

# Her Spectrum

Navigating the Unique Experiences & Needs of  
Autistic Girls and Women

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**Autism**ONTARIO

# Disclaimers & Statements

## General Disclaimer

- Opinions are of the presenters
- Make informed decisions

## Language

- Identity-first (e.g., autistic person)
- Person-first (e.g., person with autism)

## Professional Disclaimer

- Specific questions
- Additional Resources

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# Agenda

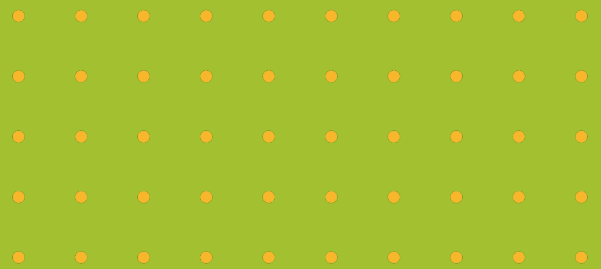
- (Mis)Diagnosis
- Autistic female profile
- Anxiety
- Pathological Demand Avoidance



“For 45 years, I was like, 'I've got to go put my human suit on', and only in the last two years have I become fully, fully myself.”

- **Sia**

# (MIS)DIAGNOSIS



# 4.2:1

Data suggests that for every girl with autism, there will be 4.2 boys diagnosed with autism.



# Common Misdiagnoses

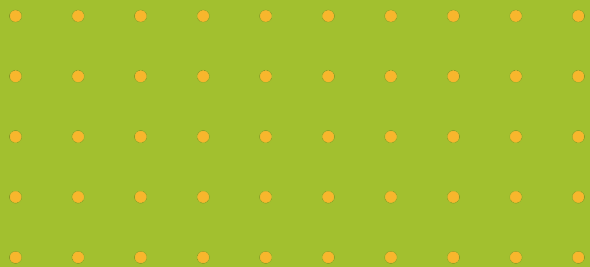
- Anxiety
- Depression
- ADHD
- Obsessive Compulsive Disorder
- Sensory Processing Disorder
- Post-Traumatic Stress Disorder
- Bipolar Disorder
- Borderline Personality Disorder
- Oppositional Defiant Disorder





**39%**

**more girls should be  
diagnosed but aren't.**



# Why are these girls being missed?

- Gender bias in diagnostic criteria
- Camouflaging and social masking
- Social mimicry
- Special interests and play patterns
- Language and communication differences
- Societal gender norms
- Co-occurring conditions
- Diagnostic bias
- Lack of awareness

# Diagnostic Criteria

Differences in social communication and interaction across contexts:

- Reciprocity
- Nonverbal communication
- Relationships

Restricted, repetitive patterns of behaviour or interests:

- Repetitive motions or language
- Rigidity and resistance to change
- Restricted interests that are abnormal in intensity or focus
- Hyper- or hypo-reactivity to sensory input

# Some common mistakes in diagnosing

- Relying too much on one measure
- Forgetting to get the subjective experience
- Not conducting an in-depth interview
- Not requesting historical information (i.e. report cards)
- Making assumptions based on social capabilities



# How does autism look different in girls?



- Social & communication differences
- Sensory issues
- Special interests
- Behavioural differences
- Masking behaviours



# Masking

- Dr. Donna Henderson who specializes in diagnosing autism in girls explains masking as **‘When your outer behaviour doesn’t match your inner experience.’**
- Masking requires significant cognitive and emotional effort, leading to internal strain and exhaustion.

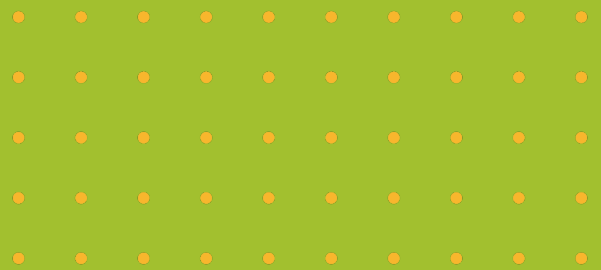


# 3-6x

Those who do not identify with the sex they were assigned at birth are three to six times as likely to be autistic as cisgender people.



# ANXIETY





# Autistic girls have more anxiety

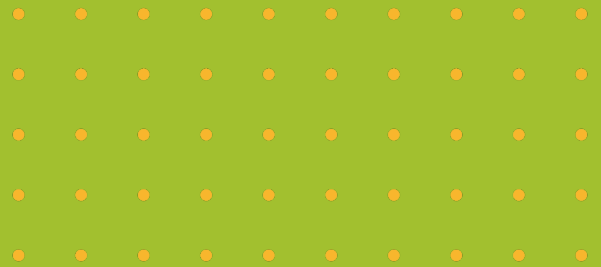
- Fear of change
- Social anxiety
- Generalized anxiety
- Separation anxiety



# Strategies for managing anxiety

- Clear communication
- Visual supports
- Quiet spaces
- Sensory regulation
- Mindfulness techniques
- Predictability and routine
- Gradual exposure
- Social stories
- Supportive peer relationships
- Collaboration with school
- Counselling and therapy
- Caregiver involvement
- Encourage self-advocacy
- Consideration of medication\*

# PATHOLOGICAL DEMAND AVOIDANCE



# Content Disclaimer

The content you are about to hear contains information on a developing topic.

**Pathological Demand Avoidance (PDA) is not currently recognized as a diagnosis in Canada and is not included in the DSM-5 assessment criteria.**

The information is from emerging research done abroad, mostly in the UK.

We strive to empower our community with vetted knowledge and provide a safe space for discussions on highly requested topics like this one.

As research on this topic develops, please see the sources below for more information:

- [PDA Society](#)
- [PDA Society Resources](#)

# Pathological Demand Avoidance (PDA)

The demand avoidance profile refers to a pattern of behaviour characterized by a strong aversion or resistance to everyday demands and expectations.

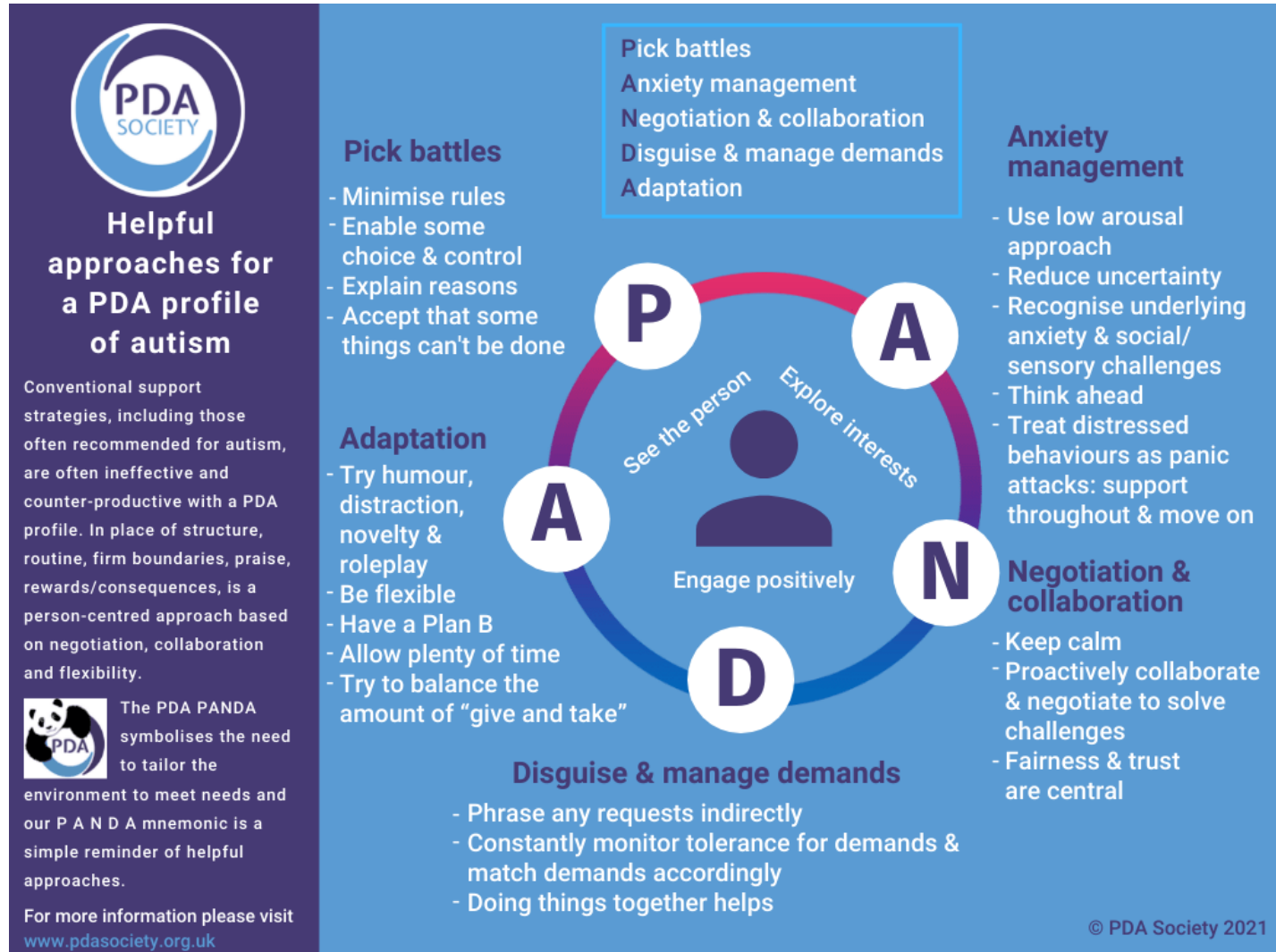
Key features:

- Resistance to Routine Requests
- Social Communication Challenges
- Strategies to Avoid Demands
- Anxiety and Control

# What can parents try?

## PANDA


- **P**ick Battles
- **A**nxiety Management
- **N**egotiation & Collaboration
- **D**isguise & Manage Demands
- **A**daptation



**PDA SOCIETY**

### Helpful approaches for a PDA profile of autism

Conventional support strategies, including those often recommended for autism, are often ineffective and counter-productive with a PDA profile. In place of structure, routine, firm boundaries, praise, rewards/consequences, is a person-centred approach based on negotiation, collaboration and flexibility.



The PDA PANDA symbolises the need to tailor the environment to meet needs and our P A N D A mnemonic is a simple reminder of helpful approaches.

For more information please visit [www.pdasociety.org.uk](http://www.pdasociety.org.uk)

**Pick battles**

- Minimise rules
- Enable some choice & control
- Explain reasons
- Accept that some things can't be done

**Adaptation**

- Try humour, distraction, novelty & roleplay
- Be flexible
- Have a Plan B
- Allow plenty of time
- Try to balance the amount of "give and take"

**Disguise & manage demands**

- Phrase any requests indirectly
- Constantly monitor tolerance for demands & match demands accordingly
- Doing things together helps

**Anxiety management**

- Use low arousal approach
- Reduce uncertainty
- Recognise underlying anxiety & social/sensory challenges
- Think ahead
- Treat distressed behaviours as panic attacks: support throughout & move on

**Negotiation & collaboration**

- Keep calm
- Proactively collaborate & negotiate to solve challenges
- Fairness & trust are central

**Pick battles**  
Anxiety management  
Negotiation & collaboration  
Disguise & manage demands  
Adaptation

**P** **A** **N** **D** **A**

See the person  
Engage positively  
Explore interests

# What can parents try?

## Low Demand Parenting

Low demand parenting uses low arousal approaches to keep anxiety levels to a minimum and provide a sense of control. By reducing demands, we can keep our child from entering into fight-and-flight mode and build an environment that feels safe.

## Collaborative Problem Solving (CPS)

The goal is to foster a problem-solving, collaborative partnership between adults and kids and to engage kids in solving the problems that affect their lives.

# What can parents try?

- Declarative Language
- Use an 'I statement': "I'm noticing..."; "I'm wondering..."; "I'm thinking about..."
- Imperative language: "Pick up your toys."
- Declarative language: "I'm noticing toys on the floor. I worry they might get stepped on and broken."



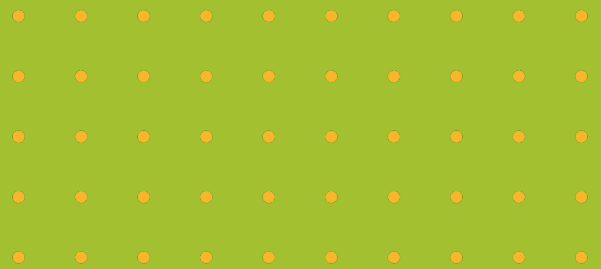
# Managing at school

It's important to work with teachers to implement the following:

- Implement an Individualized Education Plan (IEP)
- Provide clear instructions
- Use visual supports in the classroom
- Allow breaks and flexibility
- Build a supportive environment
- Provide sensory support



# SELF-CARE FOR AUTISTIC GIRLS



# Self-care techniques

- Deep pressure activities
- Sensory deprivation
- Take “body breaks”
- Engage in a special interest
- Move your body
- Try a digital detox
- Use an alternative form of communication





# Questions



# References

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