



FOR IMMEDIATE RELEASE:
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April Is National Autism Awareness Month

Local Nonprofit Spreads Positive Message in Schools

WAUKESHA — First identified in the early 1900s, autism received its diagnostic name and definition from Dr. Leo Kanner in 1943. Autism, which is derived from the Greek word *autos* meaning self, is a neurological disorder which effects all developmental planes – communication, social/emotional, cognitive, self-help, and motor – to varying degrees.

Most children with autism spectrum disorders (ASDs) are unable to learn from the natural environment as neurotypical children do. Early, intensive therapy can help treat the symptoms of autism. Some such symptoms include self-stimulatory behavior such as hand flapping and toe walking, intense preoccupation with parts of toys such as wheels or fans, lack of verbal communication skills, inappropriate social behavior, and self-injurious behavior.

When Kanner exposed autism in the '40s, he observed that 1:10,000 children were effected. The most recent numbers from the Centers for Disease Control and Prevention (CDC) suggest the diagnostic rate is now 1:110 (2009). Several factors are being considered for the spike: In the 1990s, the autism spectrum was created to include Asperger's Syndrome (AS), Rett's Disorder, and Pervasive Developmental Disorder – Not Otherwise Specified (PDD-NOS) in addition to Autistic Disorder. With the increased awareness, more pediatricians are picking up on the signs of autism and referring their patients for neuropsychological evaluations. There is also a host of speculative causations, such as environmental triggers and genetics.

The prognoses for children diagnosed with an ASD are as widely varied as the spectrum itself. More profoundly effected children may grow into dependent adults, eventually requiring an institutional level of care. Other higher-functioning children may thrive academically in school, requiring only social skills training and self-regulation techniques to achieve the semblance of "normalcy" among peers. Parents are required to navigate an endless ocean of therapeutic interventions ranging from scientifically-based behavior modification to anecdotal treatments. Whatever regimen a family adopts, most understand there is no cure for autism.

While Denise Schamens (Brookfield) and Chelsea Budde (Waukesha) aren't promoting any specific therapeutic intervention, they have recognized the need to create autism awareness and improve social support for children with ASDs. In 2007, they formed Good Friend, Inc., a 501(c)(3) public charity based in Waukesha to teach acceptance of and foster empathy for students with ASDs among their typically-developing peers.

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Budde and Schamens, both of whom have children with special needs including autism, have spread Good Friend's awareness-acceptance-empathy message to more than a dozen school districts in Southeast Wisconsin and down into northern Illinois. Furthermore, Good Friend's debut DVD, "How Can I Be a Good Friend to Someone with Autism?", has been purchased by schools from Hawaii to New Jersey. The duo present peer sensitivity workshops and general assemblies using novel curriculum for grades K-6, plus a number of trainings for parents and professionals, from educational staff in-services to first responder awareness and sensitivity workshops. A screening of the DVD is included with each of these services, which generally take 60 minutes.

For more information on Good Friend, visit www.goodfriendinc.com, contact Budde by phone at 414-510-0385, or email chelsea@goodfriendinc.com. For more information about autism, visit the Autism Society of America's website, autism-society.org.

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