

RBQ-2A Questionnaire

Read each question carefully and choose the answer you feel is most representative. There are no right or wrong answers, or trick questions.

- **Q1. Do you like to arrange items in rows or patterns?**
 - 1. Never or rarely
 - 2. One or more time/s daily
 - 3. 15 or more times daily
- **Q2. Do you repetitively fiddle with items? (e.g. spin, twiddle, bang, tap, twist, or flick anything repeatedly?)**
 - 1. Never or rarely
 - 2. One or more time/s daily
 - 3. 15 or more times daily
- **Q3. Do you like to spin yourself around and around?**
 - 1. Never or rarely
 - 2. One or more time/s daily
 - 3. 15 or more times daily
- **Q4. Do you rock backwards and forwards, or side to side, either when sitting or when standing?**
 - 1. Never or rarely
 - 2. One or more time/s daily
 - 3. 15 or more times daily
- **Q5. Do you pace or move around repetitively (e.g. walk to and fro across a room, or around the same path in the garden?)**
 - 1. Never or rarely
 - 2. One or more time/s daily
 - 3. 15 or more times daily
- **Q6. Do you make repetitive hand and/or finger movements? (e.g. flap, wave, or flick your hands or fingers repetitively?)**
 - 1. Never or rarely
 - 2. Mild or occasional
 - 3. Marked or notable
- **Q7. Do you have a fascination with specific objects (e.g. trains, road signs, or other things?)**
 - 1. Never or rarely
 - 2. Mild or occasional
 - 3. Marked or notable
- **Q8. Do you like to look at objects from particular or unusual angles?**
 - 1. Never or rarely
 - 2. Mild or occasional
 - 3. Marked or notable
- **Q9. Do you have a special interest in the smell of people or objects?**
 - 1. Never or rarely
 - 2. Mild or occasional
 - 3. Marked or notable
- **Q10. Do you have a special interest in the feel of different surfaces?**

1. Never or rarely
 2. Mild or occasional
 3. Marked or notable
- **Q11. Do you have any special objects you like to carry around?**
 1. Never or rarely
 2. Mild or occasional
 3. Marked or notable
 - **Q12. Do you collect or hoard items of any sort?**
 1. Never or rarely
 2. Mild or occasional
 3. Marked or notable
 - **Q13. Do you insist on things at home remaining the same? (e.g. furniture staying in the same place, things being kept in certain places, or arranged in certain ways?)**
 1. Never or rarely
 2. Mild or occasional (does not affect others)
 3. Marked or notable (occasionally affects others)
 - **Q14. Do you get upset about minor changes to objects (e.g. flecks of dirt on your clothes, minor scratches on objects?)**
 1. Never or rarely
 2. Mild or occasional (does not affect others)
 3. Marked or notable (occasionally affects others)
 - **Q15. Do you insist that aspects of daily routine must remain the same?**
 1. Never or rarely
 2. Mild or occasional (does not affect others)
 3. Marked or notable (occasionally affects others)
 - **Q16. Do you insist on doing things in a certain way or re-doing things until they “just right”?**
 1. Never or rarely
 2. Mild or occasional (does not affect others)
 3. Marked or notable (occasionally affects others)
 - **Q17. Do you play the same music, game or video, or read the same book repeatedly?**
 1. Never or rarely
 2. Mild or occasional (not entirely resistant to change or new things)
 3. Marked or notable (occasionally affects others)
 - **Q18. Do you insist on wearing the same clothes or refuse to wear new clothes?**
 1. Never or rarely
 2. Mild or occasional (not entirely resistant to change or new things)
 3. Marked or notable (will tolerate changes when necessary)
 - **Q19. Do you insist on eating the same foods, or a very small range of foods, at every meal?**
 1. Never or rarely
 2. Mild or occasional (not entirely resistant to change or new things)
 3. Marked or notable (will tolerate changes when necessary)
 - **Q20. What sort of activity will you choose if you are left to occupy yourself?**
 1. A range of different and flexible self-chosen activities
 2. Some varied and flexible interests but commonly choose the same activities
 3. Almost always choose from a restricted range of repetitive activities

Answer Key:

- Count how many questions you answered #3 to, then multiply that number by **3**.
- Count how many questions you answered #2 to, then multiply that number by **2**.
- Count how many questions you answered #1 to, then multiply that number by **1**.
- **Total score** = Add the **3** numbers above together.

Scoring

- Scoring range: **20–60**
- Threshold score: **26**
 - **36** average autistic score
 - **25** non-autistic score

Scores can also be summarized into four factors (when measuring repetitiveness on a scale of 1-3)
Scores are distributed as follows:

Factor 1 - Repetitive Motor Movements. Includes items: 2, 3, 4, 5, 6

Factor 2 - Rigidity/Adherence to Routine. Includes items: 13, 14, 15, 16, 17, 18, 19

Factor 3 - Preoccupation with Restricted Patterns of Interest. Includes items: 1, 7, 8, 10, 11, 12, 17

Factor 4 - Unusual Sensory Interest. Includes items: 8, 9, 10, 18.