

ADULT VERSION
Australian Scale for Asperger Syndrome
 Garnett and Attwood, 1995 (original authors)
 DRAFT VERSION
 Modified and Copyright © Roger N. Meyer, 2000

[Note: This unapproved adult Asperger Syndrome Rating Scale is based on the Attwood Australian scale found in Tony Attwood (1998) Asperger Syndrome on pages 17-19. Language and concepts were taken from the Australian scale, and credit is due its authors for such items. This version upgrades items in the 1995 scale into adult age and task-specific questions. The number of questions is more than double those in the Australian scale, reflecting the complexity of adult issues. Readers should use the 6-point Likert scale in the Attwood book for rating the response to each question, and be guided by instructions found on page 20 and following pages. Additional instructions for this scale appear at the end of this document. Author note: The term "person" has been substituted for "child". The politically incorrect terms "he", "him", or "his" refers to persons of both sexes.]

6-point Likert-type scale example:

	Never	Very Rarely	Rarely	Occasionally	Frequently	Always
I feel happy when entering a Chinese Restaurant	0	0	0	0	0	0

A. Social and Emotional Abilities

1. Does the person lack understanding of how to play adult games with others? For example, unaware of the unwritten social rules of leisure and recreation.
2. During unstructured time such as work breaks and informal social events, does he avoid social contact? For example, eats alone, reads or continues to work.
3. Is the person unaware of social conventions or codes of conduct including unwritten rules at work? Does he make inappropriate comments or actions? For example, is he unaware of the offending or other unintended effect of his comments?
4. Does the person lack empathy, i.e., an intuitive understanding of another person's feelings? For example, is he not likely to offer an apology or acknowledge his responsibility for a relationship that has failed?
5. Does the person expect other people to know his thoughts, experiences and opinions? For example, he doesn't realize that you couldn't know about something because you were not there at the time. Does he presume you know what you are thinking when you are in the same physical place but your attention has not been directed to him?
6. Does the person worry excessively or fret about things that change or that don't go as expected? Does the person demand frequent reassurance that matters are OK?
7. Does the person express concern about loneliness or a tendency to self-isolate? Is he frustrated or anxious about not having any friends or only a few friends? Does he say that

he does not know how to make friends?

8. Does the person express emotions bluntly? Does he "blurt out" his emotional expressions in ways out of scale to the situation, or before or after emotional expression is expected?

9. Does the person mean to express one emotion but actually express another?

10. Does the person have an unusual attitude towards competition? For example, is he aversive to competitive activities such as sports, games or workplace performance contests? Does he act competitively in activities that call for collaboration and cooperation?

11. Does the person demonstrate indifference to normal or expected peer pressure? Is he generally unaware of widespread crazes or fashions of the moment?

12. Does the person vocalize exceptionally strong approval or disapproval of benign acts and the choice behaviors of others? Does he attempt to impose his choice as "the only choice" in situations allowing optional choices by others? For example, food preferences, cultural activities, techniques of task performance, and social entertainment.

13. Is the person unaware of others' different styles of learning? If he is aware, is he intolerant of styles other than his own?

14. Does the person not easily modify his behavior while in the presence of persons of different rank or strangers? For example, choice of attire, posture and gestures, addressing the other(s) by their first name(s), making inappropriate demands on the time of others, and not being aware of the differing deference conduct of others. If he is aware, is he critical of that conduct? Does he expect everyone to accept him just as he is?

15. Does the person have difficulty accepting criticism, correction, and direction? Does he have a problem offering the same to others?

16. Does the person have difficulty managing conflict, disagreement, and negotiation? Does he have trouble with social problem-solving behavior? Does he confront others over differences, pout, or withdraw from the situation in an untimely way rather than remain in uncomfortable or difficult situations?

17. Does the person understand the reason for physical boundaries, personal space, and others' needs for privacy?

18. Does the person report life-long issues with explosive anger, rage, and lingering resentment over ancient slights?

19. Does the person seem to function in ways suggesting a constant low level of depression?

B. Communication Skills

20. Does the person take words, phrases, or directions literally? Does he not understand figures of speech and common clichés without explanation? Does he not understand

sarcasm? Does he have trouble understanding humor? Does he have an unusual sense of humor? Does he not understand the function of banter and small talk?

20. Does the person have an unusual tone of voice (monotone, sing-song or "affected" foreign accent, unusual inflections, prosody, and other oddities of fluid speech? Does he speak with an unusually loud or soft volume level? Does he use changes of tone, inflection, or volume levels appropriate for different levels of conversational formality, location, and topic choice?

21. When talking, does the person appear uninterested in your side of the conversation? Does he speak in a monologue, exert inappropriate control over the flow or subject matter of conversation, otherwise not consistently engage in a fluid, reciprocal exchange? Is he uncomfortable with pauses or silence in paired or group conversation? Does he fail to observe turn taking rules? Does he interrupt others despite repeated correction? Does he have trouble closing a conversation? Does he miss gestural, postural and facial cues of boredom, agreement, dissatisfaction, impatience and intention to end conversation?

22. Is the person prone to "go off on tangents" and otherwise become distracted by a minor topic? For example, if there is an agreed-upon agenda, does he have trouble sticking to it? Does he return to something already discussed "for one last word"?

23. While directly engaged in conversation, does the person use less eye contact than you would expect? Does he appear to either stare away from you or have a vacant expression when listening or talking? Do his facial gestures, body posture and stance project messages different than his words?

24. Is the person's speech over-precise, pedantic, or "professor-ish"? Does he tend to challenge or correct the word choices of others?

25. Once started, does the person demonstrate an encyclopedic knowledge of a topic? Do you have the sense that regardless of your interest, he starts conversations just to talk about his own? Regardless of what is being discussed, does he repeatedly return to his topic of interest?

26. Does the person have difficulty summarizing or "getting to the gist" when reporting conversations or describing events? Does he "ramble" without focus?

27. Does the person say that others characterize him negatively as "a know-it-all"?

28. Does the person have problems repairing a conversation? For example, when he is confused or has lost the train of thought, has he earlier failed to check in to track whether he is "on the same page"? Once confused, does he ask for clarification or redirection? Does he abruptly switch to a different topic without using transition phrases?

29. Does the person engage in audible self-talk during a conversation? When asked questions, does he offer responses that seem repetitive, scripted or askew given the context and the topic of conversation? Does he take an unusually long time responding in conversational give and take?

Cognitive and Executive Function Skills

30. Does the person have specific learning disabilities? Examples are problems with math functions and/or written math problems, a history of precocious reading combined with comprehension issues, slow reading speed, dyslexia, bad handwriting, speech delay and pragmatic language problems, short-term working memory deficits leading to frequent checking and reconfirmation behavior, little understanding of the functions of a given behavior, difficulty in perceiving differences between experiences and adjusting responses in accord with new information, repetitive and dysfunctional study habits and learning behaviors with obvious difficulty stopping or changing them.

31. Does the person report having trouble with understanding and following directions? Does he do things "his way" despite directions and instructions requiring a different approach to task completion or performance?

32. Does the person have problems multi-tasking? Must he complete a single activity before "catching up" to perform others? Does he prefer step-by-step instruction? Does he become agitated when given multiple tasks or directed to change his priorities? Can he describe his style of learning? Does he report frustration or stress when being instructed to learn in ways that do not comport with his learning style?

33. Does he report major study skills impediments in K-12, post-secondary education or vocational and on-the-job training and instruction?

34. Does the person become disoriented when presented first with the "big picture" of a job? At that moment, does he not want to understand the function of a given task in a greater scheme?

35. From reports of others or self-reports, would the person consider himself a "dreamer" or "off in my own world" some or much of the time?

36. Does the person have projects or interests that others do not understand regardless of his efforts to explain them?

37. Does the person have limited interests? Would the person characterize most of his interests as "technical" rather than "artistic"?

38. Does the person have time management difficulties?

39. Does the person have difficulty with large projects, prioritizing and sequencing tasks, setting and keeping to schedules, and knowing when "enough is enough"?

40. Does the person have an exceptional long-term memory for events and facts?

41. Does the person report no benefit from meditation, visualization, and similar means of "imaginative" stress management?

42. Does the person have intense reaction to change; as much trouble with small changes as big changes? Examples are changes in a route or delivery schedule, restaurant menu changes or moving to a new location.

43. Does the person frequently engage in black and white thinking? Does he have trouble with "gray areas" and with others "bending the rules"?

44. Does the person have an unusual sense of justice, morality, and notions of proper

behavior?

45. Does the person "tell the truth, and the whole truth" regardless of the circumstances or consequences? Does his frankness get him into trouble?

46. Is the person drawn to rules and regulations, protocols, procedures, and writing or following directives and standards? Does the person have a high interest in "quality work"?

47. Is the person a perfectionist? Does he express pleasure with being extraordinarily precise and detail oriented?

48. Does the person find great comfort in performing rote, repetitive tasks that for a person of their intelligence and education is puzzling to others?

49. Does the person appear to maintain a high state of vigilance and suspicion?

50. Is the person likely to be intense and alert with matters of interest, and nonchalant or dismissive of matters he doesn't consider important?

51. Does the person have money management difficulties?

52. Does the person procrastinate, and is he concerned about it?

53. Is the person subject to unexplainable bouts of impulsivity?

54. For his age and stage of life, is the person uncharacteristically conservative and equally hesitant about making small and major decisions?

55. For work and other relationships, does the person have difficulty "reading another person's mind"? Examples would be not anticipating and acting to address a work colleague's functional and emotional needs. The same applies to a partner's unarticulated needs for emotional, sexual satisfaction and social as well as physical companionship.

56. Does the person describe his behavior as being like a packrat, unable to part with things of little or no intrinsic value? Is the opposite true? Does the person impulsively give things away or discard items known to have a future value?

57. Does the person have difficulty in organizing personal records, forgetting appointments and important commitments or constantly misplacing important documents?

Somatic, Motoric and Presentation Issues

58. Does the person describe himself as clumsy, uncoordinated or prone to accidents? Examples are difficulty performing assembly work, sewing and household repairs, activities requiring bilateral coordination and sensory integration?

59. Does the person not exercise regularly or maintain good physical condition?

60. Does the person have bad feelings about his body and his appearance?

61. Does the person have unusual posture or an unusual walking/running gait?

62. Even when sitting or in situations that are low-stress, does the person engage in small repetitive, self-stimulatory behaviors? Examples would be knuckle cracking, pencil tapping, fidgeting, hand steeping, grimaces or tics, playing with keys or jewelry, tightening of the jaw, eyebrow arching, scratching, nail-biting, and sighing or low-level vocalization.

63. Does the person have digestive difficulties? Examples would be celiac disease, gluten or casein intolerance, and chronic bowel disorders such as irritable bowel syndrome.

64. Does the person have strong sensory reactions to touch, light, particular sounds, preference for soft or loose clothing, certain odors, texture aversions (extending to certain objects such as paper, and certain foods)? Does the person avoid crowds or have very wide personal space boundaries

65. Does the person have a marked insensitivity to pain, heat or cold, or have a bad sense of personal safety?

66. Does the person have bad hygiene and poor self-care habits?

67: Does the person engage in public self-grooming behavior ordinarily done in private?

68. Does the person show a preference for a limited range of clothing to the point of his dress being very predictable to others? If "Yes", would it be accurate to describe this limited wardrobe as a kind of "uniform"?

69. Does the person report discomfort cuddling, hugging, or being held and touched?

70. Does the person report low sexual desire or a-sexuality? Has the person been repeatedly warned about inappropriate touching or behaviors considered by the object person to be sexual harassment or stalking? Does the person say they never understood dating, or have given up interest in dating?

71: Does the person have sleep disturbance? Examples would be difficulty falling asleep, waking early, restless sleep and discomfort in sleeping with a partner.

Other Characteristics (Use checkboxes)

72. Does the person report difficulty living with others, or becoming independent from parents or other care givers?

73. Does the person have elaborate, rigidly-adhered to rituals? Examples are self-care habits, eating, having a work area arranged "just so", arranging personal effects in a precise order, and ways of getting to and from places.

74. Does the person have a strong attraction to certain visual or auditory patterns?

75. Does the person report information about developmental delays or uneven functional development as a child? In school, was he enrolled in a special education program?

76. Does the person consider himself to be emotionally immature? Do you agree?

77. Does the person have any history of seizure activity, or demonstrate absence and other low level seizure behavior?

78. Does the person expend so much energy just getting through the work day or school that he has no energy left for "a life outside" of those activities?

79. Has the person turned down management positions with statements to the effect that he is not "a management type person"? Has he been promoted to a management position and then demoted or removed due to lack of her people-management skills?

80. Has the person had trouble retaining employment? Is there a long history of many jobs, part-time, unpaid, underpaid work, and temporary or short-duration jobs?

Additional Instructions [paraphrase and additions to Attwood, 1998, p. 20]

Many items on this adult scale are not found in the Garnett and Attwood (1995) scale. They have been added to reflect the variety of challenges and issues common to adult life. The same general point as made in the Garnett and Attwood scale applies here: Even if there is a "Yes" answer to a majority of these questions, and if the rating is between two and six as per the Australian scale, this does not necessarily imply that the person has Asperger Syndrome. Nonetheless, there is a possibility that the person being seen is on the high functioning end of the autistic spectrum. Referral to a medical professional experienced in diagnosing adult Asperger Syndrome is warranted. Medical diagnosis as opposed to diagnosis by non-medically trained mental health professionals is strongly recommended. If the person is ever to seek entitlement program eligibility, such diagnoses are less subject to challenge by disability determination authorities.