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Youth and Autism

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What is Autism?

Autism is one group of disorders under the heading of Pervasive Development Disorders (PDD). It is characterized by problems in developing appropriate social, communicative, and behavioral skills. Autism is more common in males than females. It manifests in a wide spectrum of severity. One individual with autism may blend into society with only a few communication or social interaction problems. Another individual may not have the skills to communicate at all. Other disorders classified as PDD's are Asperger's Syndrome, Rett's Disorder, Childhood Disintegrative Disorder, and Pervasive Development Disorder-Not Otherwise Specified (PDD-NOS). These disorders are characterized by some of the same symptoms as autism.

What are the Symptoms of Autism?

Symptoms of autism are usually apparent by the age of 3 years. Not all symptoms of autism will be evident in every child. These symptoms include having:

1. Little or no eye contact,
2. Limited or no vocabulary,
3. A strong resistance to change,
4. A preference for spending time alone,
5. Word or phrase repetition,
6. A preference not to be touched, held, or cuddled,
7. Uneven development of gross/fine motor skills,
8. Little or no responsiveness to spoken communication,
9. Little or no fear,
10. Pointing or using gestures instead of speaking,
11. Anxiety while in crowds,
12. Self-harming behavior such as head banging,
13. Aggressive behavior,
14. Emotional displays such as laughing or crying for no apparent reason,
15. Tantrums.

What Causes Autism?

Currently there is no known cause of autism. However, autism has been shown to possibly have a genetic connection. This genetic connection may not be related to a specific gene but may be caused by a combination of defective genes. Presence of certain disorders such as phenylketonuria (PKU) and fragile X syndrome also increases the risk of autism. Some evidence shows that vaccines, such as the MMR vaccine that protects against measles, mumps, and rubella, given at certain times in the developmental process may cause autism. However, it is important to remember that several studies have found no link between autism and the MMR vaccine, and having children vaccinated is still essential.

What Can Be Done to Treat Autism?

Early intervention is important in treating autism. Children who receive early and appropriate intervention can be taught things more easily, such as adapting to changing situations and acquiring a broader vocabulary. Some children will be able to communicate more effectively if they are taught sign language or allowed to use pictures to show what they want or need and what they are feeling. In some cases, medications such as those used to treat Attention-Deficit Hyperactivity Disorder or depression can help control some of the symptoms of autism such as aggressive behavior.

Important Issues for Extension Educators and 4-H Leaders to Consider:

1. Have contact information for parents or guardians and the member's doctor in accessible places. An example of this would be behind the child's nametag and in the medical forms box in the main office at 4-H events. This form should also include information such as what kinds of medications the child is taking, allergies, if any adaptive devices are used, and other health conditions.

2. No person with autism manifests the disorder in the same way. A discussion that includes the child and his or her parents will be valuable especially if the child has difficulty communicating and relating. Questions that can be asked include: "What seem to be the most prevalent symptoms in your child's autism?" and "What communication method(s) works best for you and your child?"

3. Some children with autism may have other medical conditions, such as PKU or Fragile X Syndrome, that have symptoms not related to autism. These conditions may cause other problems such as mental retardation. Leaders should educate themselves about the disorders affecting the child they are working with so the child's needs can be met.

4. In situations where a child demonstrates self-harm or aggressive behaviors, providing a chaperone or aide to specifically care for this child is essential. An interpreter may also be necessary if the child communicates using sign language.

5. In a few cases of autism, it may not be realistic to include a child in group activities if the child is a danger to him or herself or others in the group. Be objective and use discretion when deciding to include such a child in a group with other children.

6. Providing a schedule of activities may be a good idea for a child with autism. Try to stick with the schedule as closely as possible, and if the schedule needs to be changed, introduce the idea gradually to the child.

For More Information Contact:

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Web site: www.autism-society.org
(Web site active as of May 5, 2005)