New Jersey
Tracking Autism Spectrum Disorder and Other Developmental Disabilities in New Jersey:
What You Need To Know

A Snapshot of Autism Spectrum Disorder in New Jersey
The following estimates are based on information collected from the health and special education records of children who were 8-year-olds and living in one of four counties in 2010 (see sidebar). Overall, the New Jersey Autism Study (NJAS) identified 696 children with autism spectrum disorder (ASD), including children with and without a diagnosis documented in their records.

How many children were identified with ASD?
1 in 45 children (or 21.9 per 1,000 8-year-olds) was identified with ASD. This estimate is higher than the average number of children identified with ASD (1 in 68) in all areas of the United States where CDC tracks ASD.

Which children were more likely to be identified with ASD?
Boys were almost 5 times more likely to be identified with ASD than girls.
- 1 in 28 boys was identified with ASD.
- 1 in 133 girls was identified with ASD.

White children were more likely to be identified with ASD than black children.
- 1 in 44 white children was identified with ASD.
- 1 in 56 black children was identified with ASD.
- 1 in 47 Hispanic children was identified with ASD.
- 1 in 48 Asian or Pacific Islander children was identified with ASD.

When were children first evaluated for developmental concerns?
41% of children identified with ASD were evaluated for developmental concerns by the time they were 3 years old.

When were children first diagnosed with ASD by a community provider?
On average, children were diagnosed at age 4 years, even though children can be diagnosed as early as age 2 years. When looking at age of first diagnosis by subtype, on average, children were diagnosed with:
- Autistic disorder at age 3 years and 4 months.
- Pervasive developmental disorder-not otherwise specified (PDD-NOS) at age 3 years and 9 months.
- Asperger disorder at age 6 years and 7 months.

How many children had an eligibility for autism special education services at school or had an ASD diagnosis?
76% of children either had an eligibility for autism special education services at school or had an ASD diagnosis. The remaining 24% of children identified with ASD had documented symptoms of ASD, but had not yet been classified as having ASD by a community provider.
More is understood about ASD than ever before, but there is an urgent need to continue the search for answers and provide help for people living with ASD.

Public Health Action
The Centers for Disease Control and Prevention (CDC) funds programs to track the number and characteristics of children with ASD and other developmental disabilities, as part of the CDC’s Autism and Developmental Disabilities Monitoring (ADDM) Network. The New Jersey Autism Study (NJAS) was established in 2000 as an ADDM Network site in collaboration with the New Jersey Department of Health and Senior Services and investigators from Rutgers-New Jersey Medical School. NJAS partners with the New Jersey Department of Education and other state and local agencies and organizations that serve children with developmental disabilities and their families to track the number of 4-year-old and 8-year-old children with ASD, intellectual disability, or both in select areas of New Jersey. This program also contributes information on the characteristics of children with ASD and on factors that put children at risk for this condition. NJAS data can be used to promote early identification, plan for training and service needs, guide research, and inform policy so that children and families in our community get the help they need.

Training and Education on Autism Spectrum Disorder
NJAS offers training on the identification and diagnosis of ASD, makes presentations on ASD tracking and our scientific findings, sponsors workshops on ASD topics, and assists families and policy makers in understanding the scope and consequences of ASD.

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1. Due to small numbers of children, we are unable to detect statistical differences between certain racial and ethnic groups.

2. This information is based on children who had a diagnosis from a community provider documented in their records. Because the diagnoses were made in 2010 or earlier, they reflect DSM-IV-TR subtypes. This excludes children whose only ASD classification was an ICD-9 billing code or an eligibility for autism special education services.