Helping People and Families Affected by Autism

Inside this issue

Keeping children safe	3
Auctions get boost 3	
Parent2Parent 4	
Therapeutic riding and hippotherapy5	
Inside Autism Delaware [™] 6	j -7
Programs & events 8	-9
Animal-assisted therapy 1	1
<i>DSM-5</i> update 1	1

Our mission

Autism Delaware™ works to create better lives for people with autism and their families in Delaware.



Where do I start?

The Sur

It's 2:30 in the morning, I'm bleary-eyed and headachy in front of the computer, anxiously looking for solutions to the problems faced by my loved one with autism spectrum disorder (ASD)—and overwhelmed by the amount of information out there! Where do I start?

The National Autism Center in Randolph, Mass., published its *National Standards Report* in 2009 to address the growing number of unproven treatment methods at the time and create "universally accepted standards that promote evidencebased treatment approaches for autism" (http://www.nationalautismcenter.org/about/ national.php). In other words, information about which autism treatments have been shown to work.

The National Standards Report categorized the broad range of autism interventions and therapies into three basic categories:

- established treatments
- emerging treatments
- unestablished treatments

"I think it's important to note here," says Heidi Mizell, Autism Delaware's resource coordinator and a parent mentor, "that this report came out four years ago and a lot more has been published since then. We're offering the NAC's standard and language as a basis for families to start their research. As the parent or guardian of a child with an ASD, you must research each available treatment as completely as possible and consider its appropriateness because each child responds to treatments differently.

"I also recommend," adds Mizell, "that you consider the preferences of the child,

the capabilities of the staff delivering the treatment, and what your family can manage."

Established treatments

Newslette

October-December 2013

The National Standards Report defines "established treatments" as those with scientific evidence showing they are effective for people with ASDs. Despite the benefits produced in the well-controlled studies, though, not everyone on the spectrum can expect the same results (National Standards Report: p.43).

"Some examples of established treatments," notes Mizell, "are parent-child interaction training, joint attention intervention, and applied behavior analysis." Called ABA for short, applied behavior analysis includes such treatments as

- discrete trial training (DTT),
- early intensive behavioral intervention (EIBI),
- pivotal response training (PRT), and
- verbal behavior intervention (VBI).

Emerging treatments

As defined by the National Standards Report, "emerging treatments" are those that produce favorable outcomes in one or more studies. Considering this minimal evidence, the report's authors admit the possibility that emerging treatments may not be effective and propose more high-quality studies to consistently show **Continued at the top of page 10**

he Sun Newsletter

The Sun

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Autism Delaware[™] is interested in a variety of viewpoints about autism and emerging research, but reference to any treatment, therapy option, program, service, or treatment provider is not an endorsement. We publish information only for informational purposes and assume no responsibility for the use of any information. You should investigate alternatives that may be more appropriate for your specific needs.

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Options and opportunities

Part of my role at Autism Delaware[™] is to give presentations about autism spectrum disorders and Autism Delaware to community groups, like Rotary clubs, Lions clubs, and so on. One of the truths I routinely share with them is that the world of autism is one with many more questions than answers.

This is a reality that each of you live every day. Despite the hard work of researchers and practitioners across the country and around the world, we still don't have solid answers to critical questions like "What causes autism?" and "Why are there so many more people with autism today?"

As for the question about whether any one therapy "works," the answer depends on the needs of the particular individual, how he or she is affected by autism, and the goals of the therapy. Whether it's a special diet, a newly emerging therapy, an animal-assisted

Do you want to attend an autism-related workshop or conference?

Get a stipend to help cover the cost. For details, visit autismdelaware.org >Groups & Events >Support & Education >Scholarships, Grants, and therapy, or an applied behavior analysis (ABA) model, how the therapy is implemented and its ultimate success often vary widely from one person to the next.

From the earliest days of Autism Delaware, we have maintained an options policy, which means we provide information on all corts of the

tion on all sorts of therapies, services, and supports related to autism, but it is up to the affected individual and his or her parents and caregivers to decide what works best.

It's true that sorting through all the information is a daunting task. But it's also true that options can provide op-

portunities. Armed with information and guided by knowledgeable professionals in their respective fields, families have the opportunity to make informed, important decisions with loved ones with autism spectrum disorders or on their behalf.

Knowing the options—having all the information possible—empowers families and individuals, turning them into their own advocates. And powerful advocates can move mountains, not just for themselves and their loved ones but for the whole autism community as well.

usa

A service of Autism Delaware



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Teresa Avery Executive Director



e Sun Newsletter

Keeping children safe in school

Under a state law passed in June, Delaware schools will need to comply with new rules concerning the seclusion and restraint of students. SB100 applies to all Delaware public school students and the students placed in private residential schools and treatment centers.



Del. Gov. Jack Markell signed SB100 into law in June.

Across the country, students with

disabilities have been far more likely to be restrained or put in seclusion and to have been injured or killed in the process. Advocacy for this new law was led by the Governor's Advisory Council for Exceptional Citizens and the Developmental Disabilities Council with support from Autism Delaware and other disability organizations.

The following are the key standards imposed by the law:

- Chemical restraint (drugging) is banned.
- No use of devices that restrict a student's ability to move his or her body to control the student's behavior. Mechanical restraint is permitted only with a waiver for the student from the Delaware Secretary of Education.
- Seclusion is permitted only with a waiver for the student from the Secretary of Education. An exception allows time-outs for children to regain self-control or reflect on their actions. The exit for the time-out space cannot be locked, held shut from outside, or blocked by inanimate objects. Plus, a staff member must be available at all times for the student in time-out.
- Use of physical restraint must meet the 10 standards listed in the law, including when a student presents a significant imminent danger to him- or herself or others. For students with disabilities, the physical restraint may not violate their individualized education programs (IEPs), behavioral or accommodation plans, or other planning documents.
- Parents must be notified in a timely manner about any use of seclusion or restraint.
- The Department of Education (DOE) must issue an annual report on the use of seclusion and restraint that is divided by school and demographic categories, including disability. This report will be public information. The DOE must also develop specific regulations for implementing the law.

"The law goes into effect on July 1 next year," says Kim Siegel, Autism Delaware's policy director. "We will keep you advised of public opportunities to comment on the proposed regulations and stay in contact with DOE regarding the regulations throughout the coming year." To read the complete law, visit autismdelaware.org>Advocacy>Issues & Positions>Seclusion and Restraint.

"A federal bill concerning seclusion and restraint, called the Keeping All Students Safe Act, is also being discussed," adds Siegel, "but at the moment, its future is uncertain, which makes Delaware's law all the more important for the safety of our kids."

Auctions get boost from BidPal

Starting with this year's Blue Jean Ball and Auction for Autism, Autism Delaware[™] is using BidPal to manage the registration, donation, sponsorship, bidding, and payment processes. A leader in auction automation, BidPal can be accessed through a personal smartphone or one of the four iPad kiosks that will be available on site.

"Much of the manual work that was needed at auction in the past will now be managed by BidPal," says Autism Delaware's events manager, Deanna Principe. "For us, this means a more efficient event; for our guests, this means no more checkout lines. And no more paper bid sheets, which means you won't need to go back and forth to the auction table to see where a bid stands—BidPal will text you your status.

"And for those of you who can't wait to bid on one of our one-ofa-kind items, you can begin as soon as you're registered on BidPal."

Preview the auction items now!

bidpal.net/bluejeanball

bidpal.net/auctionforautism

Did you know?

A tax-deductible donation can be made to Autism Delaware through the United Way of Delaware. Simply enter the code on the United Way form!

For the	
United Way in	the code is
Delaware	9234
SE Pennsylvania	12598
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Outism

PARENT PARENT Written by parents for parents

<mark>Newsletter</mark>

Know your child



The activity looked totally unnatural. My little, 20-month-old son Casey was spinning on a platform swing while wearing headphones so big they had to be held in place with a sweatband. He looked like an exercise bobble head doll.

He was engaged in Tomatis Listening Therapy at Totaly Sense-Sational, a treatment center in Plymouth Meeting. We drove there every day for weeks so

Casey Gilden

Casey could listen to modified Gregorian chanting for two hours while doing sensory integration therapy with an occupational therapist.

The process looked crazy, was inconvenient and expensive, but was worth it because Casey had auditory-processing issues that would not be helped by traditional therapies. After the Tomatis Listening Therapy, Casey understood about 65 percent of what was said to him. Compared to the 15 percent he was registering before the therapy, this was a huge improvement—and a life changer. I still remember the first time he came when I called him!

Months later, Casey received the traditional trifecta of therapies from the state (speech, physical, and occupational therapies), but they weren't enough. More of Casey's issues (such as chronic constipation, eye stimming, and an inability to control his body) needed to be addressed than traditional therapies could handle. So, we continued with alternative therapies.

Today, Casey is five, and over the past couple of years, we've done some elimination diets, supplements, and more alternative treatments, such as chiropractic care and hyperbaric oxygen therapy. Each intervention was done under the guidance of a doctor and was chosen to target a specific issue. And with each intervention, Casey has shown improvement.

To start your child on an alternative therapy takes an open but cautious mind. Don't begin a therapy—or opt out of one-based on one person's opinion, no matter what degree is hanging on the wall. Your responsibility as the parent is to research the therapy beforehand. This means reading the books, scouring the Internet, attending conferences and workshops, and talking to other parents and doctors. Of the many interventions out there, one of them may be what makes the difference for your child.

Many years ago, I made a philosophical decision regarding my role in my son's therapy and education: I would be Mom. I knew Jake's home life best, so being his mother is my area of expertise. My role would not be lesser than that of an occupational therapist or speech therapist, but it would be different.

Early on, I realized I could help Jake learn early-intervention skills at home, but I didn't know what should come next in Jake's progress. I relied on the experts and talked to other mothers. I noted



Jake Nardo

what Jake needed at home and brought this information to each therapy session. And I asked questions. In other words, I kept the lines of communication open.

The Sur

On the playground, in a restaurant, or at home, I incorporated into day-to-day living what I learned from trusted therapists. Jake and I would practice his signs, use his PECS (picture exchange communication system), and work on his abdominal muscles. I never set aside a particular time of day; I simply played with Jake and enjoyed our time together.

As he grew, we did recreational activities that would be considered therapy. Here, I include the playground because this is where Jake learned to climb the stairs and navigate the jungle gym. One of my favorite activities was the Personal Ponies program where Jake learned not only how to brush, feed, and wash a pony but also how to muck a corral. And Jake enjoyed walking a pony by the lead and pony-pulled wagon rides. My favorite memory is of Jake sitting on the ground, watching a pony eat a carrot he'd given her. It was a magic moment because all the work had come together, and Jake was calm, thoughtful, and happy. Every time we got in the car to leave, Jake talked more than ever. I couldn't always make sense of his words, but he had a lot to say. He still has a strong connection to animals, and I credit this program.

I also include family pools as part of our recreational therapy because Jake likes to swim. The fun experienced in the pool is as important as the exercise and skills learned.

Jake works incredibly hard at school and has a lot of attention paid to lessons in focusing, attending to the work, controlling behavior, and living with changes. So, I want his home life to be fun and light. Only I know that we are also reinforcing turn-taking while Jake is playing the Wii, working on fine motor skills while Jake is coloring, honing reading skills while looking at menus and signs, and addressing self-help skills in all areas of the home. In other words, my job is to round out Jake's school skills by building home skills.

-Cory Gilden

Therapeutic riding and hippotherapy: What is the difference?

The Sun co-contributor Lauren Janusz, MOT, OTR/L, HPCS, is an occupational therapist (OT) who is board certified in hippotherapy as well as the program organizer for Hearts, Hands, and Horses 4-H Club, the therapeutic riding program at Wellspring Farm in Bellevue State Park.

And co-contributor Brooke Zuvich, OTAS, was an occupational therapy assistant-student in both the adaptive riding and occupational therapy programs at the time this article was written. Many people ask us "What is the difference between therapeutic riding and hippotherapy?" Therapeutic riding, also known as adaptive riding, is horseback riding for people with special needs. The term "therapeutic riding" is confusing because many people assume a therapist is involved, but this is usually not the case. Adaptive riding lessons are taught by a specially trained riding instructor with (or without) the help of a horse leader and someone walking beside the rider.

Adaptive riding lessons are designed to meet the specific needs of each rider and teach him or her how to ride a horse as independently as possible. Generally, adaptive riding is appropriate and safe to begin as early as age four. The many benefits of adaptive riding include learning new skills, developing the human-animal bond, socializing with people of different ages, and being outside. The horses used in adaptive riding must be gentle, welltrained, athletic, and tolerant of games. Adaptive riding provides the rider not only with a great recreational activity but also with the opportunity to compete in horse shows. Riding is a life-long sport that can be enjoyed by people at every age.

Different from therapeutic riding, hippotherapy is a treatment strategy in which the movement of a horse is used by an OT, a physical therapist, or a speech language pathologist. The team in a therapy session includes the therapist, one or two side walkers, a horse leader, and the specially selected horse. The horse's movement is multidimensional and provides increased sensory input that makes trunk control, balance, endurance, and motor planning easier for the rider. This movement cannot be replicated in a traditional therapy clinic. Because a barn is unlike the setting of most clinics, it can be beneficial for everyone. Many riders do not even realize they are getting therapy.

Newsletter

The Sun

Hippotherapy is an effective treatment strategy for people with neurological and movement disorders, and children as young as two may be treated safely. The goals are functional and based on the need to develop independent life skills. As part of an integrated treatment plan, hippotherapy may be included with other strategies, such as neuro-developmental treatment (NDT), proprioceptive neuromuscular facilitation (PNF), sensory integration (SI), and play skills development. Once the treatment plan's goals are achieved, a rider may be discharged and transitioned into an adaptive riding program.

The horse is a huge motivator. Horses have been used through the ages for the benefit of humankind, and we think they are a great asset to our programs.

For more information about either therapeutic riding or hippotherapy, call (302) 740-4798.

Well worth the effort

by Cory Gilden

While traveling and time away from home may be hard to manage, attending a conference like the AutismOne/Generation Rescue Conference 2013 is well worth the effort because it is so full of information. For parents who are new to the autism world, conferences like this open your eyes to all the possibilities out there and help you establish a plan of action for the future; and for parents who have been dealing with autism for a while, conferences like this renew your energy and give much needed hope to continue on the autism journey.

This year's AutismOne/Generation Rescue conference was held May 22–26 in Rosemont, Illinois. One of the biggest and most well-known in the nation, the conference focused on the latest information on autism therapies, biomedical interventions, and cutting-edge autism research. It featured more than 100 speakers, four hallways of exhibitors, and numerous book-signing events. The conference wasn't all business though, holding many special events, including a ladies'

See Cory Gilden's entire review of her experience at AutismOne/Generation Rescue Conference 2013 at autismdelaware.org >Autism Resources >Learning Links >Local Autism Articles.

salon night, dads-night-out bowling, White Sox game, parents' mixer, and a casino night with drinks and dancing.







Scholars join volunteers during night of appreciation

Some of Autism Delaware's most valuable assets-volunteers and future professionals in the autism community-gathered at the Dover Downs Hotel on June 14 to be acknowledged for their contributions and efforts.

Of the volunteers, nine organizations and individuals were highlighted for donating their time, resources, and expertise to help meet Autism Delaware's mission in 2012.

Awarded the prestigious Autism Delaware Noel Perry Award for Outstanding Employer in 2012, Dover Downs Hotel & Casino and Dover Motorsports were lauded for employing people with autism spectrum disorders (ASDs) and serving as a positive role model for the employment community. Accept-



ing the award from Autism Delaware's executive director, Teresa Avery (pictured center at left), were Jason Anderson, director of ticket sales and operations at Dover Motorsports, Inc., and Doree Kuhn, senior director of hotel operations at Dover Downs Casino & Hotel

A Delaware eatery and state senator were both named an Autism Delaware Outstanding Leader in the Community. Grotto Pizza was honored for offering internships and paying jobs to adults with ASDs as well as for donating food to the Walk for Autism and annual holiday party. Grotto Pizza is also a sponsor of the Drive for Autism.



Also named was Delaware State Senator Liane Sorenson (pictured here with Autism Delaware Policy Director Kim Siegel, far left). Sorenson was instrumental in securing the passage of Senate Bill 22, which required health insurers to cover autism treatment.

Awards for Outstanding Autism Delaware Volunteer were presented to six individuals and organizations for providing

much-needed help during social outings and fundraising events-and providing it often during the year. Pictured at right are (L–R) Lisa Held, Home Depot staff



Photos by Deanna Principe

members Toni Maestrale and Irene Rodriguez, Artisans' Bank employees Dee Sedlacek and Judy Mashishin, award presenter and Autism Delaware President Marcy Kempner, and Jim and Koh Morrisey. Barbara Butterworth was also honored.

lso announced at the volunteer appreciation night were the names of the 2013–14 Autism Delaware scholarship recipients. Two types of scholarships are available every year. The Autism Delaware Adult with Autism Scholarship supports adults with ASDs who want to attend college or some other post-secondary educational program. And the Autism Delaware Daniel and Lois Gray Memorial Scholarship was created specifically for eligible University of Delaware undergraduate and graduate students working toward a professional position in the autism community.

Teresa Avery, Autism Delaware's executive director, presented the Adult with Autism Scholarship awards with Autism

Delaware's president, Marcy Kempner. Pictured left to right are Avery, scholarship recipient James Thomas Jackewicz. Kempner, and scholarship recipient David Lee Cook, Jr. Nikita Mutter also received a scholarship.





Above, standing with Autism Delaware Board Secretary John Fisher Grav—who helped establish the Autism Delaware Daniel and Lois Gray Memorial Scholarship—are the 2013–14 recipients (left to right) Ashley E. Green, Nicole M. Jones, Thea E. Byrne, Elizabeth M. McCabe, and Veronica M. D'Amico.

Outism



2013–14 grants awarded

In June, Autism Delaware announced the names of five community programs receiving an Autism Delaware grant. "Autism Delaware supports programs with the potential to improve the lives of both children and adults across their life spans and across the state," explains Teresa Avery, MBA, Autism Delaware's executive director. "We look forward to hearing about each program's success as well as to watching the improvement to the lives of Delawareans with autism and their families."

Easter Seals of Delaware and Maryland's **Eastern Shore**

A nonprofit, community-based health organization, Easter Seals is dedicated to increasing the independence of children and adults with special needs through direct services and advocacy. Easter Seals will use the funding to provide respite care vouchers to families caring for people with autism spectrum

disorders (ASDs). A family can use the voucher to pay the service provider of choice, when and where the family chooses.

Practice Without Pressure

A Delaware-based nonprofit that helps people with disabilities receive oral health care with dignity and respect, PWP was awarded a grant to expand its Oral Health in the Home[™] training program to

Kent County. Designed to help caregivers and families improve oral health care for children and adults with ASDs and other disabilities, this course empowers the family while teaching new skills that make oral health care easier to support. The class will be held in partner-

ship with the John S. Charlton School in Camden, Delaware.

Ocean Front

Providing autism and behavioral support Counseling, LLC services, Berlin, Md.-based Ocean Front Counseling will create Get Fit with Ocean Front, an exercise program for people

with ASDs and their families in southern Delaware. Ocean Front Counseling will partner with a local fitness club where a trained exercise instructor will provide exercise and yoga classes. In addition to physical benefits, the program is designed to reduce maladaptive behaviors and anxiety in social settings and improve motor coordination in the participants.

Georgetown Elementary School

The Georgetown, Del., elementary school was awarded a grant to set up and organize a series of meetings with parents in conjunction with Project SPEAK, an ongoing pro-

gram designed to help children with ASDs acquire social skills through community outings. Guest speakers will provide information about the care of children with ASDs and highlight available resources.

Organization for Autism Research

A national charity, OAR uses applied science to answer the questions faced daily by individuals with ASDs, their parents, families, teachers, and caregivers and was awarded a grant to fund research studies and publish community-friendly resource guides.

"As OAR works toward realizing its mission—to use applied research to address the challenges of autism today," wrote OAR Executive Director Michael V. Maloney in the acceptance letter, "it continues to receive strong and encouraging feedback from the autism community about the strength and pertinence of this mission."

Drive for Autism "We're sold out!"

"I had to use three words that I'm pretty sure had never been uttered in 12 seasons: 'We're sold out!"" exclaimed Autism Delaware Drive for Autism Tournament Director Deanna Principe. "With two new teams added to the roster at the last minute plus 10 new sponsors, we were busting at the seams with players."

Autism Delaware greeted an unprecedented 270 celebrities and sponsors to the 12th Annual Drive for Autism Celebrity-Am Golf Outing at the DuPont Country Club. The May 30th event drew stars from NASCAR, the National Football League, National Hockey League, Major League Baseball, and the University of Delaware as well as broadcasters from FOX, CBS, ESPN, Speed, and the NFL Network.

New this year, the Drive for Autism Celebri-Tweet Challenge connected fans to their favorite celeb-



Deanna Principe, Hermie Sadler, Artie Kempner, and the Drive for Autism Celebri-Tweet Challenge championship belt

rities through a donation to Autism Delaware. Hermie Sadler, the former Sprint Cup driver and current Speed Channel analyst, won the first annual challenge and took home the championship belt. A father of three, Sadler has one daughter on the spectrum, so the event is special for him.

"In total," noted Drive for Autism Chair Artie Kempner, "the tournament raised \$506,000 to support programs, services, and initiatives to benefit the autism community in Delaware. In addition, our Autism Delaware staff kept our expenses down so low that we generated 85 cents on every dollar raised! This is an exemplary percentage, and we're very proud of this accomplishment."

"On behalf of Autism Delaware and Artie Kempner," added Deanna, "I want to thank everyone who participated in this year's golf tournament. No matter how great or small, your support, advice, work, and insight have been and continue to be invaluable to us as an organization."



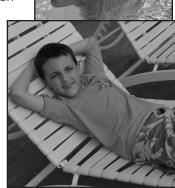
Swim, camp, and golf!

This year's summer activities for children began in June with the Autism Delaware[™] Swim Program. Meeting weekly through August 13, the program took place at the Rookery North in Milford. Designed specifically for children aged 4–21 with autism spectrum disorders (ASDs) who are toilettrained, the swim program supports water and

pool acclimation and the development of appropriate pool conduct. Fourteen swimmers benefited from muscular development and opportunities for social interaction and communication in a safe and supportive environment.

Autism Delaware Summer Dav Camp ran August 19–23. Designed for children with ASDs who are enrolled in grades 3-11 for the 2013-14 school year, day camp is open to 30 children at the Children's Beach House in Lewes. In addition to participating in exercises to build communication, social skills, and self-esteem, the children enjoy kayaking, sailing, swimming, a low ropes course, and arts and crafts.





Beginning the last week of August, the Autism Delaware Junior Golf Program is running through the first week of October this year. Designed for youth aged 8–21, the golf program includes instruction in putting, chipping, driving, and full swing and includes lessons in golf etiquette. Led by golf pro and coach Butch Holtzclaw, each 30-minute session at The Rookery Golf Course in Milton is individualized according to the child's level of ability and interest.

CALENDAR O EVENTS

October

- 2, 9, 16, 23, 30—Bowling night. Bowlerama. 3031 New Castle Av. New Castle.
 5:30 PM. *Register:* Karen Tuohy at karen.tuohy@redclay.k12.de.us. Or call (302) 633-3316.
- **3, 7, 10**—Junior golf. The Rookery. Route 1. Milton. TBD. *Register:* Dafne Carnright at (302) 644-3410.
- 5—Roller skating. Milford Skating Center Roller Skating Rink. 1 Park Av. Milford. 5:00–7:00 PM.

Horseback riding. Providence Acres Farm. Lincoln. 10:00 AM. *Register:* Liz Carlisle at (302) 644-3410.

- 8—Parent coffee hour. Panera Bread. 3650 Kirkwood Hwy. Wilmington. 9:00 AM.
- **11**—Teen/Tween game night. Autism Delaware Newark office. 6:30 PM. *Register:* delautism@delautism.org.
- 16—Parent coffee hour. Surf Bagel. 17382 Coastal Hwy. Lewes. 9:00 AM.
- 18—Haunted (but not scary) train ride on the Wilmington & Western Railroad. 2201 Newport Gap Pike. Wilmington. 6:00 PM sharp. *Register:* (302) 224-6020.
- **19**—Southern Delaware Fall Festival. Killens State Park. Pavilion 1. Felton. 1:00 PM. *Register:* (302) 644-3410.



25—Teen/Tween game night. Autism Delaware Milton office. 6:00 PM. *Register:* Dafne Carnright at (302) 644-3410.

November

- 2—Sensory friendly movie: *Mr. Peabody and Sherman.* Minimum seating: 25. Carmike Cinemas in the Dover Mall. 1365 N. Dupont Hwy. Dover. 10:00 AM. *Register:* Liz Carlisle at (302) 644-3410.
- 6, 13, 20—Bowling night. Bowlerama. 3031 New Castle Av. New Castle. 5:30 PM. *Register:* Karen Tuohy at karen.tuohy@redclay.k12.de.us; (302) 633-3316.
- 8—Teen/Tween game night. Autism Delaware Newark office. 6:30 PM. *Register:* delautism@delautism.org.
- 9—Horseback riding. Providence Acres Farm. Lincoln. 10:00 AM. Register: Liz Carlisle at (302) 644-3410.
- 12—Parent coffee hour. Panera Bread. 3650 Kirkwood Hwy. Wilmington. 7:00 рм.
- 16—15th Annual Auction for Autism. World Café Live at The Queen. 500 North Market St. Wilmington. 6:00 PM. *Tickets available online:* bidpal.net/ auctionforautism.
- **19**—Parent coffee hour. Espresso-N-Ice. Gateway West Shopping Center. 1030 Forrest Av. Dover. 9:00 AM.
- 22—Teen/Tween game night. Autism Delaware Milton office. 6:00 PM. Register: Dafne Carnright at (302) 644-3410.
- 23—Roller skating. Milford Skating Center Roller Skating Rink. 1 Park Av. Milford. 5:00–7:00 PM.

December

- 4, 11, 18—Bowling night. Bowlerama. 3031 New Castle Av. New Castle. 5:30 PM. Register: Karen Tuohy at karen.tuohy@redclay.k12.de.us; (302) 633-3316.
- 6—Parent coffee hour. Georgia House Restaurant. 18 S. Walnut St. Milford. 9:00 Aм.
- 7—Southern Delaware holiday party. Old Paths Church of Christ. 18246 Reddin Rd. Georgetown. 10:00 AM-1:00 PM. Register: (302) 644-3410.
- **10**—Parent coffee hour. Panera Bread. 3650 Kirkwood Hwy. Wilmington. 9:00 AM.
- 13—Teen/Tween game night. Autism Delaware Newark office. 6:30 рм. Register: delautism@delautism.org.
 - Teen/Tween game night. Autism Delaware Milton office. 6:00 рм. Register: Dafne Carnright at (302) 644-3410.
- 21—Northern Delaware holiday party. Aetna Fire Hall. 400 Ogletown Rd. Newark. 12:00–3:00 PM. *Register:* (302) 224-6020.



Autism

The Sun Newsletter

Parent Coffee Hour

Panera Bread

3650 Kirkwood Hwy. Wilmington

October 8 @ 9:00 AM

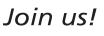
November 12 @ 7:00 рм

December 10 @ 9:00 AM

Espresso-N-Ice Gateway West Shopping Center 1030 Forrest Av., Dover November 19 @ 9:00 AM

Georgia House Restaurant 18 S. Walnut St., Milford December 6 @ 9:00 AM

Surf Bagel 17382 Coastal Hwy. Lewes October 16 @ 9:00 AM





Auction for **Autism**

Saturday, **November 16** 6:00 PM

New location!



Tickets: bidpal.net/ auction forautism

Last chance!

Get your tickets now before the price goes up! \$85 until Sept. 13

\$100 Sept. 14 til sold out

Buy online at bidpal.net/bluejeanball

Blue Jean Ball



Sept. 21 @ 6:00 PM **Rehoboth Beach Convention Center**

Save the date May 29, 2014 13th Annual

Drive for Autism Celebrity-Am Golf Outing



Save the dates!

Saturday, **April 5**

Walk for Autism **Cape Henlopen**

State Park Lewes

Saturday, April 12

Walk for Autism **Fox Point Park** Wilmington

Teen/Tween game night

For 9–19 year olds with Asperger's syndrome

Place: Autism Delaware[™] Newark office Dates: October 11 November 8 December 13

6:30-8:30 PM Time:

Cost:

\$30 per season (includes three sessions) Must be paid at registration

To register: (302) 224-6020 delautism

@delautism.org

Autumn 2013 season

For 9–14 year olds with Asperger's syndrome		
Place:	Autism Delaware™ Milton office	
Dates:	October 25 November 22 December 13	
Time:	6:00-7:45 PM	

Cost: \$10 per session

Must be paid at registration

To register:

(302) 644-3410 dafne.carnright @delautism.org

Where do I start? Continued from page 1

effectiveness for individuals with ASDs. And because a large number of studies are considered "emerging," the areas needing further research are extensive (*National Standards Report*, p.57).

"Some examples of emerging treatments," continues Mizell, "are augmentative and alternative communication devices, cognitive behavioral intervention, PECS [picture exchange communication system], and developmental relationshipbased treatment, which we also know as FloortimeTM." (For more information on Floortime, see the article below.)

Unestablished treatments

Defined by the National Standards Report, "unestablished treatments" are those with little or no evidence in the scientific literature. As a result, no firm conclusions could be made about either their effectiveness or the possibility that they are ineffective or harmful to people with ASDs (National Standards Report: p.70).

"Examples of unestablished treatments," notes Mizell, "include gluten-free/casein-free [GFCF] diets, sensory integrative packages, facilitated communication, and academic intervention." Defined as the use of traditional teaching methods to improve academic performance, academic intervention includes picture-totext matching, answering prereading questions, and handwriting training.

The Sun

For a copy of the report

Download a digital copy of the NAC's National Standards Report at http://www.nationalautism center.org/pdf/NAC Standards Report.pdf.



'Need a more user-friendly version of the National Standards Report?

Download the parent manual at http://www. national autismcenter. org/learning/ parent_ manual.php.

Floortime[™], all the time

"Floortime: What a great idea!" "We can do that!" "On the floor, playing with our son? Not a problem!" These were the initial thoughts my husband and I shared as we began learning about The Greenspan Floortime Approach. Little did we know that these initial thoughts would be changed, challenged, and grow as we tackled our son's verbal apraxia.

The more we read about Floortime, the more we learned we needed to learn. The cutesy-sounding name was far from simple. "Floortime... is a specific technique to both follow the child's natural emotional interests (lead) and at the same time challenge the child towards greater and greater mastery of the social, emotional, and intellectual capacities" (http:// www.icdl.com/dirFloortime/ overview). The DIR® model—which stands for developmental, individual difference, relationship-based—is implemented by world-renowned child psychiatrist and human development theorist Stanley I. Greenspan, MD. His book *The Child with Special Needs: Encouraging Intellectual and Emotional Growth*, written with Serena Wieder, PhD, needed to be my family's first source of information.

According to Greenspan, all people either grow through or become stuck at certain developmental stages. His theory is built on nine levels of social-emotional development, and if an individual is stuck, Greenspan believes the resulting behaviors can be worked on. Tools and treatments can help re-foster growth. Also, DIR theory can be applied not only to those with special needs but to all people.

I began bringing this book to every appointment and meeting concerning my son's care, suggesting that people should read this powerful information. A good friend at the time encouraged me to find the author and get guidance right from the source. "I can do that?" I asked amazed. "Meet the people who write these books?"

At this point, my family began to take a different path. Feeling empowered, that we could be significant change agents for our child, drove me to make the first of many appointments with Greenspan's son Jake, who is the owner and co-director of The Floortime Center[®] in Bethesda, Md., and then with Greenspan himself, who worked out of his home near Washington, D.C.

During one of the first interviews with Greenspan's nurse, I dis-

covered to my joy that she was "floortiming" me! After all, the DIR theory can be applied to everyone, and the Floortime technique is about creating problem solvers and flexible thinkers in both children and adults. Using the tools of empathy, an engaging affect, and gentle questioning, the nurse was pulling my family's story out of me. "Our motto," she said, "is Floortime, all the time."

As my family applied The Greenspan Floortime tools we had learned, we became the pied pipers of the playground. Creating circles of communication, using high affect and intentional gestures, narrating, and engaging in playful obstruction made all the difference in our life. "Your son," announced Greenspan at our last appointment, "is cookin' right along."

The Sun contributor Kristina Stroh is co-founder and executive director of All The Difference, Inc.™, a nonprofit therapy clinic in Wilmington that uses The Greenspan Floortime™ Approach as the umbrella theory. For more information, visit allthe difference.org.

Animal-assisted therapy for children with ASDs

The Sun co-contributor Susan Pfadt, MSEd, MA, is a BCBA candidate interning with Autism Delaware's clinical director, Susan Peterson. And cocontributor Janet Luke is director of development with PAWS for People™. What is the best way to help a child with an autism spectrum disorder (ASD) want to learn new things, try new skills, or over-come fears?

Help the child earn a sense of accomplishment and confidence by giving the child a task that is interesting and fun, and then reward the child when the task is completed.

This is the concept behind animal-assisted therapy.

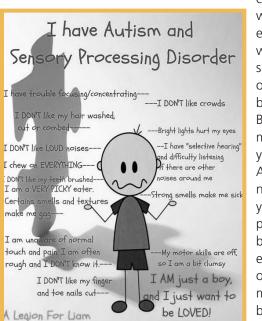
Relying on gentle, trained therapy

dogs and their compassionate owners, animal-assisted therapy helps a child reach individual goals. The interaction with the dog is not the treatment but the vehicle through which teaching occurs. Able to reach a child with an ASD in a way that people simply cannot, a dog can be a motivational vehicle through which evidence-based practices are used,

Online goodies

Sensory World is an Arlington, Texas-based website that offers information on upcoming conferences and sensory resources by best-selling special needs authors, such as Carol Kranowitz, MA, as well as special packages, educational material, children's books, music CDs, and the CAT-kit, cognitive affective training by Tony Attwood, PhD; Kirsten Callesen, PhD; and Annette Møller Nielsen, PhD. For more, visit sensoryworld.com.

A Legion for Liam offers three online opportunities for so-



cial networking with other parents of children with autism spectrum disorders. Created by Courtney Barnum, the mother of a youngster with Asperger's named Liam, you can participate on Facebook, Pinterest, or on the original blog at myausomeson. blogspot.com.

such as modeling, shaping, prompting, and differential reinforcement. For children who have difficulty relating to people, interaction with an animal is the perfect half-step to learning to connect with people. And the



Newsletter

teachers and parents who have incorporated animal-assisted therapy into a child's lesson plan can attest that it works.

The Sun

Where can you find these special dogs and their owners?

PAWS for People employs more than 350 certified animalassisted therapy teams that go into classrooms and homes to help children reach their individual goals. The PAWS for People Autism Initiative is a program specifically designed to help children with ASDs. As one of Autism Delaware's past grant recipients, PAWS for People carefully screens, trains, and certifies all animal-assisted therapy teams working with children with ASDs.

For more information, visit PAWSforpeople.org.

No reason to re-diagnose

Considered the psychiatrist's bible of diagnostic criteria, the *Diagnostic and Statistical Manual of Mental Disorders* (*DSM*) was revised by the American Psychiatric Association and released in a fifth edition in May. Known as **DSM-5** for short, this edition is controversial because diagnoses, such as Asperger's syndrome and pervasive developmental disorder–not otherwise specified (PDD– NOS), were dropped in favor of an all-inclusive diagnosis, autism spectrum disorder (ASD). Revisions were also made to the criteria for mental health disorders as noted in the April–June 2013 issue of **The Sun**.

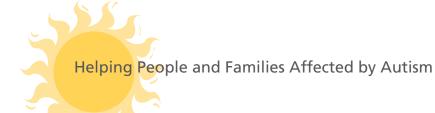
That a child's diagnosis is not called Asperger's or PDD-NOS anymore may be confusing to some parents, but it's only a label and no reason to have the child re-diagnosed, notes Geraldine Dawson, PhD, formerly the chief science officer at Autism Speaks and now a professor in the department of psychiatry and behavioral sciences at Duke University Medical Center. In a May 20 interview with *The Huffington Post*, Dawson said "That child will continue to qualify for an autism spectrum disorder."

Parents should also be aware of the new diagnostic category called social communication disorder, added Dawson. This category pertains to children who have difficulty communicating socially but do not display the repetitive behaviors associated with being on the spectrum.



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Saturday, November 16, at 6:00 PM

Reserve your tickets at

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Blue Jean Ball Get your tickets before the price goes up!

\$85 until Sept. 13 \$100 Sept. 14 until sold out

Don your blue jeans and bling, and get ready to party!

Saturday, September 21 6:00 PM

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