THE AUTISM SPECTRUM PARENT FAMILY PROFESSIONAL

MEMBERSHIP INCLUDES:

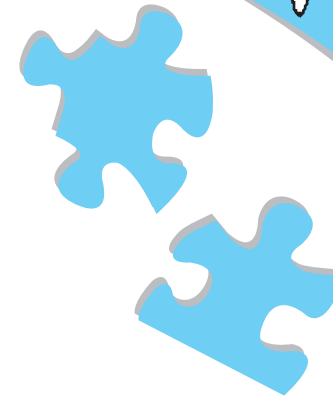
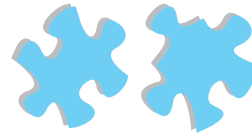
- CHECK AUTISM ADVOCATE JOURNAL
- VISA SCHOLARSHIPS FOR CONFERENCES
- MASTERCARD ACCESS TO ASM FAMILY RETREAT
- PURCHASE ORDER AND SUMMER CAMP

_____-_____-_____- _____

CREDIT CARD NUMBER EXP. DATE

SIGNATURE

The Autism Society of Maine provides education and resources to support the valued lives of individuals on the autism spectrum and their families.



THE AUTISM SOCIETY OF MAINE IS AN OFFICIAL AFFILIATE OF THE NATIONAL AUTISM SOCIETY.

Autism Spectrum Disorder

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Revised 5/14

MEMBERSHIP FORMS CAN BE MAILED OR FAXED. YOU CAN ALSO SIGN UP ONLINE AT WWW.ASMONLINE.ORG

nationalAutismSociety.org
www.autism-society.org

WWW.ASMONLINE.ORG
1-800-273-5200

What is Autism Spectrum Disorder?

- Developmental disability that appears before age 7 years
- Result of a neurological disorder that affects the brain
- Occurs in 1 out of 68 births in the United States
- 4 times more prevalent in boys than girls
- Crosses all racial, ethnic and social boundaries
- Affects ability to communicate, reason and interact with others
- Impacts individuals differently and to varying degrees of severity (mild, moderate, severe)
- Often found with other disabilities

What is different?

There will be one diagnosis, Autism Spectrum Disorder, instead of three. This new diagnosis includes those who would have otherwise been diagnosed with:

- Asperger's Disorder,
- Autistic Disorder and
- Pervasive Developmental Disorder-Not Otherwise Specified

Why the change?

The DSM-IV, a guidebook used by clinicians to diagnose and classify disorders, has been updated to the new DSM-5. These changes were based on new research and knowledge, with input from over 1500 experts from 39 countries.

This manual also includes improved rating scales resulting in better precision of diagnosis.

What do the changes mean?

People will not suddenly lose their current diagnosis when the new criteria are published. Typically, people are re-evaluated every 2 - 3 years. When the re-evaluation takes place, it would be using the DSM-5 criteria. The manual does write: "Individuals with a well-established DSM-IV diagnosis of Autistic Disorder, Asperger's Disorder or Pervasive Developmental Disorder Not Otherwise Specified should be given the diagnosis of Autism Spectrum Disorder.

Many worry about the impact to funding for services. We do not know how/if social policy will change. It will be important for your legislative representatives - state and federal, to know your concerns. So, please contact them!

***Not Caused by Poor Parenting!
Individuals Do Not Choose to Have ASD!***

What are the criteria?

- **Persistent deficits in social communication and social interaction across settings, as shown by:**
 1. Deficits in social-skills and emotional reciprocity
 2. Deficits in non-verbal communication (i.e. body language, eye contact);
 3. Deficits in developing, maintaining and understanding relationships (i.e. absence of interest in peers, difficulty in sharing imaginary play) **AND**
- **Restrictive, repetitive patterns of behavior, interests or activities as shown by:**
 1. Repetitive speech and/or behaviors, or use of objects (such as repeating words, using objects the same way over and over, spinning, flapping);
 2. Insistence on sameness, inflexible adherence to routines, need to take same route to destinations, eat same foods);
 3. Highly restricted fixated interests that are abnormal in intensity or focus (i.e. strong focus on unusual objects, unusual interests);
 4. Hyper- or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).
- Symptoms must be present in the early developmental period (i.e. by age 7 years)
- Can be with or without an intellectual disability
- Can be with or without a language impairment
- **Severity Levels:**
 - Level 3**- "Requiring very substantial support"
 - Level 2**- "Requiring substantial support"
 - Level 1**- "Requiring support"

Individuals with a well-established DSM-IV diagnosis of Autistic Disorder, Asperger's Disorder or Pervasive Developmental Disorder Not Otherwise Specified should be given the diagnosis of Autism Spectrum Disorder.

Individuals who have deficits in social communication, but whose symptoms do not otherwise meet criteria for Autism Spectrum Disorder should be evaluated for Social (Pragmatic) Communication Disorder.

What causes autism spectrum disorder?

- No single cause
- Biological and neurological differences in the brain
- Research continues focused on genetic links in family patterns and ASD
- Research suggests environmental factors - influences on genetics are not yet clear
- Not caused by poor parenting and individuals do not choose to have autism

How is it diagnosed?

- No medical test for autism
- According to the DSM-5 criteria for ASD
- Evaluations to be conducted by a multi-disciplinary team that may include: neurologist, psychologist, developmental pediatrician, speech and language pathologist, occupational therapist, education consultant or other professional (i.e. LCSW, LCPC) knowledgeable about Autism Spectrum Disorder (ASD)
- Rule out any physical reason for the behaviors being observed

Is there a cure?

- No known cure
- Many ways to understand the disorder and help people cope with the symptoms
- Some symptoms may lessen as the individual ages or disappear altogether
- With appropriate intervention many behaviors associated with Autism Spectrum Disorder (ASD) can be positively supported and strengths maximized
- Majority of individuals with ASD will continue to exhibit some of the symptoms throughout their lives

What are the most recognized interventions?

- Early intervention services
- Highly structured individualized special education program tailored to the individual's needs
- Positive reinforcement strategies
- Training and support to caregivers
- Speech and language therapy
- Occupational Therapy
- Applied Behavior Analysis
- Vocational Training and Supports
- Living Supports: varies based on need from own apartments to residential care
- Biomedical (e.g. diet, supplementation)