

## Student Interview Things to Consider

### Language and Communication:

- pragmatic language
- joint attention
- intonation and inflection
- preferred topics/areas of interest
- conversational interaction (quantity and quality)
- conversational interaction (clarity and relevance)
- reciprocity
- use of abstract language
- jokes/sarcasm/idioms

### Social Interactions and Emotional Responses

- eye contact
- facial expressions
- perception of self in relation to others
- emotional range
- anxiety level
- response to feelings

### Repetitive Behaviours/Sensory Features:

- quality of body movements
- unusual body movements or mannerisms
- response to clothing
- response to sounds
- response to manipulative materials

### Other:

- Friendships
- Family relations
- School
- Interests
- Feelings
- Goals

## Parent Interview Things to Consider

### General/Introduction:

- perception of child's strengths and weaknesses
- fears about the assessment process as well as fears/hopes about the child's future
- what they think the child's symptoms signify
- support network and resources

### Developmental History:

- birth history
- medical history (medications, diagnoses, sensory issues, hearing/vision, GI issues)
- family history (genetic predisposition)
- milestones (language, social, motor, emotional, regression/interruption)
- adaptive skills
- history of interventions
- significant events

Adapted from Ruth Aspy and Barry Grossman, The Ziggurat Group.

## Teacher Interview Things to Consider

- perception of child's strengths and weaknesses
- what they think the child's symptoms signify
- what are the behaviours in the classroom
  - o temper tantrums
  - o self injurious behaviours
  - o response to sensory stimuli
- what are the child's academic skills
- what are the child's social skills
  - o do they have friends
  - o what do they do on the playground/schoolyard
  - o how do they integrate into group tasks
  - o where do they eat lunch
  - o what do they do at recess
  - o do they demonstrate unusual fears, affection
  - o do they like to spend time with others
- what are the child's communication skills
  - o are they able to read nonverbal cues
    - facial expression
    - gestures
    - body language
  - o would they know if someone is interested in what they're saying
  - o are there signs of echolalia
  - o do they respond to simple commands
  - o how do they let you know what they want
  - o do they get jokes, idioms, sarcasm, metaphors

## FACTORS INCOMPATIBLE WITH AS

- neurotypical interpersonal relationships with same age peers
- extensive knowledge of special interest topic, but lacking other AS type characteristics
- sense of comfort with abstract ideas and unstructured situations
- motor mannerisms typically under conscious control
- odd motor mannerisms are associated with stress or excess energy
- lack of motor clumsiness
- insight into emotions of others and interpersonal situations
- emotion is typically appropriate to topic or content
- able of displaying empathy and sympathy across situations
- typical speech patterns and sense of humour
- understands and uses humour relating to social issues rather than one-sided humour, slapstick, word play, or memorized one-liners
- awareness of self, and recognizes impact of own behaviour on others
- aware of how others perceive him/her
- tolerates quick changes in routing
- understands meaning of metaphors, idioms and slang phrases

(Webb, J. T., et al., 2005, Misdiagnosis and Dual Diagnosis of Gifted Children and Adults, p. 104)

These would not preclude a diagnosis of AS necessarily. However, they are red flags that would make the diagnostician think of other explanations for the behaviours.

## Christopher Gillberg's Criteria for Asperger Syndrome

Severe impairment in reciprocal social interaction (at least two of the following):

- a) inability to interact with peers
- b) lack of desire to interact with peers
- c) lack of appreciation of social cues
- d) socially and emotionally inappropriate behaviour

All-absorbing narrow interest (at least one of the following):

- a) exclusion of other activities
- b) repetitive adherence
- c) more rote than meaning

Imposition of routines and interests (at least one of the following):

- a) on self, in aspects of life
- b) on others

Speech and language problems (at least three of the following):

- a) delayed development
- b) superficially perfect expressive language
- c) formal, pedantic language
- d) odd prosody, peculiar voice characteristics
- e) impairment of comprehension including misinterpretations of literal/implied meanings

Non-verbal communication problems (at least one of the following):

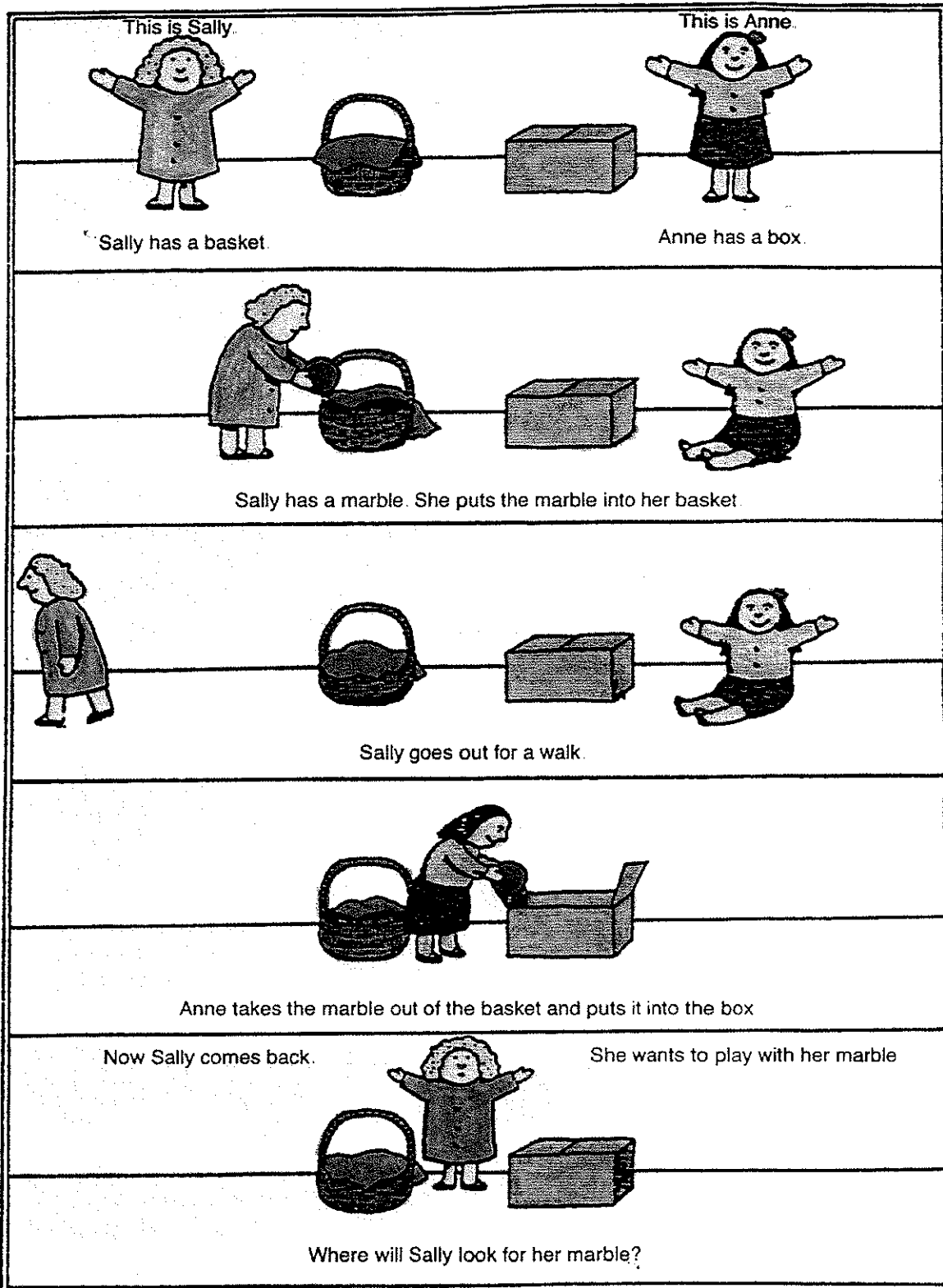
- a) limited use of gestures
- b) clumsy/gauche body language
- c) limited facial expression
- d) inappropriate expression
- e) peculiar, stiff gaze

Motor clumsiness: poor performance on neurodevelopmental examination

All six criteria must be met for confirmation of diagnosis.

DIAGNOSTIC CRITERIA FOR ASPERGER'S DISORDER  
(Szatmari, et al., 1989)

- A. Solitary, as manifested by at least two of the following four:
  - 1. No close friends
  - 2. Avoids others
  - 3. No interest in making friends
  - 4. A loner
  
- B. Impaired social interaction, as manifested by at least one of the following five:
  - 1. Approaches others only to have own needs met
  - 2. A clumsy social approach
  - 3. One-sided responses to peers
  - 4. Difficulty sensing feelings of others
  - 5. Detached from feelings of others
  
- C. Impaired non-verbal communication, as manifested by at least one of the following seven:
  - 1. Limited facial expression
  - 2. Unable to read emotion from facial expressions of child
  - 3. Unable to give messages with eyes
  - 4. Does not look at others
  - 5. Does not use hands to express oneself
  - 6. Gestures are large and clumsy
  - 7. Comes too close to others
  
- D. Odd speech, as manifested by at least two of the following six:
  - 1. Abnormalities in inflection
  - 2. Talks too much
  - 3. Talks too little
  - 4. Lack of cohesion to conversation
  - 5. Idiosyncrantic use of words
  - 6. Repetitive patterns of speech
  
- E. Does not meet criteria for Autistic Disorder



Baron-Cohen, Leslie, & Frith (1985)