

REPETITIVE BEHAVIOR SCALE for Early Childhood

This is a measure of repetitive behaviors for use in children from infancy through early school-age. Repetitive behaviors can range from simple motor movements to complex patterns of interests and routines. Many of these behaviors are very common in children and occur as part of healthy development.

INSTRUCTIONS: Please rate your child's behavior for each of the 34 items listed by circling the score that best describes how often the behavior occurs. Be sure to read and score all items. Make your ratings based on your child's behavior over the past month. Use the definitions in the box given below to score each item:

- 0 – behavior does not occur**
- 1 – behavior occurs about weekly or less**
- 2 – behavior occurs several times a week**
- 3 – behavior occurs about daily**
- 4 – behavior occurs many times a day**

If an item is “not applicable” because your child cannot yet perform a particular behavior (for instance, he or she is not yet grasping objects), the item should be scored as “0” (behavior does not occur).

Today's date: _____

Your relationship to child: _____

Child's date of birth: _____

Child's age: _____

Child is: Female Male

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I. Repetitive Motor

DEFINITION: consecutive, non-social movements or actions that are repeated in a similar manner

1	LEGS (kicking, flexing, bouncing, swinging, foot tapping)	0	1	2	3	4
2	HEAD (head rolling, nodding, shaking – <i>do not count nodding or shaking to communicate ‘yes’ or ‘no’</i>)	0	1	2	3	4
3	WHOLE BODY/TORSO (rocking, bouncing, swaying, arching)	0	1	2	3	4
4	ARMS/HANDS/FINGERS (flaps or flutters hands or arms in air; wiggles or flicks fingers; shakes or claps – <i>do not count social clapping or waving ‘hello’ or ‘goodbye’</i>)	0	1	2	3	4
5	ARMS/HANDS/FINGERS ON SURFACES (slaps, taps, or drums against objects, walls, floors, tables, or other furniture)	0	1	2	3	4
6	OBJECT USAGE (bangs, spins, twirls, shakes, drops or rolls toys or other objects)	0	1	2	3	4
7	MOUTHING OBJECTS (mouths, bites, licks, or sucks objects – <i>do not count bottles, pacifiers, cups or utensils</i>)	0	1	2	3	4
8	LOCOMOTION (repeatedly spins, scoots, crawls, walks, hops or runs in circles/back & forth)	0	1	2	3	4
9	VOCALIZATIONS (repeats same sound, word or phrase – <i>do not count attempts at communication</i>)	0	1	2	3	4

In total, how often do the above behaviors interfere with other activities or interactions? Circle the best answer.

- | | | | | |
|------------|-------------|----------------|------------|-------------|
| 0
Never | 1
Rarely | 2
Sometimes | 3
Often | 4
Always |
|------------|-------------|----------------|------------|-------------|

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II. Ritual & Routine

DEFINITION: resistant to change; engages in fixed patterns of behavior; strongly prefers that daily activities are performed in the same way

10	ARRANGING (lines up or arranges toys or other objects)	0	1	2	3	4
11	PLACEMENT OF OBJECTS (insists that things remain in the same place, e.g. toys, furniture; returns items to “correct” location when disturbed by others)	0	1	2	3	4
12	UPSET VISITING NEW PLACES (cries or “melts down” when visiting an unfamiliar place; refuses to enter new settings)	0	1	2	3	4
13	UPSET IF INTERRUPTED (cries or “melts down” when an activity is interrupted; difficulty with transitions even with advance warning)	0	1	2	3	4
14	APPEARANCE OF OTHERS (dislikes or upset by change in appearance of others, e.g. hairstyle, hats, clothes)	0	1	2	3	4
15	INFLEXIBLE ROUTINE (overly upset by changes to daily routine, e.g. schedule, people involved, or order of activities; insists that events occur in a specific order)	0	1	2	3	4
16	EATING/MEALTIME (insists on set meal routine, e.g. eats only specific foods or brands, eats/drinks in a set order or at a specific place/time; refuses food items that are “touching”)	0	1	2	3	4
17	SLEEPING/BEDTIME (refuses to sleep in new places; insists that room or bed is “just so” at bedtime; insists that specific activities precede bedtime)	0	1	2	3	4
18	PLAY (follows a strict play routine; insists that others play in a specific way; upset if play routine is altered)	0	1	2	3	4
19	SOCIAL INTERACTION (insists that others respond in a specific way; follows a set verbal script or routine regardless of context or social behavior of other children or adults)	0	1	2	3	4

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III. Restricted Interests & Behavior

DEFINITION: behaviors with a limited or inflexible range of focus; intense or unusual interests or activities

20	LIMITED & INTENSE INTERESTS (narrow preoccupation with one subject or activity, e.g., trains, dinosaurs, collecting items, e.g. rocks, sticks, strings; plays only with specific toys)	0	1	2	3	4
21	RESTRICTED USE OF MEDIA (strongly insists on same music, book, app, program, movie or part of program/movie etc.; firmly refuses new books/apps/movies etc.)	0	1	2	3	4
22	SENSORY INTERESTS (seeks specific tactile, auditory, or visual sensations, e.g. smells or rubs specific objects; intense fascination with specific sounds, lights, or textures)	0	1	2	3	4
23	STRONGLY ATTACHED TO SPECIFIC OBJECT (insists on bringing/carrying one specific toy or other object)	0	1	2	3	4
24	PREOCCUPATION W/ PARTS OF OBJECTS (focuses on parts of objects rather than the whole object, e.g. wheels on toy cars, eyes on dolls or stuffed animals)	0	1	2	3	4
25	STILLNESS (lays or sits still for extended periods of time while alone; content to do “nothing” – <i>do not count naps/bedtime</i>)	0	1	2	3	4
26	VISUAL INSPECTION (closely inspects objects; views toys and other objects from an unusual angle)	0	1	2	3	4
27	FASCINATION WITH MOVEMENT (intense interest or focus on things that move; e.g. fans, toys that spin, bounce, roll, flutter, etc.)	0	1	2	3	4

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- | | | | | |
|-------|--------|-----------|-------|--------|
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INSTRUCTIONS: Read each of the items listed and circle the score that best describes how often the behavior occurs. Be sure to read and score all items. Make your ratings based on your child's behavior over the past month.

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IV. Self-Directed Behavior

DEFINITION: repeated movements or actions directed toward the body that have the **potential** to cause redness, bruising, or other injury.

28	HITS SELF WITH BODY PART (hits or slaps head, arms, legs or other body part)	0	1	2	3	4
29	HITS SELF WITH OBJECT (hits or bangs head or other body area with objects, e.g. toys)	0	1	2	3	4
30	HITS SELF AGAINST SURFACE (hits or bangs head or other body part on furniture, walls, floors, or other surfaces)	0	1	2	3	4
31	BITES SELF (bites hand, fingers, arm, lips or tongue)	0	1	2	3	4
32	RUBS, SCRATCHES, POKES OR PINCHES SELF (<i>do not count itching of bug bites, eczema or other skin irritation</i>)	0	1	2	3	4
33	PULLS OWN HAIR	0	1	2	3	4
34	SKIN PICKING (picks at marks, scabs, cuticles, or healthy skin on face, hands, arms or torso)	0	1	2	3	4

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Comments (optional):