

Behaviors That May Be Personal Challenges For A Student With An Autism Spectrum Disorder

These forms were adapted from the Technical Assistance Manual on Autism for Kentucky Schools, which is an excellent resource for parents, teachers, and special education personnel. For information on how to receive a copy of this manual, please contact:

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The cost, which will be nominal in order to cover copying costs, has not yet been determined.

Student's Name: _____ Date: _____ Evaluator: _____

Please indicate with a check mark (✓) which of these statements describe this child's behavior.

Qualitative Impairments in Social Interaction: _____Comments:

- _____ wanting and needing to be left alone at times
- _____ trouble with back and forth social interactions
- _____ inability to respond to social cues
- _____ inability to understand how someone else might feel
- _____ inappropriate giggling or laughing
- _____ impaired imitation - not engaging in simple games of childhood
- _____ not accepting cuddling, hugging, touching unless self initiated
- _____ lack of socially directed smiles when young
- _____ little sense of other people's boundaries
- _____ engaging in stereotypic question asking as interaction pattern
- _____ inappropriately intrusive in social situations
- _____ mimicking actions from TV, but not in reciprocal manner
- _____ inappropriate use of eye contact, avoidance or extended staring
- _____ poor use of non-verbal gestures
- _____ trouble with competition, i.e. winning, losing, being first

Qualitative Impairments in Communication:

- _____ problems with pronouns
- _____ problems getting the order of words in sentences correct
- _____ problems answering questions
- _____ problems responding to directions
- _____ problems understanding jokes
- _____ problems understanding multiple meaning of words
- _____ problems understanding sarcasm, idioms, and figurative speech
- _____ echoing what is said directly, later, or in a slightly changed way
- _____ low spontaneously initiated communication
- _____ difficulty understanding abstract concepts
- _____ difficulty with concepts that are time bound or lack concreteness
- _____ difficulty with long sentences
- _____ difficulty when verbalizations are too fast
- _____ problems with reciprocal conversations
- _____ problems using speed, tone, volume appropriately

Restricted Repetitive & Stereotyped Patterns of Behavior, Interests & Activities:

- ☐ repeatedly watching videos or video segments
- ☐ lining up and/or ordering objects
- ☐ strong attachment to inanimate objects (springs, bottles)
- ☐ fascination with movement (spinning wheels, fans, door & drawers)
- ☐ pacing or running back and forth, round and round
- ☐ exploring environment through licking, smelling, touching
- ☐ very sensitive to sounds (May have acted as if deaf as baby)
- ☐ insistence on routines, resisting change
- ☐ negative reaction to change in environment
- ☐ perfectionist, problems with correction or "mistakes"
- ☐ difficulty with unstructured time
- ☐ difficulty waiting
- ☐ impaired response to temperature or pain
- ☐ staring at patterns, lights, or shiny surfaces
- ☐ lack of fear of real danger
- ☐ excessive fearfulness of some harmless objects or situations
- ☐ defensive to touch that isn't self initiated
- ☐ history of eating problems
- ☐ history of sleeping problems

Learning Characteristics:

- ☐ uneven profile of skills
- ☐ well developed long term memory
- ☐ ability to manipulate items better than paper-pencil abilities
- ☐ over and under generalization of learning
- ☐ good visual skills
- ☐ hyperactivity
- ☐ short attention span to some activities and not to others
- ☐ impulsivity
- ☐ delayed response time
- ☐ problems organizing
- ☐ sequential learner
- ☐ needs help to problem solve

Observable Problem Behaviors:

- ☐ aggression - biting, hitting, kicking, pinching
- ☐ self-injurious behaviors - biting, hitting, pinching, banging parts of body
- ☐ temper tantrums
- ☐ screaming, yelling
- ☐ noncompliance and refusal to move, to do things
- ☐ eating problems
- ☐ sleeping problems
- ☐ toileting problems
- ☐ low motivation

Possible Motor Problems:

- ☐ clumsiness
- ☐ balance
- ☐ stiffness
- ☐ motor planning - can't seem to make body do what it needs to do
- ☐ motor fatigue - tired easily
- ☐ strength
- ☐ perceptual motor, spacing, sequencing, printing, writing
- ☐ initiation - can't seem to be started in motor acts

Possible Sensory Challenges: Risk Factors -----Comments:

Sound/Auditory

- ☐ has been diagnosed with hearing problems at some time
- ☐ reacts to unexpected sounds
- ☐ fears some noises
- ☐ distracted by certain sounds
- ☐ confused about direction of sounds
- ☐ making self-induced noises
- ☐ likes sounds that are constant and mask outside sounds
- ☐ other _____

Sight/Vision

- ☐ has been diagnosed with a visual problem
- ☐ is sensitive to light
- ☐ avoids eye contact
- ☐ is distracted by some or too much visual stimuli
- ☐ enjoys watching moving things/bright objects
- ☐ has difficulty tracking
- ☐ becomes excited when confronted with a variety of visual stimuli
- ☐ has trouble with stairs, heights
- ☐ enjoys patterns
- ☐ upset by things looking different
- ☐ makes decisions about food, clothing, objects by sight
- ☐ arranges environment in certain ways and can tell if out of order
- ☐ closely examines objects or hands
- ☐ likes TV, VCR
- ☐ other _____

Smell/Olfactory

- ☐ sensitive to smells
- ☐ smells objects, food, people
- ☐ explores environment by smelling
- ☐ reacts strongly to some smells
- ☐ ignores strong odors
- ☐ other _____

Touch/Tactile

- ☐ is defensive about being touched
- ☐ prefers deep touching rather than soft
- ☐ has to know someone is going to touch ahead of time
- ☐ initiates hugs, cuddling
- ☐ explores environment by touching
- ☐ becomes irritated if bumped or touched by peers
- ☐ dislikes the feel of certain clothing
- ☐ refuses to touch certain things
- ☐ is sensitive to certain clothing
- ☐ over or under dresses for temperature
- ☐ doesn't like showers
- ☐ likes to play in water
- ☐ mouths objects or clothing
- ☐ refuses to walk on certain surfaces
- ☐ appears to have depth perception problems
- ☐ dislikes having hair, face or mouth touched
- ☐ upset by sticky, gooey hands

Taste

- ☐ has an eating problem
- ☐ dislikes certain foods/textures
- ☐ will only eat a small variety of foods
- ☐ tastes non-edibles
- ☐ explores environment by tasting
- ☐ other _____

Movement/Vestibular

- ☐ seems fearful in space
- ☐ arches back when held or moved
- ☐ spins or whirls self around
- ☐ moves parts of body a great deal
- ☐ likes rocking, swinging, spinning
- ☐ walks on toes
- ☐ appears clumsy, bumping into things
- ☐ climbs a lot and doesn't fall
- ☐ avoids balancing activities
- ☐ other _____

Perceptual/Perceptual Motor

- ☐ has trouble with paper/pencil activities
- ☐ has difficulty with time perception
- ☐ difficulty with body in space
- ☐ relies on knowing location of furniture
- ☐ problems with use of some tools
- ☐ problems organizing materials and moving them appropriately
- ☐ distracted by door, cupboards being open, holes or motion
- ☐ other _____

Social Skills That May be Personal Challenges

- ☐ imitating
- ☐ sharing
- ☐ taking turns
- ☐ sitting and participating in group
- ☐ negotiating
- ☐ initiating social interactions
- ☐ gaining joint attention (point, look, talk)
- ☐ playing
- ☐ greeting
- ☐ complimenting
- ☐ offering help, comfort
- ☐ politeness
- ☐ kindness
- ☐ doing one's best
- ☐ caring
- ☐ telling the truth
- ☐ showing humor