



Girls on the AUTISM SPECTRUM

DIAGNOSIS OF **ASD** FOR GIRLS

- On average, girls are diagnosed with ASD at age **5.4 years**
(Office of Autism Research Coordination National Institutes of Health, 2019)
 - Girls diagnosed an average of **1.5 years later** than boys (McCormick *et al.*, 2020).
There is a longer time between first symptoms and diagnosis of ASD for girls.
On average, ASD diagnosis in girls occurs **2 years** after care givers express concerns (Begeer *et al.*, 2012).
- Male-to-Female Ratio of Diagnosis in ASD: **3:1** (Loomes *et al.*, 2017)
- Many researchers believe girls are underdiagnosed with ASD
 - Difficulties especially overlooked in early and middle childhood
(Dean *et al.*, 2014, Mandy *et al.*, 2012)

WHY ARE GIRLS WITH ASD UNDERDIAGNOSED?

- Criteria for diagnosing ASD based on data driven almost entirely from studies of boys
- Screening instruments not designed to assess for specific ways that ASD presents in girls (Constantino & Charman, 2012)
- Females express characteristics of ASD differently than males. For example, autistic females often demonstrate:
 - Higher social motivation (Hiller et al 2014, Head *et al.*, 2014)
 - More typical, and gender-stereotyped, interests (Hiller *et al.*, 2014)
 - Less apparent repetitive behaviours (Hiller *et al.*, 2014)
 - Tend to internalize their emotions (in contrast to boys' tendency to externalize behaviours) (Solomon *et al.*, 2012)
 - Greater capacity to "camouflage" autistic difficulties (Lai *et al.*, 2011)
- Referral bias
 - Families and professionals often attribute girls' challenges to shyness, anxiety, or other factors
 - Autistic girls may get the following diagnoses instead of ASD (Szalavitz, 2016):
 - Anxiety, Depression, or other mental health disorders
 - Anorexia or other eating disorders
 - ADHD
 - Obsessive Compulsive Disorder
 - This can lead to fewer referrals and misdiagnosis (Holtmann, Bölte, & Poustka, 2007)

Hints that Autism May be the Correct Diagnosis (Dr. Alisa Lipson, 2019 – Pediatrician in Vancouver, BC) – <https://thischangedmypractice.com/autistic-spectrum-disorder-in-girls/>



WHAT IS CAMOUFLAGING?

- Definition: use of conscious or unconscious strategies, which may be explicitly learned or implicitly developed, to minimize appearance of autistic characteristics in a social setting (Hull, 2020)
- Girls with ASD camouflage more than boys with ASD
(Lai *et al.*, 2017; Ratto *et al.*, 2017; Parish-Morris *et al.*, 2017; Rynkiewicz *et al.*, 2016; Dean *et al.*, 2016)

TYPES OF CAMOUFLAGING

COMPENSATION

Finding ways around things that are naturally difficult

Examples:



Forcing yourself to make eye contact with someone



Copying the facial expressions of a character in a TV show when you don't know which facial expressions to make

MASKING

Hiding parts of your autism

Examples:



Not talking about something you are really interested in



Pretending to join in a game even if you do not understand the rules

ASSIMILATION

Trying to fit in with everyone else so people don't notice you are different

Examples:



Always sitting next to the same person in class



Talking to a stranger in a shop even if you don't want to

WHY DO PEOPLE CAMOUFLAGE?

- To be perceived as a functioning member of society
- Opportunity to connect
- To reduce stress

CONSEQUENCES OF CAMOUFLAGING

- Increased risk for mental health difficulties
 - Autistic people who camouflage report higher rates of anxiety and depression (Bergiola *et al.*, 2016; Cage & Troxell-Whitman, 2019; Livingston, *et al.*, 2019)
- Decreased access to supports (Mandy, 2018)
- Energy depletion (Hull *et al.*, 2017)
 - Constant energy to avoid “getting it wrong”
 - Holding it together in one situation, while falling apart in others
- Diminished sense of identity (Hull *et al.*, 2017)
 - Feelings of inauthenticity, not knowing oneself, or betrayal of self and others



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