

Step 1: General Development Surveillance

Early Years: Indicators of ASD



Communication	Social	Repetitive Behaviours and Restricted Interests	Other
 Delayed speech sounds, babbling, and/or stops using words they used to say Repeating words or phrases over and over An unusual tone of voice: flat affect, sing-song voice, or robot- like prosody Using another person's hand as a tool instead of using words Not responding to their name or appearing not to hear when spoken to Difficulties coordinating and/or using eye contact, gestures, sounds or words all at the same time (joint attention) 	 Unusual eye contact-can be absent, fleeting, or even prolonged. Not showing you or drawing your attention to things to share interest Rarely spontaneously imitating actions Engaging in little to no pretend play Preferring to play alone rather than alongside (parallel play) or with other children Playing with toys the same way every time Social behaviours that go beyond typical "shyness" 	 Unusual ways of moving hands, fingers, or whole body Rituals such as lining up toys/objects or repeating words over and over Unusual focus or attachment to a particular toy or to objects such as strings, rocks, straws, spoons, etc. Interest in specific actions or activities to a degree that interferes with social interaction Unusual sensory interests such as sniffing objects or spinning the wheels of a toy car Unusual reaction to sensations like sounds, smells, tastes or textures Over-reliance on routines and/or getting upset by minor changes in a routine or environment 	 Significant loss of previously acquired milestones or skills (i.e., developmental regression - the most frequently reported regression is loss of language, followed by loss of social- emotional connectedness) Unusual eating and sleeping habits Unusual or exaggerated mood or emotional reactions Exaggerated or prolonged meltdowns/temper tantrums that may occur often. These may include self-injurious behaviours or aggression towards others

Note: Child <24 months old? Autism spectrum disorder is often signaled by *what we do not see* or the *absence* of foundational social-communicative behaviours such as pointing to share, responding to one's name, and use of a wide range of gestures and actions with objects. In contrast, *what we do see* is the *presence* of restricted or repetitive behaviours such as spinning, rocking, and unusual attachment to objects.

Step 1: General Development Surveillance

School-Age/Teen Years: Indicators of ASD



Communication	Social	Repetitive Behaviours and Restricted Interests	Other
 Difficulty with social chat/small talk Difficulty with conversational interactions Advanced verbal skills Stereotyped speech Literal interpretation Difficulty following instructions with more than one or two steps Difficulty answering questions, especially "wh-" questions Unusual vocal rhythm, monotonous tone, odd inflections, and/or difficulty modulating the volume of voice Difficulty reading, interpreting, and using nonverbal cues, like body language or a person's tone of voice Unusual use of eye contact Limited use of gestures to express themselves 	 Difficulty with friendships Difficulty with social "rules" Social vulnerability Difficulty taking the perspective of others 	 Rigid adherence to rules and routines Compulsive behaviours Significant difficulty leaving electronics alone in comparison to peers Unusual sensory sensitivities Repetitive or unusual physical movements Repetitive noises 	 Uneven profile of skills Aggression toward others or self- injurious behaviours Mental health challenges such as depression, eating disorders, or significant anxiety Weak executive function skills Sleep difficulties Poor self-regulation and difficulty self-calming

Adult Years: Indicators of ASD



Communication	Social	Repetitive Behaviours and Restricted Interests	Other
 Difficulty participating effectively in social chat and/or social conversations A preference to talk about one or two favorite topics Difficulty functioning in group interactions or conversations that include rapid topic changes Difficulty reading body language Difficulty interpreting instructions that rely on taking the context into account (e.g., not knowing that sitting alone during break time at work is not what co-workers expect) A flat, monotone, or robotic speaking pattern A tendency to communicate in ways that others interpret as blunt, rude, or uninterested A tendency to interpret language literally and have difficulty understanding idioms Unusual use of eye contact 	 Difficulty reading social cues (e.g., unable to recognize sarcasm, or figure out that what is being said is meant to be a secret) Difficulty following social rules (e.g., "talking over" people, getting too close to others) Difficulty functioning in large groups and preferring one-on-one social situations High anxiety in social situations Difficulty establishing and maintaining close friendships and /or romantic relationships Difficulty regulating emotions or responding appropriately to the emotions of others Difficulty expressing thoughts and feelings Expresses a sense of feeling different from others without knowing why 	 Exceptional knowledge about one or more specific topics Exaggerated responses to changes in routines, the unexpected, or when personal items are moved or rearranged Repetitive behaviors Rigid routines, schedules, and daily patterns that must be maintained An insistence on sameness (e.g., wearing the same type of clothes or eating the same foods every day) An exaggerated sensitivity to environmental distractions such as noise or bright lights in the workplace Hypersensitivity or hyposensitivity to sensory input An impulse to smell, feel, or collect/hoard specific items 	 Mental health issues/disorders such as anxiety, depression, obsessive compulsive disorder (OCD), and eating disorders Employment difficulties Being perceived by others as eccentric Sleep difficulties Poor self-regulation and difficulty self-calming (e.g., becomes very angry or frustrated quickly and goes from calm to outburst in seconds)