

## Guest Editor's Welcome

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Welcome to this edition of the Delaware Journal of Public Health, focusing on health issues of persons with Intellectual and Developmental Disabilities (IDD). I am the father of Andrew, a 32-year-old autistic man. Autism is one of many IDD, and is now apparently seen in 1 in 64 births. He has an identical twin brother who is not autistic. Andrew was diagnosed at age two when he lost speech and was not meeting normal milestones like his brother. Following initial disappointment and realization of a new normal with his diagnosis, my wife and I, like many parents in this position, began to look for a path forward. We were extremely fortunate in that he had an early diagnosis, and was enrolled in an excellent autism program through the public school system in Maryland by age three. The early intervention allowed him to learn to control disruptive behaviors, and to regain his ability to speak, which improved his ability to navigate his world. Had we been in Delaware during these early years, the same excellent programs would have been available here as well.

We moved to Delaware when Andrew was 18, and here he was afforded the services available to him and all citizens with disabilities through the public school system until age 21. At this time, his programming focused on his transition to work and life as an adult. With the assistance of a caring and gifted teacher who discerned which of his diverse abilities would help him gain meaningful employment, Andrew found a job. This job was not created for him, but instead one that matched his unique skills. He functions skillfully at work, but with the assistance of a job coach to keep him and his co-workers on task. He has an active social life based on some of the organizations you will meet in this edition of the Journal. He spends his own money, but cannot be fully independent with his choices. We are his guardians not out of choice, but necessity, because he needs protections legally and financially. We advocate for him because, though he conquered his loss of physical speech, he remains relatively voiceless in the events of his life. He frequently joins his mother in advocacy efforts, and one time had the opportunity to testify at the Joint Finance Committee in Dover. Wearing his hospital scrubs, Andrew handed out his W-2 to members of the committee to prove himself gainfully employed and a tax payer! You will find in this edition the many groups that serve and advocate for the population with IDD and have helped Andrew lead a full life.

I am also the incoming president of the Delaware Academy of Medicine. Having seen the benefits of meaningful employment, stable housing, available health care and a positive social life in my son's overall well-being and health, I have chosen to focus my platform on these public health determinants, and advocate for the generalization of these opportunities to all persons like Andrew.

I was thrilled when I approached the editorial team about an issue to highlight the public health issues of this population and everyone was very enthusiastic to proceed. My vision for the edition was one of a guide to providers on what options they have to recommend and offer their patients with IDD and their caregivers to promote best health and life options. I think you will agree that mission has been completed. But as my wife and I often say, it takes a village to raise

an Andrew, and I knew that we needed a source expert to help coordinate this important issue. I had to look no farther than my co-editor, Dr. Charmaine Wright, MD, who is the Medical Director of the Center for Special Health Care Needs at ChristianaCare and, most importantly to the Swanson family, Andrew's doctor.

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