

AUTISM SOCIETY

Of Prince Edward Island

Adult Diagnosis Kit

The Autism Society of PEI

Navigation Handout

There are many different programs and services on Prince Edward Island for both individuals and their families touched by Autism.

Please note:

Many programs require documentation of the disability in order to access the provided services. If your documentation is in a language other than English or French you may want to pursue getting it translated by a health care professional and signed off on to diminish wait times of translating the document.

A Provincial Health Card will be required as well to access services. After arriving to PEI, you may apply for the health card. Provincial Health Card information can be found at:

<https://www.princeedwardisland.ca/en/information/health-pei/pei-health-card>

1. Accessibility Supports Program

Funding based on a Needs Assessment done by a support worker. The amount allotted is based on the assessed need. For example, Respite care needs, incontinence supplies, safety locks, etc.

2. School Aged Funding

\$6,600 is allotted each year to every school aged individual who has been diagnosed with Autism. This funding supports community support workers to help with social skills, or funding for tutors. To access school age autism funding speak to your Accessibility supports worker.

3. Disability Tax Credit (Federal)

The Disability Tax Credit (DTC) is a non-refundable tax credit that assists persons with disabilities or their supporting persons reduce the amount of income tax they have to pay. Their website is: The Form can be located at:

<https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/t2201/t2201-18e.pdf>

4. RDSP (Registered Disability Savings Plan)

If the individual qualifies for the DTC (Disability Tax Credit) they will also qualify for the RDSP. More information regarding RDSP's can be found at:

<https://www.canada.ca/en/employment-social-development/programs/disability/savings/rdsp.html>

Here are some additional Services provided through community organizations similar to the Autism Society. They include:

Stars For Life Foundation for Autism

Stars For Life work with students on the Autism Spectrum who are over the age of 18 with a focus on education, housing, day programming, and employment services. You can locate their website at:

<https://starsforlife.com/>

Serene View Ranch

Serene View Ranch is a team of health professionals dedicated to supporting mental health challenges, especially those that are trauma based. Their website can be found at:

<https://www.serenviewranch.com/>

Sylvan Learning Centre

Sylvan Learning offers a variety of services including personalized tutoring, Test Prep, Academic Coaching and much more. Their website is located at:

<https://www.sylvanlearning.com/>

Project LifeSaver PEI INC

Project LifeSaver provides timely responses to save lives and reduce potential injury for adults and children who wander due to Alzheimer's, autism, and other related disorders or conditions. Their website is located at:

<https://www.projectlifesaverpei.ca/>

Triple P Parenting

Triple P uses simple, positive tips to help Islanders and caregivers face typical challenges or raising children and teens. The Positive Parenting Program offers various levels of support to parents including a stay positive public awareness campaign, large group parent seminars, parenting skills and supports along with intensive family interventions. More information about Triple P Parenting supports can be located at their website:

<https://www.princeedwardisland.ca/en/information/social-development-and-housing/triple-p-positive-parenting-program>

The Island Helpline (Canadian Mental Health)

1-800-218-2885 or visit their website at:

<https://www.theislandhelpline.com/>

PEI 211

Connect with Social, Government, and non-urgent free and confidential health services 24 hours a day 7 days a week. Text or Call 2-1-1 via phone or visit their webpage at:

<https://www.princeedwardisland.ca/en/information/211-pe>

Social ABC's

The Social ABC's program is a structured, evidence-based early intervention program for children identified as possibly having autism spectrum disorder (ASD), providing families with intervention support at the first signs of concern, even before diagnosis. Parents will play a major role in the program.

The website for Social ABC's is: <https://www.socialabcs.com/>

AccessAbility Supports

The Disability Support Program has expanded and is now called **AccessAbility Supports**. New supports offer more and better assistance to Islanders living with disabilities.

Disabilities may include physical, intellectual, neurological, sensory and mental disabilities.

New or Enhanced Supports

Our government wants to ensure Islanders living with disabilities can access the tools they need to reach their full potential and contribute to society as fully as possible. These improvements mean supports will be more personalized and focus on empowering individuals and their families.

Some of the new or enhanced supports include:

- support for all disabilities including physical, intellectual, neurological, sensory and mental, based on an assessment;
- a new assessment tool to help better understand how the disability affects activities of daily living to ensure appropriate support is provided;
- a supports coordinator to navigate all available support services and develop a personalized plan to meet individual needs;
- increased supports for finding or keeping a job including coaching and skills training;
- increased financial help for home and vehicle modifications required because of a disability - \$10,000 every 10 years for home (was \$2,000 in a lifetime) and \$6,000 every 8 years for a vehicle (was \$2,000 in a lifetime); and
- a single point of contact by calling a toll-free number for easier access to support.

How can I get support?

You will meet with a staff person who will conduct an assessment to determine how disability affects your daily life and how AccessAbility Supports can help meet your needs.

If you are a current disability support client, you will be automatically enrolled in AccessAbility Supports.

What type of support is available?

Help is available under five areas of support, as follows:

Personal Supports

Personal Supports help with personal daily living assistance such as:

- life skills training in areas like meal preparation, budgeting, grocery shopping, recreational activities;
- technical aids and assistive devices such as a wheel chair; and
- supports that enable an individual to be self-sufficient and live independently such as in-home supports or personal care workers.

Housing Supports

Housing Supports help with independent living and may include assistance such as:

- financial assistance for a caregiver to provide daily supervision and guidance in a community-based residential setting; and
- financial help for required home and vehicle modifications - \$10,000 every 10 years for home modifications and \$6,000 every eight years for a vehicle.

Community Supports

Community Supports help increase active participation in the community and may include:

- assistance with finding or keeping a job including coaching, skills training, and supports for youth transitioning from the education system to the workforce; and
- supports to enable active participate in the community such as day programming, personal aid or specialized transportation.

Caregiver Supports

Caregiver Supports help family members or caregivers and may include:

- respite for caregivers to allow for time for breaks to recharge; and
- support to provide supervision for adults who are unable to stay home alone safely so that caregivers can go to work or school.

Financial Supports

Financial Supports help with basic living expenses, if needed, and may include:

- assistance for basic needs such as food, clothing, shelter, household and personal supplies through what is called Assured Income.

Questions?

Call toll-free in Prince Edward Island:

1-877-569-0546

Published date:

October 8, 2020

An assessment will determine how **AccessAbility Supports** can help meet your individual needs

Help is available under five areas of support

My Personal Supports helps with personal daily living, which may include:

- life skills training in areas like meal preparation, budgeting, grocery shopping, recreational activities
- technical aids and assistive devices such as a wheel chair
- supports that enable an individual to be self-sufficient and live independently such as in-home supports or personal care workers

My Housing Supports helps with independent living, which may include:

- financial assistance to provide daily supervision and guidance in a community residential setting
- financial help for required home and vehicle modifications

My Community Supports helps increase active participation in the community and may include:

- assistance with finding or keeping a job including coaching, skills training and supports for youth transitioning from the education system to the workforce
- supports to enable active participation in the community such as day programming, personal aid or specialized transportation

My Caregiver Supports to help family members or caregivers may include:

- respite for caregivers to allow them time to have a break and recharge
- support to provide supervision for adults who are unable to safely be left home alone so that care givers can go to work or school

My Financial Supports helps with basic living expenses if needed and may include:

- assistance for basic needs such as food, clothing, shelter, household and personal supplies through what is called Assured Income

For more information visit

PrinceEdwardIsland.ca/accessability-supports



GOVERNMENT OF PRINCE EDWARD ISLAND
WWW.PRINCEEDWARDISLAND.CA
P.O. BOX 2000, CHARLOTTETOWN, PE
CANADA C1A 7N8

Questions? Call:

1-877-569-0546



AccessAbility Supports

Formerly the disability support program, **AccessAbility Supports** will ensure more Islanders get the help they need to reach their full potential.

New or enhanced services include:

Support for **all disabilities** including *physical, intellectual, neurological, sensory and mental based on assessment*

A supports coordinator will navigate **all available support services** and develop a *personalized plan to meet individual needs*

Increased supports for **finding or keeping a job** including *coaching, skills training and supports for youth transitioning from the education system to the workforce*

Increased financial help for home and vehicle modifications required because of a disability - **\$10,000 every 10 years for home** (was \$2,000 in a lifetime) and **\$6,000 every 8 years for a vehicle** (was \$2,000 in a lifetime)

A new assessment tool for **children, youth and adults** will help us to better understand *how the disability affects activities of daily living*

New Community Connector positions will focus on *improving people's independence and more active participation in community living*



Easy Access

A single point of contact by calling

1-877-569-0546

toll-free makes it easier to access support



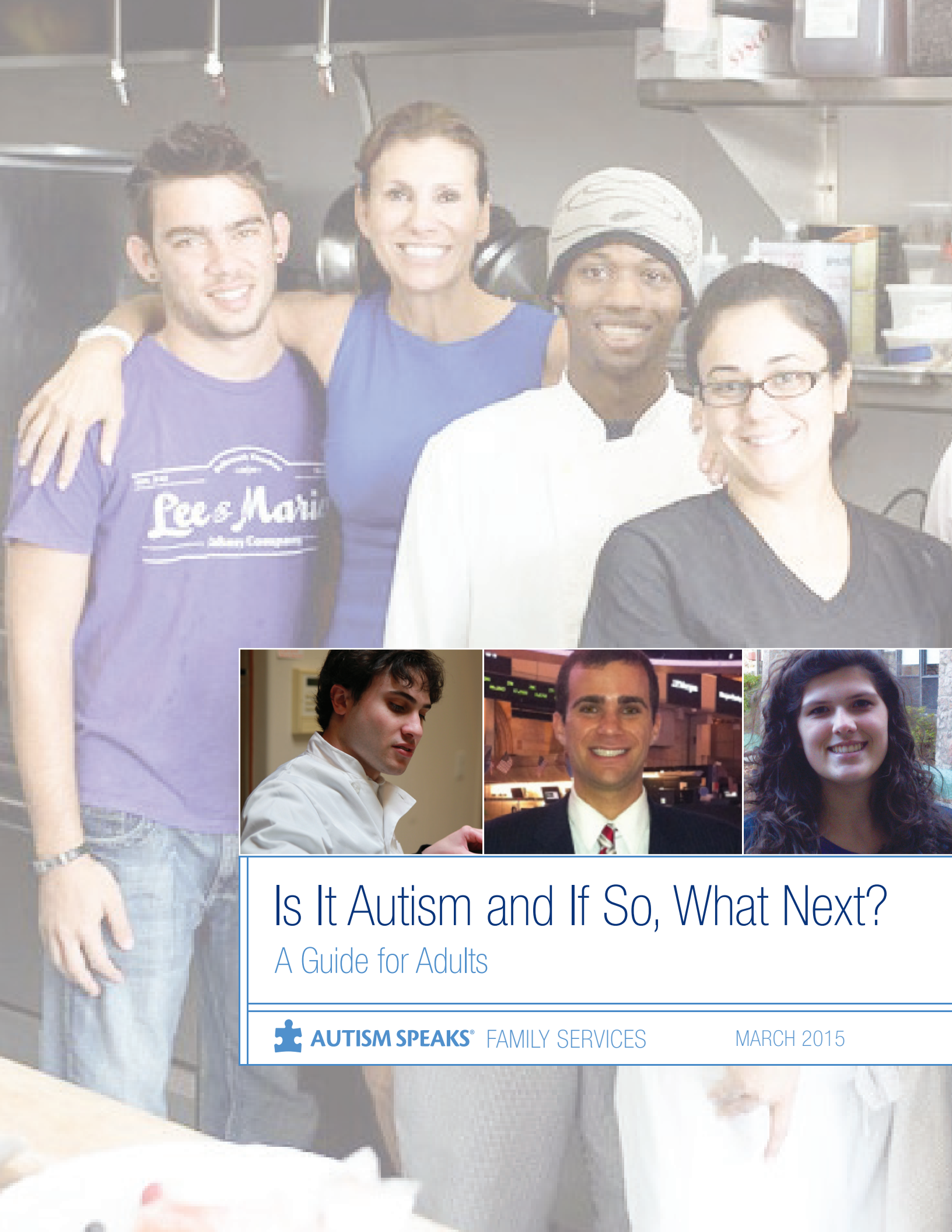
These improvements mean supports will be more personalized and focus on empowering individuals and their families.

Islanders currently participating in the Disability Support Program will be automatically enrolled for services through **AccessAbility Supports.**

More Information

Please call **1-877-569-0546** for more information or if you have questions.

PrinceEdwardIsland.ca/accessability-supports



Is It Autism and If So, What Next?

A Guide for Adults



AUTISM SPEAKS® FAMILY SERVICES

MARCH 2015

About This Kit

Is It Autism and If So, What Next? A Guide for Adults is a tool designed to help assist adults who suspect they may have autism, as well as those who have been recently diagnosed with the disorder.

This tool kit was released in the spring of 2015. It was created by the Autism Speaks Family Services staff, in conjunction with a group of contributors made up of adults with autism and other professionals, as well as the Family Services Committee.

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It's time to listen.

A tool kit for adults who suspect they may have autism, as well as those who have been recently diagnosed with the disorder.

Autism Speaks does not provide medical or legal advice or services. Rather, Autism Speaks provides general information about autism as a service to the community. The information provided in this tool kit is not a recommendation, referral or endorsement of any resource, therapeutic method, or service provider and does not replace the advice of medical, legal or educational professionals. Autism Speaks has not validated and is not responsible for any information or services provided by third parties. You are urged to use independent judgment and request references when considering any resource associated with the provision of services related to autism.

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Introduction

You have downloaded or ordered this tool kit because you suspect you may have autism or you've received a new diagnosis as an adult. You have come to the right place!

As autism awareness has grown dramatically in recent years, many young adults and adults have learned the signs and felt there may be a connection between their feelings and behaviors and the symptoms of autism. For some, it can come as a relief as questions they've had for many years may finally have an answer. Many have been misdiagnosed with other conditions or were never able to get a formal diagnosis of a condition or disorder that explains their symptoms.

This kit will provide an overview of autism to help you better understand the disorder and will hopefully clarify whether you should seek out a professional for a thorough evaluation. If/When you are in fact diagnosed with autism, the kit will also walk you through next steps in terms of accessing services and provide you with critical information about your rights and entitlements as an adult on the spectrum. There is also a list of helpful resources for you to find more information about next steps for the days and months following your diagnosis.

If you have any additional questions or are looking for resources, the ***Autism Speaks Autism Response Team*** (ART) is here to help! ART coordinators are specially trained to help support the autism community by answering calls and emails and by providing guidance and information. The Autism Response Team can be reached by email at familyservices@autismspeaks.org or by phone at 888-288-4762 (en Español at 888-772-9050).

Let's get started!

What is Autism?

Autism spectrum disorder (ASD) and *autism* are both general terms for a group of complex disorders of brain development characterized, in varying degrees, by difficulties in social interaction, verbal and nonverbal communication and repetitive behaviors. Though there are strengths and unique abilities associated with the disorder, autism is most often defined based on “deficits” and “symptoms” because the definition from the **American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders** (DSM) is science-based and the manual is used to describe disorders for diagnosis. With the May 2013 publication of the fifth edition of the DSM (commonly referred to as the DSM-5), all autism disorders were merged under one umbrella diagnosis of ASD. Previously, they were recognized as distinct subtypes, including autistic disorder, childhood disintegrative disorder, pervasive developmental disorder-not otherwise specified (PDD-NOS) and **Asperger Syndrome**. Individuals with well-established diagnoses of these disorders prior to the publication of the DSM-5 should now be given the diagnosis of autism spectrum disorder.

Under the current DSM-5, there are two domains where people with ASD must show persistent deficits. They include:

- 1. *persistent social communication and social interaction***
- 2. *restricted and repetitive patterns of behavior***

More specifically, people with ASD must demonstrate deficits (either in the past or in the present) in social-emotional reciprocity, nonverbal communicative behaviors used for social interaction, as well as deficits in developing, maintaining and understanding relationships. In addition, they must show at least two types of repetitive patterns of behavior including:



- ***stereotyped or repetitive motor movements***
- ***insistence on sameness or inflexible adherence to routines***
- ***highly restricted, fixated interests***
- ***hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of the environment***

The DSM-5 also added an additional category called **Social Communication Disorder (SCD)**. This allows for a diagnosis of disabilities in social communication, without the presence of repetitive behavior. SCD is a new diagnosis and much more research and information is needed to better understand it. There are currently few guidelines for the treatment of SCD. Until such guidelines become available, treatments that target social-communication, including many autism-specific interventions, should be provided to individuals with SCD.

To read the whole DSM-5 criteria, please visit autismspeaks.org/dsm-5.

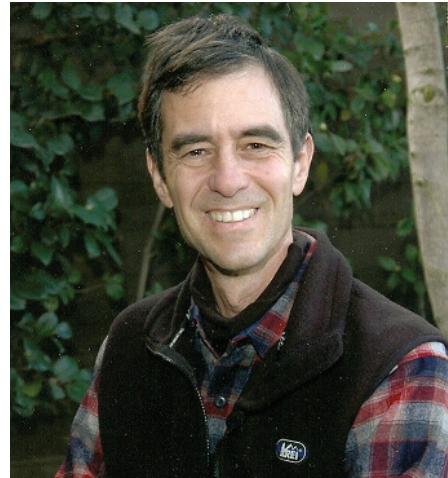
How Common is Autism?

While no studies have been able to confirm the prevalence rate for adults and more research is needed, autism statistics from the **U.S. Centers for Disease Control and Prevention** (CDC) released in March 2014 identify around 1 in 68 American children as on the autism spectrum – a ten-fold increase in prevalence in 40 years. Careful research shows that this increase is only partly explained by improved diagnosis and awareness. Studies also show that autism is four to five times more common among boys than girls. An estimated 1 out of 42 boys and 1 in 189 girls are diagnosed with autism in the United States.

ASD affects over 2 million individuals in the U.S. and tens of millions worldwide. Government autism statistics suggest that prevalence rates have increased 10 to 17% annually in recent years. There is no established explanation for this continuing increase, although improved diagnosis and environmental influences are two reasons often considered.

What Causes Autism?

Not long ago, the answer to this question would have been, “we have no idea.” Research is now starting to deliver the answers. First and foremost, we now know that there is no one cause of autism, just as there is no one type of autism. Over the last five years, scientists have identified a number of rare gene changes or mutations associated with autism. Research has identified more than 100 autism risk genes. In around 15% of cases, a specific genetic cause of a person’s autism can be identified. However, most cases involve a complex and variable combination of genetic risk and environmental factors that influence early brain development. In other words, in the presence of genetic predisposition to autism, a number of non-genetic or environmental influences further increase an individual’s risk.



“Half my life was a long hard struggle where ‘I was not playing with a full deck’ in terms of negotiating the world before my diagnosis. After my diagnosis, ‘the light bulb went on’ and I found a huge population just like me with the same struggles. At this point, my life started falling into place and over time, after my diagnosis, I gained a much better understanding of myself and the world around me.”

- Paul Nussbaum

Some factors that have been identified to increase the risk of autism include parental age, extreme prematurity, difficulties during birth, mothers exposed to high levels of pesticides and air pollution. It is important to keep in mind that these factors, by themselves, do not cause autism. Rather, in combination with genetic risk factors, they appear to modestly increase risk.

What are the Symptoms of Autism?

Autism affects the way an individual perceives the world and makes communication and social interaction different from those without autism, often leading to significant difficulties. ASD is characterized by social-interaction challenges, communication difficulties and a tendency to engage in repetitive behaviors. However, symptoms and their severity vary widely across these three core areas.

"It is sometimes said that if you know one person with autism, you know one person with autism."

- Stephen Shore

Social Symptoms

Individuals with autism tend to have difficulty interpreting what others are thinking and feeling. Subtle social cues such as eye rolling, shoulder shrugging or a grimace may convey little meaning to some people on the spectrum. Without this ability to accurately interpret gestures and facial expressions, or **nonverbal communication**, the social world can seem bewildering.

Many people with autism have similar difficulty seeing things from another person's perspective. This, in turn, can interfere with the ability to predict or understand another person's actions. It is also common – but not universal – for those with autism to have difficulty regulating emotions.

Communication Difficulties

At an early age, many children with autism experience significant language delays. However, some exhibit only slight delays or even develop precocious language and unusually large vocabularies – yet have difficulty sustaining conversations. Some children and adults with autism tend to carry on monologues on a favorite subject, giving others little chance to comment. In other words, the ordinary "give-and-take" of conversation proves difficult.



Repetitive Behaviors

Unusual repetitive behaviors and/or a tendency to engage in a restricted range of activities are another core symptom of autism. Some repetitive behaviors include arranging and rearranging objects or hand-flapping. Some people with autism are preoccupied with having household or other objects in a fixed order or place. It can prove extremely upsetting if something or someone disrupts the order. Many need and demand strict consistency in their environment and daily routine. Slight changes can be exceedingly stressful and lead to outbursts.

Repetitive behaviors can also take the form of intense preoccupations or obsessions. These extreme interests can prove all the more unusual for their content (e.g. machines, certain collectibles) or depth of knowledge (e.g. knowing and repeating astonishingly detailed information about astronomy). Adults with autism may develop tremendous interest in numbers, symbols, dates or science topics. Some of these interests can be a great asset in some circumstances, like employment, when harnessed in a productive way.

Executive Functioning and Theory of Mind

Individuals with autism often face challenges related to their ability to interpret certain social cues and skills. They may have difficulty processing large amounts of information and relating to others. Two core terms relating to these challenges are executive functioning and theory of mind.

Executive functioning includes skills such as organizing, planning, sustaining attention and inhibiting inappropriate responses. Difficulties in this area can manifest themselves in many different ways. Some may pay attention to minor details, but in turn struggle with seeing how these details fit into a bigger picture. Others have difficulty with complex thinking that requires holding more than one train of thought simultaneously. Others have difficulty maintaining their attention or organizing their thoughts and actions. Individuals with autism often face challenges using skills related to executive functioning like planning, sequencing and **self-regulation**.

Theory of mind can be summed up as a person's ability to understand and identify the thoughts, feelings and intentions of others. Individuals with autism can encounter degrees of difficulty recognizing and processing the feelings of others, which is sometimes referred to as "mind-blindness." As a result, people with autism may not realize if another person's behaviors are intentional or unintentional. This challenge often leads others to falsely believe that the individual does not show empathy or understand them, which can create great difficulty in social situations.



"I'm proud to say I have autism, as it has helped shape the man I am today. I have genuine confidence in myself and I know that others out there like me can achieve anything they set their minds to. I truly believe that people on the spectrum are some of the brightest individuals in our society and can offer so much in the workforce and in life."

- Eric Kirschner

Strengths and Challenges

*by Dr. Stephen Shore, Ed.D., Self Advocate, Author
and Assistant Professor at Adelphi University*

While some symptoms of autism discussed above may present challenges, others can be great strengths and advantages for people on the spectrum.

In the piece below, self-advocate and university professor Dr. Stephen Shore shares a list of strengths and challenges for those with autism. It is important to note that this is a general list. For every strength and challenge, you will often find examples in people that prove the opposite. For example, clumsiness is a common challenge. However, some with autism have significant strengths in movement and balance, perhaps as a dancer.

STRENGTHS	CHALLENGES
Attention to detail	Grasping the big picture
Often highly skilled in a particular area	Uneven set of skills
Deep study resulting in encyclopedic knowledge on areas of interest	Difficulty developing motivation to study areas of non interest
Tendency to be logical (helpful in decision-making where emotions may interfere)	Difficulty perceiving emotional state of others
Less concern for what others may think of them (can be a strength and a challenge), also known as independent thinking. Often results in novel “big picture” insights due to different ways of looking at things, ideas and concepts.	Difficulty perceiving unwritten rules of social interaction, but can learn these rules through direct instruction and social narratives such as Power Cards (Gagnon, 2004)
Usually visual processing (thinking in pictures or video)	Difficulty processing in non-favorite modalities such as aural, kinesthetic, etc.
Often very verbal (propensity for giving detailed descriptions may be useful in providing directions to lost persons)	Difficulty parsing out and summarizing important information for a conversation
Direct communication	Sensory integration problems where input may register unevenly, distorted and difficulty in screening out background noise
Loyalty	Generalization of skills and concepts
Honesty	Difficulty in expressing empathy in ways that others expect or understand
Nonjudgemental listening	Executive functioning resulting in difficulties planning long-term tasks

Medical and Psychiatric Issues that May Accompany Autism

Many children and adults diagnosed with autism have additional medical issues, including epilepsy, sleep dysfunction, gastrointestinal disorders or genetic disorders like Fragile X syndrome. As an adult, you may not have experienced these conditions that often arise at a very young age. But in addition to these disorders, many individuals with autism also have a variety of psychiatric and mental health challenges. Some research suggests that autism shares a genetic basis with several major psychiatric disorders, including attention deficit and hyperactivity disorder (ADHD), depression, bipolar disorder, anxiety and schizophrenia.

It is important to note that while some research suggests that just over two-thirds of children with autism have been diagnosed with one or more psychiatric disorders, healthcare professionals not familiar with autism tend to over-diagnose psychiatric problems in this group. This may be due to overlap between autism symptoms and those associated with psychiatric disorders. It is critical to receive accurate diagnoses of these conditions because medication or therapy to treat them may significantly improve autism symptoms and quality of life.

This section contains more information about some of these challenges faced by individuals on the autism spectrum.



“My anxiety can be so profound because of the fear of social expectations, sensory violations and unexpected changes. These are all so unbearable that I can feel frozen and unable to move forward. A simple request of me can sometimes be the core trigger of a meltdown.”

- Sondra Williams

Anxiety

Recent studies suggest that 30% of individuals with autism struggle with an ***anxiety disorder*** such as ***social phobia, separation anxiety, panic disorder*** and specific phobias. Some experts suspect that outward symptoms of anxiety – such as swearing and acting out – may be especially prominent among people on the spectrum. Even in the absence of an anxiety disorder, many individuals with autism have difficulty controlling anxiety when something triggers it. Anxiety can range from occasional, mild and completely understandable to unremitting, severe and irrational.

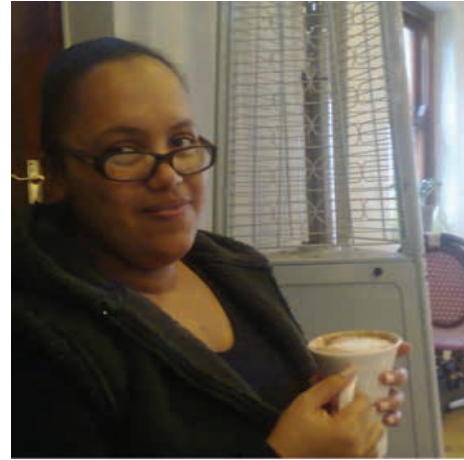
The Food and Drug Administration (FDA) has not approved any medication expressly for the treatment of anxiety in persons with autism, however some drugs approved to treat anxiety disorders in the general population are commonly used to help individuals with autism, such as Prozac and Zoloft. Medicines for relieving anxiety are best used in combination with counseling or other behavioral interventions. Individuals with autism may respond best to tailored treatments specific to those with both diagnoses.

If you suspect you may have an anxiety disorder, ask your doctor for recommendations for mental health professionals who may specialize in treating anxiety.

Attention Deficit Hyperactivity Disorder (ADHD)

According to the **National Institute of Mental Health (NIMH)**, ADHD affects about 4.1% of American adults age 18 and older and 9.0% of American children age 13 to 18. Those rates are estimated to be much higher among the autism population as many children and adults with autism struggle with **ADHD**. While there has not been a study on ADHD specifically among adults, recent studies suggest that 1 in 5 children on the spectrum also has ADHD. Another study found that just 1 in 10 children diagnosed with both autism and ADHD was receiving medication to relieve the ADHD symptoms, as many symptoms can likewise result from autism.

According to NIMH, inattention, hyperactivity and impulsivity are the key behaviors of ADHD. Inattention can result in individuals being easily distracted and having difficulty focusing on one thing, processing information, listening and following directions. Sometimes ADHD can go undiagnosed if symptoms are viewed as emotional problems, challenging behaviors or difficulties at school and in the workplace. Symptoms of hyperactivity may include fidgeting and squirming, difficulty with quiet tasks or activities and trouble sitting still during



"I suffer from anxiety and depression, so for a long time my 'strangeness' was attributed to these conditions. Since my diagnosis, I feel more in control now. I am in charge of my life and destiny. I feel that even though autism has its challenges, I have been more blessed than anything else."

- G.W.

meals, class or other activities. Impulsivity, a third hallmark of ADHD, can cause an individual to be very impatient, blurt out inappropriate comments, act without regard to consequences and have difficulty showing his or her emotions without restraint.

If you suspect you may have ADHD, it is important to be evaluated by a licensed mental health professional because treatment of the disorder, which often involves medication, can be very helpful in correcting these symptoms. To be diagnosed with ADHD as an adult, you must have symptoms that began in childhood and continued throughout adulthood. For some adults, a diagnosis can bring a sense of relief as it can help explain behaviors that have been present for most of their lives.

Depression/Bipolar Disorder

Individuals with autism may be particularly prone to **depression**, another disorder of the brain, in adolescence and adulthood. It can be difficult to diagnose, however, because many people on the spectrum are less likely to communicate the feelings used to diagnose depression. Seeing a mental health professional who has experience with autism is very important when seeking a depression diagnosis. Many people with depression never seek treatment, but when diagnosed properly, both cognitive behavioral therapy and medications can significantly improve the individual's feelings. If you feel you may be depressed, learn more about the signs and symptoms from the National Institute of Mental Health and ask your doctor for a referral to a mental health professional.

Bipolar disorder, once commonly called manic-depression, involves episodes of abnormally high energy alternating with depression over a period of time. Among individuals with autism, the symptoms of bipolar disorder commonly include abrupt increases in "pressured speech", pacing, impulsivity, irritability and insomnia. Some studies have found that as many as 27% of those with autism may have **bipolar disorder**, compared to its prevalence in the general population of around 4%. Psychiatrists often prescribe psychoactive medications to treat bipolar disorder. Studies suggest that mood-stabilizing medications may be safer treatments for those with autism.



Obsessive-Compulsive Disorder

Doctors or therapists unfamiliar with autism often mistake some of autism's core symptoms like repetitive behaviors and restricted interests with those of **obsessive-compulsive disorder** (OCD). But it is important to distinguish between the two. A distinguishing hallmark of OCD is that the compulsive thoughts or behavior cause anxiety. By contrast, persons with autism are not generally bothered by their repetitive behaviors and restricted interests, which tend to bring them comfort and enjoyment. The estimated prevalence of OCD in those with ASD ranges from 8 to 33% depending on the study, compared to the general population prevalence of 2%. For an OCD diagnosis, it is important that the mental health professional has knowledge of autism and its symptoms. As is the case with other disorders, a combination of medication and cognitive behavioral therapy can significantly improve the symptoms of OCD.

Sensory Integration Dysfunction

Many individuals with autism experience unusual responses to sensory stimuli or input due to difficulty in processing and integrating sensory information. Vision, hearing, touch, smell, taste, the sense of movement and the sense of position can all be affected, meaning while information is sensed normally, it may be perceived much differently. Stimuli that seem "normal" to others can be experienced as painful, unpleasant or confusing by an individual with autism. **Sensory Integration Dysfunction** (SID), the clinical term for this characteristic, can involve hypersensitivity, such as an inability to tolerate being touched, or hyposensitivity, such as an increased tolerance for pain or constant need for sensory stimulation. Treatment is usually addressed with sensory integration therapy, which is provided by certified occupational and physical therapists.

This Sounds Familiar . . . Now How Do I Get a Diagnosis?

If you feel you might have autism, it is important to find a mental health professional with experience diagnosing the disorder, preferably in other adults. Bring your concerns to your general practitioner and ask for recommendations for a psychiatrist, psychologist or social worker who can help you. It may help to bring a list of the symptoms of autism you feel you may have, including examples of some of the behaviors and feelings that trigger your concerns. You can also try searching the **Autism Speaks Resource Guide** for mental health professionals in your area at autismspeaks.org/resource-guide. While some may only diagnose children, they may be able to point you in the right direction.



"Autistic people like me have many sensory processing issues that stand in the way of being flexible. People with autism can be extremely sensitive to noise, lights, smells and many times touch. I need direct instruction about what the rules of expected behavior are in the different environments. Kind are those who are truly patient."

- Jeremy Sicile-Kira

How Do I Get Evaluated as an Adult If I Suspect I Have Autism?

by David Beversdorf, Ph.D., neurologist at the University of Missouri's Thompson Center for Autism and Neurodevelopmental Disabilities

With awareness of autism so high today, it's no longer as common for an autism diagnosis to be overlooked in childhood. However, this wasn't always the case. As a result, it's not infrequent that I see teens and adults seeking a diagnosis.

Evaluating autism in a previously undiagnosed adult can be challenging. And yes, it's true that the standardized diagnostic checklists we commonly use are designed for children. There are no established diagnostic tests for ASD in adults. However, I'm glad to report that they are currently in development.

Conducting an Adult Evaluation

Because of these limitations, the evaluation of an adult has to lean heavily on direct observation. This will be in the context of a discussion between the clinician and the patient about current challenges in the areas of social interaction and communication, sensory issues and restricted interests or repetitive behaviors.

However, some higher functioning adults on the autism spectrum become very resourceful in developing strategies to compensate for their disabilities. Clearly, this makes a diagnosis based on observation much more difficult. But diagnosis remains important even when for those who have learned to hide their symptoms because they may still struggle in their everyday lives and interactions.

In these cases, it's important to explore the lifelong presence of related developmental issues. In particular, it's critical to get detailed information about early childhood. Sometimes this clearly reveals an early development that fits with a diagnosis of ASD.

While our diagnostic checklists are designed for children, I find that they can be useful as we explore an adult's childhood development. In particular, I sometimes interview older relatives – such as parents – who can recall the patient's early childhood in some detail. Often they can answer questions from diagnostic checklists and, so, inform a possible



diagnosis. Clearly, this is not possible when there isn't an older relative available for a reliable report.

Sometimes, a person's early development did not have any features suggestive of autism. Instead, they began struggling with social withdrawal and related issues in their teens or adulthood. This suggests a cognitive or mental health issue other than ASD.

Finding Someone Qualified to Evaluate Adults with ASD

Currently, there are relatively few clinicians who specialize in evaluating and treating adults with autism. Nor do we have established criteria to objectively judge such qualifications.

In my opinion, your best bet may be a developmental pediatrician, child psychiatrist or pediatric neurologist who is both experienced in evaluating autism in children and open to seeing older patients. If she or he does not feel qualified to evaluate an adult, he or she may have a respected colleague who would be.

Otherwise I would recommend contacting an established and respected autism center in your area. Examples include the centers in the **Autism Speaks Autism Treatment Network**. To locate an AS-ATN near you, visit autismspeaks.org/ATN. This will provide you with the assurance that the clinician has agreed to adhere to the center's high standards for care for patients with autism, regardless of age.

Why Do I Need a Diagnosis?

You may be wondering why you need an autism diagnosis, especially if you have lived without one for many years in adulthood. Many young adults and adults who suspect they may have autism are afraid or unwilling to seek an official diagnosis because of the stigma they may feel is associated with the disorder. However, as autism awareness increases rapidly around the world, many are beginning to see the strengths and unique abilities of individuals on the spectrum.

An official diagnosis can help answer questions you may have had about yourself and your behavior for many years. For some, it can be a relief to know that these behaviors can now be explained with the diagnosis. It can also help you access the treatment and services that will help improve your symptoms and help you overcome the challenges you may have faced during the years before a diagnosis, as a diagnosis is often required to access services. A diagnosis can also lead you to seek out autism-specific supports that can help you along your journey with autism, such as support groups and social skills training. Getting a diagnosis can also increase self-awareness which can help you focus on your strengths and work around areas of challenge.

Support groups have been found to be very helpful for adults diagnosed with autism. Search the **Autism Speaks Online Resource Guide** for Support Groups near you at autismspeaks.org/resource-guide.



The National Alliance on Mental Illness (NAMI) helps explain how an autism diagnosis can help you as an adult:

“Diagnosis as an adult can lead to a variety of benefits. You can gain a better understanding of yourself. Many people have suffered from mental health problems and/or have been misdiagnosed as having mental health problems such as schizophrenia. A firm diagnosis can be a relief because it allows you to learn about your condition and understand where and why you have difficulties for the first time. Others will also gain a better understanding as it will be easier for them to empathize with your position once they learn there is a reason for your difficulties. It is also helpful to meet others within the community with ASDs by learning about their experiences and sharing your own. Support is a good step in seeking treatment and relieving anxieties, helping to maintain a healthier lifestyle while dealing with this disorder.”

My Story: Diagnosed with Autism at 34

by *Samantha Ranaghan*

My whole life I thought there was something wrong with me. My diagnosis changed those thoughts. When I learned about my diagnosis, I knew nothing was wrong with me...I knew that I had something very special about me and my life was about to change.

It was two weeks after my 34th birthday when I heard the words: "you're on the spectrum." As soon as I heard those four words, my body collapsed into my mom's arms. My mom and my stepdad were both in the room with me and you could feel the relief that went out the window. I remember walking out of work two days after my official diagnosis after a long day and stopping in my steps in the middle of the parking lot thinking to myself, "I feel normal." Why, after all these years, did I finally feel "normal"?

I'm still trying to figure out what this all means. All I know for sure is that I finally feel whole and as strange as this might sound, my life makes sense now. I don't feel out of place and awkward. I guess the greatest thing that came out of this is how I've been feeling my whole life has finally been validated.

When I tell people I am a high functioning autistic, their reactions are mostly, "Wow, I would never have guessed that. You don't act like you have autism." I want to say back to them, "How am I supposed to act?" You can't tell a person is on the spectrum by just looking at them. As I try to explain what being on the spectrum means, I can see them start to get an interest in what I'm saying and they start asking me questions. I answer them as best as I can by using examples of my own life.

While I'm glad that I finally know I'm autistic, I sometimes wonder what my life would have been if I had been diagnosed as a child instead of in my early thirties. I wonder in my own thoughts if I was a child now with the same course, would I be diagnosed? I didn't speak until I was four years old and spent many of my early years in speech therapy. I've been sensitive to loud noises and I now understand my over sensory issues. No one suspected autism. In 7th grade, I was diagnosed with Dyslexia and in my early twenties, it was ADHD. The funny thing is I never really felt as though I had either of those. Throughout my twenties, I saw many therapists that never thought of the idea of autism. It was so frustrating for me not knowing why I was and felt so different. No one seemed to know.



While I was going to my last therapist, it was my mom who brought up the idea of me having Asperger's Syndrome. She had been reading about it and she saw some of the traits that she saw in me...especially the social aspect of it. As my mom brought this to my attention, I started to do some research on my own. The more I read about Asperger's/autism, the more I saw myself in those words. Could this be the answer that I had been looking for all my life?

I think I had two things working against me growing up. The first was that autism wasn't as well-known as it is today. Second, it was and still is in a small way considered to be a boys thing. While boys on the spectrum tend to become rowdy, girls on the spectrum tend to introvert and are labeled shy and quiet. That's all I heard growing up...that I was shy and quiet. It annoyed the heck out of me.

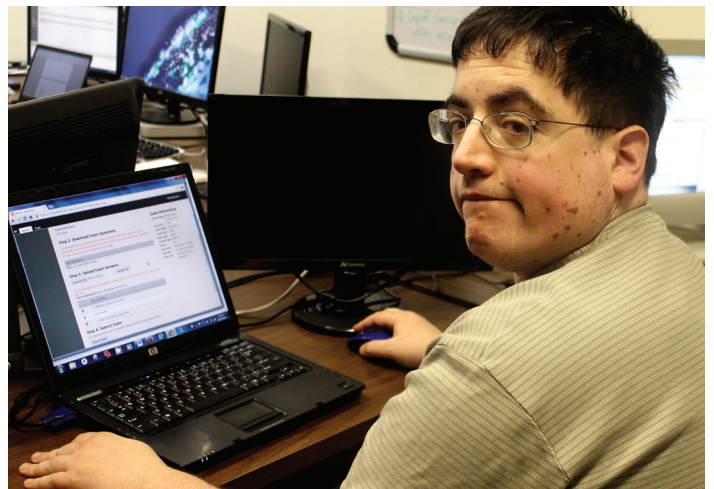
I now feel that I am understood much better by the people in my life. It's a struggle everyday trying to figure out this thing called life as someone who is on the spectrum, but with the support of my family and friends, I know I can become a better person. Just the other day, someone very close to me mentioned how far I have come in such a short time. I still get frustrated about little things I feel I shouldn't do and my sensory sensitivity, but I am learning how to live as a female on the autism spectrum.

Now as my 35th birthday and the one year anniversary of my diagnosis approaches, I could not be any happier with whom I am. The past year has been a roller coaster ride, but I can finally truly say that I am comfortable in my own skin. It's a great feeling!

How is Autism Treated?

Autism is often treated differently in adults than in children. **Applied Behavior Analysis** (ABA), **Verbal Behavior therapy** and **Cognitive Behavior Therapy** (CBT) are just a few of the therapies out there that are used to treat children on the spectrum, and in some cases adults. These treatments involve focusing on the principles that explain how learning takes place and teaching children as young as two the basics of communication and social interaction. Far more research has gone into effective treatments for children with autism, but as the population of adults on the spectrum continues to rise, more studies are beginning to focus on the best ways to help young adults and adults diagnosed with autism.

When thinking about treatment for autism, it is important to remember that each individual with autism is very unique, and as a result, a treatment that works for one adult on the spectrum may not be helpful at all for another. When looking for treatment options, be sure you fully understand both your strengths and your challenges so you can build on those abilities and improve upon areas that may be difficult for you. The more you understand your needs, the better you and your health care provider can tailor treatment to these needs and the greater the strides you can make.



As an Adult with Autism, How Can I Access Appropriate and Effective Treatment?

by Megan Farley, Ph.D., psychologist at the Waisman Center for Developmental Disabilities at the University of Wisconsin

The question of what treatments can help adults with Autism is both a great question and a difficult one to answer. Currently we have far too little in the way of evidence-based treatments for adults with autism spectrum disorder (ASD).

We have a small handful of treatment strategies that have been clinically evaluated and found to be effective for helping adolescents and young adults with autism. At the University of Texas, for example, researchers have successfully used a virtual reality training program to improve social skills among young adults with autism. The PEERS program has likewise shown promise for teaching social skills to young adults with autism. Learn more about PEERS at semel.ucla.edu/peers.

General Guidelines for Finding the Help You Need

Beyond autism-specific programs and therapies, I can offer you some general recommendations based on my clinical experience, that of my colleagues and that of the many adults with autism with whom I've had the privilege to work. First, it's important to consider what type of help you need. Every individual with autism is unique in terms of his or her challenges and strengths.

Typically adults with autism come to a mental health clinic because they're struggling with one or more issues. Common autism-related challenges include social isolation, finding and keeping a job or a romantic partner, anxiety or mood problems or an inability to organize one's life.

For mood or anxiety problems, I recommend seeing a psychiatrist for a medical consultation and a psychologist or social worker for individual therapy or group counseling. Ideally you want someone experienced in helping adults who have autism. So ask for such expertise when you contact a therapist or mental health clinic.

Beyond Autism-Specific Therapy

Unfortunately, not every community has adult autism specialists. If yours does not, I recommend finding a counselor who seems sincerely interested in learning more about autism in general and your experience

in particular. In addition, it's important to understand that both psychologists and social workers can vary widely in the approach they use in counseling. In my experience, most individuals with autism do best with therapy that takes a concrete, skill-building approach. Cognitive behavioral therapy (CBT) is a good example of this type of therapy.

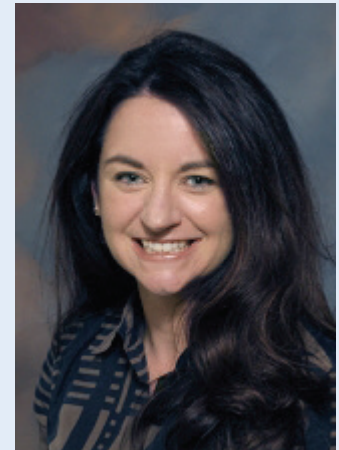
I also suggest that you consider bringing along someone who knows and cares about you for at least part of the therapy session. In my experience, many adults with autism have difficulty explaining their challenges. Someone who knows you well may be able to help you and the therapist zero in on the behaviors that are creating problems and develop strategies to address them.

You might also want to consider group therapy or classes for those who have difficulty with social interactions. Learning social skills in a group can be particularly helpful because participants can share observations and suggestions. Your therapist or social worker may be able to recommend such a group in your community.

If you're seeking help finding and keeping a job, you can find additional help through your state's vocational rehabilitation (VR) agency. These agencies have the mission of helping adults with disabilities – including autism – prepare for and find appropriate employment. Also, the ***Autism Speaks Employment Tool Kit*** was designed to help you research, find and keep employment.

Finally, I recommend you look to the community of adults with autism. There are several good websites that provide information and forums for adults with ASD. One such site is ***WrongPlanet***. Another is the ***Global & Regional Asperger Syndrome Partnership*** (GRASP).

Thanks for your question. I hope these tips prove helpful to you and other readers.



From Denial to Acceptance: I was Diagnosed with Autism at 24

by John Taylor
**Autism Speaks Family Services
Database Coordinator**



Sometime when I was in my early 20s, my father showed my mother a magazine feature he read about Asperger syndrome and said something like, “Doesn’t this remind you of John?” She agreed and took me to see some professionals at the Seaver Autism Center at Mt. Sinai Hospital in New York. After a series of tests, they diagnosed me with autism at the age of 24.

Growing up, I often excelled in about every subject other than math and for a few years was reading well above my grade level. However, I also had an IEP which included being placed in a Special Ed class for 1 year in elementary school and extra time on tests until I graduated high school. Depending on what age, I had intense interests: trains, basketball, linguistics, etc. I also struggled to find a job even after graduating college. These are some of the reasons that my mother brought me in to be diagnosed.

I was in denial at first. To this day, I haven’t seen the movie Rain Man, but my perception of autism was mainly shaped by what others had told me about the movie. Basically autism made you some sort of socially inept mute (or almost mute) savant. I was intellectually gifted and often struggled socially (a nerd you could say), but certainly not like Dustin Hoffman’s character.

As they say, “If you’ve met one person with autism, you’ve met one person with autism”. I slowly came to accept my diagnosis by connecting with others on the spectrum. I started attending social skills and support groups. On the Internet, I discovered the autism blogosphere and YouTube videos by people with Autism. I found their personal experiences about life on the autism spectrum to be a lot more relatable than what someone off the spectrum, however educated about the facts, could tell me.

What are My Rights?

Another benefit to obtaining an official diagnosis is eligibility for supports, services, treatment and protection under various laws. Below is a list of just a few of these protections that can help you address some of the challenges you may be facing as an adult with autism at work, at home or in the community.

Americans with Disabilities Act

The ***Americans with Disabilities Act*** (ADA) prohibits discrimination and ensures equal opportunity for persons with disabilities in employment, state and local government services, public accommodations, commercial facilities and transportation. In terms of employment, Title I of the ADA applies to public and private employers with 15 or more employees and prohibits discrimination based on disability when it comes to any aspect of employment, including hiring, firing, pay, job assignments, promotions, layoffs, training, fringe benefits and more.

The law also requires an employer to provide reasonable accommodation to an employee or applicant with a disability, unless doing so would cause significant difficulty or expense for the employer. If you do receive an official diagnosis, it is important to read about your rights under the ADA, especially if you feel you have been treated unfairly or even discriminated against in the workplace. If there is a “reasonable” accommodation related to the challenges you face as an individual with autism that could be put into place that may help better support you in your job, a diagnosis may help you secure that accommodation.

Learn more at ada.gov. The ***Job Accommodation Network***, a service of the ***U.S. Department of Labor’s Office of Disability Employment Policy***, is another tool that offers accommodation ideas specific to autism at askjan.org.

Vocational Rehabilitation Services

With an autism diagnosis, you could also be eligible to receive services from vocational rehabilitation programs which coordinate and provide counseling, evaluation and job placement services for people with disabilities. Each state has a ***vocational rehabilitation*** (Voc Rehab or VR) agency that provides employment service supports to people with disabilities, including autism. VR agencies can give you vocational assessments that lead up to the development of an ***Individual Plan for Employment*** (IPE), under which a variety of employment-related services can be provided, including training, counseling, job placement and supported employment. You can find the contact information for your state VR office at www2.ed.gov/svr.

Medicaid Home and Community Based Services

You will also want to contact the developmental disability agency in your state to see if you are eligible for services through the ***Medicaid waiver*** in your state. State and local DD services operate under a variety of different names across the country. Frequently the funding for these services comes through the ***Home and Community Based Services*** (HCBS) waivers, which are made available through Medicaid. Medicaid can play a critical role providing both health care and long term services and supports that help meet ongoing needs of adults with autism. HCBS provide opportunities for individuals benefitting from Medicaid to receive services in their own home or community, such as case management, adult day health services, both day and residential habilitation, home health aides and more. The requirements for gaining access to these services vary from state to state. Contact your local or state agency to see if you may be eligible. For more information, visit www.medicaid.gov.

“I’m still trying to figure out what this all means. All I know for sure is that I finally feel whole and as strange as this might sound, my life makes sense now. I don’t feel out of place and awkward. I guess the greatest thing that came out of this is how I’ve been feeling my whole life has finally been validated.”

- Samantha Ranaghan

Social Security

If you require a certain amount of supports as a result of your autism diagnosis, you also may be eligible for social security benefits. Many individuals with disabilities who are unable to secure competitive employment rely on Social Security benefits for the majority of their income. **Social Security Disability Insurance (SSDI)** and **Supplemental Security Income (SSI)** disability programs are the largest federal programs providing assistance to people with disabilities, both of which are administered by the Social Security Administration. These programs are only available for individuals with disabilities who meet certain medical criteria. If you are eligible, SSDI pays benefits to you and certain members of your family if you are “insured,” meaning that you worked long enough and paid Social Security taxes. SSI pays benefits to individuals with disabilities who have limited income and resources to help them meet basic needs like food and shelter.

Once you have an official diagnosis, it is important to schedule a consultation with a Social Security disability representative in order to understand your specific needs and the benefits you are entitled to receive. You can also learn about benefits you may be able to get from Social Security by using the **Benefit Eligibility Screening Tool (BEST)**.

Social Security also offers some work incentives in order to allow you to work and keep your benefits, which may apply to you. These include a **Plan for Achieving Self Support (PASS)**, the **Impairment-Related Work Expense (IRWE)** and the **Ticket to Work** program. More information can be found in the benefits section of the [Autism Speaks Employment Tool Kit](#).

Section 504 of the Rehabilitation Act of 1973

Section 504 is a national law that protects qualified individuals from discrimination based on their disability. It applies to employers, public colleges and universities and other organizations that receive financial assistance from any federal department or agency. For purposes of employment, qualified individuals with disabilities are persons who, with



reasonable accommodation, can perform the essential functions of the job for which they have applied or have been hired to perform.

Under Section 504, a recipient of federal financial assistance may not, on the basis of a disability, deny qualified individuals the opportunity to participate in or benefit from federally funded programs, services or other benefits or deny employment opportunities for which they are otherwise entitled or qualified. Section 504 is also the law that requires school districts to provide a “free appropriate public education” to each student with a disability, regardless of the nature or severity. While ADA also protects individuals with disabilities against discrimination, Section 504 goes a step further by requiring organizations receiving federal funds to make their programs accessible to these individuals. If you have an official diagnosis of autism, you are able to seek protection and accommodations in all federally funded programs – employment, housing, community living, etc. – under this law.

Disclosure . . . To Tell or Not to Tell?

Many adults with autism find it difficult to share their diagnosis with others, even those closest to them. This can be partially due to the stigma many people feel is associated with autism. Whether or not to disclose your diagnosis is a very personal decision that is of course entirely up to you.

Some adults have found it helpful to share the new information with their families and friends because it may help explain their behaviors and past experiences that may have been challenging. Just like your diagnosis may have helped answer questions you may have had about yourself, it can also help clarify questions others in your life may have wondered about. For example, telling your sister you have been diagnosed with autism will likely help her understand why you haven't understood her sense of humor or why you would much prefer to talk about cars than the latest movies that she might find interesting. Telling her will also allow her to do her own research about autism so she can learn how to support you and help you on your journey after your diagnosis. You can even share this tool kit with her!

In terms of the workplace, the issue of disclosure can be complicated. You may feel that your employer or a prospective employer will judge you or label you if you tell them you have been diagnosed with autism. But as is the case with family members, disclosing your autism diagnosis can also help increase the supports available to you. For example, if there is an accommodation that could be helpful to you such as a desk in a quiet area or a couple additional breaks throughout the day, revealing your diagnosis to your boss can help you secure that accommodation, and as a result, allow you to be more successful at work. Your employer or human resources officer is required to keep your diagnosis confidential if you'd rather keep that information between the two of you rather than something your coworkers are also aware of.



"People do not fully understand the person I am, and therefore treat me like I am different. I had to find a way to help my social interactions with people without being scared to socialize. Then I found the solution, and it was simple. I spoke out about my autism, and told my friends, peers and professors about it. After I did that people accepted me for who I am, and I have lifted a heavy burden off my back."

- David Powell

There are pros and cons to disclosing your autism and only you can decide what you feel is best for you. Try making a list of both sides to determine what will make you as happy and as supported as possible.

Conclusion

Whether or not you have received an autism diagnosis, we hope this kit has provided you with the tools and information you need to move forward. If after reading this, you feel your suspicions have been confirmed, be sure to seek out your health care professional for a referral and that when you do so, you are able to clearly explain why you feel this way. Bring this tool with you to share with your doctor or mental health professional or visit autismspeaks.org/what-autism and print out information that can help back up your thoughts.

If you do receive an autism diagnosis, keep in mind that you are not alone. There is help out there and the resources and supports available to adults with autism are growing every day. Visit the adult services page of the Autism Speaks website at autismspeaks.org/audience/adults to download our adult-specific resources and read news and blogs on topics related to adults on the spectrum. The **Autism Speaks Resource Guide**, which you can access at autismspeaks.org/resource-guide, is a great first step in looking for resources and supports in your area. While some of the resources may be children-focused, it is likely that local organizations and service providers will be able to refer you to other services that can meet your specific needs.

If you have any questions or additional concerns, or are looking for more information and resources, please feel free to call or email the **Autism Speaks Autism Response Team** for assistance at 888-288-4762 (en Español 888-772-9050) or familyservices@autismspeaks.org. This team of dedicated professionals is happy to help you as you take the next steps on your journey with autism.



“Everyone has challenges. But having autism has made my life amazing in so many ways. What I have is a part of who I am. Autism hasn’t defined me. I’ve defined autism. I’ve never seen myself labeled by my diagnosis.”

- Kerry Magro

Glossary

Americans with Disabilities Act (ADA) is the US law that ensures rights of persons with disabilities with regard to employment and other issues.

American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM) is the standard classification of mental disorders used by mental health professionals in the United States. The current edition, the DSM-5 that was released in May 2013, merged all autism disorders into one umbrella diagnosis of ASD.

Anxiety disorder is a disorder that affects an estimated 30% of individuals with autism and includes social phobia, separation anxiety, panic disorder and specific phobias. An individual suffering from anxiety may experience strong internal sensations of tension such as a racing heart, muscular tensions and stomachache.

Applied Behavior Analysis (ABA) is a style of teaching using series of trials to shape desired behavior or response. Skills are broken into small components and taught to child through a system of reinforcement.

Asperger Syndrome is a developmental disorder on the Autism spectrum defined by impairments in communication and social development and by repetitive interests and behaviors, without a significant delay in language and cognitive development. The diagnosis is no longer used in DSM5, but DSM5 indicates that individuals with a "well-established diagnosis" of these conditions "should be given the diagnosis of autism spectrum disorder."

Attention Deficit Hyperactivity Disorder (ADHD) is a disorder that affects approximately 1 in 5 children with autism (statistics are not currently available for the prevalence in adults with autism). Symptoms include chronic problems with inattention, impulsivity and hyperactivity.

Autism Spectrum Disorder (ASD) and autism are both general terms for a group of complex disorders of brain development. These disorders are characterized, in varying degrees, by difficulties in social interaction, verbal and nonverbal communication and repetitive behaviors. With the May 2013 publication of the DSM-5 diagnostic manual, all autism disorders were merged into one umbrella diagnosis of ASD.

Benefit Eligibility Screening Tool (BEST) is a tool from the Social Security Administration that helps you find out if you can get benefits that Social Security administers based on answers to questions.

Bipolar disorder is a psychiatric condition once commonly called manic-depression that involves episodes of abnormally high-energy alternating with depression over a period of time.

Cognitive Behavioral Therapy (CBT) is a form of treatment that focuses on examining the relationships between thoughts, feelings and behaviors and is used primarily to help individuals with autism regulate their emotions, develop impulse control and improve their behavior as a result.

Depression is a common but serious illness that involves sadness that interferes with daily life. People with depression may experience a lack of interest and pleasure in daily activities, lack of energy, feelings of worthlessness or excessive guilt and recurrent thoughts of death or suicide. Fortunately, a combination of therapy and antidepressant medication can help ensure recovery.

Executive functioning is a core term that relates to the challenges faced by individuals with autism, including skills such as organizing, planning, sustaining attention and inhibiting inappropriate responses.

Food and Drug Administration (FDA) is a federal agency of the United States Department of Health and Human Services that is responsible for protecting the public health by ensuring the safety, efficacy and security of human and veterinary drugs, biological products, medical devices and the nation's food supply, among others.

Home and Community Based Services (HCBS) provide opportunities for Medicaid beneficiaries to receive services in their own home or community. These programs serve a variety of targeted populations groups, such as people with mental illnesses, intellectual or developmental disabilities, and/or physical disabilities.

Impairment Related Work Expense (IRWE) is a Social Security work incentive that can be used to pay for items that are necessary to work and are incurred due to the individual's disability.

Individual Plan for Employment (IPE) is a written document developed and implemented in a manner that gives eligible individuals the opportunity to exercise informed choice consistent with selecting an employment outcome including the employment setting, specific Vocational Rehabilitation services needed to achieve the employment outcome, including the setting in which services will be provided, the entity or entities that will provide the services.

Job Accommodation Network (JAN) is the leading source of free, expert and confidential guidance on workplace accommodations and disability employment issues. JAN helps people with disabilities enhance their employability and shows employers how to capitalize on the value and talent that people with disabilities add to the workplace.

Medicaid waiver is a program that states may choose to use to provide home and community-based services (HCBS), like respite and habilitation, to individuals with disabilities who need a certain level of care; all states operate Medicaid waivers to provide HCBS but the eligibility rules and services vary across waiver programs and most states have long waiting lists for these programs.

National Institute of Mental Health (NIMH), part of the National Institutes of Health (NIH), is the primary agency of the U.S. government responsibly for biomedical and health-related research.

Nonverbal communication is the process of communicating by sending and receiving wordless (mostly visual) cues between people, including postures, facial expressions, gestures and eye gaze.

Obsessive-compulsive disorder (OCD) is a psychiatric disorder characterized by unreasonable thoughts and fears (obsessions) that lead individuals to do repetitive behaviors (compulsions).

Panic disorder is a psychiatric condition diagnosed in people who experience spontaneous seemingly out-of-the-blue panic attacks and are preoccupied with the fear of a recurring attack.

Plan for Achieving Self Support (PASS) is a provision of the Supplemental Security Income (SSI) section of the Social Security Act that enables people with disabilities to return to work. PASS allows its users to set aside money and/or items in service of a particular work goal.

Rehabilitation Act of 1973 is an act of Congress that prohibits discrimination on the basis of disability in programs conducted by federal agencies, in programs receiving federal financial assistance, in federal employment, and in the employment practices of federal contractors. Section 504 of the Act created and extended civil rights protections to people with disabilities.

Self-regulation and self-control are related but not the same. Self-regulation refers to both conscious and unconscious processes that have an impact on self-control, but regulatory activities take place more or less constantly to allow us to participate in society, work and family life. Self-control is a conscious activity.

Sensory Integration Dysfunction (SID) is a neurological disorder causing difficulties processing information from the five classic senses (vision, hearing, touch, smell and taste), sense of movement (vestibular system) and positional sense (proprioception). Sensory information is sensed normally, but perceived abnormally. SID may be a disorder on its own or with other neurological conditions.

Separation anxiety is a psychological condition in which an individual experiences excessive anxiety regarding separation from home or from people to whom the individual has a strong emotional attachment.

Social Communication Disorder (SCD) is a new diagnostic category established in the DSM-5 that applies to individuals who have deficits in the social use of language, but do not have the restricted interests or repetitive behavior you see in those with autism spectrum disorders.

Social phobia is a strong fear of being judged by others and of being embarrassed, that can be so strong that it gets in the way of going to work or school or doing other every day things.

Social Security Disability Insurance (SSDI) is a Social Security Administration program that provides benefits to people with disabilities (including those with visual impairments) who are “insured” by workers’ contributions to the Social Security trust fund, based on one’s wage earnings (or those of one’s spouse or parents) as required by the Federal Insurance Contributions Act (FICA).

Supplemental Security Income (SSI) is a program of the Social Security Administration that pays benefits to people with disabilities who have limited income and resources. It is designed to help aged, blind, and disabled people who have little or no income. And it provides cash to meet basic needs for food, clothing, and shelter.

Theory of mind is another core term that relates to the challenges faced by individuals with autism and refers to one’s ability to perceive how others think and feel and how that relates to oneself.

Ticket to Work program is another program from the SSA a type of support program that allows a person with a disability to take a Ticket to purchase support from an approved employment provider as part of the Ticket to Work & Workforce Investment Act. Organizations that are selected to participate in the Ticket to Work program must provide people with disabilities the opportunity and support to prepare for, obtain and keep jobs that will realistically enable you to achieve independence.

U.S. Centers for Disease Control and Prevention (CDC) is the leading national public health institute of the United States. Its main goal is to protect public health and safety and is responsible for calculating the autism prevalence numbers, which as of 2014, stand at 1 in 68 children, including 1 in 42 boys.

U.S. Department of Labor's Office of Disability Employment Policy (ODEP) is a division of the U.S. Department of Labor dedicated to developing and influencing policies and practices that increase the number and quality of employment opportunities for people with disabilities.

Verbal Behavior therapy (VB) is a method of Applied Behavioral Analysis (ABA) for teaching individuals with autism, based on B.F. Skinner's description of the system of language.

Vocational rehabilitation (VR, voc rehab) is a federal and state-funded program providing services to help individuals with disabilities enter or return to employment. It is designed to assist individuals of work age with physical and/or mental disabilities compete successfully with others in earning a living.

Resources

AUTISM SPEAKS RESOURCES

Autism Speaks Employment Tool Kit

autismspeaks.org/family-services/tool-kits/employment

Autism in the Workplace Resources

autismspeaks.org/family-services/adult-services/autism-and-employment

Autism Speaks Housing and Residential Supports Tool Kit

autismspeaks.org/family-services/housing-and-community-living

Autism Speaks Postsecondary Educational Opportunities Guide

autismspeaks.org/family-services/tool-kits/postsecondary

Autism Speaks Adult Services

autismspeaks.org/audience/adults

Autism Speaks Resource Library – Books

autismspeaks.org/family-services/resource-library/books

WEBSITES

Autistic Global Initiative: A Project of the Autism Research Institute

autism.com/tests

Wrong Planet: Asperger & Autism Forum Community

wrongplanet.net

GRASP

grasp.org

Autism Hangout

youtube.com/user/autismhangout

Carly's Café: Experience Autism through Carly's Eyes

carlyscafe.com

BOOKS

Beyond the Wall: Personal Experiences with Autism and Asperger Syndrome

by Stephen M. Shore

Defining Autism from the Heart: From Nonverbal to National Speaker

by Kerry Magro

Life and Love: Positive Strategies for Autistic Adults

by Zosia Zaks

Thinking in Pictures: My Life with Autism

by Temple Grandin

**Have more questions or need assistance?
Please contact the Autism Response Team for
information, resources and tools.**

TOLL FREE: 888-AUTISM2 (288-4762)

EN ESPAÑOL: 888-772-9050

Email: FAMILYSERVICES@AUTISMSPEAKS.ORG

WWW.AUTISMSPEAKS.ORG

Text ART to 30644



AUTISM SPEAKS®
It's time to listen.

www.AutismSpeaks.org

Autism Speaks is the world's leading autism science and advocacy organization. It is dedicated to funding research into the causes, prevention, treatments and a cure for autism; increasing awareness of autism spectrum disorders; and advocating for the needs of individuals with autism and their families. Autism Speaks was founded in February 2005 by Suzanne and Bob Wright, the grandparents of a child with autism. Mr. Wright is the former vice chairman of General Electric and chief executive officer of NBC and NBC Universal. Since its inception, Autism Speaks has committed more than \$500 million to its mission, the majority in science and medical research. Each year Walk Now for Autism Speaks events are held in more than 100 cities across North America. On the global front, Autism Speaks has established partnerships in more than 40 countries on five continents to foster international research, services and awareness.

To learn more about Autism Speaks, please visit AutismSpeaks.org.



Adult Diagnosis Package

July 2020
Stars for Life Foundation
www.starsforlife.com
(902)- 894-9286

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**Investment
Readiness**
Program

Disclaimer

This material is prepared by the Stars for Life Foundation for Autism with the intention that it provides general and specific information which is current when first published, to aid individuals with and searching for a diagnosis of autism spectrum disorder. Services and resources stated should be obtained by each individual and or by family acting on behalf of the individual. While every care has been taken in the preparation of this material, the Stars for Life Foundation for Autism cannot accept responsibility for any errors or omissions in the material, including those caused by negligence or harm during the caring of any acquired services. The Stars for Life Foundation for Autism is not responsible for the accuracy of information contained on other websites accessed by links from this website.

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What is Autism?

Autism, or autism spectrum disorder (ASD), refers to a range of conditions characterized by challenges with social skills, repetitive behaviors, speech, and nonverbal communication, as well as by unique strengths and differences. We now know that there is not one autism but many types.

The term “spectrum” reflects the wide variation in challenges and strengths possessed by each person with autism.

Autism’s most obvious signs tend to appear between 2 and 3 years of age. In some cases, it can be diagnosed as early as 18 months. Some developmental delays associated with autism can be identified and addressed even earlier.

Adults with autism who are high functioning may have only mild challenges, while others may have more severe, such as impaired spoken language. ASD affects every individual differently.

ASD symptoms can interfere with everyday life, regardless of the severity or how they are exhibited.

What Causes Autism?

There is currently no known cause for autism spectrum disorder. However, scientists believe that some genetic and environmental aspects play a role in the cause of ASD. Genetically, it is believed that autism could be a genetic disorder or a genetic mutation in early stages of pregnancy. Environmentally speaking, there is some increased risk with advanced parent age, pregnancies spaced less than one year apart, and pregnancies with complications including low weight birth, multiple pregnancies (twins, triplets, etc.), and extra premature births.

Executive Functioning

Many people with autism spectrum disorder struggle with executive functioning. Executive functioning is the process that aids people in their ability to mentally process a plan, focus their attention, remember instructions, and juggle multiple tasks successfully. They also struggle with the ability to sequence information, regulate emotions, and are not able to see the big picture while focusing on small details. Executive functioning can be divided into two categories, organization, and regulation. Organization can be classified as gathering and structuring information for evaluation. Regulation refers to recognizing your surroundings and changing your behavior to respond appropriately.

The following areas that individuals with executive functioning difficulties struggle with are:

Impulse Control

Individuals may be very impulsive and may not think before speaking or acting.

Accommodations to improve Impulse Control:

- Playing an instrument/singing
- Video games
- Role-play
- Individualized toolbox
- Yoga
- The STAR technique: Stop, Think, Act, Review.

Flexibility

Individuals may find it challenging to adapt to changes in their daily lives, schedules, and environment. They may be stubborn and struggle to shrug off disappointments. In their mind, there may only be one solution to a problem, and they may not be open to other perspectives.

Flexibility can be improved with the following:

- Playing an instrument/singing
- Video games
- Tools that help identifying problems
- Check lists/schedules
- Model and "Think out Loud"
- Self-talk
- Yoga

Emotional Control

Individuals may have explosive, angry outbursts in reaction to seemingly small problems and may become tearful. Mood swings are common.

Emotional Control can be improved by:

- Understanding their own sensory triggers
- Practicing self-regulation
- Adapting to their environment
- Yoga/Meditation
- Role-playing

Task Initiation

Individuals with ASD may struggle to take initiative and may lack motivation. Many individuals are unable to begin a task even when it is an activity that they enjoy doing, they need direction on where to begin. They may struggle to come up with ideas to fill their free time.

Struggles with task initiation can be addressed with the following:

- Schedules and checklists
- Step by step instructions, written or video
- Alarms and reminders on cell phones
- Provide 3-4 choices, not free choice
- SMART goals

Working Memory

Individuals may appear absent-minded and may experience difficulty with multi-step chores such as only remembering the first or last steps.

Accommodations to address challenges with working memory:

- Provide written or video instructions
- Break big chunks of information into small, bite-sized pieces
- Exercise
- Playing an instrument/singing/dancing
- Dual-N-back brain game
- Strategy games
- Yoga

Organization and Planning

Individuals may experience challenges with organizing written work, struggle in planning future activities and may underestimate the time required to complete a task. Following a task through to completion can be a challenge.

Accommodations to address planning and organization challenges include:

- Checklists
- Break down task in smaller, manageable pieces
- Graphic organizers
- Day planner, Google calendar or iCal
- Set time limits
- De-clutter environment
- Timer

Self-Monitoring

Individuals may be unaware of how their behavior affects other people, may struggle to ask for help when needed, may make careless errors, and leave work incomplete.

Accommodations for self-monitoring include:

- Checklists
- Reminders
- Scripts

Executive functioning issues can be managed when using the suggested tools mentioned above. It is important to improve your self-awareness and understanding when you are having executive functioning difficulties.

There is currently no specific test that will identify if someone has an issue with executive functioning. Experts typically rely on different tests to measure certain skills; these tests can highlight the problems that individuals can have with executive functioning.

Sensory Processing Difficulties

It is very common for individuals with autism to experience sensory processing difficulties. This means that these individuals struggle with receiving information from one or more of their five senses: smell, taste, touch, sight, and sound. There are two different ways that sensory issues can affect someone, hyposensitivity, and hyper-sensitivity. Hyper-sensitivity is when your body overreacts to normal levels of sensory stimulation, whereas hyposensitivity is when your body under-reacts to normal levels of sensory stimulation. Individuals who struggle with sensory processing will need to make adjustments and have specific accommodations in place to aid them in regulating their senses in certain scenarios.

Those with hyposensitivity can often feel the need to be in constant motion; crave fast, spinning and/or intense movement, and jumping on furniture and trampolines. Those who are hyper-sensitive may be fearful of activities that require good balance, including climbing on playground equipment, riding a bike, or balancing on one foot, especially with eyes closed. They may appear clumsy.

What are sensory processing difficulties?

Sensory processing difficulties were first identified by the idea that certain people's brains cannot do what most people take for granted - process all the information coming in through seven (not the traditional five) senses to provide a clear picture of what's happening both internally and externally.

Along with touch, hearing, taste, smell and sight, there are the “internal” senses of body awareness (proprioception) and movement (vestibular). When the brain can’t synthesize all this information coming in simultaneously, it has been described as “It’s like a traffic jam in your head, with conflicting signals quickly coming from all directions, so that you don’t know how to make sense of it all.”

The internal senses: Proprioceptive receptors are located in the joints and ligaments, allowing for motor control and posture. The proprioceptive system tells the brain where the body is in relation to other objects and how to move. Individuals who are hypo-sensitive crave input; they may love jumping, bumping, and crashing activities, as well as seeking deep pressure such as that provided by tight bear hugs or squeezing into tight spaces. Individuals who identify as hypersensitive, often have difficulty understanding where their body is in relation to other objects and may bump into things and appear clumsy; because they have trouble sensing the amount of force they’re applying, they may rip the paper when erasing, pinch too hard or slam objects down.

Some adults with ASD have found the following adaptations can help with sensory difficulties:

- Headphones, music players, earmuffs, noise cancelling headphones, & ear plugs.
- Sunglasses, tinted glasses, and hats with brims.
- Chewing gum or other chewable items.
- Stress balls or other “fidgets”.
- Environmental aids- workspaces designed to remove or reduce physical barriers for individuals with autism. Such as standing desks or workspaces, reduced lighting, & minimized visual distractions
- Products such as therapy ball chairs, which are designed to help people gain a better sense of, and more control over, their own balance and coordination, by providing feedback to the sensory system
- Smartphones, tablets, calculators, computers, managing calendars, setting reminders, and paper-based organizers like day planners or visual schedules can all help with organization and other executive functioning difficulties.

Autism Statistics

Gathered by IAN (Interactive Autism Network) and other various organizations:

- 1 in 66 children in Canada have autism.
- 1 in 42 in males, 1 in 189 in females are diagnosed with Autism Spectrum Disorder.
- Independent adults with ASD can often have co-occurring conditions including:
 - ❖ 60% may have Gastrointestinal problems
 - ❖ 66% may have sleep issues
 - ❖ 15% may have seizures
 - ❖ 30% may have ADHD (Attention Deficit Hyperactivity Disorder)

- ❖ 24% may have OCD (Obsessive Compulsive Disorder)
- ❖ 67% may have anxiety
- ❖ 72% may have depression
- ❖ 18% may have bipolar disorder

Diagnosis and Screening

Characteristics & Signs

Social Interaction Struggles that May Affect Individuals with ASD:

- Be unaware of what is socially appropriate and have difficulty choosing topics to talk about or choosing inappropriate topics.
- Have a small amount, or no friends and may choose not to socialize very much.
- Experience anxiety in social situations and group settings, possibly resulting in experiencing repetitive behaviors as coping mechanisms
- Find small talk and chatting very difficult.
- Have problems understanding double meanings, for example not knowing when people are teasing you or taking what people say very literally.
- Feel more comfortable with people much older or much younger but have trouble connecting with peers.

Verbal and Nonverbal Communication Struggles that May Affect Individuals with ASD:

- Have difficulty understanding gestures, body language, and facial expressions.
- Not be socially motivated because they find communication difficult.
- Have difficulty making eye contact
- Have difficulties expressing themselves, especially when talking about emotions as well as difficulties identifying other's emotions
- Find participating in conversation to be challenging.
- Use flat, monotone, high pitch, or robotic speaking patterns that may not reflect the intended emotion.
- Invent their own descriptive words and phrases.
- Not understand figures of speech in terms of phrases such as "*the early bird catches the worm*"
- Have difficulty respecting other people's personal space.
- Use words out of context of their usual meanings.

Repetitive Behavior that Individuals with ASD May Display:

- Have an obsession with rigid routines and experience severe distress if routines are disrupted.
- Display a deep knowledge about a few specific areas of interest and prefer to keep focus on that area in conversation.
- Display repetitive movements or tics.
- Communicate with repetitive verbalizations such as echoing or quoting directly from movies or books, particularly when anxious or agitated.
- Use objects in a repetitive manner, such as lining things up, patterning objects, or handling objects in their hands.

Other common Symptoms that May Affect Individuals with ASD:

- Be extremely knowledgeable in one or two academic subject areas, but have challenges being as successful in others.
- Have problems with forecasting plans for the future, and have difficulties organizing daily life.
- Respond emotionally when something unexpected happens or when things are moved or rearranged.
- Have difficulty reading and writing
- Experience hyper-sensitivity or impaired sensitivity to sensory input such as sounds, smells, tastes, textures, lights and/or colors.
- Feel clumsy and have difficulty with coordination.
- Be more socially isolated.
- Be perceived as eccentric or an academic
- Exhibit visual problems such as staring at spinning objects or light, fleeting peripheral glances, side viewing, and difficulty attending visually.

Autism can go undiagnosed into adulthood for various reasons. Sometimes it can be misdiagnosed as Schizophrenia, ADHD, anxiety disorder, or OCD, as symptoms are often similar. As ASD information becomes more readily available adults are starting to connect signs and symptoms to their own feelings and behaviors.

Autism has a broad spectrum of signs and symptoms. No one person will experience every trait but may experience struggles with social interactions, verbal and nonverbal communication, and repetitive behaviors.

To receive an official diagnosis, you will have to go to a healthcare professional, however, if you are still curious about doing more self-screening, Autism Canada has developed an online self-screening questionnaire. This is by no means a diagnosis of autism spectrum disorder, but it will help individuals gain some more knowledge and clarity around what they may be experiencing or having challenges with. The test will ask you a series of 50 questions with four possible answers available. After finishing the questionnaire, the computer will evaluate your results and give you a score to fit in the categories of low, average, and high risk. This test is a helpful way to guide you to the next step of the process. Follow the link <https://autismcanada.org/about-autism/diagnosis/screening-tools/adult/>

Steps with a Doctor

Since ASD is primarily known as a disorder diagnosed in childhood the vast majority of evaluation methods are designed for children. This makes it that much harder to diagnose adults. Because of these limitations the most common way that an adult gets evaluated for ASD is through observation. A healthcare professional will conduct a discussion with the patient about challenges in areas of communication and social interactions while observing the patient's behavior. According to an article posted by ADDitude called *Professional Guidelines for Diagnosing Autism Spectrum Disorder*, some of the tactics that are used in the evaluation process are:

- Asking the patient to explain how other people would describe them such as friends or family. This is to see if he/she has a sense of how they may impact's others and how they are viewed.
- Asking the patient how someone close to them would describe them versus someone who is not close to them. This is to see if the patient has an understanding of how different people experience them differently.
- Practicing role-play with the patient to see how they do with conversation.
- Show the patient pictures of emotional faces and see if they can name the emotion being displayed. This helps to see if the patient understands emotions and if they can recognize them.
- Describing social scenarios to see if the patient has an understanding of what's appropriate and inappropriate in certain situations. Along with if the patient understands when they are being rude or polite.

Some individuals may feel it is not necessary to get a proper diagnosis and are content with a self-diagnosis. However, receiving an ASD diagnosis for those that seek one can be very beneficial for many reasons. Some of these reasons include:

1. **Understanding Yourself** - Many people may struggle with not understanding certain difficulties that they face daily or have received a misdiagnosis with some confusion. With a proper diagnosis of ASD individuals may feel relief finally knowing why they experience their symptoms. They will be able to learn about their disorder and access necessary supports.
2. **Gaining the Understanding of Others** - Those diagnosed as adults may have felt misunderstood their whole lives. Unfortunately, people can easily be teased or bullied for being a little "different" than others. Even your friends and family may make you feel misunderstood. A diagnosis can help people to better understand your social and communicative difficulties and will make it easier for them to empathize with you.

3. **Receiving Proper Services** - There are support programs and services available for adults with ASD to help them navigate through day to day life. With a proper diagnosis, individuals will be able to access ASD-specific care and services.
4. **Joining the ASD Community** - There can be a sense of relief to meet with people who share your experiences and struggles. Being able to compare and share stories can be very beneficial and supportive for individuals with ASD. Becoming a part of a community that fully understands you can be very beneficial.

Seven tips for those who have received an autism diagnosis as adult:

- 1) **Seek help** - Seeking the help of a counselor is a good idea so that you have someone to talk to about your feelings and concerns. An adult support group may be beneficial so that you have other people to talk to who are going through the same thing or are further along in the journey.
- 2) **Get family counseling** - Parents can feel guilty about a late diagnosis and blame themselves for not recognizing the signs of ASD earlier. Feeling overwhelmed about the future after being diagnosed is also common. Siblings may also need support with the new diagnosis and how they best can help.
- 3) **Reach out to the family doctor** - Parents may also want to make an appointment with their family doctor to keep them informed. Short term medication may be needed if you are experiencing depression or high levels of anxiety.
- 4) **Research adult services in your area** - Research and make a list of what services you might need: work support, post-secondary support, independent living skills training, and social skills training. Connect with local disability organizations.
- 5) **Look into province-wide services** - Go to the provincial government's website and read about Persons with Disabilities. There are tax breaks, benefits that can be applied for, and housing support. Learn about your legal and financial rights and what supports you may need for future planning based on UNCRPD.
- 6) **Educate yourself** - There are some great resources about adults on the spectrum. There are more authors writing about topics that affect adults. Talk to other individuals, families, and support people who are further along on the adult journey and ask questions. Those who are navigating the same journey are often a wealth of information and most are eager to share valuable information.
- 7) **Keep calm and know that this is a process** - It will take time to get support in place and there will be challenges along the way. Some supports and resources will work, and others may not be as helpful.

Addressing your Overall Health & Wellness:

Common comorbid conditions that often accompany ASD are:

- **ADHD/ ADD (Attention Deficit Hyperactivity Disorder)** - ADHD is a disorder that shares many communication and social skill symptoms with autism spectrum disorder. It too is a neurodevelopmental disorder that is most commonly found in children but can be diagnosed in adulthood as well.
- **OCD (Obsessive Compulsive Disorder)** - OCD on the other hand has similar symptoms when it comes to the repetitive and ritualistic behavior that most ASD individuals experience. OCD is an anxiety disorder that causes people to have recurring thoughts, ideas, or sensations that put them in a repetitive state of doing something.
- **Anxiety** - Researchers suggest that at least a third of the ASD population have an anxiety disorder. It is important to seek treatment as it can greatly impact your daily life.
- **Depression** - Depression can be very difficult to diagnose in people with ASD. As it can be challenging for ASD individuals to express or even recognize that they have depression

A Doctor may prescribe medication to help someone with ASD lessen their symptoms of:

- Irritability
- Aggression
- Repetitive Behavior
- Hyperactivity
- Attention problems
- Anxiety and depression

Studies show that individuals with autism spectrum disorder can have other medical issues such as intestinal disorders or chronic gastrointestinal inflammation. These disorders make it difficult for the body to absorb certain essential nutrients. Maintaining a healthy diet and exercise routine will help you think more clearly and have enough energy to sustain you throughout the day.

Some believe that individuals with ASD also have different immune responses to viruses, toxins or certain foods causing them to have different reactions. It has been shown that dietary change and alternative medicine can improve the body's immune responses. Doctors and caregivers have reported positive changes in those with ASD after making these adjustments.

Other Types of Therapies Available:

There are many other forms of nontraditional supports that can aid with improving symptoms. However, only certain forms are available in Prince Edward Island. The following are according to Autism Canada and can be accessed in PEI.

Art therapy is a good tool to help expand one's imagination, communication, and socialization skills.

Therapeutic riding for individuals with autism. This program is based on Horse Boy methods which were developed specifically to accommodate the needs of individuals with autism. We are not teaching individuals to ride (unless that is what they want) instead we use the horse as a tool to help individuals to improve communication, academics, perspective taking and many other skills.

Occupational therapy teaches many skills to help increase the independence and quality of life for people with ASD. Some skills taught in occupational therapy include:

- o Self-help and coping skills such as dressing, grooming, sleeping, and eating.
- o Adaptive behavior by helping to reduce unwanted behaviors.
- o Fine motor skills such as learning to hold a pen, tie shoelaces, fasten clothes while dressing, or use utensils during a meal.
- o Physical exercise to improve endurance, muscle strength, stamina, or overall health.
- o Socialization skills.
- o Appropriate play skills and making friends.
- o Sensory integration, and emotional arousal and regulation.

Music therapy helps enable communication and expression – which are some of the core symptoms of ASD.

Neurofeedback, Audiometric testing, Sensory integration therapy, Water therapy, and Vision therapy are all additional forms of support but cannot be accessed in PEI.

For further information on available supports in PEI please contact our office.

Reflections of Adults on the Spectrum

“Embrace the unorthodox, something that you think may not work to help you, could surprise you!” - Nick (age 17 when diagnosed)

“Knowing that there is a reason why I am the way I am.” - Billie (age 26 when diagnosed)

“The people in my life are more understanding of me. Autism is very manageable if you work at it.” - Devin (age 25 when diagnosed)

Post-Secondary Education

The Academy of Learning

The Academy of Learning Career College offers courses to students that need extra assistance when learning. The academy conducts learning with assistance from the Integrated Learning System (ILS) which is a self-directed, multi-sensory learning experience. The purpose of ILS is to provide students the opportunity to make connections between experiences and learning so that information and skills can be applied. It gives students the opportunity to guide their own learning and have a very hands-on experience. The academy offers a wide variety of courses to choose from, the PEI courses are listed on their website

<https://www.academyoflearning.com/programs/prince-edward-island/>.

For more information contact Katherine McQuaid at kmcquaid@aolpei.ca or (902) 894-8973

Holland College

When applying to Holland College you will be asked a question on your application stating whether or not you have specific physical or learning requirements. When you select yes to this question you will be advised to contact Academic Support Services, so they are able to assist you in the needed areas. Once you contact the Academic Support Services, they will review your file and consult with you to determine necessary supports. When it comes to ASD they often look at the supports that were in place with that student in High School and see if those supports were suitable. The college may also assign a Student Support Worker to the individual with autism to aid them in academics, problem solving, and social and group settings, primarily group projects. The student support services that Holland College provides include:

- One on one support
- Time management and organizational skills

- Study skills
- Accommodations for physical needs
- Confidential consultations
- Individualized program for academic learning
- Test and exam accommodations
- Access to and training of assistive technologies
- Note-taking, tutoring, and mentoring
- Learning- strategy support
- Campus accessibility
- Support with self-advocacy
- Transition planning with high schools and families

Holland College assists students to be independent and reach their full academic potential. They focus their support to try and target individualized needs in learning. All services provided are free of charge.

For more information on what Holland College offers students with disabilities please contact Velda Crane, Coordinator of Student Support Services at (902)-629-4237 / vcrane@hollandcollege.com or visit Student Support Services at Prince of Wales Campus, 140 Weymouth Street, Charlottetown Prince Edward Island.

University of Prince Edward Island

The University of Prince Edward Island offers many support services and equipment to those in need. When you are applying to UPEI and you have a documented temporary disability, you will be able to access UPEI's Accessibility Services. To access these services, you will need to request an appointment with one of the case managers at the school. You can book an appointment by calling 902-566-0488 or by emailing studentserv@upe.ca. You will need to provide medical documentation of your need for your specific accommodations at the appointment to clarify that you qualify for the program's services. Here is an example of the medical form that you will need https://files.upei.ca/studentlife/medical_assessment_form_students_with_disabilities.pdf. Aside from what your doctor is suggesting for support services the case manager will assess what services you were provided in high school if you happen to be coming directly from high school. A transition meeting will be scheduled with resource teachers from high school, your UPEI case manager, yourself, and your guardian. This meeting will be extremely helpful when deciding what support services will aid you best in receiving the most out of your education. Services that could be offered to you as a student with a disability include:

- Campus accessibility
- Confidential consultations
- Test, exam, and classroom accommodation

- Assistance with grants
- Assistance with adaptive technology
- Note taking, tutoring, and mentoring
- Use of a scribe or oral testing
- Learning-strategy support
- Assistance with self-advocacy
- Transition planning with high schools and families
- Textbook to audio/pdf
- Special residence accommodations

The services you require will be determined by any suggestions made by your doctor as well as accommodations suggested by your case manager.

Follow the link below to see the guidelines UPEI has for medical documentations

https://docs.google.com/document/d/1BdKCOC768Tfth_tNB5oGY-KybwQA-HMyTlVl80b77Ps/edit?ts=5ef397b7.

Provided below is a checklist that students can utilize to help them navigate the steps for applying and receiving proper support.

https://docs.google.com/document/d/1qQeH62qhY8SvIoAKPTstjJtNAbnm_95Kfy0_ALolpMY/edit.

For more information regarding UPEI's Accessibility Services please refer to their website

<https://www.upei.ca/accessibility>.

Apart from the UPEI Accessibility Services, UPEI offers other programs such as The Gateway Program, the Best Buddies Program, and the Campus Life Program.

- **The Gateway Program** is available to all UPEI students and is completely free. The program consists of sessions with student mentors provided by professional staff to help develop skills such as time management, organization, note taking, studying skills and more. You will also be able to meet with the program coordinator on a regular basis to help provide you with what you need. For more information on The Gateway Program visit www.upei.ca/studentlife/gateway-program or contact Keith Lawlor, Program Coordinator, at kjlawlor@upei.ca or at 902-566-6001.
- **The Best Buddies Program** was founded in the United States and is now available in every province in Canada. The program offers individuals with an intellectual or developmental disability the chance to communicate with each other and with other individuals, who do not have a disability. If you are interested in being a part of the Best Buddies Program you can talk with your case manager or support worker to help you sign up.
- **The Campus Life Program** is available to all students to help gain memories, create friends, and be more involved in the university life. On Tuesdays, Wednesdays, and

Thursdays from 6-10 pm at Dalton Hall Student Affairs, 5th floor you will be able to join UPEI's Campus Life Advisors to play games, watch TV, study, or just relax.

As a student dealing with a disability it may be difficult to handle a full program of study, UPEI offers students the ability to be an Unclassified Student. An Unclassified Student has permission to apply for undergraduate courses at UPEI without applying or being admitted into a program of study. To register to become an Unclassified Student you will need to fill out an Unclassified Student Registration Form and pay a tuition deposit.

Steps to apply as an unclassified undergraduate student:

- Students will create an account at upei.ca/apply.
- Once an account is created, start a new Undergraduate Application.
- Once in the application, students must choose "Undergraduate" as "Admit Type".
- When prompted to select a program, select "Unclassified Undergraduate Level Courses".
- Complete all required fields on application.
- In order to submit you will need to pay the \$50 CAD non-refundable application fee.
- Once submitted the Registrar's Office will review your application and be in contact if additional information is required.
- If admitted, to register as an unclassified student you will be sent communications with your student ID and login information and instructions on how to pay the \$250 non-refundable tuition deposit required to register for classes.

To qualify to be an Unclassified Student there are many requirements and regulations, such as:

- The student is permitted to register but is not admitted to a specific program of study at the university. Previously admitted students may register as Unclassified Students, but registration does not constitute readmission to the University.
- Students who have been required to withdraw from this or any other post-secondary institution within the last 12 months are not permitted to register as an Unclassified Student.
- Transcripts of previous post-secondary work, and proof of English Language Proficiency, must be presented to the Registrar's Office if requested.
- Prerequisites must be met where applicable. Checking for prerequisites is the students' responsibility.
- The student is subject to an initial maximum registration limit of 10 three-credit courses as an Unclassified Student. To register in additional courses as Unclassified, a student must seek permission from the Registrar's Office and may be required to meet with an Academic Advisor prior to registration being processed.
- Summer Session Unclassified Students may enroll in a maximum of two courses (six semester-hours) per session. Fall/Winter Unclassified Students will need special permission from the Registrar's Office, to enroll in more than two courses per semester (maximum of five).

- An unclassified Student may apply for admission to the Fall or Spring Semester before the published deadlines through one of the approved admission routes. If an Unclassified Student applies to a program/faculty for a specific semester (Fall/Spring), the student cannot be registered for that same semester as an Unclassified Student.
- Upon admission to a specific program, courses completed as an Unclassified Student may be counted toward the student's program, subject to Academic Regulations and the appropriate rules of the faculty/school.

For further information on Student supports at UPEI, please refer to:

- The Student Affairs staff at <https://www.upei.ca/student-affairs/staff>.
- The Health Centre staff at <https://www.upei.ca/health-centre/staff>
- Math help center 902-628-4349, mathhelp@upei.ca, www.smcs.upei.ca/help
- Computer science help center 902-628-4349, www.smcs.upei.ca/help
- Chemistry help center 902-566-0314, www.upei.ca/science/chemistry/help-centre
- Career Counseling 902-620-5088, careerservices@upei.ca
www.upei.ca/careerservices
- Food bank 902-894-2876, foodbank@upei.ca
- Student Union 902-566-0530, admin@upeisu.ca
- Library Services 902-566-0583, reference@upei.ca
- MAPUS (Mature Student Association) 902-566-0448, mapus@upei.ca
- First- Year advising 902-628-4353, apply@upei.ca
- Off- Campus Housing Coordinator 902-566-6012, offcampushousing@upei.ca

Along with general scholarships and bursaries UPEI offers specific scholarships and bursaries to individuals with disabilities. Here is a list of those specific scholarships and bursaries:

- UPEI Memorial Bursary for Students with Disabilities
- UPEI MyAbilities Scholarship
- UPEI Access and Inclusion Award
- Mattinson Scholarship Program for Students with Disabilities
- NEADS Disability Scholarships
- PEI Council of People with Disabilities scholarship
- Sarah Gaulin Memorial Scholarship

Scholarships, Bursaries & Grants

Canada Student Grant

The Canada Student Grant for Students with Disabilities is available to students for each year of your studies. The qualifications required and listed on the Government of Canada website include:

- You must be a full-time or part-time student that has applied and qualified for financial assistance (have at least \$1 of assessed financial need)
- You are enrolled in a full-time or part-time program at any of the following institutions: UPEI, Holland College, College de l'Ile, Marguerite Connolly Training and Consulting Nursing School, Maritime Christian College, Private Institute of Hair Design & Aesthetics, JVI Transportation and Safety Academy, Hair Concepts Training Academy, Academy of Learning, and the Homburg Institute.
- You must meet the definition for a student with a permanent disability - "A functional limitation caused by a physical or mental impairment that restricts the ability of a person to perform the daily activities necessary to participate in studies at a post-secondary school level or the labor force; and is expected to remain with the person for the person's expected life".
- Must be able to provide one of the following for proof of your disability: a medical certificate, a psycho-educational assessment or documents that prove you have received federal or provincial permanent disability assistance.

If you qualify for this grant you will receive \$2,000 for each year of post-secondary school. This includes undergraduate and graduate levels.

To apply for the grant, you will need to contact the province's student financial assistance office.

The other grant that goes hand and hand with the *Canada Student Grant for Students with Permanent Disabilities* is the *Canada Student Grant for Services and Equipment for Students with Permanent Disabilities*. This grant allows for students to receive funding providing them with necessary education-related services or equipment. This grant has two additional requirements:

- Provide a written confirmation that you are in need of an exceptional education-related service or equipment from a person qualified to determine such a need.
- Provide a written confirmation of the exact cost of the equipment or service required

Upon receiving the Grant, it will be your responsibility to provide your school with receipts for the equipment or services that you have purchased with the grant money. If you do not provide those receipts, you are liable, and any outstanding balance is deducted from your funding for the next year.

As long as you qualify for this grant you could be receiving up to \$20,000 each school year. To apply, contact the province's student financial assistance office at (902)-368-4640. For further information please refer to the Government of Canada's website specified in disability grants <https://www.canada.ca/en/employment-social-development/services/education/grants/disabilities.html>.

The Island Advantage Bursary

The Island Advantage bursary for low to middle income students is a new grant that is needs-based. This grant will match the Canada Student Grant that a student with disabilities can receive. To be eligible for this grant:

- You must be a Canadian citizen, or permanent resident.
- You must have applied for a student loan.
- You must be enrolled in a full-time program at UPEI, Holland College, Maritime Christian College, or College de L'Ile.
- Your total family income for the previous calendar year of application must be less than the income cut-off amount listed in the table below:

Your family size	Gross annual family income eligibility for maximum bursary	Gross annual family income eligibility for bursary cut-off
1 person	\$ 31,243	\$ 62,756
2 people	\$ 44,184	\$ 87,789
3 people	\$ 54,114	\$104,790
4 people	\$ 62,485	\$115,302
5 people	\$ 69,861	\$125,008
6 people	\$ 76, 529	\$134,221
7+ people	\$ 82,660	\$142,184

After applying for a student loan your income will be assessed as part of the application process and you will be advised if you are eligible for the award. The award may be credited directly to your school account.

The Debt Reduction Grant

The Debt Reduction Grant can be applied yearly for students that attend a college or university on or off Island. Every year you attend a college or university you can receive \$3,500 to pay off your student debt. To be eligible for this grant you must complete your program, reside on PEI, or decide to come back to the Island. There is no deadline to apply for this grant, however the earlier the better. To apply for this grant, you can access an application form online at Student Financial Services, staff can provide further information and answer questions over the phone or in person.

For more information you can contact your administrative services at your financial institution or contact Student Financial Services at (902)-368-4640 or access their website:

<https://www.princeedwardisland.ca/en/topic/student-financial-services>

Software & Technology Available

Individuals with ASD will most likely need some form of support no matter where they fall on the spectrum. Whether it is an abundance of support or very little, it is important to know about all the available forms of tech support to help make the best decision for your level of assistance required. There are two categories of tech support: assistive and adaptive. Assistive Technology is a type of product or system that is used to improve the functional capabilities of people with disabilities. Adaptive technology is a subcategory of assistive technology - it is a product or system that is specifically designed for people with disabilities.

The information below was obtained by AASPIRE Healthcare Toolkit for Patients and Supporters.

Dedicated Speech Devices:

- Dragon NaturallySpeaking <https://www.nuance.com/dragon.html>
- Kurzweil Education <https://www.kurzweilededu.com/products/products.html>
- Smart Pen <https://livescribe.com/smartpen/>

Available Supports & Resources for Autism

Navigating the Justice System and Legal Information

When receiving a diagnosis of autism spectrum disorder, you may have to make some legal decisions. As an individual with ASD you may require support to make a will, legal decisions, handle your estates, etc. An option may be to have an adult you trust to apply to the court to be your guardian and/or committee. Similarly, if you would like to appoint a substitute decision maker, power of attorney and/or health care directive you can do so. However, if they do not, then another adult must apply to the court to be appointed.

For further legal assistance feel free to contact Robin Aitken from Cox and Palmer at 902-629-3910, raitken@coxandpalmer.com or visit their Prince Edward Island location at 97 Queen Street, Suite 600 in Charlottetown.

Community Legal Information Association (CLIA) is a registered charity that helps residents of Prince Edward Island understand the law and navigate the justice system. They provide confidential, independent, and objective legal information. They pride themselves in making sure clients feel like they are in a safe environment where you can ask questions and get the most current legal information possible, in a language you understand. For more information on the Community Legal Information organization please refer to their website:

<https://www.legalinfopei.ca/en/home>.

The province of Prince Edward Island has set up an organization called **Public trustee, Public and Official Guardian**. The office was established to help protect the interest of the most vulnerable people in PEI. Their goal is to provide adults with assistance in decision making regarding personal care, legal, and financial obligations as well as:

- Manage property and financial matters
- Make personal care decisions
- Administer or Execute Estates
- Act as a Litigation Guardian
- Review insurance settlement for minors or persons under disability
- Protect the Legal and Financial Interest of Children under the age of 18 years
- Establish and maintain infant Trust
- Protect the legal, financial, and personal and health care interest of vulnerable adults who require assistance in decision making
- Act as an independent interest for minors or persons with disabilities on insurance settlements or in court matters with financial implications to the person
- Administer the estates of missing or deceased persons

For more information on the Office of the Public Trustee, Public and Official Guardian you can contact them at Phone: (902) 368-6281 Fax: (902) 368-5335 or visit at 1 Harbourside Access Road PO Box 2000, Charlottetown, Prince Edward Island, Canada, C1A 7N8.

Supported Decision Making

Supported decision making is a way that an individual with a disability can arrange for another person to be in charge of decisions involving banking, medical, insurance, and financial decisions. The individual with the disability has the ability to assign a person for each important sector. In PEI this system is not quite fully recognized but we are moving towards that direction.

Community Resources

The PEI Community Resources Handout provides an extensive list of all the available resources and supports available for individuals with ASD. The handout includes advocacy and support organizations, education and training opportunities, employment and day program opportunities, family resource centres, leisure/recreational activities, residential/respite care services, transportation services. To access this handout, refer to the PDF version available below.

[file:///C:/Users/User/Downloads/2019%20Community%20Resources%20Handout%20List%20August%202019%20\(1\).pdf](file:///C:/Users/User/Downloads/2019%20Community%20Resources%20Handout%20List%20August%202019%20(1).pdf)

This community resource guide is thanks to:

Shelley Nelson, Community Access Facilitator Student Services - Public Schools Branch
Phone: 902-620-3746

Stars for Life Foundation

The Stars for Life Foundation provides Residential and Day Program services to Adults living with ASD. We provide client centered services; this can include one to one support and/or small group settings. Depending on client goals we provide support in the following areas - job coaching, life and social skills training, educational supports, health, and well-being, as well as specific workshops and short programs.

Healthy Relationships, Sexuality and Autism offered by the Stars for life Foundation

[http://www.autismnovascotia.ca/program/45#:~:text=Healthy%20Relationships%2C%20Sexuality%20and%20Autism%20Program%20\(HRSA\),positive%2C%20inclusive%20sexuality%20education%20lessons.](http://www.autismnovascotia.ca/program/45#:~:text=Healthy%20Relationships%2C%20Sexuality%20and%20Autism%20Program%20(HRSA),positive%2C%20inclusive%20sexuality%20education%20lessons.)

The Healthy Relationships, Sexuality and Autism (HRSA) Program provides adults ages 19 and up with ASD, support through introducing concepts of sexuality and social skills through interactive, sex positive, inclusive sexuality education lessons. The program was developed through funding by Autism Nova Scotia. This program runs once a week for 13 weeks and

discusses topics including anatomy and function, gender and sexual orientation, sexual health, sexual behaviors, relationships, dating, and emotions.

The PEI Association for Community Living

The Prince Edward Island Association for Community Living (PEIACL) is a family-based association empowering people with intellectual disabilities and their families to lead the way in advancing inclusion in their own lives and in their communities. We do this by sharing information, fostering leadership for inclusion, facilitating networking, connecting people and opportunities, and promoting rights and values in keeping with the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

Our 3 priorities areas are:

- Supporting Families
- Employment
- Social Policy Reform and Systems Change

to find out more visit: www.peiacl.org

Ready Willing & Able

Ready, Willing and Able (RWA) is a program designed to increase the labor force inclusion of people with an intellectual disability or with autism spectrum disorder. It is a project with PEI Association for Community Living.

RWA will:

- Connect and support employers, persons with an intellectual disability or ASD and local, provincial, and national community agencies
- Promote understanding and awareness among employers and the general public as to the business value of hiring people with an intellectual disability or ASD
- Complement and enhance the capacity of community employment service delivery organizations by connecting them to new employer demand

For further information on Ready, Willing, and Able you can access their website at <http://readywillingable.ca/>, www.peiacl.org or contact the organization via email rwa@peiacl.org.

PEI Council of People with Disabilities: PEI COD

PEI Council of People with Disabilities is an organization that aims to promote the full participation and inclusion of people with disabilities in the Island community. The organization's principles state that a person with disabilities has the right to economic and social security along with having their disability taken into consideration at any and all stages of economic and social settings. PEI COD prides itself by applying the following objectives to their organization. The following information was obtained from the PEI COD website <http://www.peicod/pe.ca/>

The PEI Council of People with Disabilities is a wonderful source for adults with autism spectrum disorder. The program offers so many beneficial programs and services towards people with disabilities. Having a resource such as PEI Council of people with Disabilities will aid individuals greatly in reaching their full potential and gaining a better quality of life.

Access 2 Card

The Access 2 Card is a product of the Easter Seals Organization. This card allows individuals with a permanent disability, such as ASD to have free admission for their required support person in over 500 facilities. Easter Seals is in collaboration with movie theaters, cultural attractions, entertainment venues, and recreation facilities across Canada. This card serves as a way to allow individuals with disabilities no financial burden of having to pay for two people's admission. All you have to do is simply present your valid Access 2 Card at any of the participating locations and your support person will receive free admission, while you pay full price.

How to get an Access 2 Card:

In order to apply for an Access 2 Card, you will need to have a permanent disability that requires you to have a support person with you for assistance. For proof you will need to supply an authorization from a healthcare professional stating that you do indeed have a permanent disability that requires a support person. On PEI, in conjunction with health care professionals both executive directors of the Associated of Community Living and Stars for Life can provide authorization, along with other NGO executive directors. Once you have all the necessary pieces of information needed to apply you can access the Easter Seals website and click on the Access 2 Card tab. Next you will scroll down to the area that is titled "Applying for an Access 2 Card". You will see a box that reads "Get an Access 2 Card"; click on that and another tab will be brought up. There are three steps to the application process. Step one: Fill out the application form, Step two: Payment, and step three: submitting your application. The Access 2 Cards cost \$20 for a new 3-year card or \$30 for a new 5-year card. The application process is very simple, and the website is extremely helpful throughout the process.

PEI locations that accept Access 2 cards can be found through this link:
<http://access2card.ca/wp-content/uploads/2020/02/PE-Venues.pdf>

Financial Supports

AccessAbility Supports (AAS)

AccessAbility Support, formerly known as The Disability Support Program, offers Islanders living with disabilities assistance in certain areas. The program supports disabilities such as physical, intellectual, neurological, sensory, and mental health. AccessAbility now offers new and improved supports that are intended to help individuals with disabilities on the Island to reach their full potential.

Some of these new supports include:

- Support for all disabilities including physical, intellectual, neurological, sensory, and mental. Based on an assessment.
- A new assessment tool to help better understand how the disability affects activities of daily living to ensure appropriate support is provided.
- New supports coordinator to navigate all the available support services and develop a personalized plan to meet individual needs.
- Increased support for finding or keeping a job including coaching and skills training.
- Increased financial help for home and vehicle modifications required because of a disability -\$10,000 every 10 years for home (was \$2,000 in a lifetime) and \$6,000 every 8 years for a vehicle (was \$2,000 in a lifetime).
- A single point of contact by calling a toll-free number for easier access to support.

To be eligible for AccessAbility Supports you need to be all of the following:

- A person with a disability, defined as a person who has a substantial physical, intellectual, sensory, neurological, or mental impairment that is continuous or recurrent, is expected to last for at least one year, and has a direct and cumulative effect on, and results in a substantial restriction in, the person's ability to function in his or her home, the community or a workplace.
- A permanent resident or citizen of Canada.
- A resident of PEI.
- Under 65 years of age on the day an application for supports for the person is submitted
- Meet any other requirements or conditions set out in the regulations.

To access the AccessAbility Support services you will first meet with a staff person who will conduct an assessment to determine how your disability affects your daily living. The assessment results will determine the level of funding you will receive. The Assessment will address the abilities and challenges of the applicant, their degree of restriction in the home, workplace and Community.

Depending on your assessment outcomes you may be able to receive anywhere from \$400-\$3,1000 monthly.

AccessAbility Support Funding can be used to address the following:

Personal Support is designed to help individuals improve their daily living. It can include life skills training such as: meal preparation, budgeting, grocery shopping, and recreational activities. It can also provide technical support and assistive devices. These supports can enable an individual to be self-sufficient and live as independently as possible.

Housing Supports will assist in independent living through financial assistance for caregivers who will provide assistance and daily guidance. It can also provide funding to address home and vehicle modifications which may be needed (\$10,000 every 10 years for home modification and \$6,000 every 8 years for vehicle modification).

Community Supports enable active participation in the community such as day programming, personal aid or specialized transportation. Also, provide assistance with job coaching, skills training, and supports for youth transitioning from the education system to the workforce.

Caregiver Support provides respite for caregivers, as well as supervision for adults who are unable to stay home alone.

Financial Support provides assistance for basic needs such as food, clothing, shelter, household and personal supplies through what is called Assured Income.

If you have any questions or want to set up a meeting with an AccessAbility staff personnel, call their toll-free number at 1-877-569-0546.

Assured Income

Assured Income is a financial aid for individuals and families with disabilities that may not be able to access basic needs such as food, shelter, and other essentials. To be eligible for assured income you will need to have applied for and received AccessAbility Supports. The AAS Coordinator will work with you to assess basic and special needs funding requirements. You and/or your families must provide verification of eligible expenses and eligible income. Eligibility will be established based on a budget deficit calculation. Your funding requirements will be reviewed yearly with the AAS Coordinator. If you have an increase in needs or a change to your personal income you will have additional reviews on top of the yearly review. If you receive approval for Assured Income you have the ability to access funding for any of the following.

- Essentials such as clothing, household supplies, personal requirements, and local transportation.
- Food allowance
- Shelter Supports
- Communication Supports (telephone and/or internet)
- Special Needs such as optical, dental, furniture
- Medical Supports

- Transportation
- Community Living Expense

Assured Income takes into account the state of the individual or their family's income along with the required expenses for basic living and disability related support, to pay a suitable monthly amount.

Please see link below for a copy of the Assure Income policy.

https://www.princeedwardisland.ca/sites/default/files/publications/3.1_description.pdf

Disability Tax Credit

As an adult with autism you have the ability to apply for Disability Tax Credit (DTC), which is a non-refundable tax credit that will provide an individual a reduction in the amount of income tax they are required to pay. The disability tax credit allows for individuals with prolonged disabilities to have some relief when evaluating their required costs to help support their disability.

As of 2019 the maximum disability amount that you can receive as an adult that has qualified for the disability tax credit is \$8,235. The annual amount that individuals can receive has increased each year by approximately \$100. If you are eligible for DTC and have been eligible for previous years but have not claimed the disability amount on previous tax returns, you may be able to request adjustments for up to 10 years under the CRA's Taxpayer Relief Provision. If the adjustment is approved, you could receive a back payment based on the adjustment.

To be eligible for the disability tax credit you will need to have a critical mental or physical impairment that impacts your daily living and basic functioning or required you to take part in life saving therapies. The impairment is classified as critical if it has lasted you 12 months or is expected to do so.

How to apply?

To apply for disability tax credit, you will need to file a T2201 form, which you can access by printing one off from the internet. Once you have obtained the T2201 form you can begin the process of filing out the required sections. You are only required to fill out the first page on the form. Part A of the form is for the taxpayer to fill out, this could include the individual with the disability, and if they are unable to then it can be a caregiver or guardian. Part B of the form must be filled out by a medical practitioner, below is the list of which medical practitioners have authority to complete this section if you have ASD

- Medical doctor of all impairments
- Psychologist

You can **view** this form in:

- PDF [t2201-18e.pdf](#)
- PDF fillable/savable [t2201-fill-18e.pdf](#)

Part A:

Section 1 consists of general information about the individual with the disability. This information includes name, birth date, social insurance number, address, and postal code.

Section 2 only needs to be filled out if the person filling out the form is not the one who has the disability. If there is a spouse or guardian filling out the form, they will be required to complete this section which consists of the living arrangements of the disabled individual.

Section 3 is very important when it comes to how much money you will receive from DTC. This section consists of one question asking if you would want to adjust your income tax and benefit return. It is highly advised that you answer yes to this question if this is the first time you have applied as this allows CRA to review and make adjustments to previous years.

Section 4 is the final section that needs to be completed by the individual or their dependent. This section is simply providing your signature to approve CRA to have access to your medical records and the ability to adjust your income tax and benefit returns if applicable.

Part B:

For the completion of Part B you must give your form to any of the medical practitioners listed above to fill out.

Once the medical practitioner has filled out their required sections, they will give the form back to you. At this point it is very important that you read over the form thoroughly and make sure nothing is missed. On the second last page of the T2201 form there is a very important section that will impact whether or not you will qualify for DTC. Under the heading Duration there are two questions provided. The first question asks if the patient's impairment lasted or is expected to last for a period of 12 months. If the medical practitioner that completed this section checked no for this question, then you will automatically be denied the DTC. Once passed this question the second one will ask if the medical practitioner has seen or could see any drastic improvements in the patient's condition. For this question, the answer must be no, if the medical practitioner has checked yes, then you will be automatically denied the DTC.

After reviewing your T2201 form you can send it off to Sudbury Tax Centre in Ontario. The center will review your application and be in contact via mail in 6-8 weeks with one of two letters. One being an acceptance of your application and the other being a letter stating your denial of your application with the reason why included.

For local support and additional information feel free to contact:

Daniel Martens at Martens Financial
13 Myrtle Street A, Stratford, PE C1B 1P4
Phone: (902)-394-0502
Email: daniel@martensfinancial.ca

Registered Disability Savings Plan

The Registered Disability Savings Plan (RDSP) started back in 2008 and is directly involved with the disability tax credit. This savings plan is funded by the federal government and is a long-term savings account designed for financial security.

To be eligible for RDSP you have to be a Canadian resident with a social insurance number, be 59 years of age or younger, and have to have been qualified for disability tax credit. Only one recipient can be named to an RDSP and you can only have one RDSP as a recipient. If you do not have the capabilities to manage your finances as the individual requiring the savings plan then the holder of the plan must be a qualified family member. Like the DTC, you can go back up to 10 years' worth of benefits. The amount of years will be determined by how many years back you were able to go with your disability tax credit.

How the Savings Plan Works:

A Registered Disability Savings Plan is able to be opened without any contributions. Once the plan holder deposits money into the account, the beneficiary will have immediate profit. At the age of 18 for the RDSP to be based on your income (not your guardian) it is necessary to have filed an income tax return for the two previous years. However, if this is not the case then the RDSP will be based on your parent's income until you turn 20. Once opening a RDSP you will have to file income tax yearly to keep your plan. You will then qualify for a Bond and a Grant for your account.

Bonds:

A bond is solely associated with your income and requires no contributions to generate funds. The amount that you receive in your bond is based off of the amount of income you receive.

Annual Family Net Income	Canada Disability Savings Bond (Annually)
\$30,000* or less	\$1,000
Between \$30,000* and \$45,916*	Prorated amount of \$1,000
More than \$45,916*	\$0

The bond has a maximum profit of \$20,000, however if you invest those savings you could have up to \$69,830 after 30 years, this is assuming a 6% return rate. If you are opening a bond with an annual family net income of \$45,916*, you have the ability to go back ten years from the opening year and receive payments off of each year. This could result in receiving up to \$10,000 if you have qualified for the payments in the past years.

Grants:

Grants work differently than bonds by not only basing the earnings on your income but by also basing it on your investments towards the account. You are eligible to receive a grant until December 31st of the year in which the beneficiary turns 49 years old.

Annual Family Net Income	Matching Grant on Annual RDSP Contributions	Maximum Annual Grant
Less than or equal to \$91,831*	On the first \$500 in annual contributions (\$3 for every \$1 contributed)	\$1,500
	On the next \$1,000 in annual contributions (\$2 for every \$1 contributed)	\$2,000
Greater than \$91,831*	On the first \$1,000 in annual contributions (\$1 for every \$1 contributed)	\$1,000

If you are able to accomplish a maximized RDSP it would result in \$395,265 total plan value in 30 years assuming a 6% return rate. As stated, before a Registered Disability Savings Plan is a long term investment and this is due to the fact that you cannot withdraw any money from a bond or a grant until at least ten years after starting the plan. Any withdrawal from the account before that time will result in paying back all grants and bonds that are not matured to the government. The only time you would be able to withdraw money without a full maturity, is under the circumstances of a medical crisis, or a housing crisis. The RDSP has zero impact on the other government funding programs listed below.

- Old Age Security (OAS)
- Guaranteed Income Supplement (GIS)
- Canada Pension Plan (CPP)
- HST/GST Benefit
- Most Provincial Disability Support Programs

To open a Registered Disability Savings Plan you will need to visit your financial organization, or access a financial advisor who specializes in RDSP's. If your financial organization does not offer the RDSP, Grants, and Bonds then you will need to access a financial organization, or advisor, that does. If you have a RDSP with one financial organization, you have the ability to transfer it to another. You will need to go through the process of completing a Registered Disability Savings Plan Transfer and the Revocation of Request for Canada Disability Savings Grants and/or Canada Disability Savings Bonds. Both financial organizations must sign off for the transfer to be approved.

For more information on the Registered Disability Savings Plan you can visit <https://www.rdsp.com/>. This website is a non-profit, third party organization that will be helpful with providing more in-depth details along with stories about the RDSP, a RDSP calculator, a step by step guide for applying, and more.

For local support and additional information feel free to contact:

Daniel Martens at Martens Financial
13 Myrtle Street A, Stratford, PE C1B 1P4
Phone: (902)-394-0502
Email: daniel@martensfinancial.ca

Psychologist Services Available

To Obtain an Autism Diagnosis Contact:

Dr. Brent MacDonald Phone: 403-229-3455

Email: brent@complexlearners.com

The cost for a diagnostic assessment is \$3,600. For any additional services, such as post diagnosis supports, the hourly rate is \$230.

Dr. MacDonald's services are billable through insurance plans from all major providers. If you are drawing Disability Tax Credit you have the ability to use DTC as a claim for your assessment. Discuss with your provider for more assistance and details.

Dr. MacDonald practices outside of the province but travels to PEI for two-week periods every 2-3 months to screen adults for autism. You do not need a referral to see Dr. MacDonald. When being assessed Dr. MacDonald creates a detailed developmental history, along with an intellectual and an academic screening process using programs such as the KTEA (Kaufman Test of Educational Achievement), ASRS (Adult ADHD Self Report Scale), and ADIR (Autism Diagnostic Interview Revised). After your assessment, Dr. MacDonald will provide you with a final report highlighting your diagnosis along with all test data, detailed history, your

occupational functioning, and most importantly your recommended strategies for moving forward. Dr. MacDonald offers services after a diagnosis including supportive counselling, occupational counselling, career path assistance, and social functioning in the work environment counselling.

Dr. April Sullivan Phone number: 902-445-3851

Email: admin@ericabaker.ca

The cost of an assessment for ASD is between \$2,350 and \$3,850 depending on whether a psycho-educational assessment is required for post-secondary studies.

Dr. Sullivan assesses people using the Autism Diagnostic Observation Schedule (ADOS2) and the Autism Diagnostic Interview-Revised (ADI-R). Following the assessment, Dr. Sullivan will provide individuals with a final report that provides you with a summary of your assessment and recommendations on what your next steps should be. To see Dr. Sullivan, you do not need a referral. Families can pay and submit to their insurance companies for reimbursement of Dr. Sullivan's services.

Dr. George Mallia Phone: 902-367-4446

Email: drgeorgemallia@gmail.com

Dr. Christine Beck Phone: 902-367-4446

Email: drchristinebeck@gmail.com

Dr. Neil McLure Phone: 902-432-3910

Email: mclure@pei.sympatico.ca

Please contact Dr. McLure for costs associated with a diagnosis.

Dr. McLure provides individuals with autism diagnostic assessments using assessment tools such as the Wechsler Adult Intelligence Scale, the Minnesota Multiphasic Personality Scale, and more that address executive functioning, organization, planning, attention, personality, and trauma. For Dr. McLure's services you will need a referral depending on your insurance company. Check with your insurance company prior to booking an appointment. Dr. McLure does not offer post diagnosis services but does aid you in finding some that will suit you.

Doctors that provides services after an individual is diagnosed:

Dr. Ken Pierce Phone: 1-877-569-3710

Email: ken@clarendonconsulting.com

Session Pricing:

- 1 (1 hour) session: \$500
- 5 (1 hour) sessions package: \$475 each
- 10 (1 hour) sessions package: \$450 each

Dr. Pierce provides individuals with autism spectrum disorder sessions that support people once they receive a diagnosis. He takes a “think, not feel” approach as he believes that if you change the way you think about something then you will change the way you feel about it. There is no referral to required see Dr. Pierce. You can pay and submit to your insurance company for reimbursement of Dr. Pierce’s services.

Dr. Parise Nadeau Phone: 902-438-1109

Email: parisenadeau@gmail.com

Please contact Dr. Nadeau for her rates.

Dr. Nadeau does not provide an autism diagnostic assessment but does provide services that help support ASD symptoms such as anxiety and depression.

Mental Health supports on PEI include:

Mental health walk in clinics:

Charlottetown

- ❖ Richmond Centre – 902-368-4430 Tuesday/Thursday – 11am-7pm
- ❖ McGill Centre – 902-368-4911 Friday/Saturday/Sunday – 1pm-5pm

Summerside

- ❖ Prince County Hospital – 902-888-8180 Monday/Wednesday – 9am-5pm

Montague

- ❖ Community Mental Health – 902-838-0960 Thursday – 4pm-8pm

O’Leary

❖ O'Leary Health Centre – 902-853-8670 Wednesday – 9am-3pm

Telephone Contacts:

- The Island Helpline
 - o 24/7 access. Confidential. Bilingual. 1-800-218-2885

Canadian Mental Health PEI:

- Contact
 - o Drop in: 178 Fitzroy St. Monday-Friday 9am-4pm
 - o Call 902-566-3034
 - o Email division@cmha.pe.ca
- Peer Support
 - o 902-628-3666
 - o One-on-one sessions
 - o Group sessions
 - o Accompanying clients to appointments
 - o Advocacy for youth in the school system
- PEI Helping Tree
 - o Visit https://savoir-sante.ca/en/content_page/download/331/527/21?method=view

If you need further support with your mental illness please use any of the resources above, contact your doctor, and/or talk to your loved ones if you are comfortable.

Potential Funding Source for Accessing a Diagnosis

Ceridian cares

Ceridian Cares is a charitable organization that prides themselves in their contribution of providing needed financial assistance to families and improving the communities. The organization offers grants to Canadian citizens over the age of 18 that are in need of financial support. The grants being offered are of a price range of \$200-\$4,000, with a maximum grant of \$5,000. These grants will help supply people with clothing, footwear, food, basic household needs, medical, and personal development, and recreation.

To apply for a Ceridian Cares grant you will need to go through three steps.

1) Review the Ceridian Cares application requirements and make sure that you have all the proper qualifications.

2) Gather all the required documents for the application which include:

- Your Canadian birth certificate or permanent residence card.
- Your most recent year's Canada Revenue Agency Notice of Assessment, along with all other income earners in the household.
- Two quotes from vendors or service providers for the cost of the item or items which the financial assistance is being requested for.
- Optional: a letter from a third party such as your doctor or therapist.

3) Apply for the grant. Open up Ceridian Cares website and under About the Application Process tab, click on apply. This will open up to a page stating the three steps for the application process. Click the Apply Now button and fill out the informational questions. Once that's completed scan and upload all of the required documents you've obtained and then click submit. After submitting an application, the normal response time is within 90 days.

To apply for the grant go to: <https://www.ceridiancares.ca/application>

Additional Resources

211 PEI

The United Way of PEI, in partnership with the Province of Prince Edward Island, is pleased to announce that “211 PEI” is now accessible by phone and website as a valuable resource to help Islanders navigate the network of community, social, non-clinical health and government services available across the Island.

211 PEI will help those in need “find the right door the first time” by connecting them to human services quickly and easily. The 211 PEI service is now fully active, providing Islanders and service providers with access 24/7/365 by calling 2-1-1 or searching the website at www.pe.211.ca.

The 211 PEI helps connect users with human services for both everyday needs and times of crisis. 211 PEI is a signature service of the United Way of PEI with funding and support from the Government of Prince Edward Island.

Islanders can call 2-1-1, and receive service in English, French, and through an interpretation service to more than 100 other languages. The 211 PEI website can be accessed by visiting www.pe.211.ca.

The Helping Tree PEI

The PEI Helping Tree is designed to inform Islanders of the many helping resources available on Prince Edward Island. If you or someone you care about is experiencing a problem in any of the areas listed, follow the arrows on the flowchart to find resources that may help. There are times in everyone’s lives when we need to reach out to others - sometimes it’s just a matter of knowing how to contact them. Note: unless indicated, you need to dial 902 for all local calls.

https://savoir-sante.ca/en/content_page/download/331/527/21?method=view

Helpful Apps

Autism Apps is an app that provides individuals with a categorized list of all apps that help people with autism spectrum disorder. Some of the categories include art, books, music, puzzles, self-care, and vocabulary. Along with categories for apps that help with ABA, behavior and social skills, fine motor and writing skills, and more. Visit Touch Autisms website at [Autism Apps](#) to download and gather more information for autism Apps.

Apps that can aid with anxiety:

- Headspace
- Rootd
- Acupressure

- Calm
- Stop Panic & Anxiety Self Help

Apps for relaxation, meditation, and sleep:

- Headspace
- Noisli
- Pzizz
- Slumber
- Calm
- 10% Happier

Apps for Yoga:

- Pocket Yoga
- Yoga Studio
- Simply Yoga
- 5 Minute Yoga
- Down Dog
- Asana Rebel

Informative Reading & Resources

Books

- Asperger's and Adulthood: A Guide to Working by Blythe Grossberg
- Autism Adulthood: Insights and Creative Strategies for a Fulfilling Life by Susan Senator
- The Autism Spectrum Guide to Sexuality and Relationships: Understand Yourself and Make Choices that are Right for You by Emma Goodall
- Asperger's in Love: Couples, Relationships, and Family Affairs by Maxine Aston
- Life and Love: Positive Strategies for Autistic Adults by Zosia Zaks.
- Thinking in Pictures and Other Reports from My Life with Autism by Temple Grandin
- Born on a Blue Day by Daniel Tammet
- The Jumbled Jigsaw: An Insider's Approach to the Treatment of Autistic Spectrum 'Fruit Salads' by Donna Williams
- Adult Life with Autism Spectrum Disorder: A Self-Help Guide by Maureen Bennie, Collen Eggerston, Andy Kubrin, and Sandra Werle
- Preparing for Life: The Complete Handbook of the Transition to Adulthood for Students with Autism and Asperger's Syndrome by Jed Baker, Ph.D.

Websites

- ❖ Autism Speaks <https://www.autismspeaks.ca/>
- ❖ Autism Canada <https://autismcanada.org/>
- ❖ Synapse <http://www.autism-help.org/adults-autism-aspergers.htm>

- ❖ Autism Canada ASD Central Facebook group, Canada's Forum for Adults on the Spectrum <https://www.facebook.com/groups/1710172265882835/>
- ❖ Healthcare toolkit for Patients and Supporter https://www.autismandhealth.org/?a=pt&p=detail&t=pt_aut&s=aut_asd&theme=ltlc&size=small
- ❖ Autism Online Discussion and Mailing List <http://www.autism-resources.com/links/forums.html>
- ❖ Autistic Women & Nonbinary Network <https://awnnetwork.org/>

Articles

- Articles by Marina Sarris at the Interactive Autism Network at Kennedy Krieger Institute:
 - o Daily Living Skills: A Key to Independence for People with Autism <https://iancommunity.org/ssc/autism-adaptive-skills>
 - o Autism and College Experience <https://iancommunity.org/ssc/autism-college-experience>
 - o Finding a College Program <https://iancommunity.org/ssc/college-resources-autism>
- Living with Asperger Profile for Adults <https://www.aane.org/living-asperger-syndrome-adults/>
- Adults with Asperger Syndrome: Is Occupation Therapy Right for You? <https://www.aane.org/adults-asperger-syndrome-occupational-therapy-right/>
- Asperger and Autism Spectrum: Women and Girls <https://www.aane.org/women-asperger-profiles/>
- The Autism Dilemma for Women Diagnosis <https://researchautism.org/the-autism-dilemma-for-women-diagnosis/>

Videos

- Temple Grandin Ted Talks and videos on autism
- Mental Health Challenges in ASD Panel <https://www.actcommunity.ca/education/videos/mental-health-challenges-in-asd-perspectives-of-adults-with-asd-and-professionals-who-work-with-adults>
- The Role of Medication in the Management of ASD <https://www.actcommunity.ca/education/videos/the-role-of-medication-in-the-management-of-asd>
- Perspectives on Adult Life: Adult Panel Discusses Living with AS/ASD (part 1 of 4) <https://www.aane.org/perspectives-adult-life-adult-panel-discusses-living-asasd-part-1-4/>
- Perspectives on Adult Life: Adult Panel Discusses Living with AS/ASD (part 2 of 4) <https://www.aane.org/perspectives-adult-life-adult-panel-discusses-living-asasd-part-2-4/>
- Perspectives on Adult Life: Adult Panel Discusses Living with AS/ASD (part 3 of 4) <https://www.aane.org/perspectives-adult-life-adult-panel-discusses-living-asasd-part-2-4/>

- Perspectives on Adult Life: Adult Panel Discusses Living with AS/ASD (part 4 of 4)
<https://www.aane.org/perspectives-adult-life-adult-panel-discusses-living-asasd-part-2-4/>

Other Resources:

- Eric Chessen, certified autism fitness trainer has a tool box training package that includes concepts and methods, profile assessments, exercises and templates, and videos and flow charts for a monthly subscription fee of \$12.99.
<https://autismfitness.com/about>.

This project is part of the Investment Readiness Program funded by the Government of Canada's SI/SF Strategy.



COMMUNITY
FOUNDATIONS
OF CANADA



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Available Supports/ Resources for Autism

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Potential Funding Avenues for Diagnosis

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Mailing Address:
Box 3243
Charlottetown, PE
C1A 8W5

Toll Free Phone 1-888-360-8681
Phone: 902-566-4844
Fax 1-902-368-8057
E-mail Nathalie@autismsociety.pe.ca

Autism Society of PEI

Family Membership Form 2021-2022 (Dates April 1st, 2021-March 31st, 2022)

Date: _____

Individual or Family Name(s): _____

Mailing Address: _____

Email: _____

Home Number: _____ Work Number: _____

Name of Family Member on Autism Spectrum _____

Age: _____

Additional Family Member on Autism Spectrum: _____

Age: _____

Additional Family Member on Autism Spectrum: _____

Age: _____

Family Membership fee is \$30.00 per year and is inclusive of all members of the immediate family.

_____ Cheque payable to "Autism Society of PEI"

_____ Cash

_____ E-Transfer- Transfers sent to Nathalie@autismsociety.pe.ca

_____ Interac (We accept only debit tap at the Autism Society office for membership payments)

Additional Notes: Is there anything else the Autism Society can do to help you and your family?

Autism Society of PEI Photo Consent Form

Throughout the year, the Autism Society of PEI hosts many family events, fundraisers, volunteer activities, programs and supports.

Occasionally at these events, we will have photographers taking event photos. By signing below you are consenting to allow you and your family to be photographed at any Autism Society events throughout the 2021-2022 year.

I give my consent for my family to be photographed at Autism Society events and for these photo's to be used as promotional material through Autism Society promotional outlets.

Name(Signing on behalf of above family)

Date



Disability Tax Credit Certificate

Use this form to apply for the disability tax credit (DTC). The Canada Revenue Agency (CRA) will use this information to make a decision on eligibility for the DTC. See the "General information" on page 6 for more information.

Step 1 – Fill out and sign the sections of Part A that apply to you.

Step 2 – Ask a medical practitioner to fill out and certify Part B.

Step 3 – Send the form to the CRA.

Part A – To be filled out by the taxpayer

Section 1 – Information about the person with the disability

First name and initial	Last name	Social insurance number
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Mailing address (Apt No. – Street No. Street name, PO Box, RR)

City	Province or territory	Postal code	Date of birth:	Year	Month	Day
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Section 2 – Information about the person claiming the disability amount (if different from above)

First name and initial	Last name	Social insurance number
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The person with the disability is: ☐ my spouse/common-law partner ☐ my dependant (specify): _____

Answer the following questions for **all** of the years that you are claiming the disability amount for the person with the disability.

1. Does the person with the disability live with you? Yes ☐ No ☐

If **yes**, for which year(s)? _____

2. If you answered **no** to Question 1, does the person with the disability regularly and consistently depend on you for one or more of the basic necessities of life such as food, shelter, or clothing? Yes ☐ No ☐

If **yes**, for which year(s)? _____

Give details about the **regular** and **consistent** support you provide for food, shelter or clothing to the person with the disability (if you need more space, attach a separate sheet of paper). We may ask you to provide receipts or other documents to support your request.

Section 3 – Adjust your income tax and benefit return

Once eligibility is approved, the CRA can adjust your returns for all applicable years to include the disability amount for **yourself** or your **dependant under the age of 18**. For more information, see Guide RC4064, Disability-Related Information.

☐ Yes, I want the CRA to adjust my returns, if possible. ☐ No, I do not want an adjustment.

Section 4 – Authorization

As the **person with the disability** or their **legal representative**, I authorize the following actions:

- Medical practitioner(s) can give information to the CRA from their medical records or discuss the information on this form.
- The CRA can adjust my returns, as applicable, if the "Yes" box has been ticked in Section 3.

Sign here: _____	Telephone	Year	Month	Day
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Personal information is collected under the Income Tax Act to administer tax, benefits, and related programs. It may also be used for any purpose related to the enforcement of the Act such as audit, compliance and collection activities. It may be shared or verified with other federal, provincial, territorial or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other actions. The social insurance number is collected under section 237 of the Act and is used for identification purposes. Under the Privacy Act, individuals have the right to access, or request correction of, their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 218 at canada.ca/cra-info-source.

Validate and Print Part A

Patient's name: _____

Part B – Must be filled out by the medical practitioner

Step 1 – Fill out **only** the section(s) on pages 2 to 4 that apply to your patient. Each category states which medical practitioner(s) can certify the information in this part.

Note

Whether filling out this form for a child or an adult, assess your patient compared to someone of similar age with no impairment.

Step 2 – Fill out the "Effects of impairment", "Duration", and "Certification" sections on page 5. If more information is needed, the Canada Revenue Agency (CRA) may contact you.

Eligibility for the DTC is based on the effects of the impairment, not on the medical condition itself. For definitions and examples of impairments that may qualify for the DTC, see Guide RC4064, Disability-Related Information. For more information, go to canada.ca/disability-tax-credit.

Vision – Medical doctor, nurse practitioner, or optometrist

Your patient is considered **blind** if, even with the use of corrective lenses or medication, their vision meets any of the following criteria:

- The visual acuity in **both** eyes is 20/200 (6/60) or less, with the Snellen Chart (or an equivalent).
- The greatest diameter of the field of vision in **both** eyes is 20 degrees or less.

1. Is your patient **blind**, as described above?

Yes ☐ No ☐

If **yes**, when did your patient become blind (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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2. What is your patient's visual acuity **after correction**?

Right eye Left eye

Right eye Left eye

3. What is your patient's visual field **after correction** (in degrees if possible)?

Speaking – Medical doctor, nurse practitioner, or speech-language pathologist

Your patient is considered **markedly restricted** in speaking if, even with appropriate therapy, medication, and devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to speak so as to be understood by another person familiar with the patient, in a quiet setting.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Is your patient **markedly restricted** in speaking, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in speaking become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Hearing – Medical doctor, nurse practitioner, or audiologist

Your patient is considered **markedly restricted** in hearing if, even with appropriate devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to hear so as to understand another person familiar with the patient, in a quiet setting.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Is your patient **markedly restricted** in hearing, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in hearing become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Walking – Medical doctor, nurse practitioner, occupational therapist, or physiotherapist

Your patient is considered **markedly restricted** in walking if, even with appropriate therapy, medication, and devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to walk.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Is your patient **markedly restricted** in walking, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in walking become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Patient's name: _____

Eliminating (bowel or bladder functions) – Medical doctor or nurse practitioner

Your patient is considered **markedly restricted** in eliminating if, even with appropriate therapy, medication, and devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to personally manage bowel or bladder functions.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Is your patient **markedly restricted** in eliminating, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in eliminating become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Feeding – Medical doctor, nurse practitioner, or occupational therapist

Your patient is considered **markedly restricted** in feeding if, even with appropriate therapy, medication, and devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to feed themselves.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Feeding yourself **does not** include identifying, finding, shopping for, or obtaining food.

Feeding yourself **does** include preparing food, **except** when the time spent is related to a dietary restriction or regime, even when the restriction or regime is needed due to an illness or medical condition.

Is your patient **markedly restricted** in feeding, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in feeding become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Dressing – Medical doctor, nurse practitioner, or occupational therapist

Your patient is considered **markedly restricted** in dressing if, even with appropriate therapy, medication, and devices, they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to dress themselves.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Dressing yourself **does not** include identifying, finding, shopping for, or obtaining clothing.

Is your patient **markedly restricted** in dressing, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in dressing become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Mental functions necessary for everyday life – Medical doctor, nurse practitioner, or psychologist

Your patient is considered **markedly restricted** in performing the mental functions necessary for everyday life (described below) if, even with appropriate therapy, medication, and devices (for example, memory aids and adaptive aids), they meet both of the following criteria:

- They are **unable** or take an **inordinate amount of time** to perform these functions by themselves.
- This is the case **all or substantially all of the time** (at least 90% of the time).

Mental functions necessary for everyday life include:

- adaptive functioning (for example, abilities related to self-care, health and safety, abilities to initiate and respond to social interactions, and common, simple transactions)
- memory (for example, the ability to remember simple instructions, basic personal information such as name and address, or material of importance and interest)
- problem-solving, goal-setting, **and** judgment taken together (for example, the ability to solve problems, set and keep goals, and make the appropriate decisions and judgments)

Note

A restriction in problem-solving, goal-setting, or judgment that markedly restricts adaptive functioning, all or substantially all of the time (at least 90% of the time), would qualify.

Is your patient **markedly restricted** in performing the mental functions necessary for everyday life, as described above?

Yes ☐ No ☐

If **yes**, when did your patient's restriction in performing the mental functions necessary for everyday life become a marked restriction (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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Patient's name: _____

Life-sustaining therapy – Medical doctor or nurse practitioner

Life-sustaining therapy for your patient must meet **both** of the following criteria:

- Your patient needs this therapy to support a vital function, even if this therapy has eased the symptoms.
- Your patient needs this therapy at least 3 times per week, for an average of at least 14 hours per week.

The 14-hour per week requirement

Include only the time your patient must dedicate to the therapy – that is, the patient has to take time away from normal, everyday activities to receive it.

If a child cannot do the activities related to the therapy because of their age, **include** the time spent by the child's primary caregivers to do and supervise these activities.

Do not include the time a portable or implanted device takes to deliver the therapy, the time spent on activities related to dietary restrictions or regimes (such as carbohydrate calculation) or exercising (even when these activities are a factor in determining the daily dosage of medication), travel time to receive therapy, medical appointments (other than appointments where the therapy is received), shopping for medication, or recuperation after therapy.

- | | | |
|---|------------------------------|-----------------------------|
| 1. Does your patient need this therapy to support a vital function ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Does your patient need this therapy at least 3 times per week ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Does this therapy take an average of at least 14 hours per week ? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If **yes**, when did your patient's therapy begin to meet the above criteria (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)?

Year

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It is **mandatory** that you describe how the therapy meets the criteria as stated above. If you need more space, use a separate sheet of paper, sign it and attach it to this form.

Cumulative effect of significant restrictions – Medical doctor, nurse practitioner, or occupational therapist

Note: An occupational therapist can only certify limitations for walking, feeding and dressing.

Answer **all** the following questions to certify the cumulative effect of your patient's significant restrictions.

- | | | |
|---|------------------------------|-----------------------------|
| 1. Even with appropriate therapy, medication, and devices, does your patient have a significant restriction , that is not quite a marked restriction , in two or more basic activities of daily living or in vision and one or more of the basic activities of daily living? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|---|------------------------------|-----------------------------|

If **yes**, tick at least **two** of the following, as they apply to your patient:

- | | | | |
|---|-----------------------------------|-----------------------------------|---|
| <input type="checkbox"/> vision | <input type="checkbox"/> speaking | <input type="checkbox"/> hearing | <input type="checkbox"/> walking |
| <input type="checkbox"/> eliminating (bowel or bladder functions) | <input type="checkbox"/> feeding | <input type="checkbox"/> dressing | <input type="checkbox"/> mental functions necessary for everyday life |

Note

You **cannot** include the time spent on life-sustaining therapy.

- | | | | | | | |
|--|--|-----------------------------|--|--|--|--|
| 2. Do these restrictions exist together, all or substantially all of the time (at least 90% of the time)? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | | | |
| 3. Is the cumulative effect of these significant restrictions equivalent to being markedly restricted in one basic activity of daily living? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | | | |
| 4. When did the cumulative effect described above begin (this is not necessarily the year of the diagnosis, as is often the case with progressive diseases)? | Year | | | | | |
| | <table border="1"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> | | | | | |
| | | | | | | |

Patient's name: _____

Effects of impairment – Mandatory

The effects of your patient's impairment must be those which, even with therapy and the use of appropriate devices and medication, cause your patient to be restricted **all or substantially all of the time** (at least 90% of the time).

Note

Working, housekeeping, managing a bank account, and social or recreational activities are **not** considered basic activities of daily living. Basic activities of daily living are limited to walking, speaking, hearing, dressing, feeding, eliminating (bowel or bladder functions), and mental functions necessary for everyday life.

It is **mandatory** that you describe the effects of your patient's impairment on his or her ability to do **each** of the basic activities of daily living that you indicated are or were markedly or significantly restricted. If you need more space, use a separate sheet of paper, sign it and attach it to this form. You may include copies of medical reports, diagnostic tests, and any other medical information, if needed.

Duration – Mandatory

Has your patient's impairment lasted, or is it expected to last, for a continuous period of at least 12 months?
For deceased patients, was the impairment expected to last for a continuous period of at least 12 months?

Yes ☐ No ☐

If **yes**, has the impairment improved, or is it likely to improve, to such an extent that the patient would no longer be blind, markedly restricted, in need of life-sustaining therapy, or have the equivalent of a marked restriction due to the cumulative effect of significant restrictions?

Unsure ☐ Yes ☐ No ☐

If **yes**, enter the year that the improvement occurred or may be expected to occur.

Year

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Certification – Mandatory

1. For which year(s) have you been the attending medical practitioner for your patient?

2. Do you have medical information on file supporting the restriction(s) for all the year(s) you certified on this form?

Yes ☐ No ☐**Tick the box that applies to you:**

- | | | | |
|---|---|---------------------------------------|--|
| <input type="checkbox"/> Medical doctor | <input type="checkbox"/> Nurse practitioner | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Occupational therapist |
| <input type="checkbox"/> Audiologist | <input type="checkbox"/> Physiotherapist | <input type="checkbox"/> Psychologist | <input type="checkbox"/> Speech-language pathologist |

As a **medical practitioner**, I certify that the information given in Part B of this form is correct and complete. I understand that this information will be used by the CRA to make a decision if my patient is eligible for the DTC.

Sign here: _____

It is a serious offence to make a false statement.

Name (print)

Address

Year	Month	Day	Telephone
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Date:

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General information

What is the DTC?

The disability tax credit (DTC) is a non-refundable tax credit that helps persons with disabilities or their supporting persons reduce the amount of income tax they may have to pay. The disability amount may be claimed once the person with a disability is eligible for the DTC. This amount includes a supplement for persons under 18 years of age at the end of the year. Being eligible for this credit may open the door to other programs.

For more information, go to canada.ca/disability-tax-credit or see Guide RC4064, Disability-Related Information.

Are you eligible?

You are eligible for the DTC only if we approve your application. On this form, a medical practitioner has to indicate and certify that you have a severe and prolonged impairment and must describe its effects.

To find out if you **may be eligible** for the DTC, fill out the self-assessment questionnaire in Guide RC4064, Disability-Related Information. If we have already told you that you are eligible, do not send another form unless the previous period of approval has ended or if we tell you that we need one. **You should tell us if your medical condition improves.**

If you receive Canada Pension Plan or Quebec Pension Plan disability benefits, workers' compensation benefits, or other types of disability or insurance benefits, it **does not** necessarily mean you are eligible for the DTC. These programs have other purposes and different criteria, such as an individual's inability to work.

You can send the form at any time during the year. By sending your form before you file your income tax and benefit return, you may prevent a delay in your assessment. We will review your form before we assess your return. Keep a copy for your records.

Fees – You are responsible for any fees that the medical practitioner charges to fill out this form or to give us more information. However, you may be able to claim these fees as medical expenses on line 330 or line 331 of your income tax and benefit return.

What happens after you send Form T2201?

After we receive Form T2201, we will review your application. We will then send you a notice of determination to inform you of our decision. Our decision is based on the information given by the medical practitioner. If your application is denied, we will explain why on the notice of determination. For more information, see Guide RC4064, Disability-Related Information, or go to canada.ca/disability-tax-credit.

Where do you send this form?

Send your form to the Disability Tax Credit Unit of your tax centre. Use the chart below to get the address.

If your tax services office is located in:	Send your correspondence to the following address:
Alberta, British Columbia, Hamilton, Kitchener/Waterloo, London, Manitoba, Northwest Territories, Regina, Saskatoon, Thunder Bay, Windsor, or Yukon	Winnipeg Tax Centre Post Office Box 14000 Station Main Winnipeg MB R3C 3M2
Barrie, Belleville, Kingston, Montréal, New Brunswick, Newfoundland and Labrador, Nova Scotia, Nunavut, Ottawa, Outaouais, Peterborough, St. Catharines, Prince Edward Island, Sherbrooke, Sudbury, or Toronto	Sudbury Tax Centre Post Office Box 20000, Station A Sudbury ON P3A 5C1
Chicoutimi, Laval, Montérégie-Rive-Sud, Québec, Rimouski, Rouyn-Noranda, or Trois-Rivières	Jonquière Tax Centre 2251 René-Lévesque Blvd Jonquière QC G7S 5J2
Deemed residents, non-residents, and new or returning residents of Canada	Sudbury Tax Centre Post Office Box 20000, Station A Sudbury ON P3A 5C1 CANADA or Winnipeg Tax Centre Post Office Box 14000 Station Main Winnipeg MB R3C 3M2 CANADA

What if you need help?

If you need more information after reading this form, go to canada.ca/disability-tax-credit or call 1-800-959-8281.

Forms and publications

To get our forms and publications, go to canada.ca/cra-forms or call 1-800-959-8281.

Plan for Your Future with an RDSP

Registered Disability Savings Plan (RDSP) is a long-term savings tool introduced in 2008 by Employment and Social Development Canada to help people with disabilities no matter their level of income. If you, your spouse, or your child has a disability, you may be eligible for this program.

Obligation:

- **There is no obligation.** A person with a disability can be eligible to receive up to **\$10,000** in their RDSP in the form of a Canada Disability Savings Bond without having to contribute any money themselves. An additional **\$1000** could be deposited into the plan every year going forward to a maximum of **\$20,000**.

Eligibility:

- Be a resident of Canada
- Be 49 years of age or younger
- Have a valid Social Insurance Number (SIN)
- Be eligible or have already been approved for the Disability Tax Credit (DTC)

Benefits:

- An RDSP could help with long-term financial security for the individual with a disability.
- For increased savings, the government could match up to **\$3** for every **\$1** dollar contributed to the plan by the individual or family member to a maximum of **\$70,000** per plan.

Process:

- We are Financial Advisors who are very well versed in this government program. We will fully explain the DTC process and the RDSP process to determine if it is deemed beneficial to the individual with a disability.
- We guide the qualified individual through the DTC eligibility process and then through the RDSP application process.
- We also guide the plan holder through the internal investment process.
- A regular review of the RDSP is also important and we intend to follow-up with the plan holder on a regular basis.

For more information, please contact one of our Advisors.

Justin Richard (902) 394-2748

Anton Mikhailov (902) 218-9367

www.generationsfinancial.ca



MACKENZIE
Investments

CONFIDENCE
IN A CHANGING WORLD

Registered Disability Savings Plans

Your guide to
saving for a secure future

People with disabilities and their loved ones face a distinct set of financial challenges throughout their lives. To help address these challenges, in 2008 the Government of Canada introduced the Registered Disability Savings Plan (RDSP). Designed to help build long-term financial security for disabled persons, the RDSP makes it easier to accumulate funds by providing assisted savings and tax-deferred investment growth.

This brochure explains the main features of the RDSP and provides some examples to illustrate how the RDSP can best be used.

What is an RDSP?

The RDSP is a tax-deferred savings vehicle introduced by the Government of Canada to help parents and others save for the long-term financial security of a person with a severe disability.

Eligibility

A Canadian resident who is eligible for the Disability Tax Credit (DTC) is eligible for an RDSP until December 31st of the year they reach age 59.

The DTC is available to individuals who have mental or physical impairments that markedly restrict their ability to perform one or more of the basic activities of living (i.e., speaking, hearing or walking). The impairment must be expected to last a period of one or more years, and a physician or nurse practitioner must certify the extent of the disability. Individuals can apply to the Canada Revenue Agency (CRA) for the DTC using Form T2201.

To qualify for an RDSP, you must:

- Be eligible for the Disability Tax Credit
- Be a resident of Canada
- Be less than 60 years of age
- Have a valid SIN

Opening an RDSP account

Only one RDSP can be established per beneficiary. The plan must be established by the disabled individual, unless he or she is not legally competent to sign a contract (e.g., a minor or mentally impaired). When the beneficiary is not legally able to sign a contract, the person(s) legally authorized to act on behalf of the disabled individual can establish the plan.

A change was made in Budget 2012 and under the new rules a “qualifying family member” is allowed to establish an RDSP for a beneficiary who is not contractually competent. The definition of a qualifying family member is only a spouse, common-law partner or a parent. Otherwise, anyone other than the qualifying family member will still have to go through the formal process of being named a legal representative or guardian. This is a temporary change and applies from July 2012 to the end of 2023. Even though this is temporary, it is important to note that the account holder is able to remain as account holder beyond 2023. The temporary nature of the rule simply means that new accounts cannot be opened this way after 2023, unless the legislation is extended again.

The person who establishes the plan is referred to under the Income Tax Act (Canada) as the “holder” and has principal decision-making ability over the plan (e.g., directing investments and the amount and timing of withdrawals).

The Social Insurance Number (SIN) of the disabled individual is also required.

There can be more than one holder, but only one beneficiary per plan. A substitute beneficiary designation is not permitted.

An RDSP can be transferred from one financial institution to another as the holder and/or beneficiary wish.

To open an RDSP:

1. Determine if you are eligible for the disability tax credit. If so,
2. Get an application from Mackenzie Investments and fill it out. Your financial advisor can help you with this.

A car accident left 16-year-old Steve disabled. His father, Colin, decided to establish an RDSP on Steve's behalf. Because Steve qualifies for the disability tax credit, he is eligible for an RDSP. On setup, Colin becomes the holder of the plan (as Steve is a minor) and acquires decision-making authority over the plan. It is decided that once Steve reaches the age of majority, he will become a joint holder with his father.

Contributions

Once an RDSP is established, contributions can be made by anyone, with the holder's written consent or by giving the money to the holder to deposit. Written consent is required to ensure the holder of the plan is able to schedule contributions to maximize government grants (described later).

The maximum lifetime contribution is \$200,000 per beneficiary. There is no annual contribution limit – \$200,000 can be contributed in any one year, if so desired.

Contributions are not tax-deductible; however, the earnings on contributions grow tax-free while held in the plan.

Contributions must cease by the end of the year in which the beneficiary reaches age 59.

Once an RDSP is set up, there are five ways to put money in:

1. Contributions by the account holder
2. Contributions by people the account holder has authorized
3. Federal grants and bonds
4. Transfers from a qualified RRSP, RRIF or RPP
5. Transfers of the accumulated income from a Registered Education Savings Plan on which the beneficiary is on both RESP and RDSP

Jennifer, a widow and ailing mother was worried about who would care for her disabled daughter, Susan, following her death and decided to establish an RDSP for Susan with an initial contribution of \$50,000. She then consulted her lawyer and revised her will to ensure an additional \$150,000 would be contributed to the plan upon her death (provided Susan is age-eligible at that time, i.e., under 60). After Jennifer's death, \$150,000 was contributed to the RDSP, thereby maximizing the amount available to Susan.

Government help: Taking advantage of grants and bonds

To assist in saving, the federal government offers Canada Disability Savings Grants (CDSGs) and Canada Disability Savings Bonds (CDSBs).

The RDSP is eligible for CDSGs and CDSBs until December 31 of the year the beneficiary turns 49.

Canada Disability Savings Grants (CDSGs)

CDSGs are matching grants that the Government will deposit into a beneficiary's RDSP to help accumulate savings. The Government provides matching grants of up to 300%, depending on the amount contributed and family net income.

The chart below outlines 2019 CDSG matching rates:

Family net income*	CDSG matching rates	Maximum annual CDSG
Up to or equal to \$95,259	300% on first \$500 200% on next \$1,000	\$3,500
Over \$95,259	100% on first \$1,000	\$1,000

*2019 rates. For a minor beneficiary, the family net income is that of his or her parents. Where the beneficiary is over the age of majority, the family net income is that of the beneficiary and his or her spouse, if applicable. The income threshold is indexed annually to inflation.

Maximum grant

CDSGs are subject to a lifetime limit of \$70,000 per beneficiary, and are payable until the end of the year in which the beneficiary reaches age 49 if the beneficiary remains a resident of Canada.

As part of a birthday gift, Meg and Allen agree to contribute \$2,000 for each of the next five years to an RDSP for their disabled adult nephew, Tony. Because Tony is age of majority, his family income is used for CDSG purposes. Tony's family net income and grant allocation for the next five years is as follows:

Unused grants

Beginning in 2011, you are allowed to carry forward unused grant and bond entitlements for a 10-year period.

The maximum CDSG that can be paid in any year is \$10,500 and the maximum CDSB is \$11,000.

Income thresholds for carry-forward will use the family net income applicable for each year used.

	Family Net Income	Contribution	CDSG
Year 1	\$44,500	\$2,000	\$3,500
Year 2	\$48,350	\$2,000	\$3,500
Year 3	\$50,000	\$2,000	\$3,500
Year 4	\$75,000	\$2,000	\$3,500
Year 5	\$100,000	\$2,000	\$1,000
Total	—	\$10,000	\$15,000

Since there are no annual contribution limits for RDSPs, contributions of up to \$200,000 can be made in any given year. However, where a lump sum \$200,000 contribution is made, no CDSG would be paid after the initial year. RDSP contributors should work with a financial advisor to determine whether lump sum or

periodic contributions are the better option. Depending on expected rates of return, age of the RDSP beneficiary and cash flow needs, smaller annual contributions may be more suitable. Lump sum contributions would provide a longer period of tax-deferred growth, whereas annual contributions would maximize CDSGs.

RDSP lump sum or annual contributions: an example

Kevin, age 44, has \$10,000 to contribute to his RDSP. He has a decision to make – contribute the full \$10,000 upfront to maximize tax-deferred growth, or, because of annual cash flow needs contribute \$2,000 for each of the next five years. Kevin speaks to his financial advisor, and the following potential outcomes are discussed (assuming a 6% rate of return and family net income of less than \$95,259):

Option 1

Contribute \$10,000 upfront

Total contribution: \$10,000
CDSG: \$3,500
RDSP value after five years: \$18,066

Option 2

Contribute \$2,000 per year for five years

Total contribution: \$10,000
CDSG: \$17,500
RDSP value after five years: \$32,864

Kevin elects Option 2 as it is expected to provide a greater return and flexibility for annual cash flow needs. Also, his overall return may be enhanced if the excess amount each year (the amount that exceeds \$2,000) is invested in a non-registered account.

If Kevin is receiving provincial disability support, there are limitations to the assets he can hold outside an RDSP. This could negatively impact his support.

Kim, age 44, receives an inheritance of \$200,000. She, like Kevin, has a decision to make. Should she contribute the full \$200,000 upfront, or contribute \$40,000 each year for five years to allow cash flow flexibility? Kim speaks to her financial advisor and the following outcomes are discussed (assuming a 6% rate of return and family net income of less than \$95,259):

Option 1

Contribute \$200,000 as a lump sum

Total contribution: \$200,000
CDSG: \$3,500
RDSP value after five years: \$272,329

Option 2

Contribute \$40,000 per year for five years

Total contribution: \$200,000
CDSG: \$17,500
RDSP value after five years: \$259,926

Unlike Kevin, Kim opts for Option 1. For her, a lump sum RDSP contribution will likely produce a better return despite forfeited grants. As well, if Kim chooses Option 2, deposits \$40,000 to her RDSP and invests the remaining \$160,000, she could lose part or all of her disability tax credit, as the value of tax credits decreases when income (from investments, employment, etc.) reaches a specified level. Kim contributes the full \$200,000 upfront and considers other options for her annual cash flow needs. In addition, if Kim is receiving provincial disability support, there are limitations as to assets inherited as well as income that may negatively impact Kim's support unless the entire inheritance is contributed to her RDSP.

Canada Disability Savings Bonds (CDSBs)

In addition to CDSGs, lower income families have access to Canada Disability Savings Bonds (CDSBs). The Government may deposit up to \$1,000 a year to the RDSP of a low income beneficiary, even if no contributions are made into the RDSP.

Lower income families may qualify for up to a lifetime maximum of \$20,000 from the Canada Disability Savings Bond (CDSB) program.

Family net income*	Maximum annual CDSB
Up to or equal to \$31,120	\$1,000
Between \$31,120 and \$47,630	\$1,000 is reduced on a prorated basis (based on the formula in the Canada Disability Savings Act)
Over \$47,630	No bond is paid

*2019 rates. For a minor beneficiary, the family net income is that of his or her parents. Where the beneficiary is over the age of majority, the family net income is that of the beneficiary and his or her spouse, if applicable.

CDSB payments are subject to a lifetime limit of \$20,000 per beneficiary, and are payable until the end of the year in which the beneficiary reaches age 49 (if the beneficiary remains a resident of Canada).

Starting in 2011, you may carry forward unused grant and bond entitlement to future years. The carry forward is for a maximum period of 10 years.

Victor and Shauna have a 16-year-old son, Mark, who requires regular life-sustaining therapy and have a family net income of \$20,500. As Mark is eligible for the disability tax credit, he is also eligible for an RDSP. Although Victor and Shauna do not have funds to contribute to an RDSP for Mark, they can establish a plan and still receive CDSBs of \$1,000 a year, since the Government does not require contributions to be made to be eligible for CDSBs.

Note: The Province of British Columbia also provides a one-time Disability Bond amount of \$150 from the Endowment 150 Fund.

Repayment of CDSGs and CDSBs

When withdrawing funds from an RDSP, it is important to be aware of the 10-year rule. When a redemption is done the government will look to see if CDSGs or CDSBs were deposited to the account in the 10 years prior to the redemption. If the account did receive CDSGs or CDSBs, a repayment known as the Assistance Holdback Amount (AHA) will apply. This means for every \$1 withdrawn, \$3 worth of CDSGs or CDSBs must be repaid to the government.

The purpose of the Assistance Holdback Amount is to ensure that RDSPs are used for long-term savings, and also to ensure that government funds contributed are not withdrawn and used as leverage for matching grants in future years. The same rule applies to grants and bonds received in the 10-year period before death or the cessation of a disability. Grants and bonds received before the 10-year period do not have to be repaid.

Because of the repayment provisions, an RDSP might not be the best option for short-term expenses. The scenario below illustrates this.

Arnold, 35 and disabled, has an RDSP that his family has been contributing to for the past 10 years. Arnold wishes to withdraw \$10,000 from his RDSP to purchase a car.

Details of his plans are as follows:

Plan value: \$194,963

CDSGs (last 10 years): \$35,000

CDSBs (family income exceeds threshold): \$0

Arnold's \$10,000 redemption will result in repayment of \$30,000 for CDSG for the 10-year period before the withdrawal. CDSGs received prior to the 10-year period are not subject to repayment, so if Arnold only contributed once and received CDSGs and CDSBs in Year 1, if this withdrawal is made after 10 years, no repayment would be required.

It is possible to *not* request grants or bonds for a period if there is a likelihood a Disability Assistance Payment will be required. Grants and bonds can be restarted after the payment.

The 10-year rule

Once a withdrawal of any amount is made, all federal grants and bonds paid into the RDSP in the previous 10 years have to be repaid to the federal government on a \$3 for \$1 basis.

Investment options

Qualified investments for RDSPs are generally the same as those for Registered Retirement Savings Plans (RRSPs) and Registered Education Savings Plans (RESPs) and include cash, stocks, bonds, GICs, mutual funds and a variety of other investments.

It is important to talk to your financial advisor to ensure that investments are appropriate for RDSPs. Where a non-qualified investment is acquired by an RDSP or where a qualified investment ceases to be qualified, a tax of 50% of the fair market value of the investment would be levied, and income earned on the investment would also be taxable.

Taking money out of your RDSP

RDSP withdrawals are also known as disability assistance payments. There are two types of payments from an RDSP – Lifetime Disability Assistance Payments (LDAPs) and Disability Assistance Payments (DAPs).

Beneficiaries are not required to pay taxes on their RDSP until withdrawals are made or the RDSP is terminated.

Lifetime Disability Assistance Payments

- LDAPs are recurring annual payments that once started, must be paid until the plan is terminated or the beneficiary has died.
- LDAPs may begin at any age, but must commence by the end of the year in which the beneficiary turns 60.
- Payments are generally limited to a maximum tied to the fair market value of the plan and the beneficiary's life expectancy (age 80 in most cases). The maximum amount does not apply where a physician certifies that the RDSP beneficiary is not expected to survive beyond five years.

Disability Assistance Payments

- DAPs are lump sum payments made to the beneficiary or the beneficiary's estate.
- DAPs may only be made if the plan's fair market value after payment will be more than the Assistance Holdback Amount (CDSGs and CDSBs received in the 10-year period prior to a disability assistance payment).

Both LDAPs and DAPs can be used for disability or non-disability-related expenses.

As of 2014, maximum withdrawals are the greater of the LDAP formula or 10% of the value of the plan at the beginning of the year.

Taxation of withdrawals

Disability assistance payments generally consist of original contributions, investment income, CDSGs and CDSBs (subject to repayment obligations). Because original contributions are non-deductible when contributed, they are non-taxable on withdrawal. Investment income, CDSGs and CDSBs are fully taxable to the RDSP beneficiary when received.

RDSP holders cannot encroach on capital alone, as each payment will consist of both taxable and non-taxable amounts. Generally speaking, the proportion of the payment that would be non-taxable is the same as the proportion of total contributions to total plan value.

If an RDSP beneficiary has little or no other income, a portion, if not all of the withdrawal can be received without incurring any tax liability due to the combined effect of the disability tax credit and the basic personal amount on the beneficiary's tax return. Taxable portions of withdrawals will be reported on a T4A-RDSP tax form.

Note: RRSP, RRIF or RPP proceeds transferred from deceased parent or grandparent will be taxable to the RDSP beneficiary. This is also the case with tax-deferred transfers of the taxable amount of RESPs.

Eligible transfers

An RDSP may be transferred to another RDSP for the same beneficiary. To ensure RDSP beneficiaries only have one plan, the transferring plan must be terminated immediately after the transfer. Also, the receiving plan must agree to pay minimum amounts for the year where the transferring plan has not yet done so (generally applicable to beneficiaries age 59 or older).

Tax-deferred transfers from RRSPs, RRIFs or RPPs to an RDSP to the maximum contribution limit are permitted as of July 2011. These transfers must be from an RRSP, RRIF or RPP of a deceased parent or grandparent if the beneficiary of the RDSP was financially dependant on that individual. Tax-deferred transfers of the taxable amount of RESPs are allowed as of 2014.

Fred just celebrated his 60th birthday, so by the end of the year must begin withdrawals from his RDSP. His financial advisor advises him that \$24,500 must be withdrawn from his plan, an amount calculated based on Fred's life expectancy of age 80. Details of his RDSP are as follows:

Plan value: \$587,996

Total contribution: \$200,000

CDSGs: \$35,000

CDSBs: \$0

Of the \$24,500 payable in the year, \$8,333 would be non-taxable ($\$200,000/\$587,996 \times \$24,500$). The excess, \$16,167 would be taxable to Fred.

However, if Fred has no other income, he can receive the taxable RDSP distribution of \$16,167 and not incur any taxes after taking into account his disability tax credit and basic personal amount.

Note: As of 2014, withholding tax will apply to the taxable portions withdrawn from an RDSP. The tax withheld can be claimed by the beneficiary on his or her tax return. The amount withheld should be taken into consideration when determining the withdrawal amount.

Impact on Social Assistance Benefits

Payments from an RDSP do not impact other income-tested federal government programs, including:

- Old Age Security (OAS)
- Guaranteed Income Supplement (GIS)
- Canada Pension Plan (CPP)
- The Goods and Services Tax Benefit (GST Benefit)
- Social assistance benefits

As well, generally speaking RDSPs assets and payments should not have a negative impact on eligibility for programs such as subsidized housing and long-term care. However, each province and territory has legislation that provides support to persons with disabilities, so be sure to check with your legal and/or financial advisor for the most up-to-date legislation in your province.

What if the beneficiary dies or is no longer disabled?

When an RDSP beneficiary dies the RDSP will collapse and full proceeds of the plan will be paid to the beneficiary's estate or the estate beneficiary, respectively (subject to CDSG and CDSB repayment obligations).

Original contributions remain non-taxable, while CDSGs, CDSBs and investment income received will be taxed as ordinary income to the beneficiary or his or her estate.* Recognizing that a beneficiary's estate will receive RDSP proceeds on death of the beneficiary, provision should be made in the beneficiary's will for distribution of the assets so that the beneficiary has greater control over the intended distribution of the assets.

If the beneficiary dies without a will, the proceeds would be distributed according to the laws of intestacy for the province or territory in which the beneficiary resided. These laws generally provide for the spouse and children of the deceased, if any, followed by the next closest relatives.

However, relying on the laws of intestacy could lead to unintended distributions, particularly if the beneficiary has a preference that non-related individuals (e.g., friends, caregivers) inherit. Because the rules differ between jurisdictions, it is important to speak to a lawyer in the jurisdiction of the RDSP beneficiary to determine applicable rules.

If the beneficiary ceases to be eligible for the disability tax credit because their condition has improved, the RDSP must either be collapsed by the end of the year following the cessation of the DTC, or an election, with medical verification can be made to put the RDSP "on hold" (no contributions or withdrawals) for up to four years. If there is a relapse and the beneficiary is again DTC-eligible, then the RDSP can be restarted without requiring an entirely new application.

***Note:** If CDGs or CDSBs were paid into the RDSP within 10 years of the death of the beneficiary, those funds must be repaid to the Government.

Karen recently passed away. At the time of her death, her RDSP was valued at \$251,471 of which \$100,000 was original contributions. No grants or bonds were received in the 10-year period prior to death. On death, Karen's estate received a payment of \$251,471, of which \$100,000 was non-taxable. The remaining \$151,471, consisting of grants, bonds and investment income was taxable on her final tax return.

Other Planning Issues

Henson Trust

Named after the Henson family, a Henson trust is a formal trust to which assets can be contributed on behalf of a disabled individual. Because the trust is discretionary in nature (i.e., the trustee has full discretion over when, how and if assets are distributed to the disabled beneficiary), the trust can provide a certain level of financial support without having the disabled beneficiary's provincial benefits clawed back. It should be noted that some provinces, Alberta, for example, do not recognize such trusts.

In many provinces, Henson trusts will continue as an effective estate planning strategy alongside RDSPs. Suitability should be discussed with a financial advisor and lawyer. Greater flexibility may be achieved through a Henson trust as maximum and minimum withdrawals do not normally apply. Short-term expenses may also be addressed more easily in the absence of CDSG and CDSB repayment provisions. As an estate planning strategy, a contribution of \$200,000 could be put into an RDSP during the contributor's lifetime with any excess being left to a trust in the deceased contributor's will.

As of 2016, a Henson trust may be designated as a "Qualified Disability Trust", which receives preferential tax treatment on income earned in the trust.

For more information on the RDSP or to set up a plan, please contact your financial advisor.

GENERAL INQUIRIES

For all of your general inquiries and account information please call:

ENGLISH	1-800-387-0614
BILINGUAL	1-800-387-0615
ASIAN INVESTOR SERVICES	1-888-465-1668
TTY	1-855-325-7030 416-922-4186
FAX	1-866-766-6623 416-922-5660
E-MAIL	service@mackenzieinvestments.com
WEB	mackenzieinvestments.com

Find fund and account information online through Mackenzie Investments' secure InvestorAccess. Visit mackenzieinvestments.com for more information.

The content of this brochure (including facts, views, opinions, recommendations, descriptions of or references to, products or securities) is not to be used or construed as investment advice, as an offer to sell or the solicitation of an offer to buy, or an endorsement, recommendation or sponsorship of any entity or security cited. Although we endeavour to ensure its accuracy and completeness, we assume no responsibility for any reliance upon it.

This should not be construed to be legal or tax advice, as each client's situation is different. Please consult your own legal and tax advisor. Market conditions, tax laws and investment factors are subject to change. Individuals should consult with their financial advisor, accountant or legal professional before taking any action based upon the information contained in this brochure. The Canada Disability Savings Grant (CDSG) and the Canada Disability Savings Bond (CDSB) are provided by the Government of Canada. Eligibility depends on family income levels. Speak to a tax advisor about RDSP's special rules; any redemptions may require repayment of the CDSG and CDSB.

Commissions, trailing commissions, management fees and expenses all may be associated with mutual fund investments. Please read the prospectus before investing. Mutual funds are not guaranteed, their values change frequently and past performance may not be repeated.



List of Registered Occupational Therapists in PEI

Aguila, Sandra J. (# 199)

Amyotte, Bonnie L. (# 189)

Anand Toner, Alice (# 150)

Arsenault, Michelle (# 49)

Bernard, Monique M. (# 176)

Brine, Marie (# 57)

Bruce, Chloe (# 194)

Burchell , Felicia A. (# 185)

Butler, Selynn (# 197)

Callaghan, Cathy (# 44)

Carmichael, Shelley (# 39)

Clark, Julie (# 41)

Colter, Amanda S. (# 162)

Cooke, Nancy (# 37)

Cormier, Shianna (# 202)

Crawford, Karla M. (# 84)

Cutcliffe, Heather (# 18)

Deighan, MacKenzie A. (# 198)

Dennis, Julie H. (# 142)

Drake, Carrie E. (# 155)

Dykerman, Sarah (# 122)

Ellis, Lauren (# 180)

Findlay, Jessica R. (# 177)

Fitzpatrick, Rae E. (# 158)

Fullerton, Katie (# 192)

Gallant, Manon (# 104)

Gaudet, Kendra (# 72)

Gauthier, Gail (# 76)

Gauthier, Heather M. (# 78)

Giasson-Jean, Corinne (# 157)

Goodwin, Tanya M. (# 92)

Groeneweg, Charlotte L. (# 178)

Hackett, Marjorie J. (# 26)

Hann-Levy, Lorilei (# 60)

Higgins, Michelle (# 112)

Holland, Mark (# 82)

Hornby, Devin J. (# 171)

Horne , Jessica I. (# 144)

Hughes, Rachelle (# 81)

Jameson, Alicia (# 135)

Johnston, Christopher (# 109)

LeBlanc, Michael E. (# 140)

Love, Alida L. (# 77)

MacDonald, Sarah D. (# 145)

MacLauchlan, Nicole (# 173)

MacLean, Brittany (# 133)

MacLean, Laura B. (# 169)

MacLeod, Daniel A. (# 170)

MacLeod, Donna F. (# 64)

MacLeod, Grant (# 93)

MacNutt, Jane P. (# 153)

MacPherson, Colleen G. (# 83)

Marchessault, Christine E. (# 115)

McDonell, Allyson (# 123)

McQueen, Tania J. (# 125)

Miller, Marilee T. (# 63)

Mourant, Sherry L. (# 200)

Myers, Melissa A. (# 117)

Nabuurs, Karen (# 193)

Neill, Jennifer J. (# 141)

Paynter, Amanda K. (# 114)

Paynter, Jillian (# 196)

Peters, Anne-Marie S. (# 96)

Porter, Hayley (# 201)

Power, Rogan J. (# 163)

Praught, Emilie (# 143)

Rainnie, Stephanie L. (# 53)

Read, Liane (# 132)

Reid, Lindsay (# 86)

Reid, Shannon J. (# 187)

Richard, Lloyd A. (# 116)

Robertson, Megan A. (# 149)

Ross, Daniel (# 191)

Saunders-Green, Lisa A. (# 159)

Sauve, Marla M. (# 175)

Schurman, Karen E. (# 48)

Shaw, Paula M. (# 188)

TeRaa, Tabatha (# 66)

Thompson, Derek J. (# 147)

Thompson, Yvonne (# 46)

Verhulst, Katie (# 108)

Watson, Joan R. (# 35)

Waugh, Sarah (# 195)

Woodside, Dawna L. (# 33)

Younie, Elizabeth M. (# 156)

List of Occupational Therapists with Special Registration for Telepractice in PEI during COVID19 Pandemic

MacMillan, Krista (# SR 2021-01 (Time-limited telepractice))

McCaskill, Pam (# SR 2021-02 (Time-limited telepractice))

Mercer, Jillian (# SR 2021-03 (Time-limited telepractice))

Thieu, Scott (# SR 2021-04 (Time-limited telepractice))

Private Practice Directory
Psychological Association of Prince Edward Island
Updated February 8, 2021

Kathren Allison, Psychologist

PEIPRB Registration #: 064

Telephone: (902) 314-1113

Email: kathy.allison@rogers.com

Office address: 1 Rochford St., Charlottetown, PE C1A 9L2

Currently accepting referrals: Yes

Typical referral wait time: 6 months

Language in which service provided: English

Formal assessment services provided: Psycho-educational assessments for children and adults; ADHD; Adult ADHD; cognitive/intelligence; learning disability; learning assessments

Relevant areas of practice: Learning disabilities; ADHD/attention problems;

Services provided to: individuals

Age groups served: children; adults

I am a registered psychologist who has been working full time in my own comprehensive private practice (assessment and treatment of anxiety, depression, PTSD, learning disabilities, ADHD, etc.) for over 10 years. I am now focusing exclusively on assessments for learning disabilities and attention problems/ADHD, for both children and adults.

This entry last updated: 30 April, 2018

Dr. Christine Beck, Psychologist

PEIPRB Registration #: 042

Telephone: (902) 367-4446

Email: drchristinebeck@gmail.com

Office Address: 51 University Avenue, Suite 204, Charlottetown, PE C1A 4K8

Currently accepting referrals: Yes

Typical referral wait time: 6 months

Language in which service provided: English

Formal assessment services provided: behavioural / emotional; cognitive / intelligence; learning disability; neuropsychological

Relevant areas of practice: psychotherapy

Services provided to: individuals; groups

Age groups served: adolescents; adults; older adults

Thank you for your interest in my private practice. I am a doctoral level Psychologist with training in adult and geriatric neuropsychology, adolescent and adult community mental health, educational assessment, health and rehabilitation psychology and psychotherapy with a variety of referral concerns.

Please call my office to see if my services are appropriate for your needs.

Sincerely,

Dr Christine Beck

This entry last updated: 23 April, 2016

Dr. Freda Burdett, Psychologist

PEIPRB Registration #: 081

Telephone: (506) 461-9959

Email: drfredaburdett@gmail.com

Office address: 224 Queen Street, Charlottetown, PE, C1A4B6

Currently accepting referrals: Yes

Typical referral wait time: New practice

Languages in which service provided: English

Formal assessment services provided: n/a

Relevant areas of practice: Abuse; Addictions; Anxiety; Attachment issues (adult); Assertiveness; Depression; Grief / loss / bereavement; Habit change; Health issues; Loneliness; Obsessive-Compulsive Disorder; Personal growth / wellness; Personality Disorders; Phobias / fears / panic; Post Traumatic Stress Disorder (PTSD) / trauma; Psychotherapy; Relationship issues; Self-esteem; Separation / Divorce; Sexual issues; Social skills; Stress management; Workplace issues

Services provided to: individuals

Age-groups served: Adolescents and Adults

Dr. Burdett has a PhD in Clinical Psychology. Her primary area of focus has been on trauma assessment and treatment. She works with first responders, military members, and the general public; treating a wide range of clinical disorders, such as PTSD, anxiety, and depression (including post-partum depression). She has been trained in CBT, DBT, ACT, CPT, EMDR, and Prolonged Exposure. She welcomes you to contact her with any questions about her practice and availability.

This entry last updated: 02 August 2019

Sarah Carr, Psychologist

PEIPRB Registration #: 068

Telephone: (902) 367-4722

Email: carrpsychological@gmail.com

Office address: 49 Kensington Rd., Charlottetown, PE C1A 5H6

Currently accepting referrals: No

Typical referral wait time: 8 – 10 weeks

Provides services through telehealth: Yes

Language in which service provided: English

Formal assessment services provided: n/a

Relevant areas of practice: abuse; ADHD/attentional problems; anger management; anxiety; assertiveness; behavioural problems; blended/step family issues; conflict resolution; depression; family therapy; grief/loss/bereavement; obsessive-compulsive disorder; parenting; personal growth/wellness; Post Traumatic Stress Disorder (PTSD)/trauma; psychotherapy; relationship issues; self-esteem; separation/divorce; stress management; workplace issues

Services provided to: individuals; couples; families; groups

Age groups served: pre-school children; school-aged children; adolescents; adults; older adults

This entry last updated: 27 March, 2020

Rebecca Deacon, Psychologist

PEIPRB Registration #: 051

Telephone: (902) 940-6157

Email: rjhooley@hotmail.com

Office Address: Suite 2C, 126 Richmond St, Charlottetown, PE C1A 1H9

Currently accepting assessment referrals: Yes

Currently accepting therapy referrals: No

Typical referral wait time: 3 - 6 months

Provides services through telehealth: Yes

Language(s) in which service provided: English

Formal assessment services provided: ADHD, behavioural/emotional; cognitive/intelligence; learning disability

Relevant areas of practice: ADHD/attentional problems; anger management; anxiety; behavioural problems; conflict resolution; depression; disabilities; family therapy; gifted/talented children; obsessive-compulsive disorder; parenting; phobias/fears/panic; psychotherapy; self-esteem; separation/divorce; social skills

Services provided to: individuals; families

Age groups served: pre-school children; school-aged children; adolescents

Rebecca Deacon's primary area of practice is in School Psychology and she has extensive experience in Psycho-Educational Assessment of School Aged Children, including the diagnosis and treatment of learning, behavioral, and social-emotional problems. Having worked within the school system for many years, Ms. Deacon is knowledgeable regarding evidence-based intervention, academic and behavioral program planning, and collaborating with families, schools, and other professionals. In addition to extensive assessment experience, Ms. Deacon has also treated a wide range of Anxiety Disorders in children and youth using a primarily Cognitive-Behavioral Approach, while also integrating other evidence-based strategies. Ms. Deacon also works with individuals and families to support the development of emotional and behavioral regulation, particularly as it relates to behavioral disorders such as ADHD.

This entry last updated: 27 March, 2020

Dr. Jason Doiron, Psychologist

PEIPRB Registration #: 038

Telephone: (902) 394-1249

Email: psychologist@pei.sympatico.ca

Office Address: 160 Belvedere Ave., Charlottetown, PE

Website: <https://peipsychologist.wordpress.com/>

Currently accepting referrals: Yes

Typical referral wait time: 2 months

Language(s) in which service provided: English

Formal assessment services provided: ADHD; Adult ADHD; behavioural/emotional; cognitive/intelligence; learning disability

Relevant areas of practice: addictions; ADHD / attentional problems; anger management; anxiety; assertiveness; behavioural problems; conflict resolution; couple therapy; depression;

grief/loss/bereavement; habit change; loneliness; obsessive-compulsive disorder; parenting; personal growth / wellness; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD)/trauma; psychotherapy; relationship issues; self-esteem; separation/divorce; sports psychology

Services provided to: individuals; couples; groups

Age-groups served: school-aged children; adolescents; adults

Following my undergraduate years at the University of Prince Edward Island I was trained as a clinical psychologist at the University of New Brunswick, where I obtained my PhD in 2005. My part-time private practice (I am a full time professor at UPEI) is best be described as relatively general in nature. Much of my clinical work presently involves the assessment of cognitive ability and academic skills, along with the diagnosis of learning disabilities and other conditions related to learning (e.g., ADHD) in children and adults. I also have a smaller caseload of individuals who work with me in a psychotherapy / counselling context. My therapeutic work with clients is usually shorter-term with the goal of achieving some improvement or growth within approximately 8-12 sessions of work together. I tend to view clinical issues (such as anxiety or depression) through the lens of cognitive behavioural theory while integrating ideas from other evidence-based approaches as well.

This entry last updated: 14 December, 2015

Dr. Lee-Anne Greer, Psychologist

PEIPRB Registration #: 33

Telephone: (902) 620-9144

Office Address: 126 Richmond Street, Suite 2C, Charlottetown

Currently accepting referrals: No

Typical referral wait time:

Language in which service provided: English

Formal assessment services provided: n/a

Relevant areas of practice: psychotherapy

Services provided to: individuals

Age-groups served: adults; older adults

This entry last updated: 17 November, 2020

Chris Hartley, Psychologist

PEIPRB Registration #: 045

Telephone: (902) 396-8465

Email: hartleypsychology@hotmail.com

Office address: Suite 2C – 126 Richmond St., Charlottetown, PE C1A 1H9

Currently accepting referrals: No

Typical referral wait time:

Language in which service provided: English

Formal assessment services provided: Pain assessment

Relevant areas of practice: Pain management; rehabilitation; sleep disorders; stress management; workplace issues

Services provided to: individuals

Age-groups served: adults

I am a registered psychologist working full time in private practise offering psychological services to adults facing a variety of chronic pain related issues including self management skills and adjustment, pain education, psychological difficulties and sleep problems.

This entry last updated: 08 February, 2021

Barbara Jones, Psychologist

PEIPRB Registration #: 061

Telephone: (902) 393-3829

Email: windhorseps@gmail.com

Office address: 174 Pickles Lane, Alexandra, PE
Box 24076, Stratford, PE C2B 2V5

Currently accepting referrals: Yes

Typical referral wait time: 5 – 6 months

Language in which service provided: English

Formal assessment services provided: behavioural / emotional

Relevant areas of practice: anger management; anxiety; attachment issues; assertiveness; depression; grief/loss/bereavement; habit change; health issues; loneliness; obsessive-compulsive disorder; pain management; parenting; personal growth/wellness; personality disorders; rehabilitation; relationship issues; self-esteem; separation/divorce; sexual issues; sleep disorders; social skills; stress management; workplace issues; mindfulness interventions

Services provided to: individuals; groups

Age-groups served: adults

Trained as a contemplative psychotherapist, mindfulness practices are embedded in all my work. My primary focus is PTSD I've worked extensively with first responders including veterans, police and fire fighters. I am working full-time at Serene View Ranch Psychological Services (www.sereneviewranch.com) where I offer individual therapy using mindfulness and CBT, psycho-educational and support groups as well as providing assessment services related to PTSD capacity and return-to-work.

This entry last updated: 15 December, 2018

Ruth Lacey, Psychologist

PEIPRB Registration #: 007

Telephone: (902) 675-4282

Email: rlacey688@gmail.com

Office mailing address: P.O. Box 512, Charlottetown, PE C1A 7L1

Currently accepting referrals: Yes

Typical referral wait time: 1 - 4 weeks

Languages in which service provided: English, Italian, Spanish

Formal assessment services provided: n/a

Relevant areas of practice: abuse; addictions; adoption issues; ADHD / attentional problems; anger management; anxiety; attachment issues; assertiveness; autism spectrum disorder; behavioural problems; depression; family therapy; family violence; gifted/talented children; grief/loss/bereavement; health issues; loneliness; obsessive-compulsive disorder; pain

management; parenting; Post Traumatic Stress Disorder (PTSD)/trauma; relationship issues; self-esteem; stress management; troubled children and youth; workplace issues

Services provided to: individuals; couples; families; groups

Age-groups served: pre-school children; school-aged children; adolescents; adults; older adults

I believe that education is important: people do the best they can and when they know better, they do better. I believe that people are inherently good. I believe that people need to be accountable, recognizing that they have choices and that they make their own decisions. I believe that every person who works on doing better benefits society. I have faith that with my experience and the client's desire to change, between us, solutions and better ways of doing things will emerge.

This entry last updated: 2 January, 2016

Caroline LeBlanc, Psychologist

PEIPRB Registration #: 020

Telephone: (902) 393-3829

Email: caroline11leblanc@gmail.com

Office address: 174 Pickles Lane, Alexandra, PE

Currently accepting referrals: No

Typical referral wait time: Not accepting referrals

Language in which service provided: French and English

Formal assessment services provided: Work disability assessments

Relevant areas of practice: abuse; anxiety; depression; health issues; loneliness; obsessive-compulsive disorder; personal growth / wellness; personality disorders; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD) / trauma; psychotherapy; rehabilitation; relationship issues; CISD; equine assisted psychotherapy

Services provided to: individuals; groups

Age-groups served: adults; older adults

Caroline has been specializing in the area of trauma assessment and therapy for over 20 years. Her emphasis has been on helping first responders, military personnel and veterans deal with trauma and PTSD. Her approach to psychotherapy is based on the Cognitive Behavioural Model, Mindfulness, Equine Assisted Psychotherapy, and Sensorimotor Psychotherapy. Eight years ago, she became certified in Equine Assisted Psychotherapy. She also is trained in EMDR, an evidence-based approach for the treatment of trauma. Caroline operates a multidisciplinary mental health clinic that provides a full range of psychological assessments and treatment for children, adolescents and adults. The centre, Serene View Ranch, is located just outside of Charlottetown and overlooks Pownal Bay. Please visit the website at www.sereneviewranch.com

This entry last updated: 27 December, 2019

Dr. George Mallia, Psychologist

PEIPRB Registration #: 040

Telephone: (902) 367-4446

Email: drgeorgemallia@gmail.com

Office Address: 51 University Avenue, Suite 204, Charlottetown, PE C1A 4K8

Currently accepting referrals: Yes

Typical referral wait time: 1 year

Language(s) in which service provided: English

Formal assessment services provided: ADHD; Adult ADHD; behavioural/emotional; cognitive/intelligence; custody / access; learning disability; neuropsychological; parental capacity

Relevant areas of practice: abuse; addictions; adoption issues; ADHD / attentional problems; anger management; anxiety; attachment issues; assertiveness; autism spectrum disorder; behavioural problems; blended/step family issues; body image; conflict resolution; depression; disabilities; eating disorders; family therapy; gifted/talented children; grief/loss/bereavement; health issues; loneliness; obesity; obsessive-compulsive disorder; pain management; parenting; personality disorders; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD)/trauma; psychotherapy; rehabilitation; relationship issues; self-esteem; separation/divorce; sexual issues; sleep disorders; social skills; sports psychology; stress management; workplace issues

Services provided to: individuals; families

Age-groups served: school-aged children; adolescents; adults

This entry last updated: 3 December, 2014

Dr. Rhonda Matters, Psychologist

PEIPRB Registration #: 027

Telephone: (902) 388-8846

Office address: 126 Richmond St. Suite 2C, Charlottetown, PE C1A 1H9

Currently accepting referrals: No

Typical referral wait time:

Language in which service provided: English

Formal assessment services provided: n/a

Relevant areas of practice: abuse; ADHD/attentional problems; anxiety; depression; family therapy; family violence; grief/loss/bereavement; obsessive-compulsive disorder; phobias/fears/panic; post Traumatic Stress Disorder (PTSD)/trauma; psychotherapy; relationship issues; separation/divorce; stress management

Services provided to: individuals; couples; families

Age-groups served: children; adolescents; adults

Dr. Matters has a PhD in Clinical Psychology from the University of Windsor in Ontario. She has been practicing for more than 20 years, with her primary focus being the treatment of behavioural disorders in children, depression, and anxiety disorders in both children and adults.

She uses primarily a Cognitive-Behavioural Approach but has also been trained in Eye Movement Desensitization and Reprogramming (EMDR), Interpersonal Therapy, Solution Focused Therapy, and Narrative Therapy

This entry last updated: 8 February, 2021

Dr. Brent Macdonald, Psychologist

PEIPRB Registration #: 072

Telephone: (403) 229-3455

Email: brent@complexlearners.com

Office Address: 320, 1167 Kensington Cres. NW (Calgary); local office on PEI upon request

Currently accepting referrals: Yes

Typical referral wait time: Varies; assessment clinics run in 2-week cycles through the year

Provides services through telehealth: Yes

Language(s) in which service provided: English

Formal assessment service provided:

ADHD; Adult ADHD; Behavioural / Emotional; Career / Vocational; Cognitive / intelligence; Learning disability

Relevant areas of practice: ADHD / attentional problems; Anxiety; Autism spectrum disorder; Behavioural problems; Depression; Disabilities; Gifted / talented children; Parenting

Services provided to: Individuals and Families

Age-groups served: School-aged children, Adolescents, and Adults

While currently a resident of Calgary, Dr. Macdonald is a native Islander who maintains active registration and practice as a psychologist in his home province of PEI. Dr. Macdonald provides psychoeducational assessments through ongoing 2-week clinics on PEI, offered as needed. Once initiated, comprehensive psychoeducational assessments can be completed in a timely manner, allowing for fast and effective planning for students of a wide range of ages. Assessments focus on attention, learning, and social/emotional & behavioral issues, with a focus on providing practical and effective recommendations and strategies.

Since clinics run through the year, there is also the opportunity to follow-up and review the effectiveness of interventions, allowing Dr. Macdonald to maintain ongoing contact and support for his clients. Collaboration with schools, where possible, is also a service that can be incorporated into the assessment process.

Learn more at complexlearners.com or contact Dr. Macdonald directly at brent@complexlearners.com.

This entry last updated: 27 March, 2020

Dr. Wm. Neil McLure, Psychologist

PEIPRB Registration #: 009

Telephone: (902) 432-3910

Fax: (902) 432-3007

Email: mclure@pei.sympatico.ca

Office address: 292 Water St., Summerside

Currently accepting referrals: Yes

Typical referral wait time: 3 - 4 weeks

Language in which service provided: English

Formal assessment services provided: ADHD; Adult ADHD; behavioural/emotional; cognitive/intelligence; insurance; learning disability; legal; neuropsychological; pain assessment

Relevant areas of practice: abuse; acquired brain injury; addictions; adoption issues; ADHD / attentional problems; anger management; anxiety; assertiveness; autism spectrum disorder; behavioural problems; blended/step family issues; couple therapy; depression; disabilities; family therapy; gifted/talented children; grief/loss/bereavement; health issues; loneliness; obsessive-compulsive disorder; pain management; parenting; personal growth/wellness; personality disorders; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD)/trauma;

psychotherapy; rehabilitation; relationship issues; self-esteem; separation/divorce; social skills; sports psychology; stress management; traumatic brain injury; workplace issues

Services provided to: individuals; couples; families

Age-groups served: pre-school children; school-aged children; adolescents; adults; older adults

This entry last updated: 1 March, 2013

Dr. Terry Mitchell, Psychologist

PEIPRB Registration #: 023

Telephone: (902) 394-0034

Email: mitchellcounselling.consulting@gmail.com

Office address: 75 Villa Ave., Charlottetown, PEI, COA 2B2

Currently accepting referrals: Yes

Typical referral wait time: 1 week

Provides services through telehealth: Yes

Languages in which service provided: English

Formal assessment services provided: n/a

Relevant areas of practice: anxiety; body image; colonial trauma, depression; eating disorders; grief/loss/bereavement; obsessive-compulsive disorder; pain management; parenting; personality disorders; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD)/trauma; relationship issues; sleep disorders; and stress management.

Services provided to: individuals

During this time of self-isolation and social distancing I am providing counselling services by telephone and video conferencing with pro-bono services for registered health professionals and front line workers. I am a psychology professor with many years of experience working with survivors of child sexual abuse and other forms of trauma. My counselling practice is based on a client-centred, feminist, psychodynamic approach using Mindfulness Practices, Cognitive Behaviour Therapy (CBT) and Dialectical Behavioural Therapy (DBT).

This entry last updated: April 23, 2020

Parise Nadeau, Psychologist

PEIPRB Registration #: 35

Telephone: (902) 438-1109

Email: parisenadeau@gmail.com

Office address: Summerside

Currently accepting referrals: Yes

Typical referral wait time: 3 - 6 weeks

Languages in which service provided: French; English

Formal assessment services provided: ADHD; Adult ADHD; behavioural/emotional; cognitive/intelligence; learning disability

Relevant areas of practice: ADHD/attentional problems; anger management; anxiety; assertiveness; autism spectrum disorder; behavioural problems; body image; depression; gifted/talented children; grief/loss/bereavement; habit change; loneliness; obesity; obsessive-compulsive disorder; pain management; parenting; personal growth/wellness; phobias/fears/panic; psychotherapy; self-esteem; social skills; stress management

Services provided to: individuals; families

Age-groups served: pre-school children; school-aged children; adolescents; adults

My main area of practice is with children, youth and families; providing support with parenting and behaviour management, as well direct individual therapy with children, youth and adults. I also offer mental health, behavioural and psycho-educational assessments.

Bilingual service.

This entry last updated: 1 March, 2013

Ken Pierce, Psychologist

PEIPRB Registration #: 006

Telephone: 1-877-569-3710

Email: contact@kenpiercephychologist.com

Website: www.kenpiercephychologist.com

Office address: 549 North River Rd., Vision Care Building, 2nd floor, Charlottetown, PE C1E 1J6

Currently accepting referrals: Yes

Typical referral wait time: 5 - 7 days

Provides services through telehealth: Yes

Language in which service provided: English

Formal assessment services provided: behavioural/emotional; career/vocational; custody/access; pain assessment; parental capacity

Relevant areas of practice: abuse; addictions; adoption issues; ADHD/attentional problems; anger management; anxiety; attachment issues; assertiveness; autism spectrum disorder; behavioural problems; blended/step family issues; body image; conflict resolution; couple therapy; depression; disabilities; eating disorders; family therapy; family violence; financial loss; gifted/talented children; grief/loss/bereavement; habit change; health issues; infatuations; loneliness; obesity; obsessive-compulsive disorder; pain management; parenting; personal growth/wellness; personality disorders; phobias/fears/panic; Post Traumatic Stress Disorder (PTSD)/trauma; psychotherapy; rehabilitation; relationship issues; resentments; self-esteem; separation/divorce; sexual issues; sleep disorders; social skills; spiritual; sports psychology; stress management; workplace issues

Services provided to: individuals; couples; families; groups

Age-groups served: pre-school children; school-aged children; adolescents; adults; older adults

I am a registered psychologist with over 30 years experience in a variety of roles including drug crisis, early childhood education, post secondary education, corporate training, community development and private practice.

There are many new science based tools available to assist others to evolve in the areas where they are challenged. The wisest professional helpers say similar things including: therapy is 'focussed accelerated learning'; since thinking determines feelings talking mostly about feelings can distract from the learning process; everyone is a survivor of their past so no longer a victim of it; and while people do have losses when they uncover the gains they become more present and get on with their life.

I have the privilege of working with clients aged 2 to 82 years. I have assisted individuals and groups to move on from: assault, abuse, addictions, ADHD, allergies, auto collisions, auto immune diseases, bullying, bankruptcy, bipolar disorder, cancer, Crohn's, death, depression,

divorce, harassment, incest, injuries, job loss, learning disabilities, PTSD, workplace strikes and other traumatic events. I have a special interest in working with couples and those struggling with bullying, depression and self esteem.

This entry last updated: 27 March, 2020

Peter Joseph Pierre, Psychologist

PEIPRB Registration #: 044

Telephone: (902) 436-6799

Email: pjpierre@live.com

Office address: Suite 5, Granville Professional Centre, 500 Granville, Summerside, PE, C1N 5Y1

Currently accepting referrals: Yes

Typical referral wait time: less than 1 week

Language in which service provided: English

Formal assessment services provided: ADHD, adult ADHD, behavioural/emotional, career/vocational, cognitive/intelligence, learning disability

Relevant areas of practice: abuse; addictions; ADHD/attentional problems; anger management; anxiety; attachment issues; assertiveness; autism spectrum disorder; behavioural problems; blended/step family issues; body image; conflict resolution; depression; disabilities; grief/loss/bereavement; habit change; health issues; loneliness; obsessive compulsive disorder; pain management; parenting; personal growth/wellness; phobias/fears/panic; post- traumatic stress disorder (PTSD)/trauma; psychotherapy; rehabilitation; self-esteem; separation/divorce; sexual issues; sleep disorders; social skills; stress management; workplace issues.

Services provided to: individuals; couples; families

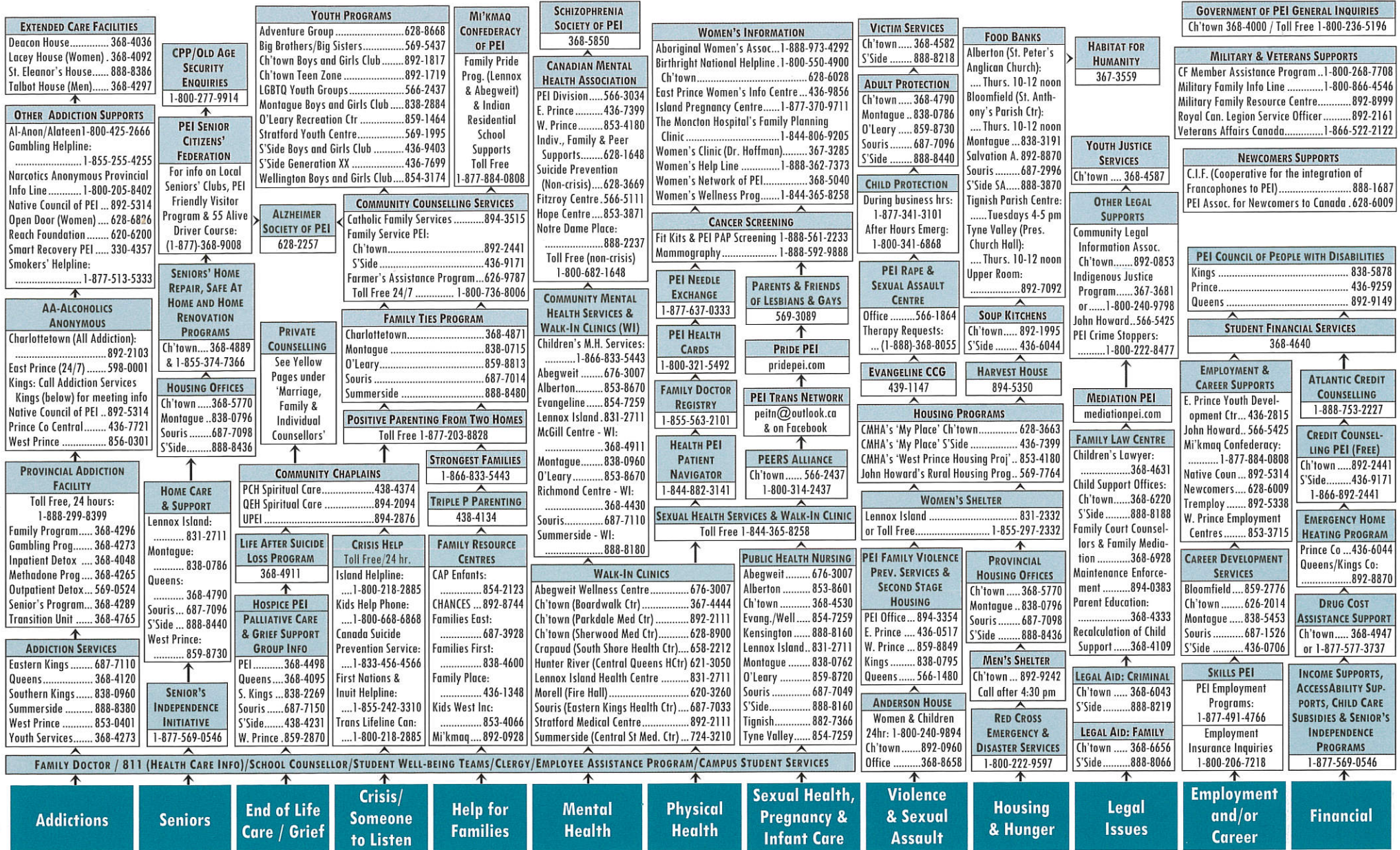
Age-groups served: school-aged children; adolescents; adults

I practice cognitive behavioural therapy and emotion focused therapy.

This entry last updated: 21 May, 2015

THE PEI HELPING TREE

The PEI Helping Tree is designed to inform Islanders of the many helping resources available on Prince Edward Island. If you or someone you care about is experiencing a problem in any of the areas listed, follow the arrows on the flow chart to find resources that may help. There are times in everyone's lives when we need to reach out to others - sometimes it's just a matter of knowing how to contact them. Note: unless indicated, you need to dial 902 for all local calls. **If you are still uncertain of where to turn, please call the Island Helpline at 1-800-218-2885, toll free 24/7. Emergency Call 9-1-1**



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