

# Autism Spectrum Disorder

An overview for families and educators

Autism Spectrum Disorder (ASD) refers to a behaviorally defined neurodevelopmental disability characterized by quantitative impairments of social reciprocity, nonverbal and verbal communication, and restrictive, repetitive patterns of behavior, interests, or activities.

It is considered to be a biologically-based condition involving differences in how parts of the brain and nervous system interact and develop over time.

- An ASD can impact an individual's ability to problem solve and process information. In addition, it may impact their ability to process sensory information, such as hearing, touch, taste and smell.
- ASD is a "spectrum disorder" which means it affects each individual in a different way and to varying degrees.
- ASD is generally present before the age of three, but may not be notable until a child is unable to manage the social, emotional, academic, motor and other life demands as expected for his or her developmental age.
- There is no known cause for autism spectrum disorder and there are no medical tests to diagnose it. ASD is determined by observing the characteristic behaviors in social interaction, communication and restricted, repetitive patterns of activities and interests to the degree that it disrupts typical development.
- ASD begins in early childhood and lasts throughout a person's lifetime.
- At present, approximately 1 in 68 young children have ASD (1 in 42 boys, 1 in 189 girls)<sup>1</sup>.
- ASD is almost five times more common in boys than it is in girls.
- Current research is focusing on the role genetics play in the development of ASD and what environmental factors may be involved.
- There is no research to support the theory that ASD is caused by childhood vaccinations.
- There is also no known cure for ASD. However, early educational, behavioral, and communication interventions have shown to be the most effective for improving the outcomes for many children on the spectrum.
- Depending on the severity of symptoms and the range of intellectual abilities, some children will make steady progress while for others, progress will be much slower.

## Changes to the eligibility category of ASD

- 2011 – HB 11-1277 made changes to Colorado's eligibility categories to correspond with federal terms and requirements including ASD which is no longer under Physical Disability
- 2012 – A definition and criteria were developed and adopted by the State Board of Education
- 2013 – 2014 Administrative Units (AUs) were trained on the new category and criteria.
- 2013 – 2016 AUs develop their timeline to begin phasing-in the revised eligibility category labels, including ASD.
- July 1, 2016 the new disability categories must be in place.

<sup>1</sup> Baio, J. (2014) Prevalence of Autism Spectrum Disorder Among Children Aged 8 Years – Autism and Developmental Disabilities Monitoring Network. Retrieved from [http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6302a1.htm?s\\_cid=ss6302a1\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6302a1.htm?s_cid=ss6302a1_w).



---

## Characteristics

---

The characteristics of ASD will vary from individual to individual so that no two people have the same set of traits. The characteristics will also change with maturation, experiences and interventions. To be identified as an individual with ASD, challenges must be observed in the areas of social communication, social interactions and restricted, repetitive patterns of behavior, interests or activities. A child may exhibit signs in the first few months of life or may appear to be developing normally and then begin to manifest signs at 18 to 24 months. When the age of onset is later, the child may experience regression, or loss of skills, or a “plateau”, a period where no new skills are acquired. For most children, symptoms will be evident in the first three years of life. Some common characteristics or “Red Flags” for ASD are:

- Not responding to his or her name by 12 months of age
- Not pointing at objects to share interest with others by 14 months
- Not playing “pretend” games by 18 months
- Avoiding eye contact and wanting to be alone
- Having trouble understanding the thoughts and feelings of self and others
- Having delayed speech and language skills
- Echolalia - repeating words or phrases over and over, either immediate or delayed
- Giving unrelated answers to questions
- Getting upset by minor changes
- Having obsessive interests
- Flapping/shaking their hands, rocking their body, spinning in circles (or other repetitive physical behaviors)
- Having unusual reactions to the way things sound, smell, taste, look, or feel

The Center for Disease Control and Prevention (CDC) has more information on typical development and possible signs of ASD listed by age, from two months to five years, on their *Learn the Signs. Act Early.* website, <http://www.cdc.gov/ncbddd/actearly/milestones/index.html>.

---

## Eligibility for Special Education Services with Autism Spectrum Disorder

---

Colorado has recently developed eligibility criteria for special education services for a student over the age of three with ASD. This change in the Colorado special education rules, Rules for the Administration of the Exceptional Children’s Education Act (ECEA Rules) became effective October 30, 2012. This new disability category must be fully in place in all school districts by July 1, 2016. The criteria can be found at [http://www.cde.state.co.us/cdesped/IEP\\_Forms.asp](http://www.cde.state.co.us/cdesped/IEP_Forms.asp) in the Disability Categories and Eligibility Criteria table in both English and Spanish. A student with a medical diagnosis of Autism Spectrum Disorder, Autistic Disorder, Asperger’s Disorder, or Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS) **may not qualify for special education services based on the diagnosis alone**. Also, a child may be receiving private therapy based on the diagnosis but may not qualify for the same services in the educational setting. The Child Find or special education team from the school district, which includes the family, will make the determination based on their evaluation of the **educational impact** of the disability and the **need for specialized instruction**. Specialized instruction is instruction, interventions, accommodations and services that are tailored to the individual students needs and not provided to all students in the general education classroom. Educational impact is based on the effect the disability imposes on academic achievement or on social and emotional challenges that impact the student’s functioning in classroom activities and with peers. The families/caregivers are actively involved in the evaluation and decision-making process. If the student does not qualify for special education services, he/she may qualify for accommodations under Section 504. More information on Section 504 can be found on the following website, <http://www.cde.state.co.us/spedlaw/rules>.

A student does not need a medical diagnosis for the team to evaluate and determine the student eligible for special education services with the disability of ASD. This is an identification of the characteristics of ASD as it affects the student’s ability to benefit from general education alone and need for specialized instruction. It is **not a diagnosis**.



When a student is suspected of having ASD with an educational impact, the team may not delay or withhold special education services because of the lack of a medical diagnosis or while waiting for a diagnosis. Similarly, services may not be delayed or denied while implementing a Response to Intervention (RtI) process if the student is suspected of being a child with a disability. The RtI process is one which the teacher assesses a student on an area of concern and then implements one or more interventions and monitors the progress to determine if the student is making sufficient gains. More information on the educational evaluation process and the difference between an educational determination of eligibility with ASD and a medical diagnosis can be found in the *Guidelines for the Educational Evaluation of Autism Spectrum Disorder* which may be found at the following website, <http://www.cde.state.co.us/cdesped/sd-autism>. Eligibility criteria for services for a child under three year of age are based on criteria set by Early Intervention Colorado. More information can be obtained on their website at <http://www.eicolorado.org>. A determination of eligible for special education under the Autism Spectrum Disorder category provides the student with school based services only. If the family would like private therapy services in the home or clinic they may choose to pursue a diagnosis of ASD for their child. Most insurances and public agencies will require a diagnosis by a doctor or clinician in order to pay for therapy or behavioral services.

---

## If You Have a Concern:

---

### **Children birth to three years:**

Families/caregivers who have concerns about their young child's development should seek the advice of their pediatrician or physician. A physical exam and developmental screening may determine if further evaluation is necessary. The family may also request an evaluation from their school district or Board of Cooperative Educational Services (BOCES) by contacting the Child Find office. A Child Find Directory can be found on the CDE website at, <http://www.cde.state.co.us/early/childfinddirectoryinfo> with the location and contact information for the Child Find Coordinator in each district and BOCES. The family of a child under the age of three may choose to begin the evaluation process by contacting the agency in their area that provides early intervention services to children birth to three-years who have a developmental delay or disability. Early Intervention Colorado for Infants, Toddlers and Families has the contact information for these agencies. They can be found at <http://eicolorado.org/>.

### **Children three to five years:**

If the child is three to five years of age but not attending a public preschool and the family has concerns about development the family may also seek advice from the pediatrician or family physician about the child's development. For an evaluation from the school district or BOCES, contact the Child Find office. See the above paragraph for where to find that information on the CDE website. If the Child Find Coordinator determines an evaluation is needed, it will be provided free of charge either at the school district or the child's home.

### **Children attending school:**

If the child is already in school and there is evidence of educational impact, the family may begin by discussing concerns with the child's teacher, principal or a member of the school's special services team. The family's information and active partnership from the beginning of the process is essential. A developmental history will help establish if the characteristics have been present from early childhood. If the behaviors of concern are more recent, other disability categories may be explored.

---

## Evidence-Based Interventions

---

The Colorado Department of Education (CDE) encourages ongoing collaborative partnerships between families and professionals to address the widely varying needs of individuals with autism spectrum disorder. CDE does not endorse



any one specific program or methodology. To meet the diverse needs of students with effective programming, knowledge of current evidence-based practices and how to match a strategy to a student's learning style is necessary. Due to the overwhelming amount of information on the web and in print, it can be daunting for educators to know which interventions have the research or evidence and which do not.

The National Professional Development Center on Autism Spectrum Disorders is a multi-university center to promote the use of evidence-based practices for children and adolescents with autism spectrum disorder. Currently the center has identified 27 practices that meet their rigorous criteria to be considered as evidence-based. You may locate the evidence-based practices on the following website, <http://autismpdc.fpg.unc.edu/evidence-based-practices>. The center periodically reviews the new research on behavioral, developmental and/or educational interventions and reports on their findings. The report is free and may be downloaded from their website.

Review of the research conducted by the National Autism Center (NAC) provides a report on their findings of eleven "established treatments" and twenty-two "emerging treatments". Based on their findings, the NAC has created a manual for educators, *Evidence-Based Practice and Autism in the Schools Educator Manual* and *A Parent's Guide to Evidence-based Practices and Autism*. Home-school coordination of supports and interventions can increase student learning opportunities. Each document can be downloaded in a PDF version for free or a spiral bound copy can be purchased for a small fee at <http://www.nationalautismcenter.org/>.

## Resources

Autism Society of Colorado, <http://autismcolorado.info/>

Autism Society of Larimer County, <http://autismlarimer.org/>

Autism Society of Boulder Valley, <http://autismboulder.org/>

Autism Society of America, <http://autism-society.org/>

PEAK Parent Center, information and support for families of a child or children with a disability, <http://peakparent.org/>

Family Voices Colorado, information and support for navigating the health care system including insurance, <http://familyvoicesco.org/>

Center for Disease Control and Prevention (CDC), information on ASD, <http://cdc.gov/ncbddd/autism/facts.html/>

Autism Internet Modules, training modules on a variety of autism related topics, <http://autisminternetmodules.org/>

Autism Speaks, although developed for families, has a wealth of information for educators and individuals with ASD, <https://www.autismspeaks.org/>

Ohio Center for Low Incidence Disabilities (OCALI), <http://ocali.org/>

JFK Partners, University of Colorado School of Medicine, provides training, services and information on developmental disabilities, <http://jfkpartners.org/>

**Where can I learn more? Colorado Department of Education, Exceptional Student Services Unit, Autism Spectrum Disorder website: [www.cde.state.co.us/cdesped/sd-autism](http://www.cde.state.co.us/cdesped/sd-autism)**

*This CDE guidance document is meant for clarification, is not legally binding, and is not to be confused with legal advice. This guidance reflects CDE's recommendations, but Administrative Units (AUs) may have developed their own policies or procedures that differ from those described herein. Be sure to refer to your local AU's policies and procedures through the Director of Special Education. If you are seeking legal advice, please contact your legal counsel.*

The contents of this handout were developed under a grant from the U.S. Department of Education. However, the content does not necessarily represent the policy of the U.S. Department of Education, and you should not assume endorsement by the federal government.

Colorado Department of Education, Exceptional Student Services Unit  
(303) 866-6694 / [www.cde.state.co.us/offices/exceptionalstudentservicesunit](http://www.cde.state.co.us/offices/exceptionalstudentservicesunit)