



ASSERT

Autism Symptom Self-Report for adolescents and adults

Name:	Sex:
Date of birth:	Age:
Name of rater:	Date:

	NO	YES
1. Does he/she exhibit considerable difficulties interacting with peers?	1	2
If so, in what way? _____		
2. Does he/she exhibit a low degree of concern or a seeming lack of interest in making friends or interacting with peers?	1	2
If so, please specify. _____		
3. Does he/she have problems appreciating social cues, i.e. does he/she fail to note changes in the social conversation/interaction or to take account of such changes in his/her ongoing interaction with other people?	1	2
If so, please describe? _____		
4. Does he/she exhibit socially or emotionally inappropriate behaviours?	1	2
If so, in what way(s)? _____		
5. Is there a pattern of interest or a specific interest which takes up so much of his/her time that time for other activities is clearly restricted?	1	2
If there is, please comment. _____		

6. Does he/she try to introduce and impose routines, rituals or interests on himself/herself in such a way as to produce problems for himself/herself? **1** **2**
If so, in what way? _____

7. Does he/she try to introduce and impose routines, rituals or interests on himself/herself in such a way as to produce problems for others? **1** **2**
If so, please describe. _____

Comments:

REFERENSER

Posserud, M.B., Breivik, K., Gillberg, C., & Lundervold, A.J. (2013). ASSERT--the Autism Symptom Self-Report for adolescents and adults: bifactor analysis and validation in a large adolescent population. *Research in Developmental Disorders*, 34, 4495-4503.