

## CDC: Autism rates unchanged at 1 in 68 children

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Rates of autism spectrum disorder (ASD) held firm at one in 68 school-aged children, the same as estimates made in 2014, according to new data from federal health officials.

However, experts said more work is needed to ensure children are being diagnosed early, as only 43% had received a comprehensive evaluation by age 3.

“We would love to be doing those comprehensive evaluations earlier,” said AAP President Benard P. Dreyer, M.D., FAAP. “We know that early intervention in autism makes a difference and, therefore, it makes me more committed than ever to continue our screening policy which is at 18 and 24 months and try to encourage pediatricians to screen more actively.”

Because of the timing of that policy, he hopes to see the impact reflected in future prevalence reports.

Data for the new ASD prevalence rates come from the Centers for Disease Control and Prevention’s (CDC’s) Autism and Developmental Disabilities Monitoring Network and include 8-year-olds at 11 sites in Arizona, Arkansas, Colorado, Georgia, Maryland, Missouri, New Jersey, North Carolina, South Carolina, Utah and Wisconsin. The new estimates are based on 2012 data while the 2014 estimates were based on 2010 data. They are published in the CDC’s [Morbidity and Mortality Weekly Report](#).

ASD prevalence varied by geography, ranging from about one in 122 children in Maryland to one in 41 in New Jersey. However, the Maryland figures were based only on medical records while the New Jersey figures included both education and medical records.

Overall, researchers found ASD rates for boys (one in 42) to be more than four times higher than for girls (one in 189). There were differences by race as well. Roughly one in 65 white children had ASD compared to one in 76 black children and one in 99 Hispanic children.

“At this point, other research does not suggest that African-American children and Hispanic children living in the United States have different rates of autism or autism spectrum disorder, so I think the difference is how early they’re being identified and I think that that is an area of concern,” said Susan E. Levy, M.D., M.P.H., FAAP, chair of the AAP Council on Children with Disabilities Autism Subcommittee.

She suggested that in addition to being vigilant about screening in their own practices, pediatricians can partner with child care centers and schools to ensure underserved children also have access to screening.

“There is data and evidence that ... children who have been identified early and referred for treatment have better outcomes than children who were identified later and referred for treatment,” she said.

**Resources**

- [AAP Council on Children with Disabilities autism page](#)
- [Information for parents on the Healthy Children website about autism](#)
- [Bright Futures health initiative](#)
- [AAP clinical report on identifying autism](#)
- [AAP toolkit on caring for children with ASD](#)
- [CDC's Learn the Signs. Act Early. program](#)

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