A Snapshot of Autism Spectrum Disorder in New Jersey

Findings from the New Jersey Autism Study (NJAS) help increase understanding about the scope of autism spectrum disorder (ASD) in children, describe the characteristics of ASD in those children, and identify differences between groups in the prevalence or detection of ASD.

1 in 32
or 3.1% of 8-year-old children in an area of New Jersey were identified with ASD by NJAS in 2016

White children were 1.3x More likely to be identified with ASD than black children

Values indicate prevalence per 1,000 children. No significant differences in ASD prevalence were found between white and Hispanic children or between black and Hispanic children.

Boys were 4x More likely to be identified with ASD than girls

IQ data available for 71%
Of children identified with ASD by NJAS

IQ = Intelligence Quotient
Intellectual disability = IQ ≤ 70

By 51 months
half of children identified with ASD were diagnosed

44% of children
Identified with ASD received a Comprehensive Developmental Evaluation by age 3 years

81% of children
Identified with ASD had a documented ASD diagnosis

IQ = Intelligence Quotient
Intellectual disability = IQ ≤ 70
What are the key take-away messages?
- The percentage of children with ASD increased in an area of New Jersey from about 2.9% in 2014 to about 3.1% in 2016.
- Rising numbers of children with ASD need services and support, now and as they grow into adolescence and adulthood.
- Boys continue to have a higher ASD prevalence than girls. In 2016, 5% of boys in an area of New Jersey were identified with ASD, compared to about 1.2% of girls.
- Future efforts may emphasize the importance of screening young children with standardized tools and connecting families to needed services before age 3 years.
- The percentage of children with ASD continues to be higher in New Jersey compared to other areas in the United States where CDC tracks ASD. It is not known exactly why this is so, but geographic differences in evaluation and diagnostic practices for children with developmental concerns may play a role.

How can this information be useful?
The latest findings may be used to:
- Promote early identification of ASD;
- Plan for the service needs of individuals with ASD and provide trainings related to ASD for healthcare providers and families;
- Guide future research; and
- Inform policies promoting improved health and quality-of-life outcomes for individuals with ASD.

How and where was this information collected?
NJAS uses a comprehensive, active case-finding method based on the analysis of information from the health and special education records of children who were 8 years old and living in one of four counties in New Jersey in 2016.

**Tracking area**
Essex, Hudson, Union, Ocean counties

**8-year-old children in tracking area: 33,031**
- 40% white
- 22% black
- 32% Hispanic
- 6% Asian or Pacific Islander

What else does NJAS do besides track ASD among 8-year-olds?
NJAS collaborates with the New Jersey Departments of Health and Education and local agencies and organizations that serve children with developmental disabilities and their families to track the number and characteristics of 4-year-olds and 8-year-olds with ASD and/or intellectual disability in select areas of New Jersey. NJAS offers information and training on the identification and diagnosis of ASD, sponsors presentations and workshops on ASD topics, and promotes innovative approaches to the detection of ASD.

“The CDC ADDM and NJAS have been driving forces in advancing awareness and urgency for funding and policy changes to help more children and adults access the medical and behavioral treatment they need.”

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