

RAISING AWARENESS FOR PEOPLE WITH AUTISM IN COUNTRY NSW
TURNING WHEELS FOR AUTISM

Guide book to Autism, support and making the most of abilities.



Justin Omrod 2007 Hartley Challenge (picture courtesy of Hartley Lifecare, ACT)

Navigation book for country NSW

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How to navigate the guide

Introduction

This guide was developed as part of “Turning the Wheels for Autism” a charity bike ride aiming to raise awareness of Autistic Spectrum Disorders and the need for more support services in country New South Wales (NSW). This bike ride was initiated and completed by Justin Omrod, who is from Orange (NSW).

Justin’s dream

“I am a country resident from Orange and I will be embarking on a two week bicycle ride over a massive distance promoting awareness of Autism and the lack of services in country New South Wales (NSW).

I have enjoyed cycling for a long time. When one of my co-workers suggested that I do a long distance bike ride for charity in 2004, I completely disregarded the idea as madness. I do enjoy my cycling, but that seemed impossible!

I have Asperger’s Syndrome (a form of Autism). Until recently, I had learnt to focus on my disability but I realised that I need to think about my abilities! I decided that I would challenge myself to ride long distance and share with people about my abilities along the way. I decided the emphasis of the bike ride would be raising awareness of Autism, the lack of services in rural NSW and how I have improved my life.” (Justin Omrod, 2008)

The cyclist’s guidebook

This guide book aims to help people who are affected by Autism to find information and direction to make the most of people’s abilities.

It is hoped that this guide will provide a starting point for people who may be looking for information. When putting this guide together it was pointed out that it wasn’t a challenge of what to include but what to leave out! There is an abundance of information available from many different places, this is just the first ride.

The guidebook is organised into sections that are most useful to a particular group of people, such as people who have Autism, family members, professionals and other community members. The information in the book is brought together from many internet sources.

Acknowledgements

This guide was developed by Laura Green in support of Justin’s big ride. Many hours, effort and prayers were offered to make Justin’s bike ride happen and a big thank you goes out to Helen Falla of Hartley Lifecare, Justin’s family, John Betts and the Autism and Asperger’s Support Group Central West, Turning the Wheels for Autism Inc and to the organisations who allowed the reproduction of information in this guide.

Starting point

What is Autistic Spectrum Disorder?

From www.learningplace.com.au

What does the term 'ASD' mean?

In Education Queensland, ASD (Autistic Spectrum Disorders) is a term that describes a number of clinically similar medical diagnoses. It incorporates the following diagnostic categories:

- Autistic disorder,
- Asperger's disorder,
- childhood disintegrative disorder,
- Rett's disorder,
- pervasive developmental disorder not otherwise specified.

Terminology in the area of ASD can be extremely confusing to parents and school staff members. An understanding of the purpose of the terms and diagnostic criterion is of value only to provide a guide to the common difficulties that may need to be accommodated and supported. ASD is used as a broad descriptive term only and does not define every characteristic of a person nor their learning needs.

What is ASD?

ASD is a complex developmental disability.

A diagnosis of ASD indicates severe difficulties in three areas:

- **communication**
- **social interaction**
- **flexible thinking and behaviour.**

In addition, some young people with ASD also have significant sensory processing difficulties. The unusual perception of sounds, sights, smell, touch and taste, can lead to distinctive behavioural responses.

A pattern of developmental differences in **all three areas** is necessary to confirm a medical diagnosis.

Why is each person with a diagnosis of ASD unique?

Every person is a unique individual. We all come from our own unique family, have distinctive personalities and a particular sense of humour. A diagnosis of ASD doesn't change the uniqueness of an individual. The term ASD describes a specific cluster of difficulties someone is experiencing; it does not define the whole person.

Young people with ASD will display varying abilities in communication, social understanding and flexibility of thought and behaviour. The level of difficulty they may experience in each area will be specific to each individual, however the pattern of problems is the feature common to persons diagnosed with ASD.

In language and communication, for example, some young people may be avid conversationalists in an area of interest to themselves. The same person, however, may experience great difficulty discussing what they did on the weekend. Other young people with ASD may use pictorial symbols or voice-output devices to communicate effectively with friends and family.

How is a diagnosis of ASD made?

In the Queensland state education system making a diagnosis of ASD is considered to be a highly specialised medical skill.

Diagnoses are only accepted from the following medical professionals:

- paediatricians,
- psychiatrists or
- neurologists.

A medical specialist or a family member may request information from school staff to assist with the diagnostic process.

School staff, including AVTs-ASD, guidance officers and special education teachers, are not qualified to make a diagnosis of ASD.

Cycling solo

People living with this disability

From www.auties.org



Individuality, Diversity, Equality, Achievement

Auties.org is for people on the Autistic Spectrum who are ready to dare reach out, open the doors to the community and market their abilities directly to the public and for those interested in supporting these pioneers.

So if you are on the autistic spectrum and stagnating whilst waiting for society to create something for you, why not go ahead and look at what you CAN do and CAN manage, what you ARE interested in and ARE doing now, and begin creating your own opportunities. Even more, if you haven't got a clue where to start, take a look at what others on the autistic spectrum are doing in their own self employment and employable hobbies/skills and see if it inspires you to dare such things or even something completely different with your own unique style, in your own unique way.

All you need is a website or an email and the desire to take that leap. They say the greatest risk in life is taking no risks at all.



People with Autism

From <http://www.autismvictoria.org.au/people>

One of the most significant developments in the field in the past twenty years has been the opportunity for people diagnosed with an Autism Spectrum Disorder to tell the rest of us what it means.

The world wide web has opened up amazing opportunities for people with an Autism Spectrum Disorder to connect with each other.



Autism spectrum disorder

Artwork by Julian Martin, thanks to Arts Project

The following people are just a few of many who have written and spoken widely of their personal experience with Autism Spectrum Disorder:

- Temple Grandin - www.templegrandin.com
- Donna Williams - www.donnawilliams.net
- Wendy Lawson - www.mugsy.org/wendy

However, the availability of competent and sensitive support services for adults with an Autism Spectrum Disorder is poor. In Victoria, access to government services is often restricted to those who also have an intellectual disability.

If you are an adult with an Autism Spectrum Disorder, or suspect that you may have Autism or Asperger Syndrome, you will want to know

- How to get a diagnosis
- Where to get professional services such as counselling
- What are the best web sites (see below)
- Where to learn more about Autism Spectrum Disorders

A group of Victorians have established a network for adults with an Autism Spectrum Disorder, and are progressively developing a range of activities. Called Auties.org, they have developed a website to promote your skills and services (www.auties.org) and Autism friendly dinner clubs and activity groups with different organisers to contact for each. Please feel free to check with the organisers of each group to see if their activities suit you.

The Dinner Clubs meet once a month at quiet, low key and affordable restaurants. As membership grows, it is hoped that the dinner clubs will expand to take in a wider range of Melbourne locations. There is an events calendar on the website where you can find details of the different events and also a mailing list you can get on to be kept informed of where the dinners are going to be located.

Auties.org is also a web based information exchange on which you post details of your skills and services. Individuals and Companies looking for specific skills should check this site as there are many very talented people with an Autism Spectrum Disorder who would love to be able to help you.



Useful websites

Artwork by Julian Martin, thanks to Arts Project

Here are some useful web sites for adults with an Autism Spectrum Disorder.

<http://www.aspergia.com>

This site is a Discussion Board and Chatroom for those with Asperger Syndrome and their Parents/Carers. It takes a unique approach in that it believes Asperger Syndrome is not a disability.

<http://members.ozemail.com.au/~rbmitch/Asperger.htm>

This is an Australian Asperger Syndrome Information Centre designed for everyone involved in the Asperger field (including those with Asperger Syndrome, parents and professionals).

<http://maapservices.org>

This group is committed to providing up-to-date and comprehensive information on social and communication disorders, with particular focus on Asperger Syndrome and Nonverbal Learning Disorder (NLD). Based in the United States.

<http://www.angelfire.com/in/AspergerArtforms>

A look at the life of an autistic man with qualifications in mathematics, physics, psychology and teaching - and a condition that handicaps him quite severely. He lives in the UK.

<http://www.angelfire.com/journal2/asperger>

Personal experiences from a lady living in New Zealand (originally from the US).

<http://www.colour-se7en.co.uk>

This UK site has been developed by Steven McGuinness and features information about asperger/savant syndrome and autistic spectrum related disorders.

Putting your bike in the workshop

Information for health professionals

From <http://www.autismhelp.info>

Assisting health professionals to better understand the needs of people with ASD

- Providing quality medical care
- Information and services
- Providing family support
- Outcomes
- Patient communication
- Behavioural issues
- Sensory processing
- Epilepsy
- Health problems associated with ASD
- Adolescents with ASD
- Sexual issues
- Mental health issues
- ASD in females
- ACT-Now Autism Secondary Consultation & Training Strategy

Providing quality medical care

When presenting to their GP with concerns about their child's development, many parents will suspect that their child is somehow different. By identifying the core characteristics of ASD

and initiating a referral for assessment, GP's can help the family begin to come to terms with their child's individual needs and requirements for support. For information on the characteristics of ASD, see Frequently Asked Questions or the Autism Training Program.

Common difficulties experienced by parents with a young child with ASD include;

- delayed speech,
- poor eye contact,
- repetitive behaviours,
- difficult behaviour (tantrums, obsessions, aggression)
- sleeping difficulties,
- disinterested in people,
- delayed development,
- apparent deafness,
- insistence on routine,
- sensitive to noise,
- overactive behaviour,
- fussy eating and food fads.

A lack of joint attention (pointing and sharing interest with others through eye contact) has been found in many studies to be the most influential factor as to whether or not a child has ASD. This differs from the child pointing out objects to have their needs met and is done purely for the sharing of enjoyment.

'The time at which parents become concerned that the behaviour of their child is not normal ranges from the time of birth up to 4.5 years. The average age at which parents first have concerns is 1 year and 10 months.'

(Autism in Victoria: An Investigation of Prevalence and Service Delivery for Children Aged 0-6 Years, Victorian Government Department of Human Services, 2003)

Information and services

Health professionals can assist the family by directing them toward appropriate information and services. State Autism Associations are a good starting point for information. These can be found in the Web Links sections of this site.

Access to available services will depend on location, but generally include;

- early intervention services for children up to 6 years of age,
- specialist autism schools,
- government disability services,
- school psychological services,
- child and adolescent mental health services,
- adult mental health services,
- respite services,
- home help,
- work skills training for young adults, and
- parent support networks.

Providing family support

At the time of diagnosis, parents are likely to experience grief and loss, stress and depression. Parents may be confused by the array of services available and may feel pressured to do everything they can to help their child. Parents may require help understanding reports provided by other professionals.

Some parents will identify with certain characteristics of ASD

and may question whether they could also be on the autism spectrum. High functioning autism and Asperger's Syndrome can remain undetected well into adulthood.

Issues for siblings may also emerge as parents devote much of their time and attention toward the child with ASD.

Outcomes

Parents may be greatly concerned for their child's future. An early diagnosis is essential to maximise learning opportunities, as early intense intervention produces the best possible outcome. A child's outcome is dependent on their intelligence, personality, age at diagnosis, development of language and social skills, and place on the spectrum. The best outcomes are seen in children with average or higher IQ and spoken language by 8-9 years of age.

Patient communication

Communication impairment in individuals with ASD varies greatly. It can range from;

- absence of development of speech,
- verbal utterances and spoken words to indicate needs only,
- moderate to mild delay.

Or no significant language delay, but subtle impairments such as;

- difficulty initiating and sustaining a conversation,
- repetitive, one-sided conversations, talking 'at' people,
- literal interpretation of language,
- unusual pitch (flat, monotone or high pitched),
- difficulty interpreting and using non-verbal communication,
- making socially embarrassing or tactless comments.

Health professionals can assess the language capabilities of a new patient with ASD by asking a few simple introductory questions. Use clear, direct language. It is helpful to use open-ended questions or a choice of alternatives as some patients may automatically answer yes (or no) to closed questions. Use visuals, models or diagrams to explain concepts and procedures.

Behavioural issues

Changes in routine, sensory processing difficulties, stress at home or school, frustration or physical problems such as an ear infection are all potential causes of misbehaviour. A child who lacks the verbal skills to express his feelings of pain or hunger will often attempt to communicate through tantrums or aggressive behaviour. Punishment of these behaviours is likely to result in further stress for the child. Therefore when looking at behaviour, parents and professionals need to understand the child is not being naughty but is reacting to stress, anxiety or sensory input from their environment. These reactions can seem unusual as neuro-typical children would not react in this way, but are perfectly logical when seen from the point of view of the child with ASD.

Low cognitive abilities and poor problem-solving skills increase the frequency of failure, which produces anxiety. Self-stimulatory behaviour is also linked to high levels of anxiety. An inability to cope with and reduce anxiety levels often results in crying, yelling, tantrums and aggression.

Sensory processing

Many individuals with ASD show unusual sensory responses such as aversion, sensitivity or insensitivity to particular sounds, smell, tastes, movement or body positions, visual input and tactile sensations.

Epilepsy

Approximately 30% of people with ASD develop epilepsy. Children with a severe intellectual disability are most likely to have seizures. Seizures often develop during early childhood, with puberty being the next peak onset time, however onset can occur at any age.

Sometimes seizures are noticeable, but many are undetected by simple observation. Possible signs of seizure activity include:

- behavioural problems, such as aggression or self-injury,
- losing some behavioural and/or cognitive gains,
- making little or no academic gains, after previously doing well in pre-teen years.

Health problems associated with ASD

In addition to epilepsy, other genetic and medical conditions are often present, with higher than average rates of anxiety disorders and depression, obsessive compulsive disorder, attention deficit hyperactivity disorder, bipolar disorder, Tourette's Syndrome and cerebral palsy.

Ear infections, chronic diarrhoea and/or constipation are frequently seen in early childhood.

Adolescents with ASD

Communication deficits and physical changes due to onset of puberty combined with a limited social network, can result in a great deal of anxiety for individuals who are unable to effectively express themselves. This is a particular concern for those who are unable to talk to and be supported by friends about issues related to puberty and sex.

Children with ASD are particularly vulnerable to teasing and bullying. Adolescents are likely to become increasingly aware that they are different and may feel that they are being left behind by their peers.

Health issues in adolescence include:

- identifying risk factors and early detection of mental illness,
- reviewing seizure frequency and medication,
- advice on personal hygiene, diet, weight, fitness and exercise,
- advice on safe sex practices and substance misuse,
- referral to community based services for social and leisure activities,
- referral to local services for employment training, supported accommodation, and further education.

Sexual Issues

Loneliness caused by poor self esteem and social skills, and a lack of friends of a similar age may impact on the development of sexual relationships. Gaining sexual knowledge may be hindered by cognitive and communication impairments, combined with restricted opportunities to learn from peers.

Parents may seek assistance from their GP for help dealing with sexual issues. Lack of discretion in sexual behaviour, such as public masturbation or inappropriate touching of the opposite sex can occur when there is difficulty understanding social rules and the thoughts and feelings of others.

Mental Health issues

Individuals with ASD are likely to experience severe stress far more frequently than most people do and they are less able to deal with it effectively. They may not recognise the signs of stress until it becomes overwhelming, they then have fewer resources to deal with it because of their communication and social deficits.

Adolescence and early adulthood are the peak periods for onset of depression and anxiety disorders. Young people with Asperger's Syndrome have higher levels of psychopathology than those with high functioning autism.

Depression may not present in the typical manner; indications may include dangerous or bizarre behaviour (eg. playing chicken), reduced standard of personal hygiene, tiredness and irritability due to disturbed sleep. Anti-depressant medication can make a huge difference to behaviour.

ASD in females

While ASD is more common in males, females may be underdiagnosed. Females may be more passive, less disruptive and display less of the behavioural problems that result in young boys being referred for assessment. Young girls with ASD might have fewer problems with social interaction because they are better at imitating the social behaviour of their peers. Also females might have an obsessive interest with being social and having friends while boys tend to obsess about objects like trains, cars or dinosaurs. Neuro-typical females are likely to be more supportive and compensate for the communication impairments and social awkwardness of female peers with ASD, making these deficits less obvious.

ACT-Now Program

The Autism Secondary Consultation & Training Strategy is a project by Monash University - Centre for Developmental Psychiatry & Psychology to build the skills and capacity of regional service providers to identify Pervasive Developmental Disorders, promote understanding of PDD's in the wider community, improve linkages between service providers and strengthen partnerships between services and families.

Feeling lost

Information for parents after a recent diagnosis

From <http://www.autismvictoria.org.au/parents>



Discovering your child has an Autism Spectrum Disorder can be a stressful time. We have put the following steps together to help you navigate the service maze.

Help is out there in many forms and from many agencies. Parents have to be persistent, resilient and informed. Do not be afraid to ask for and insist on help that best suits your family circumstances.

Navigating the maze



Artwork by Julian Martin, thanks to Arts Project

1. **FIRST** is identification of the possibility that your child may have an Autism Spectrum Disorder. This involves contact with a multidisciplinary assessment team to determine the diagnosis.

TIP: You do not have to wait for a diagnosis before you can contact support services. Seek help as soon as you feel ready.

2. **THEN** comes the task of learning all about the services that are available. There are several groups of services to navigate, click on services in the left hand menu for a detailed list.

3. **AT THE SAME TIME** it is important to increase your knowledge. Read, read, read is our advice. We have put together a specialist reading list that we update regularly.
4. Many families find talking to other families with a child with an Autism Spectrum Disorder helpful and comforting. There are many **local support groups** - some formal, some informal, scattered around Victoria. Contact the Autism association office for the current details of groups that may suit you.

Cycling in tandem

Information for families

From www.betterhealth.vic.gov.au

Autism - suggestions for parents

Parenting is a difficult job, but a child with autism poses extra challenges. The following suggestions may help. See your doctor, autism professionals or autism associations for more information and advice. Remember that other parents of autistic children can be a gold-mine of tips and suggestions, so raise any issues you have at your support group.

After the diagnosis

An initial period of panic, which could include a fruitless search for the 'cure', is completely normal. This reaction settles down once the shock of the diagnosis has passed. Suggestions include:

- You may like to consider counselling to help manage your own feelings about your child's diagnosis.
- There are many different approaches to the management of autism. You may like to research them yourself to find the best approach for your child and family.
- Good starting points include your doctor or paediatrician.
- Contact an autism support group such as Autism Victoria for further information, support and guidance.
- Other parents who have children with autism are excellent sources of information.
- Search the Internet for information on autism management programs, but be aware that not all information on the Internet can be considered reliable. Check with your doctor or autism professionals, and be wary of any website that claims a 'cure' for autism.

Advice on choosing a management program

Suggestions include:

- Seek advice from your doctor, autism professionals and autism organisations.
- Only choose management programs that are based on sound, scientific principles.
- It might be best to avoid experimental programs. Consult with your doctor or autism professionals for guidance.
- Make sure the people offering the program are professionally qualified.
- Make sure the program deals with all aspects of autism.
- Find out about the time and effort involved - for example, you may not have the time or resources to devote to an intensive program because of other children or work commitments.
- The program may be for children with particular abilities or who are a particular age, so check that it is appropriate for your child.

- Be wary of programs that claim to work for everyone with autism - their approach may be too broad to be useful.

Safety in the home

Parents are used to childproofing their homes, but children with autism may need extra precautions. However, it is important to find a balance between keeping your child secure and making sure your home is also still safe and easy to get out of in an emergency like a fire. Talk to a locksmith and other parents who face similar issues. Suggestions include:

- You may have to board up your windows if your child likes listening to breaking glass. In some cases, you can install foam. Use picture frames with plastic instead of glass.
- Some children with autism are experts at escaping the most secure homes. Talk to a locksmith about installing lockable security doors on all exterior doors and window locks - but make sure you can still get out quickly in an emergency.
- Use key-lock door knobs (or bolts or chains installed high on interior doors) to keep your child in their room at night, or to block access to certain rooms.
- Fence your front and back yards.

Personal hygiene

Suggestions include:

- There is no medical reason to bathe your child daily. If your child resists bathing, aim for one or two baths per week - at other times, clean them as best you can with a damp cloth.
- The fear of water can be overcome by the novelty of swimming pools, showers or jumping over lawn sprinklers.
- Some children with autism detest getting their fingernails and toenails cut. You could try teaching them to do it themselves (with nail clippers rather than scissors), or else perform the job while they're asleep.
- If your child is sensitive to getting their hair cut at the hairdressers, try hugging them in your lap. Regularly brushing your child's hair may 'desensitise' them to getting their hair cut.
- Try cutting their hair yourself. If this is too difficult, cut their hair as best you can while they are asleep.

Clothes

Many children with autism tend to take their clothes off whenever they can. Suggestions include:

- Ask your child why they want to take their clothes off. They may be able to tell you what's irritating them.
- Your child may be overly sensitive to the feeling of clothes against their skin. Consult with your occupational therapist for help to develop a 'desensitisation' program.
- Choose soft fabrics, preferably cotton.
- Avoid clothing with tight waistbands, collars or cuffs.
- Remove clothing tags that may rub against their skin.
- Try dressing them in clothes that are difficult to remove, such as overalls or jumpsuits.
- Choose shirts, dresses and pants that button at the back.
- Replace zippers, velcro, buttons and other easily opened fasteners with more complicated options.
- If your child constantly removes their nappy, check that it's comfortable. Try switching brands.

Going out

Suggestions include:

- Try to have another adult with you to help out if needed.

- Choose ‘family restaurants’ or chain restaurants that don’t expect perfect behaviour from young patrons.
- Take books, pens and toys for your child to play with.
- When eating out or shopping, try to choose non-busy times.
- Reinforce good behaviour with plenty of praise.
- Try to avoid delays. For example, book the first appointment when visiting the doctor or dentist so that your child doesn’t have to sit for too long in the waiting room.

Where to get help

- Your doctor
- Autism Infoline Tel. 1300 308 699 or email info@autismvictoria.org.au
- Autism Victoria Tel. (03) 9885 0533
- Statewide Autistic Services - Respite, Residential and Recreation Services Tel. (03) 9773 6044

Things to remember

- Parenting is a difficult job, but a child with autism poses extra challenges.

See your doctor, autism professionals, autism associations or other parents at your support group for more information and advice.

This page has been produced in consultation with, and approved by:



This information was provided by the Better Health Channel. Material on the Better Health Channel is regularly updated, for the latest version of this information please visit: www.betterhealth.vic.gov.au

Learning how to cycle

Information for teachers and supporting therapists

From the Autism Association of Western Australia
From <http://autism.org.au>

When teaching students with Autism

- Teach to their strengths
- Compensate for their weaknesses

Strengths	Weaknesses
visual skills	ability to process language
rote learning	ability to provide their own structure and organisation

Strategies for teaching children with Autism

1. Avoid verbal overload
2. Use visual cues and prompts
3. Prepare student for changes to routine
4. Provide structure and organisation
5. Use consistent approach to teaching

6. Provide with necessary information to be successful
7. Recognize difficult or unusual behaviour as an indicator of stress
8. Take time to get to know your student and his/her needs

Avoid verbal overload

Irrespective of the persons apparent level of language ability.

Use visual aids in teaching

Give sequential diagrammatic instructions

Teach in the “concrete” as much as possible

From the Autism Association of Western Australia

Physical Structure

People with autism are unable to segment their environment.

They are unable to place details in the right relationship to the big picture.

They are overly focussed on detail to the exclusion of its place in the big picture.

They have no plan or plot from which to work.

so

Make clear physical and visual boundaries. Segment the environment for them. Establish boundaries to show the student where things begin and end. Minimalise visual and auditory distractions. Help the student focus on the concept, not the details.

Prepare for changes to daily routines by using a visual schedule of daily activities.

Schedules can be made using:

Written instructions

Pictograms (Compics)

Photos

Representational objects

Routines

A routine is a systematic and repetitive strategy which established a clear beginning and end. People with autism are attracted to things that are the same. This is why consistency and routine are appealing.

Children with autism will make their own routines. Teachers need to utilise this trait and make productive and appropriate routines for the student.

Transitions

Children with autism have difficulty processing information that is new and unpredictable. They prefer to interact with people and objects in a stable, predictable environment. For these children, changes or transitions are uncontrollable, unknown events that happen to them. Viewed in this way, it is easy to understand why children with autism tend to become confused and upset during transitions.

Give the child plenty of warning of changes of activity.

Give children individual instructions - don't rely on general directions.

Accompany verbal instructions with visual cues.

Provide the child with a timetable, using words or pictures.

Provide a transition object to act as a reminder.

Allow the child to make some choices about activities or objects.

Checklist of best teaching practices for students with Autism

1. Maximum use of visual cues.
2. Minimise dependence on abstract thinking.
3. Reduce factors which cause stress:
 - Waiting
 - Physical contact
 - Ambiguity
 - Overload
4. Be aware of sensory difficulties.
5. Don't take misbehaviour personally - examine what the behaviour communicates.
6. Be as concrete and literal as possible when providing information and instructions.
7. Avoid nicknames, idioms, double meanings, teasing or sarcasm in social language.
8. Avoid verbal overload.
9. Prepare for changes of environment, task, teacher.
10. Always be consistent.
11. Avoid non-productive actions or conversations - if it doesn't need to be said or done resist the temptation to continue.

Travelling into the future

What do we need to get there?

From <http://autismaus.com.au/aca>

National Call To Action

The Australian Advisory Board on Autism Spectrum Disorders represents the views of its corporate members in identifying and addressing the needs of people with an autism spectrum disorder (ASD) in the Australian community.

The National Call to Action is the result of a collaborative approach that identified the imperatives for the autism community. We appeal to both national and state policy makers for a whole of government approach to ensure effective resourcing and structuring of future service delivery.

1. Access To Diagnosis

We call for access to timely and affordable diagnosis for both regional and rural Australia that is governed by the following principles:

- A national experience of no more than 3 months waiting time for a diagnosis;
- A national benchmark for a multi-disciplinary diagnostic team responsible for the process of diagnosis; and
- Medicare rebates are available for diagnosis.

This will be achieved by:

- A national benchmark for the funding of the diagnostic process; and
- Medical courses incorporating information on ASD.

This is a critical priority for the following reasons:

Currently there is up to 24 months waiting list across the states and territories of Australia;

- A time delay creates additional frustration and stress on family members who are living with the pressures of raising a child with ASD;
- Diagnosis is the critical starting point for families to access intervention support services which maximise positive outcomes for both the child and his/her family;
- Diagnosis is often at the family's expense; and
- Diagnosis can be difficult to obtain in rural and remote areas.

2. Official Reporting of Autism Spectrum Disorders

We call for autism spectrum disorder to be reported as a distinct disability governed by the following principle:

- That autism spectrum disorder be included on state and national data registers such as the

Australian Bureau of Statistics (ABS), Centrelink and the Australian Institute of Health and Welfare (AIHW).

This will be achieved by:

- The development of a national Register of Autism Spectrum Disorders, that includes autism or autistic disorder, atypical autism and Asperger's disorder; and
- Government action to include autism spectrum disorders on registers such as the ABS and AIHW.
- National Call to Action/Australian Advisory Board on Autism Spectrum Disorders/September 2007 2

This is a critical priority for the following reasons:

- There is an increase in the number of individuals diagnosed with ASD; and
- State and national data is essential for planning purposes.

3. Early Intervention For Young Children (aged 0 – 6 years)

We call for early intervention services that are governed by the following principles:

- Every child has access to a minimum 20 hours of support per week;
- There is a waiting period of no more than 3 months between diagnosis and service provision; and
- Equitable access is provided for all children with special consideration given to families in rural and remote regions.

This will be achieved by:

- An increase in resources allocated specifically for early intervention services to children with an autism spectrum disorder (ASD); and
- The establishment of clear service standards and codes of conduct for the delivery of early intervention services based on sound evidence and quality indicators.

This is a critical priority for the following reasons:

- All research to date demonstrates that early intervention leads to better outcomes for children with an autism spectrum disorder;

- There are a number of significant stressors that impact on both the family and individual that are exacerbated by an unresponsive service system; and
- Sustainable positive outcomes are achieved by providing effective support in the early years.

4. Education

We call for educational services for school age children with an ASD that are governed by the following principles:

- That every child has access to an appropriate educational service appropriate to his/her needs in compliance with the federal Disability Discrimination Act (Education Standards,2005);
- That educational services are based on sound evidence and quality indicators;
- That all government and non-government educational sectors provide educational services appropriate to the needs of children with an ASD;
- That educational services be responsive to all children across the autism spectrum, including children with Asperger's disorder who are frequently not diagnosed until they are at school;
- That there should be a range of educational services for children with an ASD from specialised autism-specific programs to mainstream programs with appropriate adjustments;
- That there be a waiting period of no more than six months between application for an educational service and enrolment; and
- That educational programs and services address the needs of speech, social skills, behaviour and sensory issues and family support.

This will be achieved by:

- An increase in resources allocated specifically for appropriate needs based educational services across government and non-government educational sectors;
- Improving the capacity of generic and specialised educational services to respond through the increased provision of training, education and consultancy support; and
- National Call to Action/Australian Advisory Board on Autism Spectrum Disorders/September 2007 3
- Increased collaboration between government and non-government educational sectors and across agencies.

This is a critical priority for the following reasons:

- Research indicates that positive outcomes are achieved by the provision of appropriate educational services related to the needs of children with ASD;
- There is an increase in the number of children diagnosed with ASD that require specialised educational support;
- There is a lack of educational programs and services that support the needs of children with ASD; and
- There are high rates of exclusions, suspensions and part time schooling for children with ASD.

5. Family Support, Assistance and Respite

We call for the development of a comprehensive and integrated system of providing support to families that are governed by the following principles:

- That families have access to a range of models for support and respite;
- That the models of support are flexible and responsive to the needs of families;
- That specific services be targeted at meeting the needs of siblings of a person with ASD;
- That specialised services be available for people with exceptional needs;
- That generic services be adequately informed and educated to provide appropriate support; and
- That ageing carers of adults with ASD have access to flexible and affordable short term respite support for their son or daughter as required.

This will be achieved by:

- Gathering accurate data on the nature and extent of the need for family support to assist with future planning and effective resource allocation;
- Improving the capacity of generic services to respond through the provision of training, education and consultancy; and
- Ongoing collaboration between the public, private and voluntary sectors.

This is a critical priority for the following reasons:

- This a proactive strategy that decreases the likelihood of family breakdown, preventing progression to more expensive crisis responses;
- It improves quality of life outcomes for both families and individuals; and
- Community awareness, knowledge and understanding is improved.

6. Services to Adults with an Autism Spectrum Disorder

We call for an improved range of services for all adults with ASD governed by the following principles:

- That adults with ASD receive services and support from professionals with appropriate training in autism and related needs;
- That adults with ASD be given every opportunity to have a full and rewarding life by being as much part of the community as they possibly can be;
- That adults with ASD be given every opportunity to be part of the work force;
- That specialised models for long and short term accommodation services be designed to meet the specific needs of adults with ASD; and
- That adults with ASD who have a dual diagnosis have access to community, health, mental health and related services and support as required.

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This will be achieved by:

- Effective planning and support for transition to post school options;
- Targeted Commonwealth and State funding for adults with autism to establish specialised services in metropolitan and regional areas;
- Targeted Commonwealth and State funding for adults with Asperger's Syndrome to establish services in metropolitan and regional areas;
- Targeted funding to support specialised training of staff working with adults with ASD; and
- Replicating services and supports for adults with ASD that are based on sound evidence and have quality indicators.

This is a critical priority for the following reasons:

- People with ASD are adults for much longer than they are children and require services and supports that will maintain the progress made during their childhood years;
- Without appropriate supports adults with ASD are at high risk of developing co-morbid mental and physical health issues;
- The human and financial costs associated with family breakdown and dysfunction increases significantly if the needs of adults with ASD are ignored; and
- Employment and post-school experiences valued by the wider community are of enormous benefit to adults with ASD when provided with appropriate opportunities to participate.

7. Research

We call for Australian research program into the treatment/intervention and aetiology of autism spectrum disorders

This will be achieved by:

- An increase in resources allocated to research;
- Evaluation and assessment of existing and new programs, practices and services for children and adults with ASD;
- Collaboration and partnerships with governments, universities and service providers;
- Links with international research in the field;
- The establishment of a national research network linked with an established research organisation in this country; and
- Establishing a chair in autism spectrum disorder in a major Australian university.

This is a critical priority for the following reasons:

- There is an increase in the numbers of people being diagnosed with an autism spectrum disorder;
- The findings from the recent Australian prevalence study showing a prevalence rate of 1 in 160 in children aged 6 – 12 years; and
- The lack of interventions and services based on sound evidence and quality indicators.

For more information on the Advisory Board's National Call to Action, please contact:

Adrian Ford Chairperson (02) 8977 8300
Mick Clark Deputy Chairperson 0417 354 157

Or ASPECT www.aspect.org.au

Spare parts

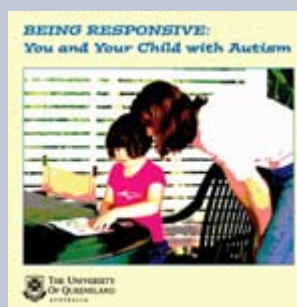
Practical resources

Following are some resources that may provide practical support being responsive:

YOU AND YOUR CHILD WITH AUTISM (INTERACTIVE DVD)



About the DVD



BEING RESPONSIVE: You and Your Child with Autism is an interactive DVD that provides information and instructions on how to use techniques that increase opportunities for social interaction in everyday situations. During the video component of the DVD, four families who participated in the program talk about the

techniques they used with their child and demonstrate how these helped to improve everyday interactions. Members of the research team provide additional information and tips about how to enhance communication and social interaction.

To provide opportunities to adapt the techniques for each child and family situation, a series of Activity Sheets are included on the DVD and are also available to download from this site. Each activity relates to a particular section of the DVD video and provides the viewer with practical ways to put into practice the ideas and techniques covered in the DVD video.

Order the DVD

Australian Customers -
\$60 (includes \$50 + \$5 GST + \$5 postage and handling)

Customers from outside Australia -
\$57 (includes \$50 + \$7 postage and handling)

To order a copy of the DVD send a cheque or money order to:

Uniquet Pty Limited
Consulting & Research Division
(ABN 19 010 529 898)
PO Box 6069 St Lucia Qld 4067
Telephone: (07) 3365 4037
Facsimile: (07) 3365 7115

Alternatively, email your credit card details to dvdorders@uniquet.com.au.

A “To Do” list constructed by a parent in Western Australia

From <http://www.autismactionplan.com.au>

Autism Action Plan

1. Contact Local Area Coordinator (LAC) for information 9426 9306 and make sure you are waitlisted for Early Intervention Services – get a copy of the Disabilities Services Commission information package.
2. Contact Centrelink & register for Carer Entitlements and Health Care Card 13 27 17
3. Find out about your options for private health care cover.
4. If your child is over five and still in nappies contact the Continence Aids Assistance Scheme and register for nappy allocation 1300 366 455.
5. Contact a Developmental Paediatrician who specializes in Autism Spectrum Disorders. Important tests need to be carried out to eliminate physiological disorders or genetic implications.
6. Contact a Psychologist to help with grief counselling.
 - a. Carers WA 1800 242 636/1800 007 332 have telephone or face to face counselling.
 - b. Family Help Line 9223 1100 or 1800 643 000 provide a 24 hour confidential counselling service.
7. Read The Autism Book – Answers to your most pressing Questions by S J Robledo and D Ham-Kucharski.
8. Contact www.disabilityfirststop.asn.au which has been designed by Disability Services to help people after they have received a diagnosis.
9. Order For Parents, By Parents. This is a resource guide written by The Parent Steering Committee of The Interdisciplinary Council on Developmental and Learning Disorders. It contains an overview, therapeutic approaches, biomedical interventions, sensory processing, educational interventions and a glossary. This is a wonderful support manual while you are working your way through the maze of information out there. It is written for the US but it is still relevant to us in Australia. <http://www.icdl.com/staging/bookstore/catalog/index.shtml> US\$29.00. You can look at an online version for free at the same web address.
10. Depending on the age of your child it might be an idea to start investigating options for schooling. This is a very long and tiring process so start gently. If you do have schools in your area that have private special needs programs it may be worth putting yourself on their waitlist to keep your options open. Many people say that the government system is more preferable because the children receive much more funding for aid time and resources. More information will be available soon on this website for you to explore.
11. Your health and your relationships are the key to all of this working for your child. Be kind to yourself. Seek help. Seek therapy. Seek support groups and people going through the same experience. These people are going to keep you sane over the next few years when no-one else understands what you are going through. We have met so many wonderful families and made some incredible friends, they inspire you to keep going, celebrate the little things and hold your hand when the mountain gets too high. Please, please reach out.

Surround yourself with positive people who do not discredit other forms of therapy.

You need to build a team that will work towards the common goal of a brighter future for your child.

Picture Exchange Communication System is a communication aid that has been developed around people who have Autism.

From www.pecsaustralia.com

Please note: As the ‘Autism Action Plan’ was written by a parent in Western Australia many of the contact details relate to that state. Use this booklet or the web to find relevant contact details for your state.

What is PECS?

The Picture Exchange Communication System (PECS) was developed almost 20 years ago as a unique augmentative/alternative communication training package that allows children and adults with autism and other communication deficits to initiate communication. First used at the Delaware Autistic Program, PECS has received worldwide recognition for focusing on the initiation component of communication. PECS does not require complex or expensive materials. It was created with educators, resident care providers and families in mind, and so is readily used in a variety of settings.

PECS begins with teaching a student to exchange a picture of a desired item with a teacher, who immediately honours the request. Verbal prompts are not used, thus building immediate initiation and avoiding prompt dependency. The system goes on to teach discrimination of symbols and then puts them all together in simple “sentences.” Children are also taught to comment and answer direct questions. Many preschoolers using PECS also begin developing speech. The system has been successful with adolescents and adults who have a wide array of communicative, cognitive and physical difficulties. The foundation for the system is the PECS Training Manual, written by Lori Frost, MS, CCC/SLP and Dr. Andrew Bondy. The manual provides all of the necessary information to implement PECS effectively. It guides readers through the six phases of training and provides examples, helpful hints and templates for data and progress reporting. This training manual is recognised by professionals in the fields of communication and behaviour analysis as one of the most innovative systems available.

PECS is especially successful if appropriately combined with elements of behaviour analysis. The manual offers many suggestions on assessing reinforcers, prompting, fading and other issues. The authors encourage PECS users to create an environment that enhances and encourages communication through the use of the Pyramid Approach to Education. The manual briefly outlines the Pyramid and how it can be established in various settings.

Pyramid Educational Consultants of Australia Pty Ltd
3/1 Basil Street Newport Victoria 3015
Phone: +61 3 9391 6122
Fax: +61 3 9391 6133

Don't Dis my cycling Ability

Advocacy and rights

There are documents from the government that can help us to understand that everybody has the right to participate equally in our community. These documents include the Disability Discrimination Act (1992) which can be found in full on the internet.

DISABILITY DISCRIMINATION ACT 1992

The Disability Discrimination Act 1992 has as its major objectives to

- eliminate discrimination against people with disabilities
- promote community acceptance of the principle that people with disabilities have the same fundamental rights as all members of the community, and
- ensure as far as practicable that people with disabilities have the same rights to equality before the law as other people in the community.

There are many advocacy organisations in New South Wales and Australia.

From <http://www.pwd.org.au>



About People with Disability Australia

Introduction

People with Disability Australia Incorporated (PWD) is a national peak disability rights and advocacy organisation. Its primary membership is made up of

people with disability and organisations primarily constituted by people with disability. PWD also has a large associate membership of other individuals and organisations committed to the disability rights movement. PWD was founded in 1981, the International Year of Disabled Persons, to provide people with disability with a voice of our own. We have a cross-disability focus - we represent the interests of people with all kinds of disability. PWD is a non-profit, non-government organisation.

Our vision

We have a vision of a socially just, accessible and inclusive community, in which the human rights, citizenship, contribution, potential and diversity of all people with disability are respected and celebrated.

Our purpose

Our purpose is to be a leading disability rights, advocacy and representative organisation of and for all people with disability, which strive for the realisation of our vision of a socially just, accessible and inclusive community.

Our work

We provide or undertake:

- Rights-related information, advice and referral services for people with disability and their associates
- Short-term individual and group advocacy assistance to people with disability and their associates
- Advocacy for reform around systemic issues that adversely affect people with disability and their associates

Representation of the sector of interest constituted by people with disability and their associates to government, industry and the non-government sector

Coordination of the sector of interest constituted by people with disability and their associates

Disability rights-related research and development around issues of concern to people with disability and their associates

Disability rights-related training & education for people with disability and their associates, service providers, government and the public.

This work is supported in part by grants of financial assistance from both the State and Commonwealth Governments. This assistance is acknowledged with appreciation.

Our core values

We believe that people with disability, irrespective of the nature, origin and degree of our disability:

Are entitled to a decent standard of living, an adequate income and to lead active and satisfying lives

Are people first, with human, legal, social and consumer rights that must be recognised and respected

Are entitled to the full enjoyment of our citizenship rights and responsibilities

Are entitled to live free from prejudice, discrimination and vilification

Are entitled to social support and adjustments as a right and not as the result of pity, charity or the exercise of social control

Contribute substantially to the intellectual, cultural, economic and social diversity and wellbeing of our community

Possess many skills and abilities, and have enormous potential for life-long growth and development

Are entitled to live in, and be a part of, the diversity of the community

Have the right to define the policies and programs that affect our lives

Ought to be empowered to exercise our rights and responsibilities, without fear of retribution.

Our principles

In realising our vision, mission and core values, we are guided by the following principles:

We are passionate, innovative and fearless in the promotion and defence of the rights and interests of people with disability

We are accessible and responsive to our community, and inclusive of its diversity

We encourage, empower and support the civic participation of people with disability

We are collaborative and supportive in our relationships within the disability rights movement as a whole

We are accountable for our activities to our members, to people with disability generally and to the public

We always act with honesty and integrity

We are resourceful and efficient in the marshalling and management of the resources needed to undertake our work.

I need a new map

Further information

From <http://www.aspect.org.au>

Autism Spectrum Australia (Aspect)
41 Cook Street, Forestville NSW 2087 Australia
Ph: (02) 8977 8300 Fax: (02) 8977 8399

Support throughout NSW

Armidale Autism Spectrum Network

Core group of parents who ring each other for support/share information, and meet occasionally. Also collaborate with the Autism Association Outreach Service to organise workshops for parents and professionals in the Armidale area. No membership fee. No email address as yet. Contact Maria Rummery on Ph: (02) 6772 0915.

Aspergers Support Group, Blue Mountains and Winmalee

A support group servicing the Blue Mountains and Winmalee areas. For more information contact Lyn Trindall on 02 4754 4050 or click on the heading above to send an email.

Aspergers Support Group, Far North Coast NSW

Covering Tweed Shire Council Areas, the informal support group consists of parents who have a child/adolescent with Aspergers (current ages 2-19). Topics explored as requested by group. Established & attended by child & family counsellor. Parent-directed group (free). Meet on 4th Wednesday of month (may vary in school holidays) at 10am at Kingscliffe Community Centre, Turnock Street, Kingscliffe. Phone Sue Reynolds (Child & Family Social Worker) on Ph: (02) 6670 9400 (Mondays & Wednesdays) or (02) 6674 9500 (Tuesdays).

ASPIA Inc.

ASPIA Inc. (Asperger Syndrome Partner Information Australia - formerly GRASP) meets first Saturday each month, 2pm - 5pm at College of Nursing, 14 Railway Pde, Burwood. Phone Carol Grigg on 0408 817 828 or visit the website for more information.

ASPIRE - autism spectrum parents information & resources east

ASPIRE is a parent-run support group for parents and carers of children on the autism spectrum including Asperger's syndrome. Regular meetings are held on the last Thursday of each month, 7:30-9:30pm at Coogee RSL (\$5 per person). Daytime meetings are held on the first Thursday of each month, 9-11am at The Junction Neighbourhood Centre, Maroubra Junction. Visit their website for more information and contact details.

The Association of Genetic Support of Australasia (AGSA)

Based in Surry Hills, AGSA is a registered charity (formed in 1988) to provide support & information for individuals and families affected by a genetic condition. AGSA has a database of over 550 predominantly rare genetic conditions. Produces a bi-monthly newsletter and hold an annual Genetic Disorders Awareness Week. Located at 66 Albion Street, Surry Hills NSW. Contact Dianne Petrie on (02) 9211 1462.

Autism & Asperger's Support Group, Central West

Based in Orange, provides a forum for families and people with ASD to interact with each other, share experiences,

offer information and educate the community. Publishes a newsletter, organises workshops & advocates for a better deal. Meets at 7.30pm on 4th Thursday of month at Orange Community Information & Service Centre, Kite St. Small family membership fee per year. Contact John Betts at work: 6391 3833 or at home: 636 22603.

Autism & Aspergers Support Group Inc.

These support groups held at Richmond and Burwood offer guest speakers at monthly meetings and an extensive library of ASD-related books and videos. New members and interested individuals are welcome at any meeting. Email contact: info@autismsupport.org.au

Hawkesbury Area

Meet second Monday of each month at the Richmond Club at 7.30pm, Cnr East Market & Francis Streets, Richmond. Contact by phone: 0425 380 575

Burwood Area

Meet first Tuesday of each month at Burswood RSL club at 7.30pm, 96 Shaftesbury Road, Burwood. Contact by phone: 0425 380 574

Autism Behavioural Intervention Queensland Inc.

The ABIQ website includes a resource kit & resource library.

Autism Breakthrough Network

Spiritual support group - a Christian group of parents, other family members and friends who care for a child/adult with an autism spectrum disorder. Website based in Sydney, reaching all countries. No meetings. Email autismbreakthrough@hotmail.com

Central Coast Autism & Asperger's Family Support Group

Established in 1993, the group has monthly meetings during school terms with guest speakers, regular family outings and resource library. Produces a quarterly newsletter. Meets 3rd Wednesday of the month (during school terms) at Banksia Family Centre, Sir Joseph Banks Drive, Bateau Bay. Cost of \$15 per annum. Contact Cathy Moore on 02 4365 5032 or email msdono@bigpond.net.au.

Coffs Coast Autism Spectrum Disorder Parent Support Group Inc.

This support group for parents of a child with an autism spectrum disorder is based in the Coffs Harbour region. The group can be contacted via phone at 02 6658 8330, fax at 02 6652 1771 or mail at PO Box 1722, Coffs Harbour NSW 2450.

Cooinda Family Support Group, Albury/Wodonga Region

COOINDA is a locally based family support group that was formed in 1976 by families who found that they shared a common bond: they all had children with disabilities. You can become a member of Cooinda if you have a child/adolescent/adult with a disability in your family or if you are an interested person or organisation. Cooinda provides a range of services including a sibling support program, access to a range of resources, and publishes a newsletter. The Cooinda Co-ordinator, Sue Pringle can be contacted at 150 Lawrence Street, Wodonga Victoria 3690
Email: cooindawodonga@optusnet.com.au
Ph:(02) 60564844 Fax: (02) 60564944.

Denistone East Public School Asperger Syndrome & ASD Support Group

Small parents and teachers group in Denistone, Sydney. Activities have included afternoon meetings to 'network' and discuss integration support, social gatherings, assisting with resources for local & school libraries, and newsletter 'Perspectives'. No cost to join. Occasional meetings, usually school afternoons, all interested people welcome. Phone Liz Abbottsmith (parent) on mobile 0410 215 493.

Hastings Autism/Asperger Resource Group

This group is based in Port Macquarie and encompass the Hastings Valley. Meetings are held on the first Thursday of every month at Port Macquarie Library from 10-11:30am. The group can be contacted by mail at PO Box 8042, Port Macquarie, NSW 2444 or by calling Sharon Hood on 0417 629 278 or clicking on the heading above to email.

Learning to Learn

A parent and therapist run organisation which has an interest in Applied Behaviour Analysis in the treatment of children with ASD. It is a non-profit organisation for both parents and professionals.

Macleay Valley Aspergers Autism Support Group

A network of parents and carers based in Kempsey providing emotional and encouragement for each other through the challenges of daily life. Provides education and knowledge about Asperger's and autism, facilitating interaction and exchange of information between parents, professionals and schools. Encourages advocacy and increased community awareness and acceptance of Asperger's and autism. Meets once a month on Monday evenings at Living Skills House, 8 Wide Street. Contact Belinda Parkinson on 0412 497 725 or Jo Downes on 0428 631 955.

Parent2Parent

This parent network is a non-profit group, pooling their resources and contacts within the wider Australian community to build community forums, chat rooms and a site linking to many and varied resources

Parents and Carers of Autism

This website is maintained by a group of parents and carers of children with autism. Their aim is for the website to become an online community for mutual support, and an information resource. It contains articles, stories and a message board.

P.A.S.S. (Parents of Autistic Spectrum Support) Lismore

Group consists of parents, partners & families of people in the autistic spectrum, including those diagnosed within the spectrum. Share ideas, experiences & knowledge of ASD's. PASS Inc. also has the largest resource library in the Northern Rivers. Meet 1st Tuesday of each month at Lismore Workers Club, Keen Street (free). Postal Address: PO Box 5286, East Lismore, NSW 2480. Contact Susan Aprile on (02) 6622 3953.

Shoalhaven Autism Spectrum Support Network

A group of mothers/carers/grandparents/partners who meet for support & to share information about events, courses, seminars, etc. Library available. Meets last Friday of the month (except in school holidays) at Noah's Ark Centre, Osbourne St, Nowra. No cost to join. Contact Anne Young at Ph: (02) 4446 0604.

Siblings Australia Inc.

Siblings Australia Inc. develops and coordinates services for families, and in particular brothers and sisters of children with special needs (disability or chronic illness).

This website provides a list of resources, on-line discussion groups, and information on workshops. The organisation is based at the Women's and Children's Hospital in Adelaide, South Australia.

South West Sydney Aspergers Parents Support Group

This support group is for parents of children and adolescents with Asperger's syndrome who live in the Liverpool, Bankstown, Fairfield & Campbelltown areas. The group meets twice a term on Mondays in Green Valley. For more information or to register for the mailing list please contact; The Operations Manager, Sharecare Inc., Tel: 9734 9888 or email Sharecare by clicking on the heading above.

Western Sydney Autistic Family Support Group

Established since 1990, the group gives members an opportunity to come together in friendship & support, access information about autism through books, guest speakers or audio visual materials. Meets 3rd Tuesday of February, April, June, August & October at Department of Ageing, Disability and Home Care, Fairfield. Contact Irene Tuazon Ph: (02) 9757 1990 or work Ph: (02) 9205 6138.

ASpar

A support and advocacy group for people raised by parents with an Autistic Spectrum Disorder or Asperger's Syndrome.

Aut-Support. Asperger's & Autistic Spectrum Network Inc.

Online contact register for people with Aspergers Syndrome. Operates from the Maitland, NSW region. Advocacy, mentoring, translational counselling, workshops, etc. Phone 02 4966 1717

Websites

“...why not go ahead and look at what you CAN do and CAN manage, what you ARE interested in and ARE doing now, and begin creating your own opportunities.” (from auties.org)

WEBSITES REFERENCED IN THIS GUIDE

All information in this guide was reproduced with permission from the website operators.

www.learningplace.com.au

www.auties.org

www.autismvictoria.org.au

www.autismhelp.info

www.betterhealth.vic.gov.au

www.autism.org.au

www.autismaus.com.au/aca

www.autismactionplan.com.au

www.pccsaustralia.com

www.pwd.org.au

www.aspect.org.au

OTHER USEFUL WEBSITES

www.tonyattwood.com.au (for parents & for professionals)

www.suelarkey.com (for teachers)