

Chairman Wieland and members of the committee,

I am Dr. Barb Stanton. On June 1st I started working at Prairie St. John's in the position of an autism specialist. My primary duties are to provide assessments, therapeutic services, and case management to children with an Autism Spectrum Disorder (ASD) and their families. I am also involved in program development activities. I am fortunate for work for an organization that promotes the use of evidence based assessments and best practice for interventions. I especially appreciate the opportunity to collaborate with other professionals, organizations and families in North Dakota who are involved with the support of issues regarding Autism Spectrum Disorders.

As you know, the Center for Disease Control reported in May of 2012 that 1 in 88 children meet the criteria for an autism spectrum disorder; 1 in 54 boys. Of those, 30 – 40% are considered to have high functioning autism.

I am speaking today in support of the recommendations presented by Kris Wallman, President of the North Dakota Chapter of the Autism Society of America.

The Centers for Disease Control and Prevention has excellent training materials that include a flow chart that can move individuals through the process of screening to a more comprehensive assessment if needed. Please keep in mind that screening is not sufficient to make a medical diagnosis. There can be several components to a comprehensive assessment including interviews, observations, the use of evidence based assessment tools, occupational and speech and language evaluations, medical and neuropsychological assessments. But, not all individuals need the same level of assessment so adopting a best practice protocol will be a useful way to insure proper diagnosing is done in the most efficient manner. Assessments must be done by individuals with proper training and experience in working with individuals on the autism spectrum.

An accurate diagnosis is critical for many reasons including tracking statistics, developing educational plans, and informing individuals and their families. Autism can be both over diagnosed and under diagnosed. I have seen both. Diagnosing Autism Spectrum Disorders provides a unique challenge due to the complexity of presenting symptoms and characteristics. And despite my

confidence in the future of these amazing children, I know that giving a diagnosis of autism is changing the life of that child and their family; forever.

An incorrect diagnosis has several ramifications, including the use of interventions that are not appropriate or can even be harmful. Children and their families cannot access proper supports. Misdiagnoses can lead to continued misunderstandings of behaviors that may result in hospitalization or even out of home placement. Interventions must be developed with the individual based on the correct diagnosis using best practice and clinical judgment.

The ability for individuals and families to access services close to their home in a timely manner using providers who follow best practice guidelines is critical to insure that individuals with an ASD are able to reach their highest potential for success. As you heard in the testimony in May, they want to be productive members of our communities and they work very hard to overcome many obstacles. We will all benefit when they are able to stay in their homes, attend school, and work in North Dakota.

These recommendations could not have been developed without the hard work of others. I am grateful for all the work of the Autism Spectrum Disorders Task Force. I want to express my appreciation to this committee for your continued effort to understand a very complex issue. By working together we can make a difference to better the lives of North Dakota citizens who are on the autism spectrum and their families.

Thank you for your time. If you have any questions I will be happy to answer them.