

## INDICATORS OF AUTISM SPECTRUM DISORDER

While many of the behaviors typical of Autism Spectrum Disorder are also typical of earlier stages of normal development, *it is the combination or pattern of behaviors and the intensity and persistence of the behaviors beyond the normal period that are associated with Autism Spectrum Disorder. The characteristics identified below are not an inclusive list, nor are the presence of the characteristics, in and of themselves an absolute indicator of Autism Spectrum Disorder. They are considered the “tip of the iceberg.” The combination of behaviors in each category which have unusual intensity, and/or duration and which have been exhibited past the developmentally appropriate age for those behaviors may be indicators of an Autism Spectrum Disorder.* It is critical for the evaluator/team to gather sufficient information to understand the underlying causes of the behavior.

For example, a child may repetitively line up objects. Additional information will assist the evaluator to determine whether this is done for sensory input, due to a skill deficit, that is a restricted interest, or due to some other reason. The behaviors of an Autism Spectrum Disorder are typically present during early development. For older children, the behaviors present in the early years may stay the same, change their form, be less intrusive, or be eliminated over time.

The following indicators have been developed from a combination of DSM-IV characteristics, the Mid-Oregon Regional Program list of characteristics, characteristics listed in “The Screening and Diagnosis of Autism Spectrum Disorders,” information from the Center for the Study of Autism, and other related documents.

### Characteristics of Autism Spectrum Disorder

#### (A) The child exhibits impairments in communication

- No jabbering or imitative vocalizations (9-18 months)
- Use of gestures/pointing to make needs known is less frequent than attempting to satisfy own needs independently (11-19 months)
- No babbling by 12 months
- No single words by 16-20 months
- Use of pointing/reaching is more frequent as a function of requesting than commenting, enjoyment, accomplishment, joint interest (18 months)
- No 2-word spontaneous (not just echolalia) phrases by 24 months
- Echoes words and phrases and or uses idiosyncratic phrases more than appropriate or past the appropriate age (24-32 months)
- Babbling may develop and then stop
- Does not imitate sounds, gestures, or expressions
- May develop babbling but fails to use words to refer to people or objects
- Crying not related to needs
- Lack of joint attention
- Doesn't give objects when requested to do so
- Does not respond to his or her name
- May not attend to verbal stimuli
- Used to say a few words, but now doesn't

- Began developing language then suddenly stopped
- Delay in, or lack of, the development of spoken language
- Repeats sounds non-communicatively
- First words may be unusual, may repeat passage from movies, commercials, songs
- Does not volunteer information or initiate speech
- Inaccurate use of pronouns or pronoun reversal
- Unusual vocal quality and/or inflection (*tone, pitch, or rate*)
- Abnormal tone and rhythm in speech
- Stereotyped, repetitive use of speech
- Doesn't follow simple directions, or follow directions out of the usual setting or routine
- Doesn't relate needs
- Uses and interprets language literally
- When verbal, speech may seem rote or like an imitation of something heard
- Words used inconsistently and may not be related to needs
- May ask repetitive questions
- Difficulty understanding gestures and using compensatory non-verbal communication
- Lacks understanding and/or use of non-verbal expressions
- Limited range of communication functions
- Ability to perform some motor skills at a level higher than communication levels
- Difficulty with comprehension
- Difficulty with topic maintenance
- Inability to repair communication breakdowns
- May use age or above age appropriate speech and language when discussing preferred topics, but revert to below age level speech or language or even nonverbal methods to respond to topics of little or no interest
- May show pragmatic difficulty in speech despite adequate scores on standardized tests
- Phonology is variable within individual child, often disordered

**(B) The child exhibits impairments in social interaction**

- Absent or delayed social smile (1-4 months)
- Difficult to engage in baby games (5-12 months)
- No anticipatory social responses (6-10 months)
- Does not observe peers with curiosity (6-9 months)
- Lack of parallel play (20-24 months)
- Lack of associative play (36-42 months)
- Lack of cooperative play (42-48 months)
- Does not quiet when held
- Fails to respond to mother's attention and crib toys in typical ways
- Eye contact may be avoided or fleeting
- Does not show distress when primary caregiver leaves the room
- Does not extend toys to other people
- Does not differentiate strangers from family

- Imitation does not develop
- Does not seek comfort when distressed
- Does not initiate
- Doesn't use his/her index finger to point, to ask for something
- Lack of spontaneous seeking to share enjoyment, interests, achievements with other people
- Laughs, giggles, cries inappropriately
- Lack of varied spontaneous make-believe play or social imitative play appropriate to developmental level
- Is not interested in other children/people
- Difficulty shifting attention appropriately
- Impairment in the ability to initiate or sustain a conversation or social interaction with others or to match their topic to the social context
- Initiates conversations with a narrow range of topics, may monopolize conversations
- Social interaction limited to a narrow range of interest and activities
- Difficulty shifting to other topics
- Difficulty sustaining conversation on other topics
- Failure to develop peer relationships appropriate to developmental level/may seek out social interaction but in an odd manner
- May be socially awkward
- Lack of social or emotional reciprocity
- May appear withdrawn, aloof, standoffish
- Interacts or relates to adults and peers in mechanical ways
- Joint attention difficulties-problems attending simultaneously to both adult and the environment
- Impaired awareness of the feelings of others and/or unaware of their impact on others
- Difficulty shifting point of view/perspective
- Shows more interest in objects than in people
- Prefers to follow own agenda
- Prefers to do things for self and does not request assistance or may not tolerate help

**(C) The child exhibits patterns of behavior, interests, and/or activities that are restricted, repetitive, or stereotypic.**

- Repetitive, unusual manipulation or use of toys, objects
- Compulsive adherence to routines, rituals
- Spins objects or self
- Physically overactive or passive
- Lines things up
- Has odd movement patterns
- Loss of previously acquired skills
- Seeks repetitive stimulation
- May show interest in certain play repertoire but not be imaginative or flexible in a variety of play activities
- Pretend play absent, unimaginative, or repetitive
- Prefers concrete repetitive play to the exclusion of varied, spontaneous play

(24-32 months)

- Overly attached or preoccupied with certain objects, activities, people
- Preoccupied with parts of objects
- Gets stuck on doing the same things over and over-exclusively focuses on an idea or activity until it is completed, can't get it out of his/her head
- May show emerging interest and ability with early pre-academic skills (letters and numbers) but have difficulty learning self-care skills
- May demonstrate exceptional memory for routes, locations, routines, but be inflexible and unable to tolerate change from what is usual
- Difficulties with sequencing and planning
- Difficulty shifting attention
- Generalizing from a "learned" context to a "novel" context is difficult
- Ability to perform some difficult play or academic tasks more readily than easier ones
- Upset by changes in the environment
- Unusual interest in textures, surfaces
- Literal thought process

**(D) The child exhibits unusual responses to sensory information**

- Inappropriate or no response to sound
- Reduced startle response
- Lack of response to auditory stimuli
- May be described as an extremely undemanding, baby who seldom cried or as a difficult to soothe baby
- Child reacts negatively and defensively to ordinary stimuli
- Shows unusual response or fascination to visual stimuli
- Low stimulus modulation (difficulty modifying incoming stimuli and easily overwhelmed)
- Less sensitive to pain yet sensitive to other sensitive stimuli
- Avert gaze, reacting painfully to light yet gazing for long periods at a visual display
- Apparent insensitivity to pain
- Resistant to being cuddled, touched or seeks out "bear hugs," deep pressure activities
- May express distress with soft touch (hair, teeth, face), clothing,
- Eats specific foods, refuses to eat what most people eat, or has unusual eating behaviors such as will only eat one food for a period of time and then shifts to something else
- Transition between food textures may have been difficult
- Under or oversensitive to certain textures, sounds, tastes, smells
- Difficulty with response to textures
- Repetitive motor mannerisms
- Persistent rocking
- Seeks out "movement" activities
- May crave stimuli-especially proprioceptive and vestibular
- Toe walks
- No understanding of danger

- May show unusual fear
- May have unusual sleep patterns
- Attention may be unusually long for self initiated activity but very short for social interaction or specific skill development

From the Oregon Department of Education's Technical Assistance Paper