



# Aspergers Anonymous™

Together We Can!

‘I think that the Aspergers Anonymous™ assessment guide is simple but also very perceptive in identifying the characteristics of Asperger’s Syndrome. It is simple, easy and effective.’

**Professor Tony Attwood, Clinical Psychologist, MSc, PhD, AFBPsS, MCPP**

	Yes	No
1. Are you very shy?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you avoid eye contact with other people who you don't know?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do you mostly spend lunchtimes or break periods on your own?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do changes to your routine make you very anxious?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you physically clumsy?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you always stick to and never break the rules?	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you dislike and avoid team sports or team activities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you prefer to do your hobbies or interests on your own?	<input type="checkbox"/>	<input type="checkbox"/>
9. Do you say things that other people find hurtful even though you don't find it hurtful?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you take things that other people say literally?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are you easily hurt by what other people say to you?	<input type="checkbox"/>	<input type="checkbox"/>
12. Do you have poor or no social relationships with people who are the same age as you?	<input type="checkbox"/>	<input type="checkbox"/>
13. Would you prefer a vacation in a private place rather than in a crowded place?	<input type="checkbox"/>	<input type="checkbox"/>
14. Do you have a posture or gait that is not straight?	<input type="checkbox"/>	<input type="checkbox"/>
15. Do you prefer to eat at home rather than eating out in restaurants?	<input type="checkbox"/>	<input type="checkbox"/>
16. Do you get very anxious when travelling to new places or when meeting new people?	<input type="checkbox"/>	<input type="checkbox"/>
17. Do you spend most of your time by yourself or in your own private space?	<input type="checkbox"/>	<input type="checkbox"/>
18. Are you often oppositional or argumentative with parents or authorities?	<input type="checkbox"/>	<input type="checkbox"/>
19. Do you dislike sharing your close friend or relative?	<input type="checkbox"/>	<input type="checkbox"/>
20. Are you bothered by smells, lights, noises or textures that don't bother other people?	<input type="checkbox"/>	<input type="checkbox"/>

### WHAT'S YOUR SCORE?

If you have answered YES to three or more questions, there is a chance that you may have Asperger's Syndrome.

If you have answered YES to five or more, chances are that you have Asperger's Syndrome.

If you have answered YES to seven or more, you definitely have Asperger's Syndrome.

Why do we say this? Because the actual experience of many people and their families who have and live with Asperger's Syndrome on a daily basis has taught us some basic truths about our symptoms - and about ourselves.