



New Autism Prevalence Rates

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On March 28, 2014 the CDC released a new [report](#) on the prevalence of autism. The overall prevalence of ASD is now one in 68 children (aged 8 years). The table below shows the increase in prevalence rates as provided by the CDC since 2002.

Autism Prevalence Rates - CDC	
YEAR	PREVALENCE
2000 & 2002	1 in 150
2006	1 in 110
2008 data published in 2012	1 in 88
2010 data published in 2014	1 in 68

Based on the current report, the ASD prevalence estimates varied by sex: one in 42 boys and one in 189 girls. Because the report is based on data gathered during 2010, the diagnostic categories were based on the DSM IV-TR. Median age of earliest identification varied by specific diagnosis. The median age of earliest diagnosis across DSM IV-TR categories was approximately 4.5 years (53 months) and did not differ significantly by sex or race/ethnicity. The median age of earliest Asperger disorder diagnosis was approximately 6 years (74 months).

The new CDC report provides the following data on intellectual ability among 8 year olds with ASD:

- 31% - intellectual disability (IQ ≤70)
- 23% - borderline range (IQ = 71–85)
- 46% - average or above average range of intellectual ability (IQ >85)

Key Points

CDC Findings

- 1 in 68 children has ASD
- Prevalence varied by sex (1 in 42 boys and 1 in 189 girls)
- A large proportion of children identified (46%) had average or above cognitive functioning

Considerations

- Rates likely are an under-estimate given that the average age of diagnosis of Asperger disorder was after age 8
- It is likely that girls are significantly under-identified, again indicating that rates are an underestimate.
- The possible impact on prevalence rates of the new DSM-5 criteria for ASD is unknown
- Public schools across the nation have historically lagged behind the CDC prevalence rates. Training and support is needed in order to help to close this gap.

With each prevalence update from the CDC, we reflect on the state of ASD identification. What have we learned and what changes are called for?

We do not know how much these new numbers reflect an improvement in efforts to identify ASD, in contrast to an actual increase in the incidence of ASD. Keeping in mind that the CDC prevalence rates were based on eight-year-old children, the median age of identification of Asperger disorder - six years old - could lead to false optimism. Because other studies have estimated the average age of identification of Asperger disorder to be closer to eleven years old, had the CDC focused on an older group of children, it is likely that the median age of identification would be much later. Given the later average age of diagnosis for Asperger disorder, the current CDC rates are likely an underestimate of the prevalence because the higher-functioning group is not “captured” at eight years old. We do know that efforts to serve these individuals must be increased to match the increasing rates. We do not know what impact, if any, the new DSM-5 will have on ASD prevalence rates.

Based on state data, the identification rate of autism in public schools across the nation has historically trailed behind the CDC rates. Without appropriate training and support, the identification gap in schools may widen even further.

While, we do not know the actual ratio of girls to boys with ASD, we suspect that girls remain significantly under-identified. Current research supports this notion. Increased efforts to describe the characteristics of ASD in females will likely lead to a decrease in the disparity in identification rates. The CDC data also reveal that the delay in identification continues for those with ASD with average or above average intellectual abilities (Asperger Disorder). These factors matter, primarily, because as long as ASD in any individual (regardless of gender or cognitive functioning) is unrecognized, the individual does not receive essential services.

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