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MFEATnews

School-Age ABA Interim Funding Information Session

Manitoba Families for Effective Autism Treatment & the St. Amant ABA Program invite you to attend a School-Age ABA Interim Funding Information Session. This information session is critical for families of children who are currently receiving or interested in accessing school age ABA services in the future. The topics will be presented by representatives from St. Amant as well as MFEAT. Please RSVP to Nathalie Polinchuk at 256-4301 ext 3443 prior to March 21, 2007. See page two for more information.



President's Report

Advocacy Update

The MFEAT board was very pleased to meet with Grant Doak , Assistant Deputy Minister Family Services and Wes Henderson, Executive Director, Disability Programs Family services on Feb 6th. The purpose of the meeting was to provide them with an introduction to the MFEAT organization and to review some of our past successes and future objectives as an organization. The meeting went very well with a good exchange of information from both sides.

(continued on page 3)

Manitoba Families for Effective Autism Treatment
 162-2025 Corydon Ave
 Suite 129
 Winnipeg, MB
 R3P 0N5
 www.mfeat.ca info@mfeat.ca

Our Mission Statement:

Our mission is to ensure Manitoba children with Autism Spectrum Disorder have access to Effective treatment.

Calendar

School-Age ABA Interim Funding Information Session.....March 24, 2007

“Evan’s K9” Bud, Spud n’ Steak Fundraiser.....March 23, 2007

MFEAT Conference.....Oct 22 & 23, 2007





Manitoba Families for Effective Autism Treatment & The St. Amant ABA Program invite you to attend ...

School-Age ABA Interim Funding:

An Information Session for Families



Saturday, March 24, 2007

10:00 a.m. – 12:00 p.m.

Canad Inn Fort Garry

Ambassador A

1824 Pembina Highway

This session is critical for families of children who are currently receiving or interested in accessing school age ABA services in the future.

Topics

- = **St. Amant:** Advancements in the definition and development of ABA services, and criteria for families & schools.
- = **MFEAT:** The status of permanent school age ABA programming & advocacy considerations for families.

**RSVP by March 21, 2007
to Nathalie Polinchuk at
256-4301 ext. 3443**



President's Report – continued from page one.)

School Age ABA Interim Funding

There has not been much happening in this regard as we are awaiting a response from government in regard to our submission made last fall. We anticipate that we will hear something in the very near future as the new budget for the upcoming year will be tabled shortly. **We are planning on hosting a school age ABA information session on March 24th. Please see the ad contained in this newsletter for more information.**

MFEAT Conference

This year's event has been set. It will take place on October 22nd and 23rd at the Canad Inn Polo Park. Further details will be available very soon.

10th Anniversary Event

The MFEAT organization is very excited to be celebrating it's 10th anniversary this spring. The organization has grown from 6 or 7 original families to well over 100 registered members in our the last 10 years. I think we can be very proud of our accomplishments which include the 3-year ABA pilot project, the St Amant ABA program for pre-school children and the creation of the interim funding for school age ABA services.

In addition we have supported and educated families by hosting information sessions and yearly annual conferences with world class presenters over the years. We have tentatively set the date for an event on the first weekend in June and more information will be forth-coming. We look forward to celebrating our successes with our families and friends and hope to see everyone there.

Other Initiatives

We are working on a new brochure, creating a parent networking event and possibly looking at fundraising opportunities.

In closing I would once again like to remind all members that we are reaching a very critical time in the development of school age ABA services. **We do not currently have a school age program** and are facing some significant issues with the interim funding arrangements. We need you support now to collectively voice our concerns in order to rectify the situation and ensure that we can continue to develop school age ABA services in our province. We hope to see everyone out for the information session on March 24th. In the meantime please feel free to call me with any concerns or questions you may have in regard to the MFEAT organization.
*MFEAT President
 Eldon Strachan*



***"Evan's K9"
 Bud Spud n'
 Steak
 Fundraiser***

*Friday March 23rd, 2007
 5:00 – 8:00 pm*

*Canad Inns – Cowboys
 1034 Elizabeth Rd.*

(DINNER, SILENT AUCTION & 50/50 DRAW)

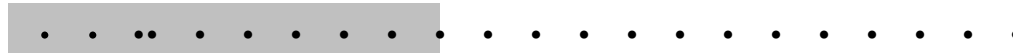


This dinner is going to the DOGS!
 All proceeds will be going to National Service Dogs. Since 1996, National Service Dogs (NSD) has been training Labrador and Golden Retrievers to assist children and families living with Autism. Service dogs have been shown to improve the family's lifestyle and the child's communication skills and behaviour. Service dogs also help to increase the child's levels of safety, independence, confidence and social isolation is dramatically reduced.
 Please visit:
www.nsd.on.ca

***For tickets,
 please call 254-8748
 \$15.00 ea***

Evan is an 8 year old boy with autism. He has difficulties with communication, social interactions, play and is a flight risk. Please consider supporting this cause to bring Evan new hope and keep him safe!

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More on M-172 and Bill C-304

(December 5, 2006)

Andy Scott's Motion for a National Autism Strategy (Bill M-172) was voted on and passed in the House of Commons. Up next: Shawn Murphy's Bill C-304 to create a National Autism Strategy to be debated. The Senate Committee inquiring into funding for the treatment of autism will hold more hearings with witnesses including Health Minister Clement, and others. We should expect to see a report, hopefully with meaningful recommendations, by May 2007. Motion M-172, as passed by the House of Commons on Tuesday, Dec 5, 2006: That, in the opinion of the House, the government should create a national strategy for autism spectrum disorder that would include: (a) the development, in cooperation with provincial / territorial governments, of evidence based standards for the diagnosis and treatment of autism spectrum disorder; (b) develop, in cooperation with provincial governments, innovative funding methods for the care of those with autism spectrum disorder; (c) consulting with provincial / territorial governments and other stakeholders on the requirements of implementing a national surveillance program for autism spectrum disorders; and d) the provision of additional federal funding for health research into ASD.

MP Criticizes Harper Government's Autism Announcement

(November 21, 2006 – Ottawa)

The Honourable Andy Scott, M.P. for the Fredericton riding says the Conservative Government's efforts to address autism are "very modest and don't go nearly far enough".

During a press conference, Health Canada Minister Tony Clement announced government will establish a Research Chair on Autism, designate a policy branch for autism and create a new Autism web page. Minister Clement also pledged to launch an extensive consultation process and hold a symposium on Autism in 2007. Mr. Scott was invited to the news conference by the Health Minister, who formally recognized the Fredericton M.P. for his work on the file. "While I am glad the Minister recognizes the need for government to do something on autism, its' response is insufficient with many parents arguing it is woefully inadequate," states the Fredericton M.P.

Mr. Scott is hopeful the Conservative minority government will move beyond what it announced and support his Private Member's Motion (M-172) calling for a National Autism Strategy. The second hour of debate was scheduled for November 27, 2006 with a vote to be held.

Scott's motion, seconded by Nova Scotia NDP MP Peter Stoffer, calls for the establishment of a National Autism Strategy that would include: direct funding for people who care for those with autism spectrum disorders, including the possibility of transferring federal funds to assist provincial governments to provide no-cost treatment, education, professional training and other required supports for Canadians with autism spectrum disorder without unreasonable wait times. The motion also calls for greater funding for health research into autism treatments and the creation of a national surveillance program.

"During the past several months, I have talked with dozens of families across the country who have profoundly autistic children. The passing of this motion (developed in collaboration with Mr. Stoffer and Leo Hayes High School in Fredericton) along with the provision of funding would directly affect the lives of many thousands of Canadians".



(continued)

Hon. Shawn Murphy (Charlottetown) moved that Bill C-304, An Act to provide for the development of a national strategy for the treatment of autism and to amend the Canada Health Act, be read the second time and referred to a committee. He said: "Mr. Speaker, I am pleased to rise in the House today to start off the second reading debate on this bill. Bill C-304 acknowledges the seriousness of this issue in this country. It clearly enunciates that we are talking about a health issue. The bill has three provisions. We are asking the Minister of Health, acknowledging of course that this involves primarily provincial jurisdictions, to convene immediately a meeting with the 10 provincial and territorial health ministers to discuss this very issue. We are asking that the minister table before the end of 2007 a national strategy on the treatment of autism. We are also asking that the Canada Health Act be amended as follows: Section 2 of the Canada Health Act is renumbered as subsection 2(1) and is amended by adding the following: (2) For the purposes of this Act, services that are medically necessary or required under this Act include Applied Behavioural Analysis (ABA) and Intensive Behavioural Intervention (IBI) for persons suffering from Autism Spectrum Disorder. Members will conclude from my remarks that the

overarching issue I want to make in this debate is that we are talking about a health issue and that the treatment modalities that I refer to be made available to all residents of Canada pursuant to the provisions of the Canada Health Act. Bill C-304 does not stand alone. There is a whole array of extremely important bills and motions on this extremely important topic. I would suggest the debate is raging. The point I am making here today with this bill is effective treatment modalities exist. The symptoms of ASD generally manifest themselves within the first three years of a child's life. It has been shown that when ASD is diagnosed early and the specific individual needs of the child are assessed and addressed, children with ASD can grow to exhibit much fewer or no symptoms. There are two vital characteristics of this treatment, early diagnosis and consistent, long term care. We refer to these treatments as applied behavioural analysis and intensive behavioural intervention. These treatments include speech and language therapy. More important, ABA and IBI are designed to teach a child with autism a whole new way of learning. The treatment teaches them how to break down a task into its smallest components, and through constant, intensive reinforcement, to apply this method of thinking to everyday life as well as complex tasks. Due to the intensity and time span of this

treatment and the fact that it is almost exclusively conducted in a one on one environment, the treatment is costly; it is not cheap. When ABA or IBI are successfully applied, the changes in a child can be dramatic. There are stark differences as to the availability of this treatment across Canada. Some provinces offer it fairly generously. Some provinces include it in the social services or welfare envelope and it is means tested. We definitely have a two tier, or what I would perhaps better classify, a 13 tier health care system when we talk about the treatment of autism. Again, it depends entirely on what province that particular child happens to be born in, and in some instances, the regions within the provinces where that child happens to live. For example, in Alberta, children have full access to treatment. In Ontario they have access up to a certain and I would argue arbitrary age at which time treatment is cut off. In other provinces, as I have stated, it is in the social services envelope. It is means tested and it is just not available in any way, shape or form the way it should be under our Canada Health Act. As we go forward and we debate this bill, we as a society are judged on how we treat the most vulnerable among us. We owe it to all Canadians, all families dealing with this particular issue.



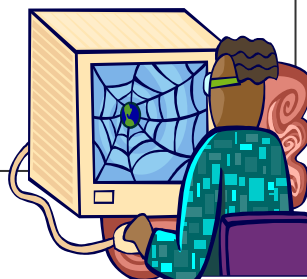
(continued)

I realize that somebody will state that it is a provincial issue, but again we have the Canada Health Act. I realize we cannot dictate to the provincial health ministers, but we can come forward with a national strategy. We have to discuss it and debate it with the provincial ministers and we have to eventually amend the Canada Health Act so these children, these individuals, these families, can get the treatment that they deserve. There is a national strategy with respect to cancer, diabetes and drugs. Why can we not have one for autism? Again, I mention that it will not be cheap. It will cost a lot of money and the Government of Canada would have to pay its fair share. That will be one of the arguments from the provincial government. If they are being asked to do this, the federal government is going to have to pay its fair share. However, on the other side of the coin, there are substantial and numerous benefits. A lot of individuals are not diagnosed early and do not receive the treatment to which they are entitled. They end up being institutionalized at considerable expense to society. The families have to incur hundreds of thousands of dollars treating these children with no reimbursement. The quality of life of the families suffers and, most important and tragic, the quality of life of the affected individuals suffers dramatically. We are judged on how we treat the most

vulnerable among us, whether it is the disabled, sick, old, the infirm or people with autism. I know people will say that it is a jurisdictional issue. I think I have dealt with that already. People will say that it costs money. Yes, it costs money, but cancer costs money, heart disease costs money, diabetes costs money. These are health issues. I go back to my original statement. If it is a health issue, let us move forward and deal with it. If it is not a health issue, let us put it to bed. In conclusion, I ask every member of the House to do the right thing on this issue. I ask that we all show leadership. I ask members to vote for this bill and move forward on this issue as soon as possible."

Canada Autism.com

Canadaautism.com endorses the [Autism Spectrum Disorder \(ASD\)](#) Petition to Canadian Parliament (House of Commons). The website provides updates and information about the petition for people with ASD to be able to access health care. For more information, please visit <http://canadaautism.com/>



Looking for Level 3 EA?

Senior Tutor with 5 years experience looking to integrate into the school system as an EA

"Dear Parents, I have been employed as a Senior Tutor with St. Amant for the past 2 years. My experience also includes working as a home tutor in both private programs, as well as the St. Amant ABA program, providing respite for children with autism and working as a research assistant with children with autism. Currently on maternity leave, I am returning to work at the beginning of April 2007 and am looking for a position as an EA with a level 3 child in September 2007. If you are interested please contact Mandy at (204) 269-1073." Resume & references available

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Autism Asperger Publishing Company

(AAPC) is an independent publisher specializing in books on autism spectrum disorders based on the latest research on autism, Asperger syndrome and other pervasive developmental disorders. They have recently expanded their titles of books and resources on social skills and sensory integration dysfunction.

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Genetic Markers for Autism Found

Canadian researchers have led an international team in the discovery of a chromosomal region containing the genes that cause autism, a finding considered a breakthrough in the effort to better understand the condition.

Researchers at Hospital for Sick Children in Toronto and the Offord Centre for Child Studies say the finding is a major breakthrough in the effort to better understand the condition and to eventually improve treatment for patients. The discovery was part of the largest genome scan ever attempted in autism research. Called the Autism Genome Project, the initiative involved 137 researchers from 50 institutions in nine countries, including Canada. Working together, the scientists were able to share samples, data, and expertise to analyze DNA from about 1,600 families worldwide. They zeroed in on a special group of neurons and the genes affecting their development and function. They then used cutting-edge Copy Number Variation (CNV) analysis to look for genetic commonality as well

as unique differences in autistic individual.

The scientists were able to implicate a previously unidentified region of chromosome 11, and neurexin 1, a member of a family of genes believed to be important in neuronal contact and communication.

The neurexin finding in particular highlights a special group of neurons, called glutamate neurons, that could play a critical role in autism spectrum disorders.

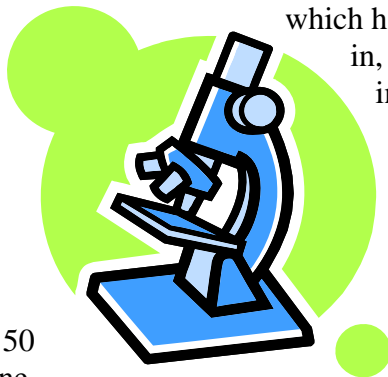
"The clinical implications of this discovery are unprecedented," said Dr. Peter Szatmari, director of the Offord Centre for Child Studies.

"Not only have we found which haystack the needle is in, we now know where in the haystack that needle is located.

Dr. Stephen Scherer, a senior scientist in Genetics and Genomic Biology at SickKids, was the first to discover the existence of

common genetic variants and is delighted with the discoveries the consortium was able to make.

"We first used genome scanning technology to test genetic markers in autistic children and find regions in the genome linking to autism susceptibility genes," said Dr. Scherer, a senior scientist in Genetics and Genomic Biology at SickKids.



"By combining this with cutting edge CNV analysis we were able to reveal, for the first time, the genetic architecture underlying autism susceptibility." The findings have been published online in the prestigious journal Nature Genetics.

Autism affects roughly one in 165 children, making it the most common form of any neurological disorder or severe developmental disability of childhood. Those affected exhibit severe impairments in reciprocal social interaction and communication, and a preference for repetitive, stereotyped behaviours.

Ontario to offer Autism Treatment in all School Boards



Michael Oliveira - Canadian Press
TORONTO — School boards across Ontario are being served notice that they must be able to provide specialized autism treatment in classrooms, ideally by September, Education Minister Kathleen Wynne said Friday. Currently, parents of autistic children are often forced to choose between keeping their kids at home to receive expensive Applied Behaviour Analysis therapy or taking them to school, where they



