

# Restricted Interests & Repetitive Behaviors (RRB's)

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*Is your child repetitive in interests, topics or language?*

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## Is your child:

- Struggling with social language?
- Repeating himself in conversation?
- Using the same comment or phrase over and over?
- Struggling to talk to peers, in spite of adequate expressive language?
- Only able to talk about certain topics and turning conversation to these?
- Interested in obscure or specific things like the diurnal turtle?
- Lecturing others about something specific like trench warfare?
- Getting stuck on a topic like air conditioning units?
- Repetitive in interests, topics and language but not in behaviors?

## LET'S TALK ABOUT IT

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Often people talk about **repetitive behavior** as repeated gross and fine motor movements. This can be hand-flapping, finger flicking, spinning in circles or several other things. Restricted and repetitive behavior can be subtler than what many people think.

Repeating the same phrase over and over or developing a very specific interest that allows your child to shut out other people can be termed 'restricted and repetitive.' These subtler repetitive nuances can be evidence of the same problem that larger repetitive movements are but often parents or professionals take a longer time to notice the impact of these or develop concerns.

A parent may have concerns about restricted and repetitive language and interests when these limit a child's ability to connect socially with others, to be flexible in the learning environment and to carry on appropriate conversations.

A child who turns every conversation back to Minecraft or Pokémon may start to annoy his friends, even if they too enjoy the topic. A child who repeats him or herself often may also begin to have difficulty connecting with others because of the repetitive nature of his or her speech. Interests like Carrier air conditioning units, Operation Desert Storm, the origin of Pluto can be harmless, but if taken to the extreme, can lead to social challenges.

*An Example.* One author of this website worked with a bright and adorable child who was obsessed with air conditioning units. He spent all breaks looking out the window and identifying the types of units he could see on other roofs or buildings. When asked about his siblings he identified each by sharing a name and a favorite air conditioning brand.

Any conversation was turned back to air conditioners. While he was adorable, social challenges were becoming evident because he was not able to **shift his focus** and his topic of conversation for very long. His interest was not terribly common among kids his age and would become less accepted as he got older.

## CLINICAL DESCRIPTION

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Clinically, restricted or repetitive topics, interests or language are of most concern when they have an impact on an individual's ability to connect socially and form meaningful social relationships with others.

Most often restricted or repetitive interests or language, when occurring to a significant degree, point to an Autism Spectrum Disorder.

**Autism Spectrum Disorders** include challenges in social communication and restricted and repetitive patterns of behavior or interests. Social communication challenges in autism often include difficulty with knowing what to say, carrying on back-and-forth conversations and reciprocity.

Many individuals with ASD speak clearly, in full sentences and with advanced vocabulary. They may use formal or precocious language and recall detailed information, and they may try to converse with peers and adults, but they tend to

struggle with **reciprocity** (making social connections) and with overuse of repetitive topics or statements.

*Restricted Interest.* Repetitive topics in autism tend to elicit images of dinosaurs, Minecraft or Thomas the Train. It is classic for young children on the Spectrum to learn everything about a topic and provide facts and details that their parents could never remember. They may navigate the computer to certain videos and segments about their favorite interest while not being able to read or even speak.

Other children will talk on end, memorizing entire factual books about a topic. It can be tricky to discern these repetitive topics from typical toddler behavior that includes repetition as a part of learning.

Clinically it is important to look at the restricted interest in the context of its ability to create social interaction and reciprocity. A young child interested in dinosaurs who is rigid about what each is called, how they play, and what they eat may not be flexible and connected with a parent in pretend play.

A child who brings the dinosaur book into a parent's lap, points to the pictures, labels, makes eye contact and gives you turns to point and label, while smiling at you cuddling and saying, "mama look!" may love dinosaurs, but this topic may not be interfering with social connections.

*Little Ones.* With young children it is important to think about whether the repetitive interest hinders social connections and interactive play. It is also notable that the restricted interest could be almost anything and is not limited to dinosaurs or trains.

*Children.* As children get older, they may have a favorite interest that stands out but does not interfere with life. For example, a child may love soccer, play every day, and sleep with the soccer ball beside the bed. This may just be an interest.

Soccer could also be a repetitive topic in autism if it becomes socially isolating. It is important to consider whether this child likes to attend birthday parties at the zoo, can play with friends in the pool and can socially connect without mention of soccer. Conversely, the child who brings his ball everywhere and seems to ignore others while he is focused on his dribble may have an interest that is impeding his ability to socially connect.

It is also important to note that for some children, teenagers or adults, these obsessions change over time.

One adult shared that he could solve any Rubik's cube as a child, he spent all allowance on Rubik's cubes and spent all his free time on the puzzles. As an adolescent he liked drawing skyscrapers and spent all his free time on that activity. Finally, as an adult he made tiny models. He had no kitchen table because all the surfaces in his apartment were covered with tiny modeling materials. He never had anyone over

because he was concerned they might mess up a model and he explained that he “really did not have the space.”

Repetitive statements might include the repetition of “I can’t say that I know” as an answer for every emotional question posed by an examiner. Another child might use “fortunately” as the start of many sentences. Often these words do not fit in all the contexts they are used in. Sometimes the words are nonsensical or are blends of two different words (fantastic and brilliant becomes “fantilliant”).

In cases like this, the examiner always must ask, “what are you saying?” or “what word is that?” to get the explanation for the created word. This is relevant because it reflects a lack of understanding or **perspective taking** about what the examiner knows and what the child/client knows.

An examiner may tally **repetitive statements** or phrases in the margin of the ADOS-2, an autism assessment that focuses on social communication and restricted and repetitive behaviors and interests. The authors of this site have tallied over 50 repetitive statements in an hour long session.

Repetitive statements relate to a child getting stuck and struggling to vary social responses. The same child may answer fact based questions perfectly, but the open ended nature of conversation often means that a child with autism has no idea what to say. This also relates to an individual with autism having trouble taking another person’s perspective. This deficit can result in repetitive statements, struggling to shift topics and at times sharing untrue information because of a need to say something.

## **WHAT TO DO FOR A CHILD WHO IS RESTRICTED AND REPETITIVE**

To improve repetitive language or increase variation in topics of interest, a parent can do several things.

**First**, *use and model language* for your child. Encourage back and forth conversation on a variety of topics. Practice asking questions, answering questions and sharing information back and forth. Vary activities and conversation topics at home. Try and introduce new things that may be related to an interest but with an effort to expand that interest.

**Second**, before a playdate *practice* specifically what topics your child may talk about and practice things to say. Help him come up with fun (true) things about himself to share with others. Help her think about cool things to talk about related to the topic of the playdate or party.

Prepare your child to do and play and talk about something other than his or her specific interest. Practice talking about friends’ interests. Point these out to your child and help think of things to say that relate to these interests.

**Third**, get your child *enrolled in social activities* that are low risk, like a Lego club, cooking class, robotics club, swimming, etc. Find something that has team aspects but is not as competitive as a typical team sport. Start with something that has a structure but is about individual performance. Practice what to talk about here and things to say.

Vary activities so they may relate to specific interests, but they may expand. If your child likes Minecraft, try a robotics club. If she loves to make pancakes, go for a general baking class with other kids. Having these chances to socialize and practice conversation while developing interests will be helpful.

**Fourth**, consider a *social skills group* with clinicians who are trained to help children develop conversation skills and engage in back and forth conversation as well as social interaction like playing games, talking about different topics or working together to solve problems or puzzles.

**Fifth**, *Provide breaks and down time*. Give your child time to talk about his favorite interests and outlets that focus on these. Provide a space for these interests and topics while also encouraging other things and supporting him or her in language and conversation. Let your child have time devoted to dinosaurs, air conditioners, history books and try to relate the restricted topic to other interests. Encourage variety and reward your child with time to do his or her favorite things.

## SIMILAR SYMPTOMS

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*If your child is struggling with a similar problem, not directly addressed in this section, see the list below for links to information about other related symptom areas.*

- [Social skills \(Socializing\)](#): children with restricted and repetitive language or topics of interest are likely to have overall social skill difficulties
- [Conversation](#): children with restricted and repetitive language or topics of interest are likely to struggle with conversations
- [Pragmatic language](#): children with restricted and repetitive language or topics of interest may struggle with making social connections through the use of language
- [Rigidity](#): children who are rigid tend to be more repetitive and may easily get stuck on topics or ideas. These kids tend to like to be the boss and to direct and teach others
- [Perseverating](#): this means getting stuck on a topic or interest and struggling to shift which is common for children on the Autism Spectrum
- [Repetitive Behavior](#): as noted before, often repetitive behaviors that have motor components like spinning or jumping or flapping are related to being repetitive or saying repetitive things. All of these can relate to social skills challenges like those in autism
- [Stuttering](#): stuttering can be related to language fluency and may result in a child repeating him or herself. Stuttering is different from repetitive language as

repetitive language is the repetition of whole words and phrases over and over. A child might say “popsicles, popsicles, popsicles, popsicles!” but the difficulty is not in articulating the word but is an interest in the way it sounds or the topic itself

## POTENTIAL DISABILITIES

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*Children who have significant problems in this area **may** have any of the following potential disabilities. \*Note, this information does **not** serve as a diagnosis in any way. See the ‘Where to Go for Help’ section for professionals who can diagnose or provide a referral.*

- [Autism Spectrum Disorder](#): deficits in social communication and restricted interests or behaviors. This is by far the most likely cause of restricted and repetitive behaviors that cause clinical concern and impact day to day life.
- [Giftedness](#): gifted children can have very mature interests at times and a focus on reading or studying could be construed as repetitive. These children may struggle to connect with some same aged peers. It is most important to look at the ability to connect with others with similar intellect and the impact on day to day life
- [Attachment or Trauma](#): those with traumatic experiences in their history often feel better being in control and making things predictable and repetitive. This repetitive use of play or language would relate or speak to having emotional control. The social connection may be disrupted but these children feel like they are trying to connect. The interaction may feel like you are being pushed away and pulled toward them and the clinician or adult will not feel the absence of a social connection
- [Social Anxiety Disorder \(Anxiety Disorders\)](#): significant anxiety in social settings could lead to repetitive responses or difficulty shifting activities because of fear of failure. The symptoms in this article are unlikely to be caused by social anxiety and much more likely to be caused by autism. It will take the help of a professional to assess this difference
- [Intellectual Disability](#): individuals with low IQ scores often have difficulties with verbal comprehension, particularly for more abstract information, and thus conversation skills can be impacted, and a person may respond in a repetitive way or choose the same activities over and over. It can be challenging to differentiate an intellectual disability alone from having both an intellectual disability and having autism. A psychologist who specializes in autism assessment can do this

## WHERE TO GO FOR HELP

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*If your child is struggling with this symptom to the point that it is getting in the way of his learning, relationships, or happiness, the following professionals could help; they may offer diagnosis, treatment, or both.*

- [CLEAR Child Psychology](#): to obtain a *customized profile* of concerns for your child or *consult 'live'* with a psychologist or to obtain a virtual or in-person assessment of symptoms
- [Psychologist or Neuropsychologist](#): to consider symptoms in mental health context, seek a comprehensive evaluation
- [School Psychologist](#): to test IQ, anxiety, social skills and consider academic impact
- [Speech and Language Pathologist](#): to provide language assessment and then therapy, at school therapy can happen at lunch-time or during recess for a natural social environment. May be in a group or the therapist may come into the classroom to facilitate social learning, conversation and shared interests
- [Social Group](#): Often facilitated by a social worker, counselor or psychologist, a group with other children with an emphasis on social and conversation skills and developing interests. Make sure your child is matched by approximate age and children have similar language skills for the most success in these groups

*These professionals may recommend or administer the following tests for this symptom:*

- [ADOS-2](#): test of social communication issues associated with autism
- [CELF-5 \(including the pragmatics profile\)](#): test of language ability
- [Child Interview or self-report rating scales](#): tests for emotional or psychological problems
- [Parent and teacher rating scales](#): tests of emotions, behavior, and social skills such as: BASC-3, SRS, SCQ, Conner's-3
- [WISC-V](#): test of cognitive ability (IQ test)

## LEARN MORE ABOUT RESTRICTED AND REPETITIVE BEHAVIOR

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[1] Kroncke et al. (2016) Kroncke, Willard, & Huckabee (2016). *Assessment of autism spectrum disorder: Critical issues in clinical forensic and school settings*.

Springer, San Francisco.

Springer: <http://www.springer.com/us/book/9783319255026>

Amazon: [https://www.amazon.com/Assessment-Autism-Spectrum-Disorder-Psychological/dp/3319255029/ref=sr\\_1\\_2?s=books&ie=UTF8&qid=1468348614&sr=1-2&keywords=assessment+of+autism+spectrum+disorders](https://www.amazon.com/Assessment-Autism-Spectrum-Disorder-Psychological/dp/3319255029/ref=sr_1_2?s=books&ie=UTF8&qid=1468348614&sr=1-2&keywords=assessment+of+autism+spectrum+disorders)

[2] Baker, Jed. (Retrieved 2017). Social skills books and resources for ASD. <http://socialskillstrainingproject.com/books.html>

[3] Berns, Roberta M. (2010). *Child, family, school, community: Socialization and support*.

Amazon: <https://www.amazon.com/Child-Family-School-Community-Socialization/dp/1305088972/>

[4] Mendler, Allen (2013). *Teaching your students how to have a conversation*.

Amazon: <http://www.edutopia.org/blog/teaching-your-students-conversation-allen-mendler>

[5] Ozonoff, Sally & Dawson, Geraldine & McPartland, James C. (2014). *A parent's guide to high functioning autism spectrum disorder: How to meet the challenges and help your child thrive*.

Amazon: <https://www.amazon.com/Parents-High-Functioning-Autism-Spectrum-Disorder/dp/1462517471/>

[6] UCLA PEERS Clinic <https://www.semel.ucla.edu/peers>

[7] Giler, Janet Z. (2000). *Socially ADDept: A manual for parents of children with ADHD and / or learning disabilities*.

Amazon: <https://www.amazon.com/Socially-ADDept-Children-Learning-Disabilities/dp/0966696921/>

[8] Giler, Janet Z. (2011). *Socially ADDept: Teaching social skills to children with ADHD, LD, and Asperger's*.

Amazon: <https://www.amazon.com/Socially-ADDept-Teaching-Children-Aspergers/dp/047059683X/>

[9] Baker, Jed. (2006) *Social skills picture book for high school and beyond*.  
<https://www.amazon.com/Social-Skills-Picture-School-Beyond/dp/1932565353/>

[10] Baker, Jed. (Retrieved 2017). *Social skills books and resources for ASD*.  
<http://socialskillstrainingproject.com/books.html>

[11] Gray, Carol & Attwood, Tony (2010). *The New Social Story Book, Revised and Expanded 10th Anniversary Edition: Over 150 Social Stories that Teach Everyday Social Skills to Children with Autism or Asperger's Syndrome, and their Peers*.

Amazon: <https://www.amazon.com/Social-Story-Revised-Expanded-Anniversary/dp/1935274058/>

[12] McConnell, Nancy & LoGuidice (1998). *That's Life! Social language*.

Amazon: <https://www.amazon.com/Thats-Social-Language-Nancy-McConnell/dp/0760602247/>

[13] Fein, Deborah (2011). "The Neuropsychology of Autism"  
Amazon: <https://www.amazon.com/Neuropsychology-Autism-Deborah-Fein/dp/0195378318/>

Children's books on social skills:

Brown, Laurie Krasny & Brown, Marc (2001). *How to be a friend: A guide to making friends and keeping them (Dino life guides for families)*.

Amazon: <https://www.amazon.com/How-Be-Friend-Friends-Families/dp/0316111538/>

Cook, Julia (2012). *Making Friends is an art!: A children's book on making friends (Happy to be, you and me)*.

Amazon: <https://www.amazon.com/Making-Friends-Art-Childrens-Paperback/dp/B00DCVWAJI/>

Cooper, Scott (2005). *Speak up and get along!: Learn the mighty might, thought chop, and more tools to make friends, stop teasing, and feel good about yourself*.

Amazon: <https://www.amazon.com/Speak-Up-Get-Along-Yourself/dp/1575421828/>

Meiners, Cheri. (2003). *Understand and care*.

Amazon: <https://www.amazon.com/Understand-Care-Learning-Along-Book/dp/1575421313/>

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My-child-has-restricted-interests

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