

Autism and Gender

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About Me and the Presentation

- Licensed Psychologist
- Licensed Specialist in School Psychology
- Worked in schools, public and private, including as an LSSP
- Opened Gray Area, PLLC in McKinney, TX
- Presentation
 - Several hot topics in a few hours
 - Condensed
 - If you have questions or if there are areas you would like to have more information on in the future, email me at: ggray@grayareapl.com
 - Other trainings

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Agenda

- Girls on the spectrum
- Hygiene issues
- Autism, gender, and sexuality



Real Ratio of Boys to Girls

- 1,711 children under age 18
- Australian
- Considered 2 biases:
 - What factors prevented girls from reaching the diagnostic clinic?---Recognition Bias
 - 72% of families reported a "school recognition failure"-- basis of the bias
 - 88% of girls reported masking
 - What factors prevent the diagnosis from being made?---Diagnosis Bias
 - Problems with diagnostic criteria
 - Recognition x Diagnosis= Ascertainment Bias
- True ratio appears to be 3 (boys): 4 (girls)
- 80% of females are still undiagnosed at age 18

(Tsilika et al., 2022)

Brain Differences

- Study published in 2022
- Algorithm developed that was 86% accurate at distinguishing boys from girls with autism
- Motor, language, and visuospatial attention differences
- Distinguishing and predictive features:
 - Primary motor cortex
 - Supplementary motor area
 - Parietal and lateral occipital cortex
 - Middle and superior temporal gyri

(Stanford Medicine, 2022; Suppekar et al., 2022)

Brain Differences

- Primary motor cortex predicted ADI-R RRB scores for females only
- Girls who were more similar to boys had more severe RRBs
- Functional brain organization is different for girls
- Differences between neurotypical people and people with autism



(Stanford Medicine, 2022; Suppekar et al., 2022)

Girls with Autism- Narrative Language

- Cognitive process words (e.g., think, know)
 - Deficits in the use of these words is thought to be reflective of deficits in social cognition, such as Theory of Mind
 - Neurotypical boys and girls tell narratives in sex-specific ways, including their reliance on cognitive process words (girls- more reliance on internal states and emotions)
 - Most previous research focused on boys with autism and it was unclear if it generalized to girls



(Boorse et al., 2019)

Girls with Autism- Narrative Language

- Results
 - Boys and girls with autism used more nouns than neurotypicals, indicating more object-focused stories
 - Girls with autism produced "significantly more" cognitive process words than boys with autism, despite symptom severity
 - In other words, girls with autism overlap with boys with autism (in terms of noun usage) AND neurotypical children (in terms of cognitive process words)
 - The researchers argue that this means more natural language processing assessment would be helpful for identifying girls with autism

(Boorse et al., 2019)

Girls with Autism

- Originally, the definition of Asperger's was developed under the assumption that girls were not at risk of it
- Much harder to diagnose in general but especially for higher functioning girls
- If it is diagnosed early, it is often due to ID and more disruptive behaviors
 - Which led people to think these were almost required for girls

(Boorse et al., 2019)

Girls with Autism

- Some research suggests they are on par with neurotypical same-age boys but behind neurotypical same-age girls
 - Empathy, friendship
- People argue that the current diagnostic criteria really does not allow for girls to be diagnosed

(Boorse et al., 2019)

Girls with Autism- Play

- Recess- boys with autism often stayed away from groups while girls with autism blended in more because they stayed near groups and seemed incorporated
- Struggles typically occurred internally and beyond surface-level interactions



(Boorse et al., 2019)

Girls with Autism

- Masking or Social Camouflaging - Describes how girls with autism follow the actions and interests of others and are good at mimicking the behaviors of those around them
 - This reflects how girls with autism are hard to distinguish on the surface from neurotypical same-age girls
 - A good example of this is boys not engaging in pretend play in preschool but girls with autism look like neurotypical girls because they use imagination and play with toys such as dolls
 - The difference in girls with autism and neurotypical girls is that girls with autism understand the social expectations but lack cognitive components such as storytelling

(Boorse et al., 2019)

Girls with Autism

- Symptoms often are hidden because they occur in behaviors that are considered to be typical
- Boys' restricted interests tend to impede their ability to interact socially while girls' tend to blend in with typical social expectations (e.g., rainbows, fairies, collecting items considered feminine)
 - This is one reason girls with ASD also end up with diagnoses of eating disorders (society gears ads towards women and weight loss)
- Reacting to sensory sensitivity, intense situations, feeling anxious can all be chalked up to "just being a girl, too sensitive,..."

(Boorse et al., 2019)

Girls with Autism- Dissociation, PTSD

- PTSD is under diagnosed and may be more common than we think
 - Trauma may look different on the spectrum
 - Less extreme experiences such as fire alarms, offhand comments, others' behavior toward them
 - Social incidents are much more predictive of it for people on the spectrum
 - Difficult to identify much less treat
 - Happens in boys, too
- Girls may mask to protect themselves from future traumatic events
- Dissociation may be present

(Gravitz, 2018; Oswald, 2020)

Girls with Autism- Dissociation, PTSD

- Dissociation:
 - The world "shuts off"
 - Basically stops
 - "It's strange what our senses will catch. It's one streetlight among dozens, but if it goes out right next to you the darkness overtaking the light is instantly noticed. This is true of dissociation. My friends can tell when I've had enough and frequently ask me how I'm doing if we're hanging out together. When the streetlight in my head goes out, I feel nothing and sense little."
 - "It's not a calm amidst a storm. It's standing in the circle where the light used to be and trying to make sense of the dark. There's an inherent background of panic because dissociation takes everything away from me."

(S, 2019)

Girls with Autism- Dissociation, PTSD

- There is an article written by a woman with autism describing this
 - Felt weird, like an "alien"
 - Constantly tried to figure out why she felt so different
 - Missed the nonverbal signals people send each other, a language she could not speak
 - Learned to assimilate, mask, and blend in
 - Felt like she was watching a movie outside of her body
 - Finally diagnosed but for her, it did not "fix" anything

(Autistic Science Person, 2018)

Girls with Autism and Empathy

- Theory is that we share or empathize with others' physical pain and socially unpleasant experiences
 - It increases activation in areas of our brain from similar first-hand experiences
- Used fMRI with pictures (physical pain) and drawings (social situations) with females diagnosed with ASD
 - Some of the social situations showed the character aware of the problem (i.e., embarrassed) and some where they were unaware
- Results
 - Able to detect physical pain
 - Significantly less able to accurately consider others' perspectives for social pain
 - Awareness of "integrity threat" (i.e., problem awareness) did not impact whether anterior insula was activated, it activated for all similarly

(Stroth et al., 2019)

Girls with Autism and Empathy

- Results
 - Able to detect physical pain
 - Significantly less able to accurately consider others' perspectives for social pain
 - Awareness of "integrity threat" (i.e., problem awareness) did not impact whether anterior insula was activated, it activated for all similarly
 - The anterior insula is associated with social-emotional processing (e.g., interoceptive processes and empathizing)
 - Females with ASD could not rely on their gut feelings for empathy but tried to "walk in their shoes" and could cognitively understand the character's situation because they relied on social norms

(Stroth et al., 2019)

Girls with Autism and Empathy

- Results
 - These findings could also be linked to flattened affect
 - Girls with ASD rated embarrassment just as high as controls
 - More egocentric views of complex social situations than straight forward physical ones
 - The more it overlapped with a shared experience, the better they did
 - Activated the same empathy networks as neurotypical people, just not to the same degree for more complex situations
 - Ties into social thinking exercises from Michelle Garcia Winner

(Stroth et al., 2019)

Autism and Hygiene

- High functioning individuals struggle with this often
- Possible reasons
 - Too much unnecessary work (e.g., washing jeans after starting cycle)
 - Unnecessary in general
 - No time/better things to do
 - Sensory
 - Trouble with executive functioning
 - Uninteresting/unmotivated
 - Mental health struggles
 - Account for ethnicity and culture

("Aspergers and Poor Personal Hygiene," n.d., "Keeping Healthy," n.d.)

Autism and Hygiene

- More about executive functioning
 - Needs to be consistent
 - Task switching
 - Hyperfocus
 - Initiation
 - Planning
 - Motor coordination
 - List created by an individual with ASD included 33 steps for washing their hair

("Autistic Hygiene," n.d.)

Autism and Hygiene

- Social cues
 - Are they missed when it comes to hygiene?
 - Social awareness
- Too worn out
- Being too busy



(“Aspergers and Hygiene: Solutions for an Overlooked Issue,” 2014; “Autism: Keeping Ourselves Clean and Following the Basic Rules of Hygiene,” 2019)

Autism and Gender

- Gender dysphoria
 - Incongruence, whether distressed or not, “related to a discrepancy between an individual’s assigned gender at birth and their experienced gender”
- Gender diversity
- Gender nonconformity
 - Broad term
 - Includes gender dysphoria
 - Gender identity or the way it is expressed varies from the norm

(Strang et al., 2016)

Autism, Gender, and the DSM-5

- In 2013, the DSM-5 was released
- Earlier in 2013, they released a position statement affirming support of transgender rights
- Updates in DSM-5, even before the latest TR, reflect this
- Changes:
 - Gender identity disorder replaced by gender dysphoria
 - Transvestic fetishism replaced by transvestic disorder
 - “Disturbing”
 - Stigmatizing

(Whalen, n.d.)

Autism, Gender, and the DSM-5

- Renaming of gender identity disorder is a positive BUT
 - Argument is that both gender dysphoria and transvestic disorder should be completely removed
 - Transvestic disorder should be removed immediately
 - Gender identity disorder was not REMOVED it was renamed
 - Neither are a psychiatric problem
 - BUT, no way to get insurance coverage If at least gender dysphoria is not included because no other way to code it for insurance purposes
 - BUT, also evidence that gender identity disorder was used for "reparative" treatment

(Whalen, n.d.)

Autism, Gender, and the DSM-5

- More on the problems with transvestic disorder
 - Many paraphilias should not be diagnoses because they are "diverse expressions of sexuality that harm no one"
 - It "pathologizes and invalidates" those who do not conform to stereotypical gender roles
 - It includes "autogynephilia" which is a "supposed condition created by Dr. Ray Blanchard"
 - Highly criticized
 - Involves a male's propensity to be aroused by the thought of being female
 - Says they are either gay or gender dysphoric
 - Enforces binary gender roles

(Whalen, n.d.)

Autism and Gender

- People who identify as a different sex than the one they were born with are 3-6x more likely to be on the spectrum than cisgender individuals
 - Also more likely to:
 - Report ASD traits
 - Sensory
 - Pattern-recognition
 - Trouble with empathy
 - Suspect they have ASD (5x more likely)
- In other words, people with ASD are more likely to be gender-diverse and gender-diverse people are more likely to be on the spectrum

(Dottaro, 2020)

Autism and Gender

- Improvement in research so it is not only looking at people who sought medical care for gender
- Unclear how much the overlap carries into comorbid conditions
- How are the studies impacted by girls with autism?
- Some clinicians are only focusing on one part of the presentation rather than both autism and gender identity

(Diartoro, 2020)

Autism and Gender

- Hypothesized links
 - Trouble with empathy but success with systemizing
 - Less likely to be preoccupied with social norms and judgments
 - High testosterone in utero results in more male-like thought patterns, which leads to both
 - Only applies to girls on the spectrum
 - Deficits in social interactions
 - Being the same gender as someone who picks on you, leads you to dislike that gender and identify with the other
 - Intense interests
 - Revolving around gender
 - Important to differentiate between intense interest and co-occurring gender dysphoria

(Saleh, 2021; Zupanec et al., 2021)

Autism and Gender

- Hypothesized links
 - Trouble communicating
 - Missing social cues about assigned gender could increase chances
 - Gender dysphoria might be a way autism manifests, it could be caused by autism-related traits
 - High rigidity in autism
 - Trouble reconciling assigned and experienced genders could increase dysphoria
 - Confusion in gender identity development
 - Hard to feel like you belong to a certain group

(Saleh, 2021; Zupanec et al., 2021)

Autism and Gender

- Case study
 - 16.5 years old
 - Female by birth
 - Presented with gender dysphoria, depression, and suicidal thoughts
 - Preferred male pronouns
 - Hard to determine if it was an intense interest so decided to "watchfully wait" with regular check-ups
 - Took a positive therapeutic approach rather than affirmative one
 - Suicidality stopped
 - Mood improved
 - Did not want to fully socially transition though dressed more masculine and cut hair short

(Zupanic et al., 2021)

Autism and Gender

- Case study
 - At 17, medical council denied wish for mastectomy
 - Refused to join group for transgender adolescents
 - In therapy,
 - Wondered why others were able to transition faster but could not wrap his head around it
 - Unable to imagine peer perspective of mastectomy and female name
 - Avoided using pronouns socially, let other person choose them
 - At 18, considered but decided against hormonal therapy
 - Wish for mastectomy continued and no improvements in gender dysphoria symptoms so presented to a medical council again
 - Recommended what was already being done
 - As well as the group therapy they had refused

(Zupanic et al., 2021)

Autism and Gender

- Case study
 - At 19, did hormonal treatment
 - Irregularly attended psychiatric appointments and skipped offered visits
 - Graduated high school, went to college, increased anxiety
 - After initial dose of testosterone, anxiety decreased
 - Changed to gender-neutral name but did not change his gender legally
 - At 20, awaiting mastectomy, euthymic, anxiety under control
 - Throughout, mother was inconsistent in her support and father did not support

(Zupanic et al., 2021)

Autism and Gender

- Case study results support
 - Higher risk of depression, anxiety, suicidal thoughts, suicide attempts, and self-injury in people with gender dysphoria
 - Even higher for people on the spectrum, too
 - Social isolation is increased
 - Parent support makes a difference but parents are often skeptical
 - Diagnosing gender dysphoria in person with ASD is complicated by deficits in:
 - Communication
 - Self-awareness
 - Executive function
 - Concrete thinking
 - Understanding ambiguity
 - Thinking about the future

(Zupanic et al., 2021)

Autism and Gender

- Case study results support
 - Diagnosis is easier through help with ASD traits
 - Reevaluating gender-related needs over time through therapy
 - Therapy compliance is inconsistent
 - Encouraging people to explore gender identity over time can help
 - Persistent and worsening gender dysphoria helps make the determination about intense interest or true gender dysphoria
 - ASD difficulties noted lead to longer transition times
- Patient felt it was too slow though they could not get themselves to do some of the transitions, such as the social ones

(Zupanic et al., 2021)

Autism and Gender

- Study identified key themes in experiences and perspectives of people on the spectrum seeking medical care for gender diversity
 - In depth interviews
- Themes
 - Urgent gender needs- much like those not on the spectrum, meeting diagnostic criteria
 - Narrative focusing on their gender-related experiences and needs
 - Highly detailed personal experiences
 - Impact of being neurodiverse
 - Difficulties with self-awareness, communication, executive functioning, self-advocacy
 - History of gender-diverse experiences
 - Often as far back as elementary or earlier
 - Shows that often it is not an obsession
 - Disinterest in binary gender presentations

(Stang et al., 2018)

Autism and Gender

- Themes
 - Bias and harassment
 - Gender-related needs are not understood or are doubted
 - ◆ Made worse by ASD concerns noted
 - Fear of harassment
 - Expectation of the steps to happen in a specific order, which is not always followed by people on the spectrum
 - Fear of backlash
 - Confidence in the future
 - Optimistic in general

(Stang et al., 2018)

Autism and Gender

- Concerns over defining them as comorbidities
 - Lack of understanding of biological relationship between them
 - Could lead to discrimination
 - Cisgenderism
 - The systematic erasure and problematizing of trans people
 - The essentializing of gender
 - The gender binary
 - De-legitimizes others
 - The immutability of gender
 - Not changeable
 - The external imposition of gender
 - Begins at birth and then through gender attributions throughout life
 - From the observer, not the individual

(Kennedy, 2013; Saleh, 2021)

Autism and Gender

- Concerns over defining them as comorbidities
 - Correlation does not equal causation
 - Studies do not account for the effects of cultural cisgenderism
 - A form of professional cisgenderism
 - Internalized and most people do not realize it
 - Children realize it is socially unacceptable to do certain things
 - Social exclusion is a real threat if they do not conform because there are not other options for social groupings
 - Leads to hiding gender identities
 - Different for ASD - cultural cisgenderism is unimportant or undetectable
 - Inherently that makes individuals with ASD that experience gender dysphoria more readily noticeable

(Kennedy, 2013; Saleh, 2021)

Autism and Gender

- More on cultural cisgenderism
 - It results in a lack of vocabulary to understand and express experiences
 - It actually impacts everyone
- Cisgenderism and reports
 - What pronouns to use
 - What if things change over time?
 - Difficulties with writing using "they/them"

(Kennedy, 2013; Saleh, 2021)

Autism and Gender

- Why is the correlation important?
 - Sense of belonging to a group
 - Improves well-being
- Why are people on the spectrum more gender diverse?
 - It is unclear
- Awareness of the correlation as well as often comorbid conditions leads to more inclusive practices
 - You have to be aware of all conditions

("Is There a Link Between Autism Spectrum Disorder and Transgender Identity," 2022)

Autism and Gender

- There were no guidelines for when autism and gender dysphoria occur at the same time
- Research was utilized to develop preliminary ones for assessment and care
- Based on a consensus among experts
- Although ASD can complicate things, many are clinically appropriate for gender dysphoria related treatment

(Strang et al., 2016)

Autism and Gender

- Guidelines
 - Screen gender referrals for ASD and vice versa
 - Care must overlap with both assessment and intervention for both ASD and gender dysphoria
 - May need an extended diagnostic process
 - Lack of consensus on when to start medical intervention

(Strang et al., 2016)

Autism and Gender Dysphoria in Texas

- Put political beliefs aside, this is not about that
- Mid February 2022, State Attorney Gen. Ken Paxton wrote a “nonbinding” legal opinion saying gender-affirming care is a form of abuse
 - He referenced body modification procedures, which are “rarely, if ever, performed on children”
 - Also said any gender-affirming care is abuse
 - Includes puberty blockers
- 7 days before primaries, Gov. Abbott ordered state child welfare to launch abuse investigations when children receive gender-affirming care

(Dey & Harper, 2022)

Autism and Gender Dysphoria in Texas

- Attorneys think it is unlikely that this would be supported in court
- These actions caused uproar
 - Concern for being weaponized in divorce
 - Legal issues for physicians, therapists, schools
 - Fear from children and their families
 - Increases stigma
 - Could block access to supports that reduce depression and suicide
- In 2017, laws were proposed to ban bathroom usage
- “Last year, Texas filed more anti-LGBTQ bills than any other state legislature”
 - One was a bill classifying gender-affirming care as abuse
 - It passed the Senate but died in the House

(Dey & Harper, 2022)

Autism and Gender Dysphoria in Texas

- Gender-affirming care is technically still legal
- DFPS said, investigations are only launched when “an allegation is reported and if the allegation meets the legal definition of abuse or neglect”
- Many are considering leaving Texas because of fear
- Does not really matter that it is “legal” because it is a constant threat and laws could change at any time
- Many places stopped offering services and medications children had already started

(Dey & Harper, 2022; West, 2022)

Autism and Gender Dysphoria in Texas

- Doctors under pressure from insurance, too, to stop
- Some people are exploring options out of the state because they are scrambling
- Contemplating moving
- Gender-affirming care includes socially transitioning
- President Biden signed an executive order
 - Called US Departments of Education and Health & Human Services to increase access and counter things like what is happening in Texas
 - Health Department is releasing sample policies for states to expand options
 - Education Department is releasing sample school policies for full inclusion
- Texas is 1 of 22 states that has not banned conversion therapy

(Dey & Harper, 2022; Neugeboren, 2022; West, 2022)

Podcasts on Autism and Gender Dysphoria

- Gender: A Wider Lens
 - First one has some research but a lot of speculation and talk
 - Second one has an expert
 - Thoughts shared:
 - People using your pronouns means they see you as that gender
 - Feeling out of place
 - Looking for a world to belong in
 - Does affirmation make people stay because they do not have that elsewhere?
 - Need work on who are you regardless of your gender (e.g., personality, values, goals)
 - Camouflaging

(O'Malley & Ayad, 2021; O'Malley & Ayad, 2022)

Podcasts on Autism and Gender Dysphoria

- Gender: A Wider Lens
 - Alexithymia- inability to put thoughts and feelings into words
 - Ties into Brene Brown's work
 - Even neurotypical people lack the language needed
 - Interoception- the ability to understand low levels of emotions
 - Easier with images and videos, especially related to interests
 - Gender dysphoria and restricted interest
 - Gender dysphoria and executive dysfunction such as long term consequence awareness, or lack thereof

(O'Malley & Ayad, 2021; O'Malley & Ayad, 2022)

Autism and Asexuality

- Asexuality
 - Conceptualized as a lack of sexual attraction or desire
 - Not always a consistent definition
- Original research says it may be more common with ASD
 - None looked at how individuals on the spectrum understand and conceptualize their sexual identity
- Updated research shows
 - People on the spectrum are more likely to self-identify as asexual
 - Some instruments actually show even higher numbers of people who do not self-report but they were not normed to include people on the spectrum

(Ranis et al., 2021)

Autism and Asexuality

- Updated research shows
 - Numbers are lower if asexuality included no sexual attraction
 - More than half reported some sexual attraction
 - Suggests other terms may be better at capturing their experiences
 - Numbers significantly influenced by not engaging in sexual activity
 - Significant variability in romantic attraction
 - Less than 1/2 reported being asexual and aromantic

(Ranis et al., 2021)

Autism and Gender

- What do we do?
 - Keep things in mind
 - What is something about yourself that you you knew and/or decided on your own, had autonomy over, on the most basic level?
 - Glasses or contacts?
 - Meat or no meat?
 - What radio station to play in the car?
 - Glennon Doyle's Untamed ties in well, even after the fact she is saying what she would have done differently
 - We are constantly evolving and should own that as a field and as professionals

Autism and Gender

- What do we do?
 - Support students and families
 - Account for the stress they experience, as well as the staff, including you
 - Report terms
 - Acknowledge "all intersections" people on the spectrum experience
 - More training to be more inclusive
 - Be mindful for potential neuro-diversities, too
 - Need to address problems in autism diagnoses
 - Research and norms being based on white, cismale people
 - Has not focused on females, much less other diversities
 - Cannot ignore one component for the other
 - Cannot use this to pathologize gender identity

("Is There a Link Between Autism Spectrum Disorder and Transgender Identity", 2022)

Autism and Gender

- What do we do?
 - What about recommendations for outside resources?
 - What instruments do you use in your autism evaluations right now?
 - Do you have to do norms by gender?
 - Were the instruments standardized on cisgender people?
 - How is everything complicated by being based in schools?
 - Releases to talk to outside professionals during evaluations, counseling, etc.

Girls with Autism- Things to Remember

- Surface-level (or superficial) social behavior is normal
- It's social understanding and beyond surface-level social skills that are typically impaired
- Girls often hide their deficits through masking



Evaluating Girls Anyone

- How do we know a girl is a good referral for AU testing?
- How do we even catch everyone?
 - Are they referred in the first place?
 - How do we educate the staff we work with to know what to look for?
- Will often look typical in observations and even in regular interviews
- Pay attention to if the child has diagnoses but none of them seem to fully capture what is going on
- Do not assume that a person does not have autism even if it was "ruled out" previously
- Honestly, same things go for boys and transgender children

Girls with Autism- Possible Signs Overall

- Not fitting in socially, having few friends, nothing more than surface-level interactions but can still be interested in people
- Parents describe unusual behavior that they find normal (e.g., student crying every day at school all day)
- Studying the behavior of others and following them
- Additional atypical features (e.g., adherence to routines, motor tics, sensory sensitivity or seeking, echolalia, intense interests even if typical female interests)

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