Preparing for Your ADI-R Interview

A Guide for Adults and the People Who Support Them

About this guide

This guide will help you prepare for the Autism Diagnostic Interview-Revised (ADI-R), which is an important part of your autism assessment at NeuroFX. The ADI-R is a detailed, structured conversation about your development and behaviour, both when you were a child and now. It has been written for adults aged 18 and over, and for any family member, partner or friend who will be helping with the interview.

Adults come to assessment at very different points in life. Some are in their late teens or early twenties with parents close at hand; others are in their forties or fifties and may have lost the people who knew them as a child. This guide takes account of that. Whatever your circumstances, please be assured that a thorough and fair assessment is possible, and we will work with the information that is available to you.

What is the ADI-R?

The ADI-R is a gold-standard clinical interview used in autism assessment. It is one of the tools recommended by NICE for the assessment of autism in adults. It focuses on three main areas:

- Social interaction and relationships
- Communication and language development
- Patterns of behaviour, interests, and activities

The interview explores your early development and your behaviour both now and in the past. Autism is a lifelong neurodevelopmental condition, so understanding how you were as a child is just as important as understanding how you are today. The ADI-R helps build a comprehensive picture that, combined with other assessments, informs the diagnostic process.

Practical details

Who conducts the interview?

The ADI-R will be conducted by Tina Fox, our clinical lead. Tina is experienced in neurodevelopmental assessment and will guide you and anyone supporting you through the interview in a supportive and understanding manner.

Format and duration

The interview takes place online via video call. Please allow up to three hours for the session. We understand this is a significant time commitment, and there will be opportunities for short breaks if needed.

The interview is conducted at a comfortable pace. There are no right or wrong answers, and nobody will be judged on their responses. We are simply gathering detailed information about your development and experiences.

If an informant is taking part, we will agree on the arrangements with you in advance, including whether you and your informant will join the same session or speak with Tina separately. Everything shared is with your consent, and you remain in control of who is involved.

Who should take part?

The ADI-R was designed as an interview with a parent or carer, and the most detailed information usually comes from someone who knew you well in early childhood. For adults, though, who is available to help changes over time, and there is no single right arrangement. In order of preference, the interview can draw on:

- **A parent or someone who raised you.** This is the ideal informant, as they can describe your first years, your early language and play, and how you related to other children. Both parents are welcome if that is possible, as they may hold different memories.
- **Another relative who knew you as a child.** An older sibling, a grandparent, an aunt or uncle, a step-parent, a foster carer or a close family friend who saw you regularly when you were small can all contribute valuable information, even if they did not see everything.
- **Someone who knows you well now.** A partner, adult child, close friend, housemate or long-standing colleague may not know about your early childhood, but they can speak to your current social communication, routines, interests and sensory responses. Their contribution is most useful alongside information about your early years from another source.
- **You.** Your own memories and reflections are always part of the process, and for some adults they will be the main source. The section below on interviews without a parent or sibling explains how this works.

A combination often works best: for example, a parent for your early years and a partner for the present day, or an older sibling together with your own recollections. When you book, please let us know who you would like to involve so that we can plan the session around them.

How informant availability changes across adult life

We see adults at every stage from 18 to 60 and beyond, and the picture below is a general one rather than a set of expectations. It is here to reassure you that your situation, whatever it is, is one we are used to working with.

- **Late teens and twenties.** Parents are usually available, and their memories are relatively recent. School reports, health records and family photographs are often still to hand. This is the closest the adult interview comes to the childhood version.
- **Thirties and forties.** Parents are often still able to take part, though memories of the early years may be less precise and the interview will lean more on the overall pattern of your development than on exact ages. Siblings, partners and long-term friends become more important, and childhood records may need to be tracked down.

- **Fifties and sixties.** Parents may be elderly, unwell or no longer living, and siblings may themselves be unsure of details. Here the interview often draws on a mix of your own memories, an older relative or family friend where one exists, any surviving records, and someone who knows you well now. Please read the section below on interviews without a parent or sibling.

If your informant is older, please reassure them that approximate timings and general impressions are exactly what we need. They are not being tested on dates.

If you have no parent or sibling who can help

Many adults, particularly those in their forties, fifties and sixties, have nobody from their childhood who can take part. Parents may have died or be living with conditions that affect their memory, families may be estranged, or you may have grown up in care. Please be assured that this does not prevent an assessment. NICE guidance for adult autism assessment recognises that a full developmental history is not always possible, and that clinicians can draw on other informants, on documentary evidence such as school reports, and on your own account.

In this situation, Tina will conduct what we call an adult-informed ADI-R. You act as the informant for your own history, and the interview is adapted so that it works with what you can remember and what you can gather. This section explains how to prepare for it.

What is different about an adult-informed ADI-R

- The questions are the same in content, but they are phrased for you rather than about you, and Tina will spend more time helping you find your way back to specific memories.
- Where the standard interview asks about the years between four and five, you will be asked about the earliest period you can remember clearly, which for most people is somewhere in the primary school years. Tina will work with whatever period you can recall.
- Gaps are expected. Saying "I don't know" or "I can't remember" is a perfectly good answer and is far more useful to us than a guess.
- Your current experiences carry more weight, and Tina will explore in more depth how the things you describe show up in your adult life.
- Anything you have been told about yourself as a child, even second-hand, is worth mentioning. Family stories, nicknames, things teachers said, and the way relatives described you all help.

Building a picture of your childhood

Before the interview, it helps to spend some time deliberately reconstructing your early years. Adults who do this often surprise themselves with how much comes back. Some approaches that work well:

- **Make a timeline.** List the houses you lived in, the schools you attended and the ages you were at each. Anchoring memories to places and years makes them much easier to retrieve.
- **Look at photographs and videos.** Old family photos, school photos and any home video can prompt memories of how you played, who you spent time with, and how you reacted to parties, holidays or crowds.
- **Read anything written about you at the time.** School reports are especially valuable because teachers often commented on friendships, playtime, following instructions and

unusual interests. Old letters, diaries, certificates, and the notes in a baby book or Red Book (Personal Child Health Record) can all help.

- **Ask more distant relatives and family friends.** An aunt, uncle, cousin, godparent, former neighbour or your parents' friends may remember you clearly, even if they only saw you a few times a year. A short conversation or a few written notes from them is enough; they do not need to attend.
- **Reconnect with people from school.** A childhood friend, a former classmate or, occasionally, a former teacher can describe how you were with other children. Social media has made this far easier than it once was.
- **Request records.** You are entitled to ask your GP practice for your childhood medical records, which may include health visitor and developmental checks. Schools and local authorities may hold old educational records, and adults who grew up in care have a legal right to request their care files from the relevant local authority. These requests can take several weeks, so start early if you would like to include them.

You do not need all of these. A single school report, one photograph that reminds you of something, or one conversation with a cousin can add real value. Please do not feel you have to produce a complete archive.

Involving someone who knows you now

Even where nobody can speak to your childhood, we would encourage you to consider bringing in someone who knows you well today. A partner, a close friend, an adult child or a trusted colleague can describe how you come across in conversation, how you handle change, what your routines and interests look like from the outside, and how you respond to noise, light, textures or busy places. People often notice things about us that we do not notice ourselves, and this outside view is an important part of the picture when early history is thin.

If you would prefer not to involve anyone else, that is entirely your choice. The assessment can still go ahead on your own account, together with the other elements of your assessment.

How this fits with the rest of your assessment

The ADI-R is never used on its own. It sits alongside the ADOS-2, which is a direct observational assessment with you, the questionnaires you complete, and any reports or records you provide. When the developmental history is limited, these other elements become correspondingly more important, and Tina will weigh all of the evidence together before reaching a conclusion. If there are areas where the information is not enough to be confident either way, we will say so clearly and explain what would help.

How to prepare

Taking some time to prepare will help ensure we gather the most accurate and complete information. This applies to you and to anyone who will be helping with the interview. Here is what we recommend:

Review developmental milestones

Think back, or ask your informant to think back, to your early development. Try to recall:

- When you first smiled, babbled, or said your first words
- When you started walking or developed other motor skills

- How you played with toys and whether you played with, or alongside, other children
- Any concerns anyone had about your development, and whether you were seen by a health visitor, speech and language therapist or other professional

Please do not worry if exact ages or dates cannot be remembered. Approximate timings or age ranges are perfectly acceptable. What matters most is the overall pattern of development.

Think about specific examples

During the interview, you will be asked about specific behaviours and situations, both in childhood and now. It helps to think of concrete examples rather than general descriptions, such as:

- How you sought comfort when upset as a child, and how you manage distress now
- How you made and kept friends at school, and what your friendships and relationships look like today
- How you take part in conversation, including small talk, eye contact, taking turns and understanding jokes or hints
- Any repetitive movements, routines, rituals or intense interests, past or present
- How you cope with unexpected changes to plans, and what happens when a routine is disrupted
- Unusual sensory responses (for example, sensitivity to sounds, textures, lights, smells or food), and how these affect your daily life
- How things have gone at work or in education, and any patterns you have noticed across different jobs, courses or settings

Real-life examples help us understand your unique experiences and provide the clearest picture of your needs. Many adults find it useful to jot examples down in the days before the interview as they come to mind.

Gather relevant documentation

If you have any of the following documents, please have them available during the interview:

- Previous assessments or diagnostic reports (for example, from educational psychologists, speech and language therapists, mental health services or other professionals, at any age)
- School reports, records of additional support at school, or Education, Health and Care Plans (EHCPs) if you had one
- Letters from other healthcare professionals, including any relating to anxiety, depression, ADHD or other conditions
- Red Book (Personal Child Health Record), baby book or other developmental records, if these still exist
- Occupational health reports, workplace adjustment records or feedback from employers, if relevant

These documents can help confirm timelines and provide additional context, though they are not essential. If you do not have these readily available, please do not worry. For adults without a parent or sibling to help, the earlier section describes how to track down records that may still exist.

If you are the informant

If you are a parent, relative, partner or friend helping with someone's ADI-R, thank you. Your perspective is a valued part of the assessment. A few things that will help:

- Read this guide before the interview so you know what to expect
- Spend some time in advance thinking back over the period you know best, using photographs or records as prompts if that helps
- Describe what you actually saw and remember, rather than what you think it might mean
- It is fine to disagree with the person being assessed, or with another informant; different perspectives are helpful, not a problem
- If you did not know the person during a particular period, simply say so

During the interview

What to expect

The ADI-R follows a structured format with specific questions covering different areas of development and behaviour. Tina will guide you through each section and will ask follow-up questions to clarify your responses.

Some questions will focus on the present day, while others will ask about childhood, particularly between the ages of four and five years old, or the earliest period that can be clearly remembered. This helps us understand how your development has progressed over time and whether the features we are exploring have been present throughout your life.

Be honest and detailed

Please answer questions as honestly and thoroughly as you can. It is important to describe both strengths and challenges. There is no need to downplay difficulties or exaggerate concerns. Many adults have spent years developing strategies to manage or mask their differences; it helps us to hear about the effort that goes into this, not only about how things look from the outside. The more accurate the information, the better we can understand your needs.

Take breaks if needed

We understand that discussing your own development, or that of someone you care about, in detail can be emotionally demanding. Revisiting childhood can bring up difficult memories, and hearing a family member describe you can be unexpectedly moving. If you need a short break during the interview, please let Tina know. We want to ensure everyone feels comfortable and supported throughout the process.

Ask questions

If you do not understand a question or need clarification, please ask. The interview should be a collaborative conversation, and we are here to ensure the process is as clear and supportive as possible.

After the interview

Once the ADI-R is complete, the information gathered will be combined with other assessments, including the ADOS-2 observation and any questionnaires or reports you have provided. This

comprehensive approach ensures we have a thorough understanding of you before reaching any conclusions.

You will receive an outcome letter and a detailed report as outlined in your assessment pathway documentation. If an informant took part, the report is yours, and it is for you to decide what you share with them.

Questions or concerns?

If you have any questions about the ADI-R, are unsure who to involve, or need support preparing for the interview, please contact us:

Telephone: 0333 533 3303
Email: info@neurofx.co.uk
Website: www.neurofx.co.uk

We understand that the assessment process can feel overwhelming, especially when it means looking back over many years. Your input during the ADI-R is invaluable, however much or little of your early history you are able to bring. Thank you for taking the time to prepare, and we look forward to working with you.

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