Red Flags for School Age Children: Screening for Autism Spectrum Disorder in School-Aged Children and Youth

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INTRODUCTION

Autism Spectrum Disorder is characterized by a wide range of features. Some school-aged children and youth with characteristics of Autism Spectrum Disorder are not identified earlier because their features have not been recognized as being related to this disorder due to the subtle and wide-ranging nature of the features.

This document is NOT a diagnostic tool but may be used by parents or professionals to help them to explore if a child should be referred for follow-up. This document can be used to provide a focus for discussion by highlighting specific behaviours of concern. Follow-up may include assessment and/or intervention which may be obtained through Community Service Providers and/or In-School Teams.

The following list of characteristics and/or behaviours should be considered as Red Flags for a possible Autism Spectrum Disorder. Every child with ASD is unique and may show some or many of these features. Some of these characteristics are not unique to ASD and may be exhibited by children who do not have the disorder.

The features associated with ASD are typically grouped into the areas of Social, Communication and Behaviour. Check the applicable features.

SOCIAL

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Limited ability to develop and maintain friendships with peers over time despite a desire for friendship e.g. engages in solitary activities, seldom joins groups successfully
Easier interactions with adults than with peers
Limited ability to initiate, maintain and end a conversation appropriately e.g. often sustains a conversation on topic of his/her own interest, talks off-topic frequently, difficulty with conversational turn–taking, greetings
Rigid adherence to rules and routines; becomes very upset if rules are not followed e.g. supply teacher, change in schedules/timetables, peer games
Limited ability using and understanding non-verbal skills e.g. appears rude, displays flat affect, difficulty with unspoken social rules, interpreting facial expressions and gestures, may show emotions that are not appropriate to the situation, may violate rules of personal space/stand too close to others
Difficulty understanding that other people have different thoughts and feelings than student (perspective taking) or assumes that others understand their thoughts and feelings
Social naivety; e.g. bullied or bully, rejected, taken advantage of by others

COMMUNICATION			Unusual sensitivities to noise, light, touch, smell, taste,		
Ma	ay display:		and/or movement		
	Use of complex words and phrases (good grammar skills/ strong vocabulary skills) however may not fully		Unusual or limited coping skills e.g. may be quick to run away, and/or hide		
	understand what they are expressing		Significant or unusual anxieties e.g. greater than		
	Highly verbal skills e.g. may spend more time talking han listening		expected distress/concern over other people touching their possessions, strong need to arrange, organize, or line up objects,		
	Peculiarities in speech e.g. jargon, unusual noises, atypical rhythm in speech, odd inflections, monotone pitch, speaking in an overly formal manner, lack the ability to modulate the volume of voice,		Unusual and often socially inappropriate personal habits such as picking at body parts, smelling inedible objects, and/or unusual personal hygiene		
	Echolalic speech (repeats phrases over and over again) e.g. repeats back words or phrases he/she has heard previously or in other contexts, mimics television, movie, and/or computer phrases,		Poor self-regulation e.g. becomes very angry or frustrated quickly (student goes from calm to meltdown in seconds), difficulty calming him or herself		
	Excessive or repetitive questioning		Highly developed memory e.g. bus routes, sports statistics		
	Difficulties answering questions, especially open- ended questions or why questions unless related to student's area of special interest		Uneven profile of skills e.g. highly advanced in one area and very weak in other areas		
	Difficulty understanding jokes, metaphors and sarcasm e.g. interprets speech literally and has difficulty understanding idioms and/or sarcasm		Unusual interests relative to peers		
			NEXT STEPS		
	Difficulty expressing complex, feelings, emotions and/or thoughts		Intense interest in a few prescribed topics/activities, often at the exclusion of other topics/activities or more than would be expected in peers		
BEAHVIOUR			For parents, take this completed document to your		
May display:			family doctor or paediatrician and request further assessment.		
	Self injurious behaviour or aggression to others e.g. skin picking, nail biting, pinching		For professionals and/or community members, review this completed document with parents and suggest consultation with family doctor or pediatrician		
☐ Stereotypical and repetitive motor mannerisms e.g					
_	hand or finger movements, posturing, grimacing		For educators, refer to your In-school Team and		
	Awkward and uncoordinated movements e.g. may overshoot when reaching for materials and drop things on floor; may "touch" others with enough force to hurt; may hold pencil with light grip so that pencil marks are too vague to read or with too much force so		consult with Area/Regional Support Staff.		
			ed with permission from the guide entitled York ASD thership Evidence Based Practice Guide to Screening and sessment (June, 2015).		

DISCLAIMER: This document reflects the views of the author. It is Autism Ontario's intent to inform and educate. Every situation is unique and while we hope this information is useful, it should be used in the context of broader considerations for each person. Please contact Autism Ontario at info@autismontario.com or 416-246-9592 for permission to reproduce this material for any purpose other than personal use. © 2016 Autism Ontario 416.246.9592 www.autismontario.com

that paper tears, poor ball skills