

# FSL FAQs

POPARD Family - School Liaison Newsletter



## FAQ: WHAT IS THE EMERGING RESEARCH REGARDING GIRLS WITH ASD?

### Gender Differences in Diagnosis of ASD

In the latest edition of the *Diagnostic and Statistical Manual of Mental Disorders, 5th Ed., Text Revision* (DSM-5-TR), published by the American Psychiatric Association (2022), much of what is currently known, with respect to gender differences and ASD, is summarized:



### Gender Difference in Prevalence

- ▶ ASD is diagnosed three to four times more in males than in females. Historically, boys have been diagnosed much more often than girls. This ratio is declining a bit, as more becomes known about ASD, but the ratio remains dominated by boys.

In this regard, results from some researchers have suggested a “male bias” that might influence referral, if not diagnosis:

some social behaviours, such as playing alone, might predispose a referral for assessment, because it is so obvious. [The art of camouflage: Gender differences in the social behaviors of girls and boys with autism spectrum disorder - Michelle Dean, Robin Harwood, Connie Kasari, 2017 \(sagepub.com\)](#) describes a study in which researchers investigated such behaviour.

### **Gender Differences in Diagnosis**

- Average age at diagnosis is later for females than for males.
- Identified females are more likely than males to have intellectual impairments (suggesting that those without intellectual impairments or language impairments may be under-identified, as diagnosis of either of these two conditions first might then lead to consideration of ASD; that may be influenced by overall male dominance in the diagnosis of intellectual developmental disorder and communication disorders.

- Diagnosis is more challenging for clinicians: females have better conversational skills and social skills than males and may mask fairly effectively but have difficulty similar to that of males in understanding social relationships. A fairly recent article in Scientific American ([Autism--It's Different in Girls - Scientific American](#)) describes several interesting research projects related to this. In a more recent paper, researchers considered if an argument might be made for gender-specific norms ([Assessing autism in females: The importance of a sex-specific comparison ScienceDirect](#)).
- Restricted repetitive behaviours and interests may be less evident and more socially acceptable but remain unusual in intensity.
- More gender variance (behavior or expression of gender that does not match masculine or feminine gender norms [[gender variance - Search \(bing.com\)](#)]) is reported in identified females than in males.

### **Couse of ASD**

ASD persists across the lifespan. But it is not a degenerative disorder (APA, p. 63); instead, individuals with ASD improve in their abilities with age, regardless of gender. Masking, which might make diagnosis more challenging, is an example of self-taught compensatory adjustment.

#### Onset

- Symptoms of ASD (especially a decline or delay in social and communication behaviours) are usually apparent in early childhood (12-24 months)

#### Early Childhood/Primary Grades

- Symptoms are most marked in preschool and in primary grades when children are placed in groups of other children of similar ages

#### Later Childhood

- Most children with ASD learn compensatory skills in later childhood; this can be facilitated by targeted educational and community services that assist them and their families in developing pro-social behaviours

## Adulthood

- Individuals with ASD who do not have additional diagnoses of intellectual developmental disorder or language disorder are better able to live independently and continue to compensate for challenges associated with ASD. However, ongoing learning and compensation makes diagnosis in adulthood challenging, especially in females, who may have learned better than males to effectively mask symptoms.
- Individuals with intellectual developmental disorder and individuals with ASD who do not have intellectual developmental disorder, but who do have substantial challenges in self-care and ability to function in the community, are eligible for support by governmental agencies, especially Community Living British Columbia (CLBC). Information on support and qualifications required is available at [Community Living BC | Support for Adults with Developmental Disabilities, Autism and FASD](#).

## Will Gender Differences Persist?

The authors of the section of DSM-5-TR devoted to diagnosis of ASD note that standardized instruments can improve reliability of diagnosis across time and across clinicians. But they also observe that:

... the symptoms of autism spectrum disorder occur as dimensions without universally accepted cutoff scores for what would constitute a disorder. Thus, the diagnosis remains a clinical [emphasis added] one, taking all available information into account, and is not solely dictated by the score on a particular questionnaire or observation measure (APA, p. 62).

The first two criteria that are applied in the diagnosis of ASD involve deficits in social communication and interaction (Criterion A) and patterns of behaviour that are restricted, repetitive, possibly unusual in intensity or focus, or unusual in response to environmental sensations (Criterion B). In DSM-5-TR, examiners are encouraged to evaluate deficits in relationships (in Criterion A) against norms for age, *gender*, and culture.

As our knowledge of ASD expands, the prevalence ratio of male to female may diminish. But some gender-related differences may remain. And it is important to remember that there is more in common across genders, with regards to ASD, than there are differences. [Autism in Women: Symptoms, Causes, Diagnosis, and Treatment \(healthline.com\)](#), updated in 2023, is a useful summary of some gender similarities and differences.

## POPARD Resources

The POPARD handouts below discuss masking/camouflage and describe some of the services that might be helpful for girls with autism:

- <https://autismoutreach.ca/learningportal-autism101-girls-on-the-autism-spectrum/>
- <https://autismoutreach.ca/learningportal-autism101-5-ways-to-support-autistic-females/>

## References

- American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision. Washington DC, American Psychiatric Association, 2022.
- Dean, M., Harwood, R., & Kasari, C. (2017). The art of camouflage: Gender differences in the social behaviors of girls and boys with autism spectrum disorder. *Autism*, 21(6), 678–689. <https://doi.org/10.1177/1362361316671845>
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