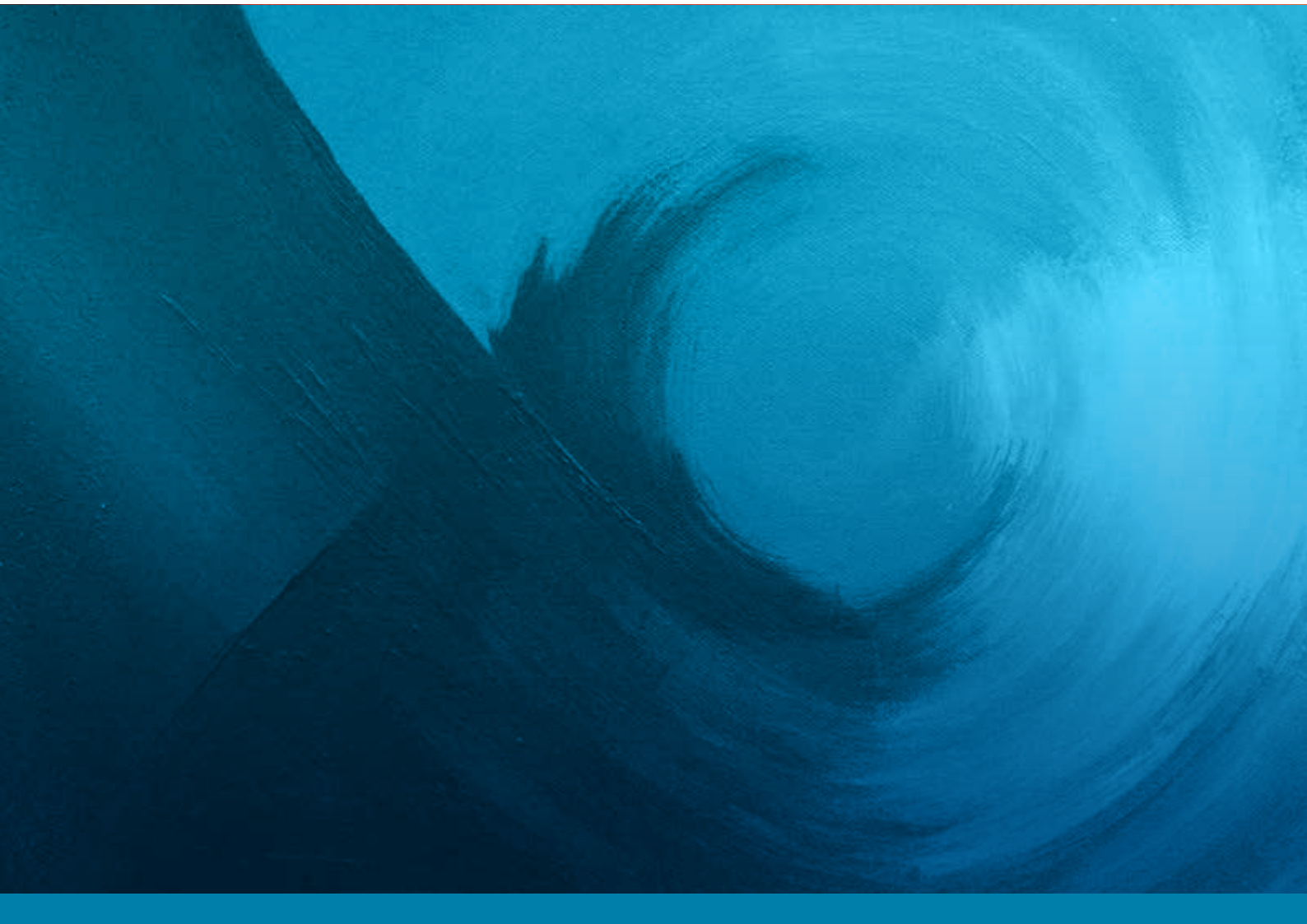




Information for adults seeking an assessment

National Guideline

For the assessment and diagnosis of autism in Australia



Autism CRC

Autism CRC is the independent national source of evidence for best practice in relation to autism across the lifespan and the spectrum. We provide the national capacity to develop and deliver evidence-based outcomes through our unique collaboration with autistic people, families, professionals, services providers, researchers, and government. Together, we are addressing agreed needs and co-producing outputs with these stakeholders for the benefit of the community. Autism CRC was established in 2013 as the world's first national, cooperative research effort focused on autism under the Australian Government's Cooperative Research Centres (CRC) Program. We receive funding from a number of sources, including the Australian Government. Autism CRC is no longer part of, or associated with, the CRC Program.

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Citing this document

Suggested citation: Autism CRC. (2024). *National Guideline for the assessment and diagnosis of autism in Australia: Information for adults seeking an assessment*. Autism CRC.

This resource supports the implementation of:

Goodall, E., Dargue, N., Hinze, E., Sulek, R., Varcin, K., Waddington, H., Whitehouse, A. J. O., Wicks, R., Allen, G., Best, J., Eapen, V. Evans, K., Hiremath, M, Foster, W., Lawson, W., Toby, S., & Trembath, D. (2023). *National Guideline for the assessment and diagnosis of autism in Australia*. Brisbane: Autism CRC.

Cover artwork: Dr Emma Goodall



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Welcome

The **National Guideline for the assessment and diagnosis of autism in Australia (the Guideline)** sets out **66** Recommendations for how assessments, that consider a diagnosis of autism, should occur.

This booklet outlines what adults should expect and experience during a clinical assessment and diagnosis of autism, based on the best practice Recommendations in the Guideline. It also provides tips for engaging with practitioners, examples of what good practice should look like, and links to further information.

Undertaking an assessment journey can vary depending on individual circumstances. However, everyone should experience an approach that is **safe, helpful, respectful, appropriate, informative, individualised, and comprehensive. It should be led by competent practitioners who use evidence-based practices and modern approaches whilst respecting each person's preferences and way of interacting with the world.**

About the Guideline

The Guideline helps ensure that practitioners involved in assessment use best practice. This means working in appropriate, evidence-based, and helpful ways, with individuals being assessed and their families.

It was developed with extensive community consultation and a review of the existing evidence. Notably, members of the autistic and autism communities generously shared their experiences, insights, and views to inform the Guideline.

Publication approval by the National Health and Medical Research Council (NHMRC) means the Guideline meets the highest national standard.



Tip

Referring directly to the Guideline is highly encouraged to understand what a comprehensive assessment involves, including who is involved, and how, where, and when different parts of the assessment are conducted. Having this knowledge should make you feel more empowered and informed regarding the assessment and diagnosis of autism.

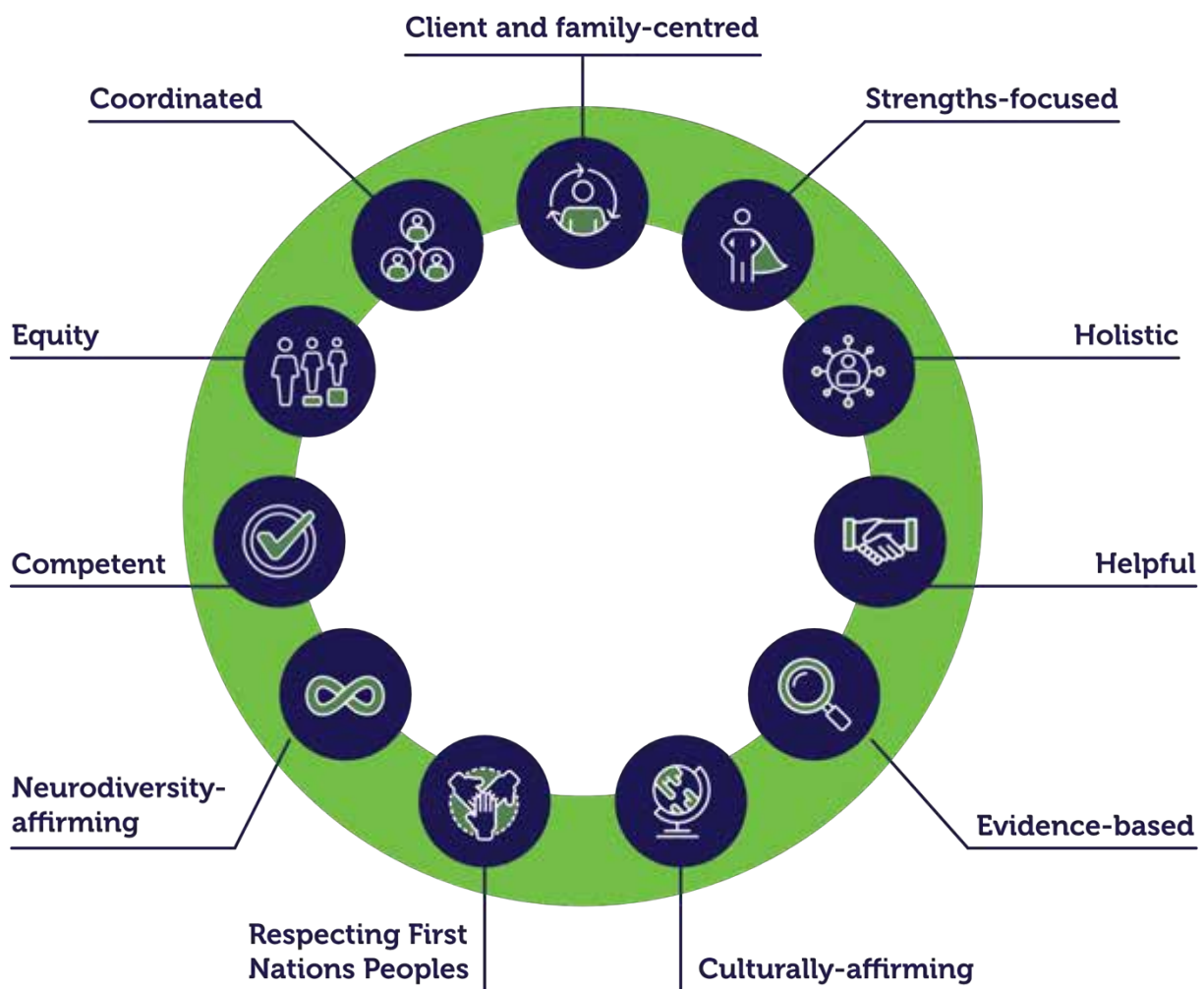


The Guideline recommends that **practitioners use strengths-based language** and frame diagnostic criteria in a **neurodiversity-affirming** way when talking about autism. For example, 'difficulties' or 'challenges' instead of 'deficits' or 'impairment'.

Guiding Principles

Guiding Principles (Recommendations 1-11) include all parts of the assessment and diagnostic process.

Guiding Principles provide a framework through which practitioners can make decisions in relation to all aspects of the assessment and diagnostic process for autism. You can find out more about the practical ways your practitioner or assessment team might apply the 11 Guiding Principles in the personal reflection section of this booklet on page 19.



Tip

Whilst acknowledging the importance of clinical terminology, the Guideline refers to 'autism' rather than Autism Spectrum Disorder due to an important shift within the community in how autism is understood. For example, for most people, autism is no longer considered a disorder to be 'cured' but rather intrinsic to the individual and, for some people, their identity.

Foundations of assessment

The Foundations of assessment (Recommendations 12-36) outlined below underpin all elements of the assessment and diagnostic process.



Process

A clear and consistent process



Knowledge, skills, training, supervision and regulation

Delivered by people with appropriate knowledge, skills, attitudes, training, supervision, and regulation



Collecting information

Thorough information collection



Settings (clinic, community and telehealth)

In settings that are appropriate and accessible



Sharing information

With information that is helpful respectful and accessible



Referral for supports

With referral to supports when needed



Quality and safety

High quality with appropriate safeguards

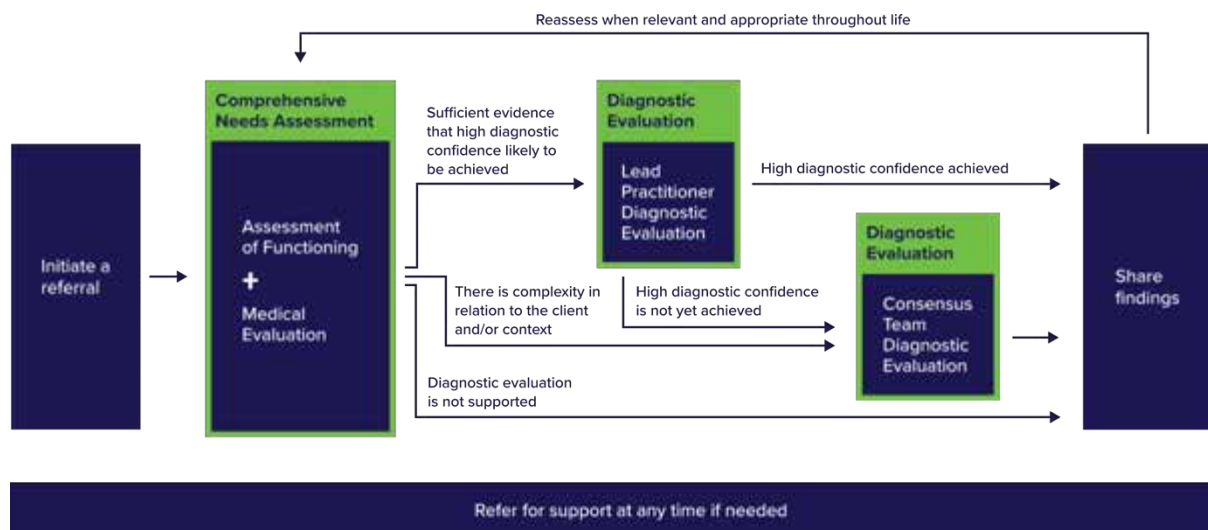


Journey overview

What to expect during the assessment and diagnostic process

According to the Guideline, the process for assessment and diagnosis of autism should include a **Referral (Recommendations 37-41)**, a **Comprehensive Needs Assessment (Recommendations 42-53)** that comprises an **Assessment of Functioning and Medical Evaluation**, and a **Diagnostic Evaluation (Recommendations 54-66)** when appropriate. A **referral for supports** can be made at any stage a need is identified.

The paths below represent possible different assessment journeys. Depending on you, your support needs, your history, and your presentations, the process is flexible to help with a timely and accurate diagnosis.



To ensure that the Diagnostic Evaluation is both accurate and efficient in evaluating the range of autism presentations, the Guideline incorporates a degree of flexibility that enables the process to be tailored based on the complexity of your individual clinical presentation.



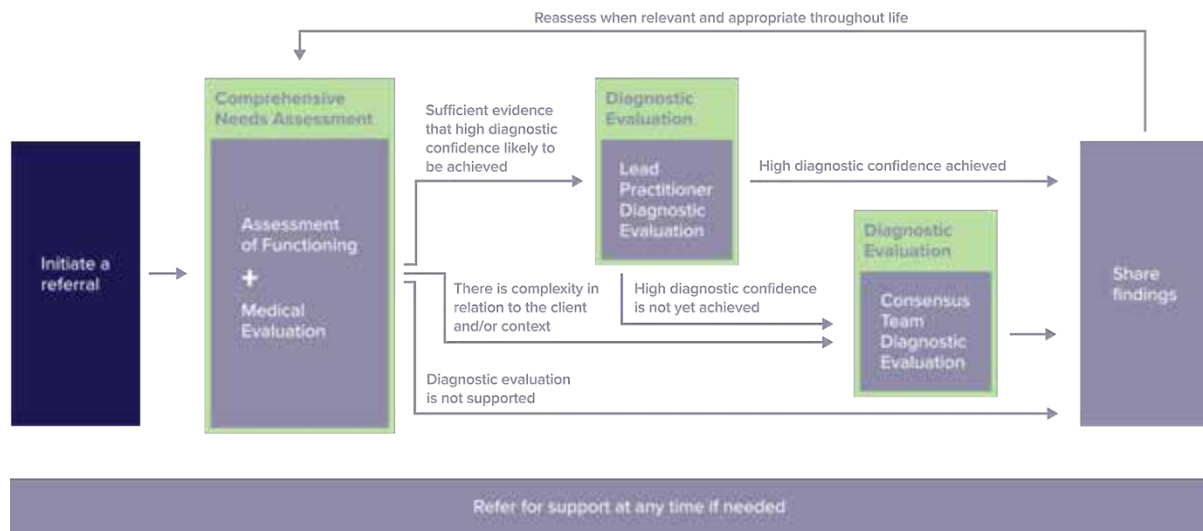
Tip

You are encouraged to take notes in the space provided at the end of this booklet. Your notes may help guide your discussion with your practitioner when you meet with them next, and ensure your expectations, questions and concerns are being addressed.

Making a referral for assessment

(Recommendations 37-41)

The process starts when your primary healthcare provider (for example, General Practitioner or Aboriginal Health worker) **initiates a referral for assessment**. You can speak to your primary healthcare provider about any challenges you are facing, and experiences and concerns you may have. **You can request a referral for an assessment if you are already seeing another health professional.**



Why seek a referral?

For many adults considering a possible autism diagnosis, there are a number of reasons that might have brought you to this point. Perhaps your children have been identified as autistic, and you are considering your own neurology. Perhaps you have always felt different, and are seeking answers. Perhaps you have been diagnosed with other conditions that don't quite seem to 'fit'. Or perhaps a friend, family member, or professional has suggested you should explore an autism assessment. Whatever your reason, it is valuable to think about why you are considering an autism assessment, and what information you would most like to learn from the assessment.

Good Practice Point



37.3 Practitioners should be aware that different clients will present with different needs and preferences regarding referral for assessment. Possible reasons for seeking assessment include clients:

- **Wanting to better understand themselves, their life experiences, and their support needs.**
- **Wanting to access support.**



Tip

Before your appointment, it's a good idea to create a list of topics you want to discuss and questions you might have. You can use the Good Practice Points mentioned above as a starting point and write the list down in the note section at the end of this document. This will help you stay organised and make the most of your appointment.

What information may be collected?

Practitioners should collect information that helps you understand whether a referral for an assessment that considers autism may be appropriate and desirable for you.

Good Practice Point

39.1 Practitioners should collect information that will help them understand and document the client's:



- **Characteristics, functioning, and context, including strengths and support needs.**
- **Views and preferences about if, and why, a referral for assessment may be appropriate and/or desired.**
- **Previous contact with practitioners in relation to autism and/or related conditions, including the outcomes of any consultations.**



Tip

Awareness and use of neurodiversity-affirming and strengths-based language is growing among practitioners and across disciplines. If you experience something different, it is okay to communicate your preferences with the practitioner.



Good Practice Point

39.2 Where a practitioner uses a screening tool to support their gathering of information and decision-making (autism-specific screener or broader), they should be aware that screening tools should not be used in isolation to determine whether a client should be referred for an assessment.



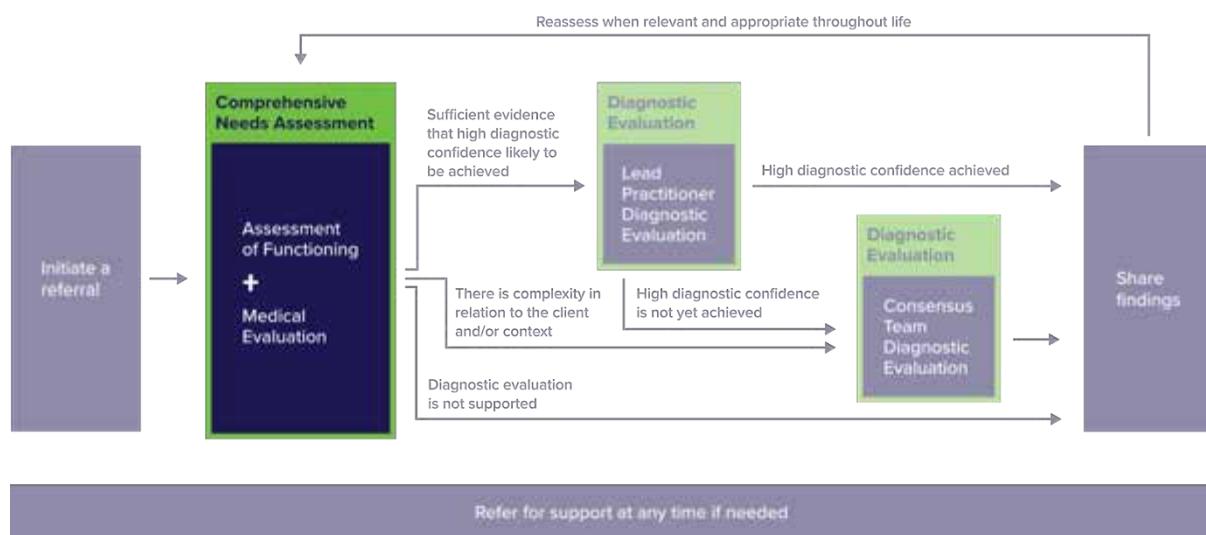
Tip

It is important to note that if, at this point, you feel like your questions have not been answered or your concerns are not addressed, it is okay to seek a second opinion.

Comprehensive Needs Assessment

(Recommendations 42-53)

The next step within the process is a **Comprehensive Needs Assessment** which comprises an **Assessment of Functioning** and a **Medical Evaluation**.



What is an Assessment of Functioning?

An **Assessment of Functioning** involves getting a detailed understanding of your abilities strengths, and any support needs you might have across a broad range of areas.

These may include your:

- cognitive abilities
- speech and language function
- daily living skills
- social relationships
- work or an educational environment.

The assessment process may include standardised questionnaires, clinical interviewing (in-depth conversations with a practitioner based on set questions), and observations.

What is a Medical Evaluation?

A **Medical Evaluation** involves a physical examination and other medical tests to understand if there could be medical causes for the behaviours or characteristics that prompted the referral. The Medical Evaluation should aim to answer your questions and may help identify the need for specialist referrals, assessments, and support as part of ongoing care.

What information may be collected?

- Medical and health history
- Family history and family function
- Developmental and educational history
- Autism-specific characteristics
- Functioning and participation in life activities
- Other characteristics and/or behaviours that may indicate the presence of a co-occurring condition and/or differential diagnosis, including cognitive functioning.

It is worth thinking about these topics before your assessment so that you can prepare for the topics that may be covered.

Who are the eligible professionals recommended to be involved in a Comprehensive Needs Assessment?

Profession	Comprehensive Needs Assessment	
	Assessment of Functioning	Medical Evaluation
Medical practitioner	✓	✓
Psychologist	✓	✗
Registered nurse	Specified ^a	Specified ^a (collaborate)
Occupational therapist	✓	✗
Social worker	✓	✗
Speech pathologist	✓	✗

✗ indicates those professions are not recommended to conduct that component of the assessment.

^a To conduct an Assessment of Functioning or collaborate on Medical Evaluation, it is recommended that they be a nurse practitioner, mental health nurse practitioner, or a registered nurse with relevant experience as a clinical nurse specialist/consultant.

Guideline reference

Please refer to the [Guideline](#) for more in-depth detail regarding the information collected (Good Practice Points 45.1 - 45.9).



Please refer to Appendix 2.2 of the Guideline to review the expertise, training and memberships for practitioners commonly involved in an assessment team.

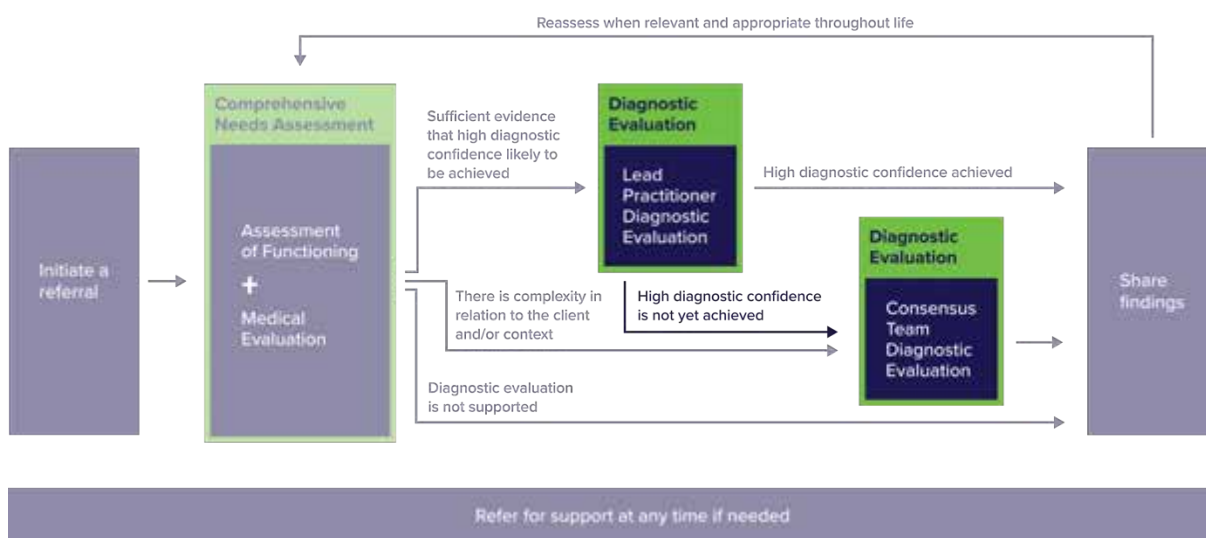
Note: Other practitioners might contribute information relevant to the assessment process – please refer to Appendix 2.3 of the Guideline to see a non-exhaustive list.



It is important to keep in mind that a thorough assessment should not solely focus on autism. Instead, it should take into account all potential reasons for any behaviours or experiences, both current and throughout your life, which seem to differ from others. **If the findings of the Comprehensive Needs Assessment suggest a possible diagnosis of autism, the Diagnostic Evaluation should be started.**

Diagnostic Evaluation (Recommendations 54-66)

The **Diagnostic Evaluation** should commence with a **Lead Practitioner Diagnostic Evaluation** or a **Consensus Team Diagnostic Evaluation**, depending on which is likely to result in a more timely and accurate evaluation.



You might be referred for a **Lead Practitioner Diagnostic Evaluation** when there is high confidence that a diagnosis of autism and/or other conditions is (or is not) appropriate. **Although a practitioner leads the process, it is recommended that at least one other relevant practitioner should be consulted.**

Alternatively, you might be referred for a **Consensus Team Diagnostic Evaluation** if you have a complex history or clinical presentation. For example, subtle characteristics and/or indications that multiple diagnoses may be relevant. This might also be preferable when a Lead Practitioner Diagnostic Evaluation is unavailable or if it seems unlikely that a diagnostic decision will be reached with high confidence through a Lead Practitioner approach.

What are practitioners referring to when it comes to diagnostic criteria?

In Australia, practitioners currently rely on two sets of commonly used diagnostic criteria included within:

- **the Diagnostic and Statistical Manual of Mental Disorders 5th Edition (DSM-5-TR) or**
- **the International Classification of Diseases 11th Edition (ICD-11)**

When you are assessed for autism, you may receive a diagnosis of Autism Spectrum Disorder based on the criteria listed in the DSM-5-TR or ICD-11. The language used in these criteria can sound overwhelming and confronting but we've summarised the information here for you.

Autism Spectrum Disorder is the collective diagnostic term for a group of neurodevelopmental conditions. Whilst every autistic person is unique, there are certain characteristics that are common to all autistic people. Autism is characterised by persistent difficulties in social-communication and interaction, and by restricted, repetitive patterns of behaviour, interests, or activities and/or sensory behaviours. The behavioural characteristics of autism are often present before 3 years of age but may not be recognised until the school years or later in life as social and cognitive demands increase.

While these characteristics can vary widely in nature and level between individuals, and in the same individual over time, autistic characteristics endure into adult life, though a person's support needs may change across the lifespan.



Who are the eligible professionals recommended to be involved in a Diagnostic Evaluation?

Profession	Diagnostic Evaluation	
	Lead Practitioner	Consensus Team
Medical practitioner	Specified ^b	✓ ^d
Psychologist	Specified ^c	✓ ^d
Registered nurse	✗	✗
Occupational therapist	✗	✓ ^d
Social worker	✗	✗
Speech pathologist	✗	✓ ^d

✗ indicates those professions are not recommended to conduct that component of the assessment.

^b To conduct a Diagnostic Evaluation, medical practitioners are recommended to have a specialist registration in the field of community child health, general paediatrics, psychiatry or neurology, or have general registration with at least six years of relevant experience in the assessment and diagnosis of neurodevelopmental conditions.

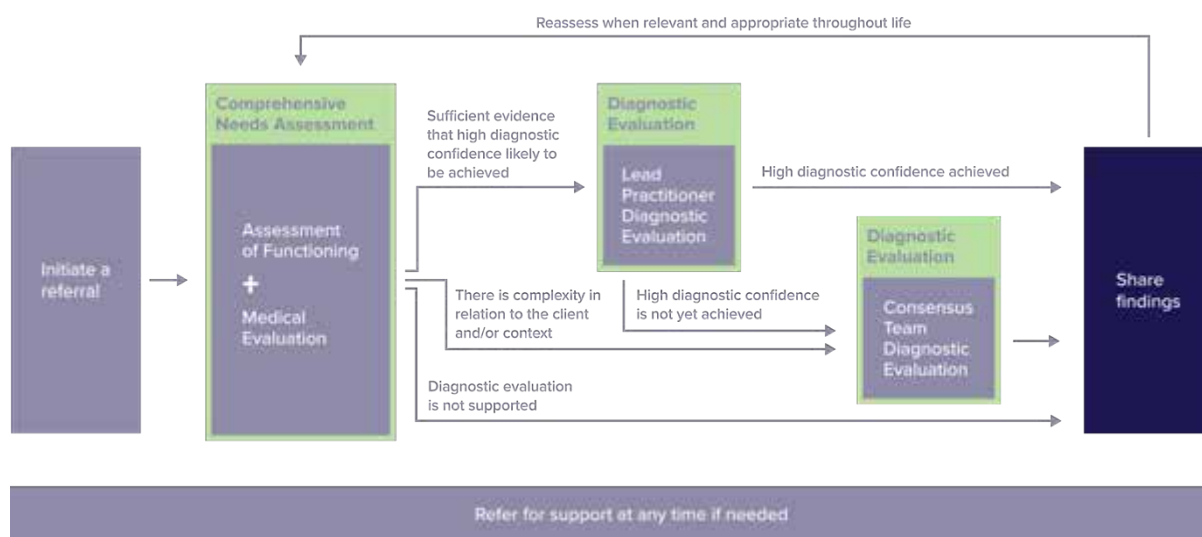
^c To conduct a Lead Practitioner Diagnostic Evaluation, psychologists are recommended to have an area of practice endorsement in clinical psychology, clinical neuropsychology, and/or educational/developmental psychology.

^d The Consensus Team Diagnostic Evaluation should include at least one member who meets the specified criteria for conducting a Lead Practitioner Diagnostic Evaluation.



Sharing findings and accessing supports

Findings should be shared throughout the process, at the final step in the process, or whenever it is determined that diagnostic evaluation is not supported. **Findings should be shared with you in a way that is accurate, understandable, and neurodiversity-affirming.**



What are the possible outcomes?

For some adults, the assessment leads to a clear finding regarding whether or not autism is an appropriate diagnosis. However, for others, the finding may not be so clear and further assessment may be needed. For example, the team may be expanded to include practitioners with additional expertise, or the assessment may happen over a longer period of time with more appointments.

It is common for an assessment that considers autism to not result in a diagnosis of autism. For example, an individual who avoids particular social situations may be better explained solely by anxiety.

At every stage, the practitioners you work with should talk to you about what they are doing, what they are finding, and what they recommend should happen next. They should explain the reasons for their decisions and encourage you to ask questions.

Their job is to listen and to help you be fully informed when making decisions. **You should always feel empowered to ask for what you need.**

After an assessment

After the assessment, the Guideline recommends that the practitioners provide you with a **written report**. **This report should be explained to you, and if appropriate, a family member, friend, or support person, in a meeting.**

The report will summarise the information collected during the assessments and what this information means. It will also explain any decisions that have been made about a diagnosis and suggest the next steps for accessing support services.

Accessing support

- Accessing support can, and should, happen at any time you need it.
- Practitioners you work with should ask about what, if any, supports are already in place, and if you need additional supports.
- A referral for support should happen as soon as a need is identified.



Tip

You can ask for a referral for support at any stage throughout the process.



Assessments can be repeated when relevant and appropriate throughout your lifetime.



Considerations when seeking an assessment of autism in adulthood

A common question that is raised when it comes to assessment for autism in adulthood is how the outcome (irrespective of diagnosis) may be helpful.

The Guideline states that the purpose of assessment is to help people understand their individual strengths and needs in a way that is helpful to them. For example, the assessment may reveal untapped strengths and unmet needs in relation to learning, participation, health, and wellbeing. Where a diagnosis is made, it may help you to better understand yourself, and your experiences in life.

This is the Good Practice Point that the Guideline offers to practitioners about seeking an assessment. It might be useful for you to read through this point to understand some different potential reasons people seek assessment. Which resonates with you?

Good Practice Point

54.1 Practitioners should explain the potential benefits of undertaking a Diagnostic Evaluation, irrespective of whether the client receives an autism diagnosis or not. These may vary for individual clients, but can include:



- The client gaining a better understanding of themselves, their experience of interacting with other people and the world around them.
- Other people better understanding the client's experience, strengths, and needs, irrespective of diagnosis, where the client chooses to share this information following the evaluation.
- The client feeling better understood and their views and experiences validated.
- Identifying supports to assist in functioning and enhance wellbeing.
- Where a differential diagnosis is made, it can be helpful in describing the client's experience, strengths, and needs to other people, including accessing appropriate supports.

Ultimately, the decision to seek an assessment or not should be a personal one, taking into consideration your individual reasons for assessment, goals, and circumstances, as well as the potential benefits to you and any costs that may be incurred.

More information

Autism CRC: autismcrc.com.au

Autism CRC is the independent national source of evidence for best practice in relation to autism across the lifespan and the spectrum.

Reframing Autism: reframingautism.org.au

Reframing Autism: Autistic-developed information, courses, and resources about autism, including personal accounts.

Autism Connect: amaze.org.au/autismconnect

Online chat and phone service to support families and individuals to understand autism, and pathways for support.



Tip

Always refer to the Guideline for more information and to further expand on the information in this booklet.

To register for access to the assessment and diagnosis Guideline, visit: autismcrc.com.au/best-practice/assessment-and-diagnosis



Personal reflection

When you are going through the assessment and diagnostic process for yourself, you should expect that the Guiding Principles that underpin the Guideline will be followed. We know, however, that it might be challenging to think about the practical ways the Guiding Principles might be applied by your practitioner or assessment team.

The following **Guiding Principles questionnaire** is designed to help you reflect on the principles and think about what a beneficial assessment and diagnostic process might look, sound, and feel like for you. Every person is different, so the following content might help you to personalise your experience and journey.

You may wish to complete this questionnaire before your initial meeting with your practitioner/s as a personal reflection and/or share your thoughts with your practitioner/s to help them to understand your needs and expectations.

This document was co-produced with members of the autistic community, and we thank them for their valuable input, guidance, lived expertise and support in creating the following questionnaire and example responses.

The text included below are examples and prompts for you to consider, and you can also fill in your own thoughts using the blank template provided.



Guiding Principles questionnaire example



Client and family-centred: Practitioners should collaborate with individuals and families with respect, and value and support their unique reasons for seeking assessment, their preferences, and contexts.

Considerations	Examples/Responses
This might look like...	<p>The practitioner asks me my reasons for exploring an autism assessment for myself. The practitioner confirms their understanding of my reasons for exploring an assessment, and validates these, by referring to these reasons in any information shared or reports I receive throughout the assessment and diagnostic process.</p> <p>My practitioner checks in with me about my sensory and communication needs prior to meeting or an appointment.</p>
Prompts and examples to consider...	<ul style="list-style-type: none"> • What things do I want to learn about myself from the assessment and diagnostic process? • What specific areas would I like additional support in? • How can the assessment and diagnostic process help me to understand my unique profile and needs? • What do I need to make this process beneficial for myself? For example, a written summary of verbal conversations, an agenda in advance of what will be discussed, a low-sensory environment, an introduction prior to the appointment to those who will be present in the appointment, support with knowing where to park, how to pay, how long an appointment will take.
How important is this principle to you in experiencing a successful diagnostic process?	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
For this principle to be achieved for me, it will look / sound / feel like...	<p>For example, I will feel like the practitioner actively listens to my experiences and takes what I share seriously.</p> <p>I will not experience a dismissive approach regarding my concerns. Instead, the practitioner will talk about my experiences in ways that are respectful and validating.</p>



Strengths-focused: Assessments and the sharing of findings should focus on the client's strengths, including skills, values and interests that are personally meaningful to them and that promote their functioning, participation, and wellbeing.

Considerations	Examples/Responses
This might look like...	<p>The practitioner helps me to explore my strengths by actively asking me about what brings me joy, when I feel satisfied and content, what my passions are, and what things I excel in.</p> <p>The practitioner uses neuro-affirming and strengths-based language that does not stigmatise autism so that I do not feel 'broken' or 'wrong'.</p>
Prompts and examples to consider...	<ul style="list-style-type: none"> • Can I identify my strengths and passions? Do I need the practitioner to support me to do this? • How would I like my challenges to be discussed so that I can recognise my strengths? • How would I like to receive the diagnostic report, especially if it is not entirely strengths-based? For example, I would like a face-to-face appointment to discuss the report before I read it, so the practitioner can reframe any deficit-based language.
How important is this principle to you in experiencing a successful diagnostic process?	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
For this principle to be achieved for me, it will look / sound / feel like...	<p>For example, I will hear that I am invited to share what I am good at, and what brings me joy and meaning.</p>



Holistic: Assessments should be comprehensive and seek to understand all aspects of the client, including their context, history, strengths and challenges, and aspirations – now and into the future – to the extent that is relevant to the purpose of the assessment for the client and that they are willing to share.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner asks me about my co-occurring conditions (whether diagnosed or suspected) and the impact these have on my daily life.</p> <p>The practitioner will listen without judgment when I share my memories and past experiences and accept them as true.</p> <p>The practitioner will ask me about how I experience different contexts and will help to explore the factors impacting on these experiences.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • Do I feel comfortable involving my family and/or others from my support network in my assessment and diagnostic process to complement or confirm my memories and experiences? • What support will I need when I think about my history? Will this trigger trauma or distress for me? • What do I imagine my future looks like if I'm living my best life? How might the assessment and diagnostic process help me to achieve that future?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>For example, I will feel that my past diagnostic experiences are considered during the assessment and diagnostic process, including potential re-evaluation of past diagnoses to a diagnosis of autism and/or other conditions.</p> <p>I will hear the practitioner asking respectful questions about my past, checking in on my wellbeing, and being sensitive to potential triggers and trauma.</p>



Helpful: Assessments should have an agreed purpose, aim to answer the questions the client has, help them identify and advocate for their strengths and support needs, and provide a pathway to supports where appropriate.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner asks me why I am seeking an assessment and helps me to understand what they can offer through the process to fulfil those reasons.</p> <p>The practitioner talks with me about what pathways to support are available, whether I receive a diagnosis of autism or not, and provides guidance and high- quality information that helps me to access services to support my needs at any stage of the process.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • Do I know what I want to ‘get out’ of the assessment and diagnostic process? For example, this might be financial assistance, community and connection, self-knowledge, increased wellbeing. How can the practitioner help me to think about my ‘whys’ for seeking an autism diagnosis.? • Do I know what support is available to me if I receive a diagnosis of autism and/or other conditions? If not, what sorts of supports do I generally find useful? For example, courses, support, or community groups, reading material, podcasts. • What questions do I have about autism? How do I think I would like those questions to be answered?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>For example, I will have an opportunity to ask questions, as well as to have questions asked of me. I will have time to reflect on questions I might have and can ask them at another time or have a way to ask questions via email or text in case they don’t occur to me ‘in the moment’ at an appointment.</p>



Evidence-based: Assessment and diagnostic practices should reflect the best available evidence from research, evidence from clinical practice and lived experience, and the client's preferences and priorities.

Considerations	Examples/Responses
This might look like...	<p>The practitioner helps me to understand why a particular assessment or diagnostic practice has been chosen, and why it is suitable for me.</p> <p>The practitioner references the lived experiences of autistic people in helping me to understand my strengths, needs, supports, aspirations, and challenges.</p>
Prompts and examples to consider...	<ul style="list-style-type: none">• What types of evidence are most important to me?• How important is it to me to include lived experiences and expertise in how I understand myself?• Does the explanation they give make sense to me? Is the evidence they are using relevant to me?
How important is this principle to you in experiencing a successful diagnostic process?	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
For this principle to be achieved for me, it will look / sound / feel like...	<p>For example, if I have self-identified prior to this formal assessment and diagnostic process, I will have an opportunity to bring my personal knowledge and experience to my appointments, and have these considered.</p>



Culturally-affirming: Practitioners should acknowledge and respect the values, knowledge, preferences, and cultural perspectives of the client; adopt culturally affirming practices and reflect on their own cultural knowledge and competency in their practice.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>A practitioner who is able to acknowledge my culture and learn about it.</p> <p>A practitioner who is able to be curious about cultural differences and incorporate these into their approach.</p> <p>A place where I am able to be open and respected for my cultural differences.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • How does my culture and community think about neurodevelopmental differences? • How has my culture impacted my view of autism? • How can my community and culture support me with autism? • What challenges may my cultural differences place on my journey with autism?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>I would be provided with time to consider a diagnosis of autism. In the meantime, I would be provided with supports that are appropriate to my needs and that respect my differences. I would be provided with information that I can share with my family members that explains what autism is in a culturally appropriate way.</p>



Respecting First Nations Peoples: For Aboriginal, Torres Strait Islander or other First Peoples. Services should be culturally affirming for Aboriginal and Torres Strait Islander and other First Peoples, built on an acknowledgement of the barriers to accessing supports that they may experience; an understanding of current and historical truths and their enduring impact; and respect for deep connection to Country, language, customs, and traditions.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner will build a relationship with me and my broader network (if appropriate) to understand my family structures and cultural background, including any languages that may be spoken at home.</p> <p>The practitioner will build a relationship to establish my understanding of autism, while acknowledging the various perceptions of disability more broadly within First Nations communities.</p> <p>The practitioner will listen without judgement when I share memories and past experiences about myself, to ensure I feel safe and respected.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • Has my practitioner supported other First Nations adults? • Do I feel comfortable involving my family and/or others from my support network in my assessment and diagnostic process? • What do I imagine my future looks like if I'm living my best life? How might the assessment and diagnostic process help me to achieve that future?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>I will hear the practitioner asking respectful questions about my past, checking in on my wellbeing, and being sensitive to potential triggers and trauma.</p> <p>I will have an opportunity to ask questions, as well as to have questions asked of me. I will have time to reflect on questions I might have and can ask them at another time or have a way to ask</p>

	<p>questions via email or text in case they don't occur to me 'in the moment' at an appointment.</p> <p>I will feel comfortable and safe, without any feelings of judgement regarding my upbringing and experiences.</p> <p>I want to feel that my unique and personal journey, and connection to culture, country and values are acknowledged as core aspects of my lived experiences.</p>
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Neurodiversity-affirming: Assessment and diagnosis should be neurodiversity-affirming, embracing each client’s unique understanding of themselves, other people, and the world around them.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner explains what neurodiversity is, and how autism fits as a neurotype within a neurodiversity-affirming approach.</p> <p>The practitioner does not use deficit-based or stigmatising language and explains the assessment and diagnostic process in ways that affirm and validate my experiences.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • How do I feel most comfortable talking about autism? If the practitioner explains autism as a difference rather than a deficit, how does that feel? • How does the practitioner understand ‘neurodiversity-affirming’ practice? What principles do they apply within this approach? What is my understanding of this approach? Are there differences between the practitioner’s understanding and my own?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>For example, I might hear the practitioner re-frame or ‘translate’ the diagnostic criteria into neuro-affirming language that validates my experiences as different, not deficient.</p>



Competent: Practitioners involved in assessment and diagnosis should have appropriate qualifications; up-to-date knowledge, skills, and attitudes gained through continuing professional development and supervision; experience; and regulation that is relevant to assessment and diagnosis of autism.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner is willing to share their training and experience in the assessment and diagnosis of autism (and other co-occurring conditions), including any training led by autistic people and experts with lived experience of autism.</p> <p>The practitioner should be able to answer any questions I have about my autistic identity with knowledge and confidence. This might include questions about neurodiversity/neurodiversity-affirming practice, evidence-based practice, or common co-occurring conditions.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • What kinds of knowledge or information do I want from the practitioner? What is most important for me to know or find out about? • What information do I expect the practitioner to know for me to feel confident in their competence? • What characteristics, circumstances, and/or contexts do I bring to the assessment that might require the practitioner to have specialised knowledge?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>For example, I might hear the practitioner speak knowledgeably about a range of co-occurring conditions (such as, anxiety and eating disorders, ADHD and hypermobility), and demonstrate an understanding of the complex and diverse presentations of autism.</p>



Equity: All individuals should have access to timely and affordable assessment and diagnostic services regardless of who they are, where they live, or their resources.

Considerations	Examples/Responses
This might look like...	I am given clear information about waiting lists and the costs involved in the assessment and diagnostic process, and any alternatives if these are not acceptable or feasible for me.
Prompts and examples to consider...	<ul style="list-style-type: none"> • How long am I prepared to wait for my preferred practitioner? • How much am I able to pay for my preferred practitioner? • What alternatives are available to me if my preferred practitioner is not within my time or resource budget?
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	For example, I will be given clear guidance in advance of all costs involved, including for a full assessment and diagnostic report, and for all appointments. I will be empowered with clear and accurate information and alternatives to pursue if required.




Coordinated: Practitioners should work in a coordinated way with other service providers to improve access and reduce burden on the client.

Considerations	Examples/Responses
<p>This might look like...</p>	<p>The practitioner asks me for permission to contact my existing formal supports whose expertise in my life and experiences may be beneficial. I have the right not to provide such contacts if I wish.</p> <p>The practitioner provides specific recommendations for types of formal supports that might be beneficial to me at any stage within the assessment and diagnostic process, and in line with what is helpful to me.</p>
<p>Prompts and examples to consider...</p>	<ul style="list-style-type: none"> • Who currently exists in my team that might be able to provide a meaningful contribution to the process? For example, psychologist, psychiatrist, GP, occupational therapist, speech therapist, teacher. • Am I interested in developing a formal support team that is responsive to my needs as indicated through the assessment and diagnostic process? How can the practitioner help me to develop this plan for support?
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p><input type="checkbox"/> Extremely important</p> <p><input type="checkbox"/> Very important</p> <p><input type="checkbox"/> Moderately important</p> <p><input type="checkbox"/> Slightly important</p> <p><input type="checkbox"/> Not at all important</p> <p><input type="checkbox"/> Not applicable</p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	<p>For example, I will receive information from the practitioner about the various types of supports available to me. This will include supports, what these supports do for and offer to me, and how different supports will help me to thrive and work towards my aspirations.</p>

Guiding Principles questionnaire template

Fill in your own thoughts using this blank **Guiding Principles questionnaire template**. You can refer to the examples and prompts provided in the example questionnaire on pages 20 to 31.

 Client and family-centred: Practitioners should collaborate with individuals and families with respect, and value and support their unique reasons for seeking assessment, their preferences, and contexts.	
Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Strengths-focused: Assessments and the sharing of findings should focus on the client's strengths, including skills, values and interests that are personally meaningful to them and that promote their functioning, participation, and wellbeing.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Holistic: Assessments should be comprehensive and seek to understand all aspects of the client, including their context, history, strengths and challenges, and aspirations – now and into the future – to the extent that is relevant to the purpose of the assessment for the client and that they are willing to share.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Helpful: Assessments should have an agreed purpose, aim to answer the questions the client has, help them identify and advocate for their strengths and support needs, and provide a pathway to supports where appropriate.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Evidence-based: Assessment and diagnostic practices should reflect the best available evidence from research, evidence from clinical practice and lived experience, and the client's preferences and priorities.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Culturally-affirming: Practitioners should acknowledge and respect the values, knowledge, preferences, and cultural perspectives of the client; adopt culturally affirming practices and reflect on their own cultural knowledge and competency in their practice.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Respecting First Nations Peoples: For Aboriginal, Torres Strait Islander or other First Peoples. Services should be culturally affirming for Aboriginal and Torres Strait Islander and other First Peoples, built on an acknowledgement of the barriers to accessing supports that they may experience; an understanding of current and historical truths and their enduring impact; and respect for deep connection to Country, language, customs, and traditions.

Considerations	Responses
<p>This might look like...</p>	
<p>Prompts and examples to consider...</p>	
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable </p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	



Neurodiversity-affirming: Assessment and diagnosis should be neurodiversity-affirming, embracing each client's unique understanding of themselves, other people, and the world around them.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Competent: Practitioners involved in assessment and diagnosis should have appropriate qualifications; up-to-date knowledge, skills, and attitudes gained through continuing professional development and supervision; experience; and regulation that is relevant to assessment and diagnosis of autism.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	



Equity: All individuals should have access to timely and affordable assessment and diagnostic services regardless of who they are, where they live, or their resources.

Considerations	Responses
<p>This might look like...</p>	
<p>Prompts and examples to consider...</p>	
<p>How important is this principle to you in experiencing a successful diagnostic process?</p>	<p> <input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable </p>
<p>For this principle to be achieved for me, it will look / sound / feel like...</p>	



Coordinated: Practitioners should work in a coordinated way with other service providers to improve access and reduce burden on the client.

Considerations	Responses
This might look like...	
Prompts and examples to consider...	
How important is this principle to you in experiencing a successful diagnostic process?	<input type="checkbox"/> Extremely important <input type="checkbox"/> Very important <input type="checkbox"/> Moderately important <input type="checkbox"/> Slightly important <input type="checkbox"/> Not at all important <input type="checkbox"/> Not applicable
For this principle to be achieved for me, it will look / sound / feel like...	

Notes

Take notes in the space provided below. Your notes may help guide your discussion with the practitioner when you meet with them next, and ensure your expectations, questions and concerns are being addressed.

Our values



Inclusion

Valuing lived experience



Innovation

Solutions for long term challenges



Evidence

Truth in practice



Independence

Integrity through autonomy



Cooperation

Capturing opportunities together



AutismCRC

Independent national source of evidence for best practice



autismcrc.com.au