AUTISM SPECTRUM DISORDER
Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder that impacts the normal development of the brain in the areas of social interaction, communication skills, and cognitive function. **Individuals with autism typically have difficulties in verbal and non-verbal communication, social interactions, and leisure or play activities.**

Because autism is a spectrum disorder, it varies greatly from person to person, and can include mild Autism (Asperger's, PDD-NOS, high functioning autism), moderate autism and severe autism (low functioning).

**QUICK FACTS**
- Autism now affects 1 in 110 children and 1 in 70 boys
- 40% of children with autism cannot speak
- Autism prevalence figures are growing
- More children will be diagnosed with autism this year than with AIDS, diabetes & cancer combined
- Autism is the fastest-growing serious developmental disability in the U.S.
- Autism ranges from mild to severe, and no two individuals with autism are alike
- There is no medical detection or cure for autism

RESOURCES

**NATIONAL AUTISM ASSOCIATION**
Main Web: nationalautism.org
Safety Web: autismsafety.org
Wandering Prevention: awaare.org
Email: naa@nationalautism.org
Phone: 877.NAA.AUTISM

**SEARCH & RESCUE**
National Center for Missing and Exploited Children: missingkids.com | 1-800-THE-LOST

**TRACKING**
Project Lifesaver: projectlifesaver.org
LoJack SafetyNet: lojacksafetynet.com
EmFinders: emfinders.com

**REVERSE 911**
A Child is Missing (Free Service)
achildismissing.org | 954.763.1288

**DISABILITY DATABASE SOFTWARE**
Take Me Home (Free Service)
Officer Jimmy Donohoe, 850.436.5416
Jdonohoe@ci.pensacola.fl.us.

**ENDANGERED MISSING ADVISORY**
EMA GUIDELINES (Free Service)
Download at ncjrs.gov

**AUTISM TRAINING**
Autism Risk Management: autismriskmanagement.com
The Autism & Law Enforcement Education Coalition: sncarc.org/alec.htm
The Law Enforcement Awareness Network
leanonus.org
Autism Alliance for Local Emergency Responder Training: AutismAlert.org

about autism
NATIONAL AUTISM ASSOCIATION SAFETY INITIATIVE
first responder information
AUTISM & MORTALITY
In 2008, Danish researchers found that the mortality risk among the autism population is twice as high as the general population. In 2001, a California research team found elevated deaths in autism and attributed it to several causes, including seizures and accidents such as suffocation and drowning.

AUTISM & WANDERING
Similar to wandering behaviors in the Alzheimer’s community, wandering and elopement behaviors in children and adults with autism have led to countless tragedies across the country.

WANDERING DEFINED: When a person, who requires some level of supervision to be safe, leaves a supervised, safe space and/or the care of a responsible person and is exposed to potential dangers such as traffic, open water falling from a high place, outdoor elements, or unintended encounters with potentially predatory strangers. May also be referred to as Elopement; Bolting; Fleeing; Running. Sometimes you’ll hear, “My son is a runner.”

AUTISM WANDERING STATISTICS
☑ Roughly half, or 49%, of children with autism attempt to elope from a safe environment, a rate nearly four times higher than their unaffected siblings. This indicates it is not an issue of poor parenting.
☑ In 2009, 2010, and 2011, accidental drowning accounted for 91% total U.S. deaths reported in children with autism ages 14 and younger subsequent to wandering. 23% were in the care of someone other than a parent.
☑ More than one third of children with autism who wander are never or rarely able to communicate their name, address, or phone number.
☑ Two in three parents of elopers reported their missing children had a “close call” with a traffic injury.
☑ 32% of parents reported a “close call” with a possible drowning.
☑ Half of families with elopers report they had never received advice or guidance about elopement from a professional.

AUTISM BEHAVIORS
A Child/adult With Autism May...
- Have No Eye Contact.
- Have Verbal and Auditory Limitations.
- Not Respond To Their Name, or Your Questions.
- Seem Deaf or Defiant.
- Be Unable To Understand Social Cues.
- Have Extreme Sensitivity To Light, Sound and/or Touch.
- Wear Clothing Inside-out To Avoid Tags or Seams Against Skin.
- Demonstrate Low To No Sensitivity To Pain, or Oversensitivity To Pain.
- Have No Fear of Real Danger.
- Have Odd Fears.
- Take Figurative Language Literally.
- “Stim” Or Self-stimulate (Rock Back & Forth, Flap Hands, Flick Fingers, Hyper Laugh, Hum, Etc).
- Be Attracted To Water, Traffic, or Have Extreme Obsessions With Certain Ideas, Objects, Places, or People.
- Run or Bolt From Stressful Situations.
- Enter Another Person’s Home Without Understanding Consequences.
- Be Impulsive or Aggressive When Scared.
- Communicate Through a Picture System.
- Need a Written or Picture Schedule.
- Act Intoxicated, High, or Suspicious.
- Have the Cognitive Ability of Child.
- Not Be Potty-trained.
- Routinely Smear Fecal Matter.
- Head-bang, Self-bite, Self-hit.
- Not Have Toys In His/her Room, or in the House (May Be More Interested in Lining Up or Spinning Random Objects.)
- Have Extremely Narrow Food Preferences, or Ingest Non-food Substances (Pica.)
- Be Inflexible To Change.
- Have Echolalia: Repeat Something Over & Over.
- Walk on Toes.

PARENT BEHAVIORS
The Parent of a Child/adult With Autism May...
- Have Unusual Security Patterns In the Home: Locks on Both Sides of Door, Nailed-down Windows, Chain Locks, Makeshift Locks, Barricades (Fire Safety May Be Secondary To Parents of Elopers.)
- Not Have Toys In the Home.
- Have Walls With Holes, Dents, Fecal Matter.
- Have Unusual Foods In the Fridge.
- Have Home Windows Blacked Out, or Car Windows Covered.
- Have Unusual Sleeping Arrangements (Mom/Dad May Sleep In the Hallway or Next To Child’s Bed.)
- Have Weighted Blankets, Vests and Other Weighted Materials.
- Allow Child/adult To Wear Odd Clothing Depending On Tactile Sensitivity.

TIPS ON INTERACTION
- Check Child For ID – It May Be On the Shoe or In a Pocket.
- Reduce Stimuli (Bright Lights, Loud Noises, Commotion)
- Avoid Giving Complex Directions, Use Simple Phrases
- Avoid Figurative Language, Idioms.
- Don’t Assume the Child Understands.
- Provide Communication Aids If Possible.
- Use Techniques to Ease Anxiety, Such As First/then & Fill-in-the-blank. For Example...
  First, We Are Going To Get Into The White Car, Then You Can Have A Cookie.
  Instead Of: What Is Your Phone Number? Try: Say “My Phone Number Is ______.”
  Follow Up All Actions With Praise: “Great Job!”

For more information, visit National Autism Association’s Safety Site at autismsafety.org