



*Help Us Understand
Autism Spectrum Disorders:
A Guide for the Extended Family
(Updated January 2010)*

If you do not see a resource or listing for your area,
please contact your local FBR office, the Family Support Coordinator,
or the Chief Operating Officer.

We will make every attempt to meet your needs.

Family Behavioral Resources - Autism Services

Local Phone Number: 724-850-8118, Ext. 25

Toll Free Number: 1-866-4-FBR-ASD

Fax Number: 724-850-9500

autismservices@familybehavioralresources.com

www.familybehavioralresources.com

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Introduction

Welcome to our Resource Guide for Extended Families! Extended family members typically include grandparents, aunts, uncles, and/or cousins. Parts of this guide may also be useful to share with neighbors, close friends of the family, other important caregivers, or even co-workers and employers. This guide:

- ✓ Is meant to offer a comprehensive but simplistic, family-friendly explanation of what autism is, and how it affects the immediate family.
- ✓ Will offer sample scenarios and situations to show extended family members firsthand examples of what the family with autism goes through, and how they can better support their loved ones.
- ✓ Will provide a list of resources and websites that extended family members can review in order to better understand autism.
- ✓ Will offer suggestions as to how extended family members can seek their own support in order to better cope with this change in their family.
- ✓ Will show you a brief overview of treatment options for autism so that you may understand what treatments and services that your loved one may receive.

It is our hope that families will find our guide educational and informative. We have made extensive efforts in all of our resource guides to provide the most comprehensive information and listings in relation to autism treatments, therapies, and providers. We realize that there may be some organizations, facilities, or important resources that still need to be added. If this is the case, please let us know what we have missed so we may share that information with the community.

Family Behavioral Resources is dedicated to providing support to children and families affected by autism spectrum disorder. We believe that autism is treatable with early intervention and treatment. Our team of Regional Directors of Autism Services and Autism Coordinators work very hard to treat children with autism not just through wraparound services, but also by training, mentoring, and supervising other clinicians in a variety of modalities. Our Family Support Coordinator works closely with the Autism Team in the development of community outreach efforts, such as partnering with school districts to develop autism support classrooms, offering workshops, and providing resource packets that promote autism awareness and education.

If you would like more information about autism or about the services that FBR can provide to families, please do not hesitate to contact:

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1-866-4-FBR-ASD or 724-850-8118, Ext. 25 (Office)
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Please be sure to visit us on the web at **www.familybehavioralresources.com**.

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A Brief Introduction to the World of Autism - From the Mind of a Parent



My son was diagnosed with Autism in May 2001, and I remember feeling like a Mack truck moving at one hundred miles per hour had hit me. It certainly explained my son's numerous behaviors that nobody else seemed to be able to explain.

Prior to obtaining the diagnosis at three and a half years old, I felt lost, confused and completely inadequate at my new role as a mother. I watched my little boy run around my home like a rat in a maze for up to fourteen hours a day. He frequently flickered light switches off and on, repeatedly, and then turned the faucet on over and over again, and he could do it for hours on end. I watched him line up his Disney figurines, alphabet blocks and cars along our living room windowsills and floor. I would often call his name and he was usually non-responsive, almost appearing deaf. He could not speak beyond a babble – I was never called Mama, never told to give him juice, and was never told, “I love you,” when I tucked him into bed at night. Sometimes he would look into my eyes and blurt out these jumbled mish-moshed syllables that didn't form sentences, let alone words. He never played with other children; in fact, he seemed to be scared of them. When my son was angry or frustrated, he would bang his head over and over – never seeming to feel the pain. He would only wear certain types of clothing, eat certain foods, and he never let me brush his teeth or hair. Trying to cut his hair was a nightmare! One of his worst behaviors was a high-pitched, ear-piercing scream, which would repeat frequently throughout the day. Watching my little boy engage in all of these behaviors was heartbreaking and I had no idea how to help him. Life spun out of control for my son and our family, and I did not have any idea what was making my little boy act like this.

Welcome to the world of autism – a world that's overwhelming and confusing, and leaves parents with many unanswered questions. It's a world in which, at the present time, there is no cause and no cure. The autism spectrum contains several diagnoses that have similar features. It's important to remember that no two children with Autism present in the same way, even if they have the exact same diagnosis. This is why we call autism a “spectrum” diagnosis. There is no “one size fits all” treatment, and there is a lot of red tape to sort through before you can obtain services.

In time, you'll learn more of the technicalities and jargon that goes along with having the diagnosis of Autism. You'll learn the “glossary of terms”, about different therapies, hear thousands of opinions, and learn how to sort fact from fiction.

For now, come to terms with the fact that your life may never be quite the same as it was before, but that there is *hope for tomorrow* – hope that someday your loved one and family reach its fullest potential.

The Reality of Autism – A Comparison of Facts and Common Misconceptions

Myth: Children with Autism simply suffer from emotional problems.

Fact: Children with an Autism Spectrum Disorder are affected with a neurological condition that may be genetic or biological in nature.

Myth: Children with Autism are either mentally retarded or have “savant” or “genius” skills like “*Rain Man*.”

Fact: Only a percentage of children on the spectrum have a dual diagnosis of Autism along with Mental Retardation. Most people with Autism do not have “savant skills” like Dustin Hoffman’s *Rain Man*, rather they often have “splinter skills.” Splinter skills occur when a child has a skill that they excel in, but they lack in other areas. For example, an elementary school child with Autism may know how to read any material give to them, yet they cannot tie their shoes or sustain a conversation.

Myth: Bad parenting causes Autism. They just need disciplined with a good spanking on the bottom to keep them in line.

Fact: Parenting skills have absolutely nothing to do with a child’s diagnosis of Autism. The term “Refrigerator Mother” was coined in the 1960’s to refer to parents whose alleged “cold hearted natures” were faulted for the onset of Autism. Thankfully, this concept is now known as a terrible myth. Parents cannot and do not cause Autism. Punishments such as spankings do not cure or treat Autism. In fact, the child with Autism who has little skills will not understand why they are being punished. Children with Autism internally do not have the skills to cope with the real world; their brains are “wired” differently. Only with effective treatments and proper behavioral support and structure will a child learn how to manage and reduce their inappropriate behaviors.

Myth: Parents who suspect Autism at an early age should wait until the child is older and see if they grow out of it.

Fact: A parent or family member who suspects a loved one may have Autism should act immediately. Early intervention and treatment is imperative for a child on the Autism spectrum. Children do not “grow out” of Autism on their own. Children who make strides have been taught life and coping skills, and been given behavioral or other clinical/medical support.

Myth: Autism does not run in families.

Fact: Though we do not yet understand the genetic basis for Autism, we do know that thousands of families today have more than one child with a diagnosis on the spectrum. Sometimes, even a spouse or parent discovers that they themselves were misdiagnosed or never diagnosed at all with some form of Autism (such as Asperger’s Syndrome). Occasionally, the parent of a diagnosed child may notice symptoms in their niece or nephew. Other times, a child with autism is born into a family who has never been affected with an Autism Spectrum Disorder.

Myth: If caught early enough, you can cure autism with intensive behavioral treatments or a special diet.

Fact: There is presently no cure for autism. There are a number of treatments – both mainstream and alternative – that are available and accessibly to children and families. All children progress at different rates – sadly, some children do not progress, but the majority of children with Autism show some type of improvement with intensive treatments and interventions. Miraculously, some children with Autism are

able to recover from some of their symptoms by acquiring age-appropriate skills and strategies to self-monitor their behavior.

Myth: People with Autism do not show emotion or eye contact. They have no desire to socialize. They just don't care about anybody because they are lost in their own world.

Fact: This is not true. Eye contact varies amongst each individual – some children with autism have better eye contact than others. Some children can be taught to offer appropriate eye contact. Most often, children with Autism care for their family members and other people close to them very much – they simply lack the skills to communicate these feelings. They don't necessarily prefer not to have friends or play with peers – they lack the social and conversational skills to form meaningful relationships. Children with Autism may indeed be lost in their own world – but they can be encouraged to “join our world” if we offer the right treatments at the right time.

Myth: Most children with Autism do not speak.

Fact: Some children diagnosed with Autism are non-verbal, but many do end up becoming verbal with intensive and early intervention. However, as many autism advocacy websites point out, “Not being able to speak is not the same as having nothing to say.” For this reason, children who cannot yet speak are encouraged to use functional sign language, picture cards, and sometimes, assistive technology (such as a computer, specifically “Dynavox”) in order to communicate their thoughts, wants and needs.

Myth: Children on the spectrum need to go away to “special Autism schools.”

Fact: Many educational options exist today for a child with Autism. All children with a diagnosis are entitled to an “Individualized Education Plan” or “IEP” as it is often referred. This plan may include time spent in a classroom with Autism Support, Learning Support, or Life Skills. Many children, though, are simply mainstreamed into a regular classroom with varying supports – assistive technology, picture schedules, adapted homework assignments and tests, instructional assistants, special “buddies” to help them with peer socialization, speech and/or occupational therapy provided by the district, or any combination of the aforementioned options. Some children who receive intensive early intervention are very fortunate and may not need support by the time they reach elementary school. Some children do go to private schools, some are home schooled, and yes, some children are sent to specialized schools that support children with Autism. Options are up to the parent and the IEP team.

Myth: Everyone with Autism has the same symptoms.

Fact: Though every person with Autism has deficits in the same three core areas (communication, socialization, and self-stimulatory/repetitive behaviors), no two people with Autism are alike. This is why Autism is a “spectrum disorder.”

Myth: Autism gets worse as a child gets older. They probably won't ever go to college or raise a family.

Fact: It is true that some people with Autism need support as adults and live in group homes or have personal care aides. Most people with Autism, however, make remarkable improvements with the right behavioral, medical, educational, and community supports and are able to be independent as adults.

(Excerpts for this section taken from: www.cdrcp.com/aut_myths.html and www.nde.state.ne.us/autism/characteristicsmythshtml.html, and also were based on personal experiences from a parent)

Comments Often Heard from Extended Family Members

At one point or another, family members may recall making some of these comments (or something similar) to the parent of a child with Autism. Most often, comments are made with good intentions. Some comments, that are meant to be funny, turn out to be downright hurtful.

Here are some examples, with commentary by our Family Support Coordinator, a parent to a child with Autism:

“You didn’t talk for the longest time – some children just take longer to speak than others do.”

Though it is true that not every child develops at the same rate, many children who do not speak by the age of eighteen months should be evaluated for speech and language disorders, hearing loss, and/or an Autism Spectrum Disorder.

“I liked playing by myself when I was a kid, too!”

There is nothing wrong with playing alone. The problem comes in when a child is playing alone because they are unable to socialize with other children and lack age-appropriate play skills, or play with their toys in an inappropriate manner.

“Your (siblings, cousins, etc.) did that (insert behavior), too. Normal kids do that!”

Some children with Autism exhibit behaviors that may be performed by typically developing peers, as in having particular preferences, lining up letters or blocks, etc. The difference is that children with Autism repeat behaviors due to their developmental delay, and may repeat them over and over for self-stimulatory purposes. Another thing to keep in mind is that, unlike a typically developing child, the behaviors that a child with Autism exhibits often interfere with their ability to function within their environment. Furthermore, a parent of a child with Autism is often hurt when they hear the word “normal” in comparison to their diagnosed son or daughter. It makes them feel as if their child is “abnormal” and less significant than another child.

“He’s just fidgety.”

Some children are fidgety, but children with Autism fidget for a number of reasons that could include anxiety or sensory integration needs.

“She’s just shy.”

There is a big difference between simply being “shy”, and lacking the social skills and internal ability to interpret the surrounding environment and interact with others appropriately. A child who either refuses to play with other children or not initiate peer interaction independently may lack the skills to do so. Again, this is part of Autism.

“He/she’s not autistic! I bet your doctor’s wrong, get a second opinion.”

Unfortunately, today’s society is still grossly unaware of the prevalence of, and often times, the classic symptoms of Autism and how they manifest themselves differently in every child. Some adults who lived through the era of the “Refrigerator Mother” theory still blame parents for causing a child’s autism. Others, who were exposed to Autism through the movie “Rain Man”, expect every child with Autism to have savant qualities. Others expect every child with Autism to be non-verbal. A child who is diagnosed with Autism has been placed on the spectrum because they have met the criteria outlined in the DSM-IV(a diagnostic manual).

“You’re too overprotective – there’s no reason he can’t go to (insert event/party here). Everything will be fine!”

Parents of children with Autism are often much more careful about family outings, holiday gatherings, parties, etc. because they know what their child can handle, and what they can’t. For example, some children cannot go to birthday parties because they cannot stand to hear the Happy Birthday song. Some children with Autism do not go to holiday dinners because they are too crowded and overstimulating. Other parents bring their children with a means of adapting the environment – they may bring fidget or sensory toys, social scripts/stories, or picture schedules to help them understand what will happen. Most parents know their child’s limits. Some parents can be overprotective, but this is not often the case. (See page 10 for more on this)

“You worry too much.”

When a child is diagnosed with this heartbreaking condition, parents almost immediately begin to worry about their child’s future. Will my child ever speak? Will my child ever play a game with another child? Will my child ever attend a regular school? Will my child need medication? What if something happens to me? Will my child end up in an institution? There is so much hope for children with Autism these days, but it doesn’t mean that parents don’t worry each and every day about how much their child will progress. Every parent, even of typical children, thinks about the future. For a family affected by Autism though, sometimes the outlook appears bleak, and quite scary.

“Everything will be ok, he’ll grow out of it.”

Some children indeed recover from symptoms of Autism, or learn age-appropriate skills and coping abilities that help them to function, despite their diagnosis. Over time, a child’s diagnosis may change, or move “through the spectrum” (for example a child may receive a label of Autistic Disorder and two years later be given a diagnosis of Pervasive Developmental Disorder). Sometimes diagnoses (for children who make outstanding progress) are removed in time. However, the majority

of children with Autism do not receive a change in diagnosis. There is no known cause, and no known cure for Autism. Until that changes, Autism remains a lifelong disability.

“You’re so strong. I don’t know how you do it, I could never raise a child like that.”

This kind of statement, though meant well, is sensitive and potentially offensive. At the end of a day, a parent of a child with Autism may sit down, and burst into tears, wondering how in the world they survived another day – a day that may have been filled with 10 hours of varying therapies. Parents of children with Autism are often strong, and have developed a much thicker skin than other parents, as they endure stares and rude comments (sadly) on a daily basis. The comment “I could never raise a child like that,” just reminds the parent that their child is different and not “typical.”

“Why does she do THAT? Boy is that strange...”

This type of outburst, often said without thought, is very hurtful. It makes the parent feel like their child is “weird,” and for higher-functioning children who are more aware of their surroundings, it causes extreme anxiety and self-consciousness.

“Sometimes I wish my child didn’t talk, too!”

This is perhaps one of the most awful jokes a parent of a typical child could make to a parent of a child with Autism – especially the parent of a non-verbal child. The sentence is meant to lighten the mood and be funny. However, to a parent who has never heard “Mommy” or “Daddy”, or heard “I love you” as they tuck in their children at night, this statement is a blatant reminder of their child’s disability. Parents of children with Autism often want to hear their child talk more than anything.

“He just needs loved ... and an occasional swat on the rear!”

As mentioned before, parents do NOT cause Autism. Children with Autism are very well loved by their parents, but sometimes, as they say, “love isn’t enough.” These children need intervention and treatment, as early as possible, to obtain the best possible outcomes. A spanking is not effective, since the child does not understand why they are being punished. Even positive behavioral modification does not work until the child has awareness of their environment and the ability to understand consequence.

“Didn’t you talk to your pediatrician? If they aren’t concerned, why are you?”

Unfortunately, even as prevalent as Autism is today, many pediatricians are not familiar with the warning signs of this disorder. It is often parents who take the lead in obtaining a diagnosis for their child.

Everyday Situations That a Family With Autism May Struggle With - How to Handle Them and Support Your Loved Ones

Some examples of social situations that children with Autism Spectrum Disorders may struggle with include:

Amusement Parks
Birthday Parties
Church / Weekly Mass
Circus Trips
Extracurricular programs (Boy/Girl Scouts, etc.)
Field Trips
Grocery Shopping (or other errands – the drugstore, etc.)
Haircuts
Holidays
Little League Games/Tee-Ball
Movies/Plays
Picnics
Playgrounds (Inside/Outside)
Restaurants
Schools
Sporting Events
Spur of the moment activities / routine changes
Swimming Pools
Vacations
Weddings (or Graduation Parties, etc.)
Zoo Trips

How can extended family members best support their family members affected by Autism in these situations? Here are some suggestions:

- 1) Do not force your family members to bring their child to a family function that they will not be comfortable attending or are absolutely unable to attend because of their skill or developmental levels of functioning, anxiety, social awkwardness or fears, etc. Parents know their child's limits.
- 2) Take the time to learn the basics of Autism Spectrum Disorders, so that you may be able to understand why certain social situations or outings may be more difficult for your loved one.
- 3) Take the time to learn about different strategies or interventions that could be useful to help a child make it through family outings or parties. For example, offer to read a social story or show a child a picture schedule when they are having a hard time interpreting how to act in a certain situation. Read them stories about the circus or the zoo before a family outing.
- 4) Understand that giving gifts can be difficult – the excitement and element of surprise can be too much for a child with Autism. Also, children with Autism have developmental delays, so their interests can be immature, or not age-

- appropriate. Children with Asperger's Syndrome often have limited, but more "advanced" interests such as astronomy or computers, robots, etc. It is best to ask what a child with Autism might like as a gift, and also ask the parent how the gift should be presented. Obviously, all parties involved want the child to enjoy and appreciate the gift!
- 5) Offer to make adaptations to gatherings when possible. An example might be to offer a quiet break room (a spare room, game room, etc.) with special sensory or favorite toys when birthday or holiday parties are being held.
 - 6) Understand that movies – a very popular outing - may be too difficult for a child with Autism. A number of reasons for this are that they may lack the attention span to watch the entire movie, they may not understand how to interpret the story plot, and they may be uncomfortable sitting in a theatre for two hours and may become agitated or fidgety. The combination of all reasons listed could lead to increased anxiety or frustration – which, especially in children who cannot communicate effectively, can lead to an increase in undesirable behaviors. For families who would like to try attending a movie with a child who has Autism, consider starting off by choosing shorter movies with a simple plot, perhaps with favorite cartoon characters (for example, a Disney movie).
 - 7) Church is often complicated for a child with Autism. The concepts and ideas presented in most belief systems are way too complicated to understand, as most beliefs are abstract in nature. Also, weekly services are very structured, which leave little room for adaptations. Some that you can make are: bringing a fidget toy or favorite item, wearing a weighted vest, sitting on a special cushion, or bring a social story to read in the pews. Children who are unable to sit in the pews may also have the option in sitting in a back room (such as the room for infants, etc.)
 - 8) Weeklong family vacations can be too much on a child with Autism, primarily because of the unfamiliarity of their new surroundings and frequent changes in routine. For children not used to vacations, a suggestion would be to start out by offering to take a day-trip together. Build up to perhaps a weekend camping trip, and then try adding days at a later date. A great way to help on trips is to offer to help watch the child, as safety awareness is often a skill that is lacking.
 - 9) Sporting events can present a problem for a few reasons. Like many social gatherings, sporting events are crowded and noisy. Children with Autism many not understand the many rules of a sport due to their communication and/or social delays.
 - 10) The concept of winning vs. losing may be difficult, especially for a child with Autism or Asperger's Syndrome who directly participates on a team (such as Little League or T-Ball). Gross motor delays, clumsiness, lack of attention span, and much more can all make a child with Autism less likely to enjoy or fully participate in a sport. Additionally, this is why many diagnosed children have adapted Physical Education classes in school.
 - 11) Get involved with your child's (wraparound) team. They can answer your questions and show you what interventions and strategies work for or motivate the child.

As can be seen, social situations for families and children directly affected by Autism can be very complicating. There are many, many factors to consider.

How Do We Cope As a Family?

Whether you are the parent of a child with autism, a sibling, a grandparent, or an aunt or uncle, it is never easy to accept or cope with this diagnosis – let alone understand it. It is devastating that **1 in 91** children are diagnosed with a form of autism, now known as the most common childhood disability. Just twenty years ago, autism occurred in only 1 out of every 10,000 births. Arguably, the nation is in the midst of what many refer to as an “autism epidemic.”

The question “How do we cope?” is common, yet difficult to answer. Every family copes differently. When given the diagnosis of autism, some parents feel as if they have been handed a “death sentence,” while others are relieved that their concerns have been validated. Some parents take months to “grieve” before they seek support and even services, while others seek out services immediately and research everything and anything about autism night and day. Even the mother and father (or other caretakers) themselves grieve in different ways and at different rates, putting a huge strain on their relationship. Single parents are at a disadvantage – and will be even more reliant on their extended family for support.

What remains the same is that, even though autism can be devastating, there is an immense amount of support available to the child and family. Early intervention is the key, and support is a must – whether we are referring to clinical support, educational support or family support.

How do you cope? What do you do for your loved ones? Pages 10-11 offer some suggestions as to how to adapt some of the social situations. Here are some final thoughts:

- 1) Learn all you can about autism. Even if you don’t understand all the “ins and outs” of the disorder, at least have some basic awareness. You can research the internet, read books or articles, or just talk to someone with experience.
- 2) Learn about the child. Learn what behaviors they exhibit, and perhaps why. Learn how you can best communicate with **them**. Find out what makes them happy – whether it’s something as simple as a toy dinosaur or doll, or something more complicated, like reenacting their favorite movie script or discussing the parts of a Lionel train engine. Even if they can’t talk to you, just be there. Even if they don’t truly recognize or appreciate your presence, their parents will.
- 3) Make the child and their parents feel included. Do not isolate them at parties or event, or especially at holiday gatherings.
- 4) Offer to watch their child so they can go to a support group and connect with other parents, or so perhaps they can enjoy dinner and a movie for the first time in months. Finding respite care is a huge concern for parents of children with autism.
- 5) Accompany them to a support group or seminar.
- 6) Know that it is **ok** for you to feel grief and feel pain – after all, Autism has hit your family – it affects all of you.
- 7) Get involved in the community – join a local walk, offer to assist at community events pertaining to autism. Become a *true advocate* – it feels so good to make a difference!

**Most importantly... *Accept more, judge less.*
Come together as a family – now is the time.**

How Do I Contact FBR?

Would you like to speak to a member of the Autism Team? Please feel free to contact us:

Either Rick Murray or Catherine Hughes would be happy to assist you personally, or put you in contact with your local Regional Director of Autism Services or Autism Coordinator for support in regard to specific resources in your area. For your convenience, here is a listing of our office locations that offer wraparound services, and our outpatient clinics offering outpatient therapy and medication management.

ARMSTRONG – 206 Fifth Avenue, Suite B, Ford City, PA 16226
724-763-1002/724-763-1031

BEAVER – 1301 Riverside Drive, Beaver, PA 15009
724-775-1362 / 724-775-3793

BEDFORD – 9528 Lincoln Highway, Suite 1, Bedford, PA 15537
814-623-5077 / 814-623-5405

BLAIR – 764 Plaza Rt 764, Suite 2, Duncansville, PA 16635
814-695-2282 / 814-695-2460
(*OFFERS AUTISM SERVICES AT THIS TIME)

BRENTWOOD – Brentwood Towne Square, 101 Towne Square Way, Suite 239, Pittsburgh, PA 15227
412-881-2400 / 412-881-6400

BUTLER - Warner Center 200 Renaissance Dr., Suite 401, Butler, PA 16001
724-282-9010/ 724-282-9019
(*OFFERS FAMILY-BASED SERVICES)

CAMBRIA – 313 West High Street, Suite 209, Ebensburg, PA 15931
1-866-4-FBR-ASD / 724-850-9500
(*OFFERS AUTISM SERVICES AT THIS TIME)

CRANBERRY – One Landmark North Suite 101, 20399 Rt. 19, Cranberry Twp., PA 16066
724-772-2677/724-772-2669

◆ ***GREENSBURG** - One Corporate Circle, Suite 2000, Greensburg, PA 15601
724-850-7300 / 724-850-8011 (*Clinic Only)

◆ **INDIANA BHRS** - 1380 RT. 286 Hwy East, Suite 526, Airport Prof. Center, Indiana, PA 15701
724-463-3600 / 724-463-3633

INDIANA CLINIC - 1380 RT. 286 Hwy East, Suite 524, Airport Prof. Center, Indiana, PA 15701
724-465-0369 / 724-465-1081

LANCASTER– Sycamore Court, 245 Centerville Road, Suite 11, Lancaster, PA 17603

1-866-4-FBR-ASD / 724-850-9500
(*OFFERS AUTISM SERVICES AT THIS TIME)

LATROBE-3576 Rt. 30W, Suite 7, Latrobe, PA 15650
724-537-8100 / 724-537-2070

MERCER - *Colonial Square; 701 North Hermitage Road; Suite 10; Hermitage, PA 16148
(* 2/5/2010, moving to: 197 N. Buhl Farm Drive)
724-981-4462/724-981-4558

MONROEVILLE - 2526 Monroeville Blvd., Suite 200A, Monroeville, PA 15146
412-824-4005 / 412-824-4006

NEW KENSINGTON BHRS- 4 Kensington Square, Suite A, New Kensington, PA 15068
724-339-1134 / 724-339-1554

NEW KENSINGTON CLINIC- 3 Kensington Square, Suite B, New Kensington, PA 15068
724-335-9733 / 724-335-9734

NORTH HILLS-8035 McKnight Road, Suite 102, Pittsburgh, PA 15237
412-366-8342 / 412-366-8346

NORTH HUNTINGDON - 8960 Hill Drive, North Huntingdon, PA 15642
724-861-9200 / 724-861-5926

ROBINSON- Park West One; 1000 Cliff Mine Road, Suite 100; Pittsburgh, PA 15275
412-788-4224 / 412-788-4553

SOMERSET – 140 West Union Street; Somerset, PA 15501
814-444-0620 / 814-444-0640

◆ **UNIONTOWN** - 253 S. Mt. Vernon Ave., Uniontown, PA 15401
724-438-4960 / 724-438-1809
(Serving Fayette and Greene Counties)

WASHINGTON – 90 West Chestnut St., Millcraft Center, Suite 110 LL, Washington, PA 15301
724-229-0311 / 724-229-3277

◆ = Outpatient Clinic Available

