

GENDER IN AUTISTIC LATE-DIAGNOSIS NARRATIVES

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Abstract

In recent years, the discussion of how gender impacts autism diagnosis has been popular in both academic and lay contexts, such as social media. In psychology, the idea of the Female Autism Phenotype has particularly caught the attention of researchers as a possible explanation for why autistic women and girls are diagnosed later. However, studies related to gender and late autism diagnosis often do not consider how autistic adults personally perceive this link. Using thematic analysis, this study analyzes the blogs of late-diagnosed autistic adults to understand whether and how these individuals perceive a link between their gender and their timing of diagnosis. Critical discourse analysis is also used to understand how understandings of autism, group affiliations, and other factors may influence these perceptions. The study found that while the Female Autism Phenotype and similar theories have been favoured by bloggers in years past, they have not been regularly discussed by late-diagnosed bloggers in recent years. This indicates that autism researchers who focus on gender's role in late-diagnosis may not be in line with autistic community priorities regarding autism research

Introduction

Recently, discussions of adult autism diagnosis have become more prominent, both in academic (see also Huang et al. 2020; Price 2022; Lilley et al. 2022) and lay contexts, such as social media (Heaton 2023; Fong 2022; Tabb 2023). Often central to these discussions is the role that other identities, particularly sex and gender (see Hennekam 2020; Hayden 2020; Gesi et al. 2021), may play in certain autistic individuals not being identified as autistic in childhood. This has led to theorizations of identifiable gender differences in how autism presents or manifests, namely the Female Autism Phenotype. I have become particularly interested in how autistic people view (or do not view) gender as linked to their late diagnoses when reflecting on their personal experiences, as well as whether these perspectives are shaped by engagement with disability theory, autistic (self-)advocacy movements, and/or autistic social media communities. Furthermore, I seek to understand how autistic adults engage with medicalized understandings of autism and gender, particularly out of the fields of psychology and psychiatry, as well as how/if medicalized ideas are perpetuated, shifted, critiqued, and/or repurposed by autistic individuals and communities.

In this Major Research Paper, I read the blogs of late-diagnosed autistic adults to understand if and how they see a link between their gender (including gender identity, gender presentation, biological sex, gender (non)conformity, and other related factors) and the (delayed) timing of their autism diagnosis. Drawing on diverse fields, including Genre Studies (specifically the study of autobiography and life writing), Critical Autism Studies, Rhetoric, Queer and Trans Studies, Communication, and Gender and Women's Studies, this MRP takes a critical interdisciplinary approach to the study of autism and positions autistic adults as experts on their own experiences.

In line with my mission to establish autistic adults as experts on their own experiences, blogs were specifically chosen due to the fact that they are owned and shaped by the autistic community, rather than being publications with specific editorial standards that autistic individuals are required to conform to. I aim to specifically draw on the work of autistic people to produce an “insider view” (Harmens et al. 2022, 44), which becomes difficult when relying on publications subject to intense editorial mediation and scrutiny, such as magazines and books. Researchers have seen the use of autistic blogs in studies as a method to resist the frequent oppression and misunderstanding of neurodivergent voices in research, particularly in interview and survey-based research, instead representing community views unaltered by researcher questioning methods (Harmens et al. 2022, 44; Petty et al. 2023, 3).

Overall, this study aims not to understand whether there truly is a link between late diagnosis and particular gender identities or expressions, but rather how autistic adults personally perceive this link. It also aims to critique gender-essentialist views of late autism diagnosis, such as the Female Autism Phenotype, which position certain presentations and experiences of autism as unique to cisgender women and/or people assigned female at birth and ignore the role that social perceptions of gender may play in perceptions of autistic people.

Method

In the context of this study, I did not follow any specific age criteria for late diagnosis, instead looking for individuals who personally identified as late-diagnosed or late-identified (as well as those who used similar language to refer to their experiences). While some clinical literature has stipulated an age requirement for who can be considered ‘late-diagnosed’ (see Lilley et al. 2022), I want to recognize that individual circumstances and experiences may impact

one's perception of diagnosis as 'late'. This approach led to a sample mostly comprised of people in their 30s at the time of diagnosis (four of out seven bloggers) with the final three bloggers diagnosed at 26, 27, and 40, respectively. While this close age range provided a commonality amongst research subjects, it is important to note that older adults are increasingly being diagnosed as autistic (Leedham et al. 2020; Niekerk et al. 2011) but are not reflected in this sample. Reasons for this may include that older adults are not as active on social media as their younger counterparts or that they may be less likely to speak openly about their autistic identity than their younger counterparts.

In my research, I did not necessarily intend to capture as many narrative accounts as possible, but rather to engage closely with a limited number of them. I used a snowball sampling method beginning with four prominent late-diagnosed bloggers that I am familiar with as an individual who is active in autistic social media communities, particularly on Facebook. From there, I followed the blogs they linked, mentioned, and collaborated with. For a blog to be selected, it had to include long-form blogging content (e.g. written or video content, but not micro-blogging content such as tweets), be created by one primary author, and have been updated at least once in the year prior to the start of the study (i.e. since April 2022). As such, I sourced materials only from single-authored blogs, not sites that various autistic authors contribute to (e.g. *The Mighty*, *The Art of Autism*). To protect the privacy of bloggers who choose not to widely share their work, only blogs that are completely public were included in the study, therefore excluding any paywalled or password-protected content (e.g. that found on Patreon, Medium, or Substack or included in email newsletters).

The snowballing method allowed me to find five additional bloggers who fit my criteria. I echo Masschelein and Van Goidsenhoven's (2016) broad definition of a blog as "an online

journal or diary, i.e. a user-authored site that takes the form of regularly updated web pages, listed in reverse chronological order that can be commented upon by readers” (258). Recognizing the diverse forms that communication can take, particularly amongst autistic people (Lees 2023), my sample includes not only traditional text blogs (e.g. those hosted on WordPress or Blogger) but also longer-form Facebook blogs and video blogs (also known as vlogs). To be a part of the sample, blogs must also include significant discussion of personal experience, meaning that blogs more oriented towards advice or advocacy are only eligible if they also include posts entirely or mainly consisting of personal reflection. One video blog that I encountered (*Autism From The Inside*) was excluded from the sample for mainly consisting of advice and education videos without comparable discussion of personal experience.

Three other blogs were eventually excluded as they were deleted or otherwise became unavailable over the course of the research period. While these blogs may be archived through other means (e.g. the Wayback Machine), I chose to entirely omit them in order to protect the privacy of the bloggers and respect their personal reasons for taking down their blogs. This is particularly important due to the fact that autistic individuals have historically not been given agency over their own stories, particularly by researchers (see also Botha and Cage 2022). As a result, my final sample includes seven blogs, comprised of the four original blogs and three additional blogs found through the snowball method. Though not intentional, the majority of bloggers in this sample (four out of seven) identify in a way that falls outside of the gender binary. However, it is unclear whether this is reflective of general trends within the adult autistic blogging community or whether it is merely reflective of my personal perspectives on who is a prominent late-diagnosed blogger from my own position as a non-binary autistic person.

However, all of the bloggers added through the snowball method identify as cisgender to my knowledge.

From each of these blogs, I selected the posts which discussed late diagnosis, diagnosis experience, gender/sex, and related topics most explicitly. This involved a multi-pronged search approach: putting relevant keywords (e.g. ‘diagnosis’ or ‘gender’) into a search bar, if available; pursuing the blog’s tags for relevant keywords, if available; and reading the titles of posts for applicability to the themes studied. The final sample of blog posts includes two types of posts: those that encompass a ‘diagnosis story,’ whether or not it mentions gender, and those that discuss late diagnosis with implicit or explicit reference to gender.

After determining the posts to be included in my sample, I read the blog posts (or viewed them while reading an accompanying transcript, in the case of video blogs), using inductive coding. Once I generated a list of codes, I grouped them into relevant thematic categories for analysis. In this thematic analysis, I only paid attention to the words being used and disregarded any sound, visuals, or other elements in the blog posts.

Inspired by Shapira and Granek’s work on psychiatric cisgender-ableism experienced by autistic transgender patients (2019), I also used critical discourse analysis to understand the general bodies of knowledge and paradigms that individuals drew on in their work (e.g. the pathology paradigm, neurodiversity paradigm, female autism phenotype, neuroqueer theory, etc). I went in with an original list of discourses (see Appendix A) to guide this analysis (based on the literature review) but was also open to additional discourses that emerged in my reading. In this element of the analysis, I paid attention not only to the words within the blog posts but also to any external sources that were linked or referenced.

Coding and labelling of discourses were performed simultaneously with the help of Dedoose qualitative analysis software. The initial list of discourses were inputted as codes into the software, with other codes being added throughout the analysis process. Coding is a qualitative research method which allows a researcher to categorize their data into groups and understand consistent themes throughout samples. This method was selected as my project aims to understand both shared and diverging viewpoints amongst autistic bloggers with similar diagnosis experiences, as well as how they communicate these viewpoints within their blogs. For my purposes, coding involved labelling any sentiments about late autism diagnosis, autism and gender, and the intersection of these two areas. Viewpoints were presented neutrally and without researcher reflection (e.g. “Autism criteria is based on boys”) and in accordance with the vocabulary used by specific bloggers (for example, “masking” and “camouflaging” both appeared in the code list despite describing the same phenomenon). These codes were then organized into four broad themes as detailed in the Thematic Analysis portion of the paper.

Critical Discourse Analysis, on the other hand, involved incorporating knowledge of discourses present in the literature and applying them to sentiments present in blog posts. This also involved relying on some of my prior knowledge as a scholar trained in Critical Disability Studies to identify discourses not present on the initial list that were referenced or employed but not necessarily explicitly named by bloggers (e.g. social model of disability, refrigerator mother theory, human rights model of disability).

Literature Review

Gender and Autistic Experience

Psychologists, psychiatrists, autistic community members, and other stakeholders have taken a number of (often opposing) approaches to theorizing how gender and sex impact autistic experience (and vice versa). In 2002, psychologist Simon Baron-Cohen proposed the extreme male brain theory of autism. This theory suggests that “the male brain is [...] defined psychometrically as those individuals in whom systemising is significantly better than empathising, and the female brain is defined as the opposite cognitive profile” (Baron-Cohen 2022, 248). Due to his observations of high scores on systematizing tests and low scores on empathizing tests (compared to non-autistic men) among those then-identified with Asperger’s Syndrome, Baron-Cohen suggests that autism is an “extreme form of the male brain” (251). This theory extends beyond the brain, however, using biological sex characteristics like increased testosterone levels (demonstrated through a high incidence of precocious puberty in autistic boys) and even size ratios in fingers to demonstrate the ways in which autism could be a form of ‘extreme maleness’ (252). In *Disability Studies Quarterly*, Jordynn Jack (2011) notes how through extreme male brain theory, “masculinity itself has been cast as a disability.” Jack explores how extreme male brain theory “owes much to our current cultural preoccupations with hi-tech culture and nerdism as well as with sex/gender,” as it helps to produce the most desirable autistic figure: the ‘Asperger’s’ man who performs highly in technological fields. She also notes how “competing theories tend to be marginalized, especially if they conform less easily to our common understandings of sex/gender difference.” Ridley (2019) also critiques extreme male brain theory, drawing attention to the way that it equates so-called male *behaviour* with a male *brain* (22). Ridley cautions against using descriptions of gender differences in study results as an explanation for the differences, explaining that “even a robust statistical difference between men

and women does not define the nature of male and female” (23). While extreme male brain theory was once popular in autism research, it has been rarely written about in recent years (Stagg and Vincent 2019; Ridley 2019).

In recent years, a distinctive profile of ‘female autism’ (sometimes referred to as the ‘Female Autism Phenotype’) has emerged in the psychological literature. The ‘Female Autism Phenotype’ is a theory that fewer females are diagnosed with autism not because it occurs more commonly in males, but rather because “their presentation of autism is qualitatively different to the typical male presentation” (Hull, Petrides, and Mandy 2020, 308). The ‘Female Autism Phenotype’ encompasses unique presentations of autistic traits, interests, and capabilities in social relationships compared to what is conceived of as ‘classic’ (read: male) autism. Central to this phenotype is the act of ‘camouflaging’ or ‘masking’: “the use of conscious or unconscious strategies, which may be explicitly learned or implicitly developed, to minimise the appearance of autistic characteristics during a social setting” (Hull, Petrides, and Mandy 2020, 309). Studies often do not define ‘female’ or differentiate between gender and sex.

Outside of academia, the Female Autism Phenotype has circulated in autistic communities, with lists of female autistic traits appearing online. In addition to the characteristic of masking, traits on these lists often include things like emotional sensitivity, intellectual giftedness, naivety, shyness, and co-morbid or false diagnoses of other disabilities such as bipolar disorder, depression, obsessive-compulsive disorder, and anxiety disorders (Craft 2022; p-3as-life-resources 2017; Hovet 2020).

While there is no official diagnostic instrument for the female autism profile, some psychologists do administer questionnaires or interviews centred around this profile or phenotype. While not exclusively used in diagnosing girls and women, the Camouflaging

Autistic Traits Questionnaire (CAT-Q) was partially developed based on research findings of masking in girls and women and has been regarded as particularly useful in diagnosing girls and women (Hull et al. 2019, 820).

However, autistic scholars have also begun to critique the notion of a distinct ‘female autism’ phenotype. In their blog post for the University of Kent titled “Beyond ‘female autism’” (2019), George Watts argues that while there are a number of ways that autism can present, there is nothing inherently ‘female’ about the presentation that has been labelled ‘female autism’. In the blog post, they recount their own experience coming to an autistic identity through identifying with autistic women, noting that they “would argue that this resonance wasn’t because they were female, it was because they are similar autistic people to me” (Watts 2019). They suggest that the presentations of autism typically relegated to the category of ‘female’ are not exclusive to women, but rather make up a larger category of ‘unrecognized’ presentations of autism, even noting that a cis man started early ‘unmasking’ campaigns. Devon Price also critiques the idea of a distinct ‘female’ autistic phenotype in his book *Unmasking Autism* (2022). While he recognizes that “there’s a particular way the neurotype tends to present among people who only discovered the identity late in life” (56) which corresponds to some of the traits commonly associated with ‘female autism’, he rejects the notion that these traits are inherently feminine, noting that they show up in autistic people with a number of gender identities. Price argues that the notion of ‘female autism’ “presents the root of masking as being a person’s assigned sex at birth, or their identity, when really it’s social expectations that lead to a person’s disability getting ignored” (60). He is adamant that “masking is a social experience, not a biological one” (60). These authors do not attempt to suggest that presentations of autism cannot

differ, but rather that to suggest they differ on the basis of gender identity or biological sex is inaccurate and essentialist.

A number of individuals and groups have argued that there may be a correlation between transgender and autistic identity. Various studies have shown elevated numbers of individuals with autistic traits in populations presenting for gender-affirming care in comparison to the general population (see Stagg and Vincent 2019; Nobili et al. 2018; Warrier et al. 2020).

More important to the purposes of this research, however, is how transgender autistic individuals see these experiences as connected. In 2020, Jessica Kingsley published an anthology of writing by transgender autistic individuals edited by Maxfield Sparrow called *Spectrums: Autistic Transgender People in Their Own Words*. In the introduction for this collection, Sparrow notes that

Being autistic and being Transgender, non-binary, or otherwise gender divergent have much in common, both joys and struggles. The joys come from deep self-knowledge, belonging to a community, living a life in tune with one's inner being. A few struggles in common include suicide, homelessness, and barriers to adequate healthcare. (2020, 18)

Throughout the anthology, a number of contributors suggested that their autistic and transgender identities are inextricably connected. For example, endever* corbin contributed an essay titled "I'm trans and autistic, and yes (for me), they're related," beginning with the powerful line "My gender is autistic" (81).

This connection has also been theorized through the broad concepts of neuroqueerness and neuroqueering (Walker 2021), which aim to encompass concepts such as "how these two aspects [neurodivergence and queerness] of one's being entwine and interact (or are, perhaps, mutually constitutive and inseparable)" (161) and practices such as "embodying and expressing

one's neurodivergence in ways that also queer one's performance of gender, sexuality, ethnicity, and/or other aspects of one's identity" (162). 'Neuroqueer' is an intentionally broad category designed to encompass the various practices through which neurodivergence and queerness entwine, intersect, and are shaped by each other (167), meaning that while it does not exclusively define trans/autistic experience, it is one way of thinking through and theorizing this experience.

Gender and Late Diagnosis

A number of studies have attempted to prove a link between sex/gender and late autism diagnosis. Gender differences are a growing topic of inquiry in the research of late-diagnosed autism, as demonstrated by a scoping review of the literature published about late autism diagnosis from 2008 to 2018, where Huang et al. (2020) found 13 studies that explored gender differences in adult diagnosis (1316). However, little attention has been paid to the specific experiences of transgender and non-binary adults, even when they participate in adult autism studies (1316). As with work related to the Female Autism Phenotype, studies in this area do not typically differentiate between sex and gender when describing the 'female' population.

Rather, these studies have typically argued that so-called 'females' are more likely to be diagnosed with autism later in life, often drawing on evidence related to the Female Autism Phenotype. Reflecting on a study of 14 women diagnosed with autism in late adolescence and early adulthood, Bargiela, Steward, and Mandy (2016) "hypothesise that this phenomenon reflects both: (1) specific features of the female autism phenotype; and (2) characteristics of the systems that are designed to identify and help people with [autism]" (3290). Similarly, in a study of 11 autistic females diagnosed after age 40, Leedham et al (2020) argue that "findings suggest widespread limited understandings of [autism] in females, which influenced late diagnosis in the

current sample” (145). Literature around late diagnosis and gender frequently refers to camouflaging and/or “adaptive social compensational strategies” (Lehnhardt et al. 2015, 140) as key aspects of the female autism phenotype and reasons for late diagnosis (see Bragiela, Steward, and Mandy 2016; Leedham et al. 2020; Huang et al. 2020). Other studies have suggested that co-occurring disabilities (e.g. anorexia, borderline personality disorder, social phobia) seen more frequently in women may contribute to clinicians’ difficulty reaching an autism diagnosis (Gesi et al. 2021).

However, these studies have not typically drawn on how autistic people perceive connections between gender and late diagnosis. While some studies focused on the experiences of late-diagnosed autistic adults in their own words (see Bragiela, Steward, and Mandy 2016; Leedham et al. 2020), these studies did not ask participants about how they perceived their gender as specifically relating to their late diagnosis and rather used similarities among women’s experiences as evidence of gender differences.

Autistic Blogging

Relatively little has been written about autistic blogging to date. That being said, historians of neurodiversity see autistic blogging as a key force in creating a powerful autistic self-advocacy movement and shifting attitudes about autism. A number of blogs, digital newsletters, and online forums are credited with contributing greatly to the autistic self-advocacy movement, namely Wrong Planet (see Donovan and Zucker 2016, 502-505), the Residual Autism Newsletter (see Silberman 2015, 435), autistics.org (see Tisoncik 2019), the Autism Hub (Eidle 2022), and neurodiversity.com (see Seidel 2019). Further, in *Studies in Social Justice* (2022), Bridget Liang emphasizes that “both autistic adults and families of autistic children rely heavily

on blogs and other digital platforms to create community and gain experiential knowledge about autism” (447).

Blogs (and the internet in general) have also been seen as a “safe” space for autistic individuals to interact, due to the ways that they may better meet their needs/preferences around communication and sensory input than in-person spaces (Nguyen et al. 2015; Seidmann 2019, 2281). Autistic individuals have expressed how hosting a blog allows them to create their own personal space online where “they [the bloggers] are the ones who choose what and when to discuss specific topics” (Seidmann 2019, 2282). It is in part for these reasons that I choose to focus on blogs, rather than other media forms, in my work.

However, research rarely differentiates between blogs written by autistic people and those written about autistic people. In her study of autistic BIPOC parent blogs, Bridget Liang (2022) outlines the difference between ‘autistic blogs’ (those written by autistic people) and ‘autism blogs’ (those written by non-autistic people, typically parents), to showcase the ways that attitudes and orientations toward autism differ in these texts (447-48). To a similar effect, Van Goidsenhoven (2017) proposed the term “autie-blogs,” a derivative of Couser’s “autie-biographies” (1997, 7), to refer to digital life writing created by autistic individuals rather than simply about autistic individuals. Throughout this paper, I interchangeably use “autistic blogs” and “autie-blogs” to refer to these texts.

Few studies have used blogs to understand issues at the intersection of autism and gender. In my review, only two such studies came up. In one of these studies, Shapira and Granek (2019) use blogs to understand the reactions of people close to transgender autistic people seeking gender-affirming psychiatric care. In this study, blogs are used to supplement psychiatric case studies and show the reactions of laypeople (500). As a result, this study did not primarily focus

on the perspectives of autistic people, but rather on how they perceive the reactions of others. Another study, conducted by Harmens, Sedgewick, and Hobson (2022) uses blog posts to understand autistic women's experiences and well-being during autism identification/diagnosis. While the article details women's experiences with late diagnosis, little attention is paid to how women see their gender as relating to diagnosis. There is, however, one exception – one blogger discussed her anxiety around seeking an official evaluation, saying that she “had heard stories of women being refused referral due to eye contact with the GP” (48). As demonstrated by the literature, the potential for using autistic blogs to understand experiences of gender and late diagnosis has largely been unexplored.

Theoretical Framework

My research is rooted in Ian Hacking's (2009) argument that autistic narratives are “creating the language in which to describe the experience of autism, and hence helping to forge the concepts in which to think autism” (1467). I am interested in how these narratives not only describe an intrinsic experience of autism but also *create* the very category of autism itself, and especially how these narratives create subtypes or profiles of autism (e.g. female autism). In line with this, I work within Majia Holmer Nadesan's frame that autism is socially constructed in *Constructing Autism* (2005). In proposing this frame, Nadesan does not deny the possibility of there being a biological basis for the experiences we call autism (2). Rather, she uses the phrase ‘socially constructed’ to point to the “social conditions of possibility for the naming of autism as a distinct disorder and to the social conditions of possibility for our methods of interpreting the disorder, representing it, remediating it, and even for performing it” (2). Rather than suggesting that writing by autistic individuals is ‘uncovering’ and making visible the distinct and immutable

category of autism, I argue that autistic individuals are in fact *writing* autism into existence, constantly reshaping the condition itself. I recognize the key role that autism-related media (including that which is created by autistic people) plays in developing theories around gender, sex, and gender presentation which are then adopted in clinical contexts (e.g. diagnostic materials).

My research is deeply rooted in the neurodiversity paradigm. According to Nick Walker (2021), neurodiversity recognizes that “there is no ‘normal’ or ‘right’ style of human mind any more than there is one ‘normal’ or ‘right’ ethnicity, gender or culture” (19). This exists in direct opposition to the pathology paradigm, which positions autism as a “disorder” to be treated and cured (18-19). In line with the neurodiversity paradigm, I use the label “autism” rather than “autism spectrum condition” (ASC) or “autism spectrum disorder” (ASD) throughout this research, as some members of the autistic community find these labels pathologizing.

Furthermore, my project positions autistic individuals as experts in their own experiences over the medical establishment in opposition to pathologizing views of autism (e.g. Theory of Mind) that establish autistic individuals as unable to ‘truly’ understand themselves and others (see Yergeau and Huebner 2017). It is also with this in mind that I personally conduct this project from my standpoint as a queer, trans (non-binary/butch), autistic individual. Rather than attempting to entirely avoid bias in my project, I conducted research as a member of online queer autistic communities, using my knowledge and experience to guide my research questions and determine my sample. Echoing Gillespie-Lynch et al. (2017), I also see autistic researchers (including myself) as uniquely qualified to conduct research around autism due to our personal knowledge of autism, capacity for less stigmatizing views about autism, and tendency to critique

(often harmful) assumptions about autism. Further, I draw on Bertilsdotter-Rosqvist et al. (2023) who also speak to how autistic individuals have valuable

intersubjective knowledge about many aspects of autistic experience, including those that come from being labelled as autistic: what it is like to be positioned as cognitively, socially and emotionally “other”, what it is like to be the recipient of care. This means identifying questions that may be overlooked by non-autistic researchers, as well as providing knowledge about multiple factors that support autistic or human flourishing.

(10)

In positioning autistic people as experts, however, I also ensured to read the viewpoints shared by bloggers with an openness to differing perspectives, even those in opposition to the paradigms that this project operates under (e.g. pathologizing viewpoints about autism and gender essentialist views about autism).

Sample

The final sample for this study includes seven bloggers. In order to familiarize the reader with each of these bloggers, I will provide a brief biography of each one. For the bloggers found through the snowball method, I will indicate which blogger referenced, cited, or linked to their work and any other relevant details related to this link. Since all bloggers have shared a first name in their posts, but not all have shared a last name, I refer to the bloggers by their first names within the subsequent sections of the text for consistency and clarity (except for in citations).

The choice to include the names of and publicly shared personal details about bloggers was made with the knowledge that each of these bloggers makes public-facing content and

already has a significant public platform (through social/online media, advocacy efforts, or both), meaning that there is no expectation of privacy in relation to these blog posts. However, when comments left on blog posts by individuals other than the bloggers are referenced within this paper, commenters are not named or directly quoted to respect the fact that they may not have expected their words to be read on a large scale or outside of the context in which they originally shared them.

TABLE 1. Information about the bloggers included in the study

Blog Name	Blogger	Host Website	Gender Identity (Self-Described)	Age at Diagnosis	Year of Diagnosis
PurpleElla	Ella Tabb	YouTube	Non-binary (they/them)	36	2015
Just Being Me... Who Needs 'Normalcy' Anyway?	Morénike Giwa Onaiwu	Personal website	Non-binary woman (she/they)	31	Unclear
Autistic, Typing	Jules Edwards	Facebook	No specific label (she/they)	32	Unclear
The Punk Rock Autistic	Dani	Personal website	Non-binary, gender queer, gender non-conforming, autigender, transgender (they/them)	27	Approx. 2015
Yo Samdy Sam	Samantha Stein	YouTube	(Cisgender) woman (she/her)	33	2019
Look Me in the Eye	John Elder Robison	Blogger	(Cisgender) man (he/him)	40	Late 1990s

The Autism Cafe	Eileen Lamb	Personal website	(Cisgender) woman (she/her)	26	Approx 2014-2015
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Ella Tabb (*Purple Ella*)

Ella Tabb (they/them), also known as Purple Ella, is a white non-binary blogger from the United Kingdom who has been posting on YouTube since 2016. Their first post was a video blog (vlog) about their experiences being diagnosed with autism at age 36 (in 2015) after their child was diagnosed. Their video blogs focus on their experiences as a non-binary autistic person with ADHD and Ehlers-Danlos Syndrome, parenting autistic and transgender children, and advice for autistic adults (especially women and non-binary people). While they identified as a cisgender woman at the beginning of their blogging career, Tabb came out as non-binary on YouTube in 2021. As of late June 2023, Tabb has 59.6 thousand subscribers on YouTube (Tabb n.d.). They are also active and popular on other social media sites like TikTok and LinkedIn, but this study only focuses on their video blog.

Morénike Giwa Onaiwu (*Just Being Me...Who Needs 'Normalcy' Anyway?*)

Morénike Giwa Onaiwu (she/they), whose blog is titled *Just Being Me...Who Needs 'Normalcy' Anyway?*, is a Black non-binary woman living in the USA who has been blogging on her personal website since 2013. Onaiwu was diagnosed with autism at age 31 following the diagnosis of her child and 'came out' as autistic in her local community in 2014. She is active in organizing around HIV stigma and autism acceptance, including having held positions on the boards at the Autistic Self-Advocacy Network (ASAN) and Autistic Women & Nonbinary Network (AWN), two prominent autistic-led advocacy groups in the United States. She also

holds a PhD in Culture and American Studies. While the number of readers on Onaiwu's blog is not visible, she has over seven thousand followers on Twitter as of June 2023 (Onaiwu 2023).

Jules Edwards (*Autistic, Typing*)

Jules Edwards (she/they), also known as *Autistic, Typing*, is an Indigenous blogger living in the USA who has been posting on Facebook since 2019. She was diagnosed with autism at age 32 after previously receiving an ADHD diagnosis in childhood. On her blog, she discusses her experience with autism, parenting autistic racialized children, anti-Indigenous racism, and relationships between autistic adults and parents of autistic children online. In 2023, Edwards released a book with Meghan Ashburn titled *I Will Die on This Hill*. As of late-June 2023, Edwards has 42 thousand followers on Facebook (Edwards n.d.).

Dani (*The Punk Rock Autistic*)

Dani (they/them), who goes by The Punk Rock Autistic on various platforms, is a white autistic blogger living in the USA who received an autism diagnosis at age 27 (around 2015) following (accurate) childhood diagnoses of ADHD and Sensory Processing Disorder, as well as other unnamed inaccurate psychiatric diagnoses. Dani has used a number of terms to describe their gender, including non-binary, gender queer, gender non-conforming, autigender, and transgender. They have been blogging on their personal website since 2022 and posting on Facebook under the name The Punk Rock Autistic since 2020. In addition to their current work in blogging, advocacy, and consulting, they have a background in disability direct support, including with autistic people, which originally lead them to considering that they could be autistic. While the number of readers on their blog is not visible, Dani has 40 thousand followers

on their Facebook page as of June 2023 (Dani n.d.). While their Facebook page is both popular and posted on more frequently, it was excluded from this study as their blog features longer-form content that discusses late diagnosis in more detail.

Samantha Stein (*Yo Samdy Sam*)

Samantha Stein (she/her), who uses the name Yo Samdy Sam on YouTube, is a white cisgender female blogger who grew up in the UK and now lives in The Netherlands. Stein creates video blogs on YouTube about her experiences with late autism diagnosis and autistic motherhood, as well as information about health and executive function geared towards neurodivergent people. She posted her first video blog in 2019 after receiving an autism diagnosis at age 33 in 2019. In 2022, she released a workbook titled *So You Think You're Autistic*. Stein was added to the sample as a result of her appearance in two video blogs posted on Purple Ella's page. As of June 2023, Stein has 167 thousand subscribers on her YouTube page (Stein n.d.).

John Elder Robison (*Look Me in the Eye*)

John Elder Robison (he/him) is a white cisgender man who is well-known for his memoirs about his experiences growing up with undiagnosed autism, most notably *Look Me in the Eye*, which was published in 2007 and shares a name with his blog. Robison was diagnosed at age 40 (in the late 1990s) and has been blogging since 2007. Topics on his blog include growing up autistic, supporting autistic individuals in the workplace, autistic advocacy, and autism-related science. Robison formerly served on the treatment and advisory boards of Autism Speaks (see also Robison 2020). John Elder Robison was included in the sample as he was

quoted in a *Today* article shared on Morénike Giwa Onaiwu’s blog (Onaiwu 2021; Coffey 2021). While there is no way to know how many people read Robison’s blog, as of June 2023, his Twitter page has 12.4 thousand followers (Robison 2023) and his Facebook page has 31 thousand followers (Robison n.d.).

Eileen Lamb (*The Autism Cafe*)

Eileen Lamb (she/her) is a white cisgender woman who has been posting on her blog *The Autism Cafe* since 2016. She received an autism diagnosis at age 26 following the diagnosis of her eldest son. Lamb’s blog largely focuses on parenting her son who she labels as having “severe” and “profound” autism, though she also writes more broadly about parenting autistic children, being an autistic parent, and tensions between autistic adults and parents of autistic children. As of June 2023, Lamb works as Autism Speaks’ Director of Social Media and Influencer Marketing and hosts a podcast for the organization titled *Adulting on the Spectrum*. Lamb was added to the sample based on posts on Autistic Typing critiquing her blog as well as her inclusion in the aforementioned *Today* article. While Lamb’s blog does not include a reader count, as of June 2023, she has 181 thousand followers on Instagram (Lamb n.d.).

Thematic Analysis

In total, 25 blog posts (ten video blogs and sixteen text blogs) met the research criteria and were included in the overall analysis. The distribution of number of blog posts analyzed per blogger is detailed in the following chart:

TABLE 2. Number of included posts per blogger

Blogger	Number of Posts Analyzed
Ella Tabb	4
Morénike Giwa Onaiwu	3
Jules Edwards	3
Dani	2
Samantha Stein	6
John Elder Robison	2
Eileen Lamb	6

Other blog posts outside of this count are referenced, quoted, or briefly analyzed in portions of this paper, but were not included in the close analysis described below.

All blog posts were closely read and coded in the Dedoose software three or more times for attitudes toward gender, attitudes toward late diagnosis, and understandings of connection (or lack thereof) between gender and late diagnosis. After initial coding, all codes were checked for relevance and possible repetition, with a number of codes being merged for having identical or nearly identical meanings. These codes were then grouped into four prevailing themes, which I labeled as such: gender leads to late diagnosis (because of inherent/biological factors), gender leads to late diagnosis (because of social factors), absence of discussion of gender, and critique of gender presentation labels.

Gender leads to late diagnosis (because of inherent/biological factors)

Three of the bloggers (Eileen, Ella, and Samantha) saw their personal late diagnoses, as well as the late diagnosis of women and/or people assigned female at birth in general, as at least partially being caused by inherent differences in how autism presents in males and females. In

one post, Eileen stated: “I often get asked why I was diagnosed with autism so late in life, and why it wasn’t caught when I was a child. There are two main reasons. [...] The second reason is that I’m a girl. Indeed, autism in girls is harder to spot” (Lamb 2018b).

Notably, all three of the bloggers who saw gender differences as inherent or biological explicitly referred to a ‘female presentation’ or ‘female type’ of autism. Ella seemed more skeptical about this label being inherently female, referring to it as the “quieter, sometimes labelled as female, presentation of autism” (Tabb 2018). These bloggers also often described unique ‘female autism’ traits that are similar to those listed in descriptions of the Female Autism Phenotype. This can be seen most notably in some bloggers’ specific posts about the topic, namely Eileen’s “Autism in Girls: 5 Reasons Why It’s Different” (Lamb 2018b) and Samantha’s “Autism Symptoms in GIRLS” (Stein 2019c). It should be noted that Samantha included a disclaimer stating that “not all autistic women have these traits and there are many autistic boys and men who do have them” (Stein 2019c), but the video blog was still focused on explaining how autism ‘typically’ presents in girls and how this may differ from both behaviours seen in allistic (non-autistic) girls and behaviours seen in autistic boys.

The most popular of these examples was that girls are better at masking/camouflaging than boys (or simply do it more often), a view that was shared by all three of these bloggers. In some cases, this was accompanied by the notion that girls are more inclined to try to ‘fit in’ or be successful socially than boys. For example, Eileen suggested that “girls are more likely to learn how to hide their symptoms. They’re better at copying social behavior to fit in” (Lamb 2018b) but did not provide any source to back up this claim. Eileen also suggested in her post “5 Reasons Why People Might Not Get an Autism Diagnosis Until Adulthood” (2017c) that masking played a key role in delaying her diagnosis, saying that “people with high-functioning

autism can learn to adapt and fit in. For instance, I try hard with my social interactions using things I've learned over time. On most days, I appear normal" (Lamb). Samantha also discussed her experience with masking at length, sharing:

At the age of about 18 or so I took it upon myself to start masking to blend in and I did this completely unconsciously because I didn't know there was anything to blend in with, but I always knew that I was different. I just thought that there was just something wrong with me. (Stein 2019a)

The idea that girls are more prone to, better at, or more interested in masking is a view also frequently seen in clinical research about the Female Autism Phenotype (see Hull, Petrides, and Mandy 2020, 309), suggesting that these bloggers may have drawn on some clinical research (or vice versa).

These three bloggers also discussed autistic girls having more 'normal' or 'mainstream' interests compared to boys and particularly cited this as a reason that autistic girls may not be seen as particularly different from their peers (Lamb 2018b; Stein 2019c). In one video blog, Samantha discussed how

From the outside, a girl who liked the Spice Girls or Friends, especially in the 90s when culture was so much more consolidated - was so mainstream, so normal, that I actually felt a bit silly talking about them in my assessment. Autistic women might not have special interests that raise eyebrows - they might, but they might not, but what marks us as different is the intensity of the interest and the level of knowledge on the subject.

(Stein 2019c)

Other ‘female autism’ traits discussed by bloggers were autistic girls being more passive and/or shy than their male counterparts, who were seen as more aggressive or ‘disruptive’ (Lamb 2018; Stein 2019c; Tabb 2021a) and having less repetitive behaviours (Lamb 2018).

All three of these bloggers suggested that the current diagnostic criteria and tests used by clinicians are based around the ‘male presentation’ of autism, therefore making it more difficult for girls and women to be diagnosed (Stein 2019c; Tabb 2020; Lamb 2017c; 2018b). Two of the bloggers were explicitly supportive of efforts to combat this with revised or specialized diagnostic processes. In her post “Autism in Girls: 5 Reasons Why It’s Different,” Eileen said that her “hope is that in the future there will be different autism scales used to diagnose autism in girls and boys, or some other metric to account for these inherent differences” (Lamb 2018b). Ella also explicitly supported the use of the Diagnostic Interview for Social and Communication Disorders (DISCO) as a more accurate diagnostic tool for women and girls and promoted the work in this area by the Lorna Wing Centre for Autism (Tabb 2020).

Two of the bloggers (Ella and Samantha) changed their opinions over time, later critiquing the idea of an inherently female presentation of autism (Tabb 2021; Stein 2021). However, one blogger (Eileen) has not expressed any reservations about the idea of a female presentation of autism. However, unlike Ella and Samantha, she has not written about gender and autism on her blog since 2018, meaning that it is possible that she has quietly changed her views and not addressed them on her blog. In fact, no posts published after 2020 from any of the suggested that there was such a thing as a unique ‘female’ presentation of autism.

Gender leads to late diagnosis (because of social factors)

Two of the bloggers who spoke about gender and late diagnosis (Ella and Samantha) began to suggest later on in their blogging careers gender leads to late diagnosis because of social factors rather than inherent sex/gender differences in autism. More specifically, they discussed how different expectations placed on autistic boys and girls led them to behave differently. In their video blog “Autistic Girls Are We Gender Stereotyping Autism?” (2021) Ella suggested that:

Perhaps it's to do with presentation. Females are typically socialized and treated differently to men. Expectations of girls lead them to mask. [...] We are expected to demonstrate behaviours like gentleness, patience, and complex social skills that perhaps aren't expected of our male peers. Quirks are less tolerated if you're a woman. I've always felt that it might have been easier to have been a quirky, socially awkward man. (Tabb 2021a)

Samantha echoed this line of thinking in her post “Autism in Girls - I Was Wrong” (2021), which was intended to be a loose collaboration with Ella’s video.¹ In the video, she asked “Why would autism present differently enough in different genders to create such an imbalance in the first place? There is something to be said for sure about the way that different genders are socialized within society” (Stein 2021). In discussing the social expectations on girls, the two bloggers acknowledged that certain traits (e.g. masking, trying harder to fit in) do lead girls and women to be diagnosed later, but they argued that these traits are not inherent to females and are instead developed as a result of expectations put on them.

¹ Ella and Samantha each posted their own videos unpacking the “female autism” label in mid-March of 2021 as an attempt to jointly open up a conversation about the topic in the online autism community without having to coordinate a single collaborative video, which they described as much more logistically difficult.

Some bloggers also discussed how gender and/or sex could influence what disabilities doctors considered or diagnosed in certain individuals. In their post “Intersectionality and Neurodiversity,” Dani stated that “diagnosis is often biased, and social constructs of gender are a frequent denominator in our understanding of how disabilities manifest in people” (Dani 2022a). Samantha and Ella described experiences being diagnosed with or identifying with a variety of other labels in their videos, including Highly Sensitive Person (Stein 2019c), Borderline Personality Disorder (Stein 2019c), Depression (Stein 2019c; Tabb 2016), and Bipolar Disorder (Tabb 2016). Samantha suggested that these misdiagnoses could be attributed to doctors seeing autism as a ‘male condition,’ therefore attributing “women’s traits to and symptoms to other things” (Stein 2021). This bias was perhaps also illustrated in the experiences of studied bloggers (all of whom were Assigned Female at Birth) who had to advocate for their own diagnoses. In a post advocating for self-diagnosis, Jules, who received accurate ADHD and Narcolepsy diagnoses earlier in life, recalled only being considered for an autism diagnosis when she “went to a provider with [a] spreadsheet and said ‘please evaluate me for autism’” (Edwards 2022). While she did not specifically attribute this to her gender or sex, she did share later in the same post that it was “written for BIPOC women and nonbinary people who are constantly harmed and marginalized within the medical and psychiatric industries” (Edwards 2022), perhaps suggesting that she saw her experiences of having to work for this diagnosis as a form of this racial and gendered marginalization.

Many of the bloggers assigned female at birth (namely Samantha, Morénike, Ella, and Eileen) also discussed similar experiences of bias in day-to-day interactions, such as being told they ‘do not look autistic’. For example, Morénike described being asked “You? Are you SURE?” (Onaiwu 2014) and Ella recalled being told “oh you can’t tell” (Tabb 2018). Eileen

specifically connected this experience to gender, saying that she looked “like a regular 28-year-old woman” (Lamb 2018a). Similar experiences were not described by the bloggers who were assigned male at birth.

Media representation of autistic people and stereotypes were often blamed for people not being able to see girls and women as autistic. A number of bloggers invoked a similar male figure who was seen as the face of autism in pop culture. This figure was described as “a white cisgender male” (Onaiwu 2018), a “stereotypical 11 year-old autistic boy banging his head against a wall” (Stein 2019a), a “white male” (Dani 2022a), a “stereotypical presentation - mostly in boys - of someone who loves trains, numbers, timetables, does weird repetitive movements like hitting their head or flapping their hands, has poor social skills and is generally kind of a loner” (Stein 2019c), and “Spock-autism” (Lamb 2020b). Some bloggers suggested that it was not just others who were unable to see them as autistic due to media and popular culture representation, but even themselves (Lamb 2020a).

Overall, the belief that social factors caused later diagnosis in women, girls, and other groups seemed to be the most common conviction held by bloggers, especially those who were assigned female at birth and white. Even those bloggers who did not explicitly hold this view discussed experiences that could be seen as in line with it, with the exception of one blogger (John), who did not discuss gender at all, as will be detailed in the following section.

Absence of discussion of gender

Some of the bloggers spoke very little or not at all about gender in relation to their personal experiences (particularly their late diagnoses). While the white subjects who were assigned female at birth seemed eager to discuss the role of gender in their experiences, and all

of them even dedicated at least one full blog post to this topic, those outside of this group did not demonstrate the same commitment to a gendered analysis.

This was particularly true with the two bloggers who were assigned male at birth. While Dani talked about gender leading to late diagnosis in general, they did not discuss how their gender impacted their diagnosis or autistic self-discovery experience (Dani 2022b). Even in their post about intersectionality, the discussion of their own personal experience with late diagnosis focused on how it impacted their career in disability direct support and did not factor in how gender or other identities impacted their diagnosis. Similarly, while John had some guest posts on his blog written by an autistic woman about her experiences (McCarthy 2009a; 2009b), he never personally talked about gender and autism, even outside of the context of late diagnosis. One important note here is that John did not have any particular posts on his blog that recounted a full ‘diagnosis story’ as some of the other bloggers did, perhaps because he had previously written a memoir partially about this experience. That being said, the two posts analyzed for this research, “Why Are We Autistic?” and “Twelve Years of Writing on Autism,” did include sections of John discussing his diagnosis experience and how he felt about it in the following years.

Interestingly, there were also differences in how the racialized bloggers who were assigned female at birth discussed gender compared to their white counterparts. Jules only once discussed the role that gender played in the diagnostic process, specifically in reference to racialized women and non-binary people, saying that her followers should not “rely on a diagnosis in order to understand yourself and how to live your best life. This is especially written for BIPOC women and nonbinary people who are constantly harmed and marginalized within the medical and psychiatric industries” (Edwards 2022). Similarly, across Morénike’s blog, I found

no references to whether gender plays a role in late diagnosis. She did, however, speak about the erasure of racialized (and specifically Black) autistic individuals in discussions about autism (see Onaiwu 2021). While it is difficult to come to any conclusions based on two bloggers and generalizations should not be made, this trend may suggest that some racialized autistic people see other factors (e.g. race and ethnicity) as playing a larger role in late diagnosis (and overall autistic experience) than gender.

Critique of gender presentation labels

In more recent posts, some of the bloggers criticized using gendered subtypes or profiles of autism to explain gender disparities in diagnosis. In 2021, Ella and Samantha embarked on an informal collaboration in which they each made a video blog about the problems with such a category. This was particularly a shift for Samantha, who had previously discussed the Female Autism Phenotype within her videos and suggested that it was the reason that she was able to see herself as autistic (Stein 2019c). However, though Ella had previously shown less enthusiasm about the female autism profile than Samantha, it was still the first time that they publicly and explicitly critiqued the idea of a unique female autism profile. Drawing on their personal experiences, as well as interactions they have had with autistic children and adults, Samantha and Ella provided a number of arguments against separating autism presentations by gender and/or sex.

In line with recent trends in Critical Autism Studies (see also Price 2022; Watts 2019), Ella and Samantha argued that the traits associated with female autism are not inherently female. In her video blog, Samantha explained how she had “talked to men who were diagnosed in their 30s, or 40s even, who said [...] things like ‘oh well I have the female type of autism’” (Stein

2021). A similar experience can be read in Dani's blog "My Journey of Autistic Self-Discovery" (2022b). Although they were assigned male at birth and do not identify as female, Dani received inaccurate diagnoses instead of autism in childhood and, in their own words, were "a fairly calm kid," and "friendly with strangers and [...] always so happy to meet new people" (Dani 2022b) – traits that often appear on 'female autism' checklists. However, neither of the bloggers assigned male at birth in this sample explicitly discussed relating to the 'female autism' presentation.

Similarly, Ella and Samantha discussed how some people who are not assigned male at birth and do not identify as male relate to 'male autism' traits. Discussing the topic in general, Samantha mentioned how she had "talked to autistic women who said that they related more to the male type" (Stein 2021). Drawing on their own experience, Ella shared: "I wondered whether I presented more like an autistic male. I didn't feel like I was presenting the way the lists described" (Tabb 2021a). These individuals relating more to a 'male presentation' of autism suggests that there are other factors at play causing a late diagnosis than actual gender differences.

The bloggers also explained how reducing autism to 'male' and 'female' presentations can exclude trans and non-binary people. Ella discussed how their transgender daughter did not really fit either presentation entirely, saying that "in fact in some ways her autism did fit the [female] stereotype. She is bookish, quiet, and she tends to hide her anxiety, but she also has some really typically described male" traits (Tabb 2021a). They also pointed out the absurdity of suggesting that autism traits are inherently gendered, saying "my autistic child came out as trans and changed her gender presentation. Did her autism change to fit her gender presentation? Obviously it didn't, but she's still an autistic girl" (Tabb 2021a). Samantha also discussed how the idea of 'female autism' could be gender essentialist and exclusionary, noting that:

Telling a trans man that he has female autism may provoke gender dysphoria and still doesn't provide us any useful information other than perhaps he has a similar autistic profile to other autistics who happen to have been socialized as girls growing up. (Stein 2021)

Despite not believing in gendered presentations of autism, Ella did not doubt that autism could present in diverse ways, saying “it's not that I'm not validating those with what I would prefer to call a quiet or more camouflaged presentation of autism, it's that I'm not sure how helpful it is to label it as a gender difference” (Tabb 2021). Unlike Eileen, who suggested that there should be specific diagnostic instruments or tools put in place to evaluate girls for autism, Ella suggested that *everyone* should be evaluated with an understanding of the diversity of autistic people:

Rather than creating a new gendered autism presentation and teaching people how to diagnose and support it, we could overhaul the entire system. Let's treat every autistic person as an individual with an individual presentation of traits and an individual set of needs. (Tabb 2021a)

Other than Ella and Samantha, no other bloggers explicitly critiqued gendered labels for autism presentations. However, Morénike critiqued the idea of autism presenting differently in different races, saying “I have a HUGE problem with claims that autism ‘presents differently’ in people merely because their skin has more melanin. I think it’s more about how autism is PERCEIVED in such individuals than a drastic ‘difference’ in presentation” (Onaiwu 2018). While this does not indicate any specific opinions about gender, it shows a rejection of the idea that autism is inherently different in people with different socially constructed and intersectionally situated identities.

Critical Discourse Analysis

For the Critical Discourse Analysis portion, all posts were analyzed for reference to and ideas in line with the attitudes on the initial list (see Appendix A) as well as any other discourses that emerged. Of the original list, all discourses were explicitly named or continuously reflected in the posts of two or more bloggers, except for Neuroqueer, which was not referenced in any blogs. While Samantha did briefly discuss how autistic people often “don't really feel the need to conform to society's expectations of [them], especially with regard to gender or sexuality” (Stein 2019e), there were no explicit mentions of or deep engagements with neuroqueer theory, leading me to exclude it from the final discourse list. That being said, the bloggers may have referenced it in posts that were not included in the close analysis, as the topic of the intersection of autism and gender identity/queerness came up across other posts that were excluded from the sample. For example, Ella had a video blog titled “Autism And Gender Identity” (Tabb 2021b) and Dani had a Facebook post about identifying with the label ‘autigender’² (Dani 2021), but these posts were excluded from the analysis as they did not discuss late diagnosis.

Following the Critical Discourse Analysis, the discourse list contained nine root entries, a number of which also have child codes (see Appendix B).

The vast majority of bloggers in the sample (six out of seven) were explicitly aligned with the neurodiversity paradigm (Ella, Morénike, Jules, Dani, Sam, and John). Multiple of these bloggers explicitly rejected medicalizing/pathologizing views of autism (Robison 2018a; Stein 2019a; Tabb 2018) and explicitly saw autism as something positive to be proud of (Dani 2022b; Onaiwu 2014; Robison 2018b). In line with the neurodiversity paradigm, these bloggers also criticized functioning labels and the idea of mild/severe autism (Stein 2019d), were sympathetic

² According to Munday (2021), the label ‘autigender’ refers to an experience of gender “which can only be understood in the context of being Autistic.”

to or supportive of self-diagnosis (Stein 2019e; Edwards 2022), and drew parallels between autism and other marginalized identities (Onaiwu 2014; Stein 2019a). Relatedly, Dani and Samantha shared ideas that were similar to the social model of disability, claiming that it is an unaccommodating world that disables autistic people and not their autism itself. In their post “My Journey of Autistic Self-Discovery,” Dani shared:

Sure, I have my own struggles and challenges – but these aren’t because I am autistic; they arise because of the external systems in place that are not designed for neurodivergent people. They are steeped in neurotypical social standards, ableism, expectations, and judgment that can prevent forward motion when there is also a lack of support. When I am in an environment that is accommodating to me, or if I am allowed to create my own environment; I thrive. (Dani 2022b)

The majority of bloggers saw autistic people as autism experts and preferred to share resources and media created by autistic people with their followers. For example, in the description of her video blog “Could YOU be autistic? (and not know)” (Stein 2019e), Samantha linked an early version of Samantha Craft’s autism traits checklist, a resource created by and for autistic women (Craft 2019). In another video blog, Ella shared that they “personally [...] prefer to use resources that are contributed to by autistic people that are using the kinds of language that we prefer to use” (Tabb 2018). Relatedly, John expressed feeling that he had the most responsibility to his “community, which is #ActuallyAutistic people” (Robison 2018b) when writing about autism. There was also a strong trend in these late-diagnosed individuals learning about themselves being autistic from their autistic communities or resources made by autistic people, rather than through medical ‘experts’, even if they later sought out an official diagnosis (Dani 2022b; Stein 2019c; 2019e).

Even as the majority of bloggers saw autistic people as autism experts, some of these bloggers still implicitly or explicitly reaffirmed that medical professionals are autism experts. In multiple of her video blogs, Samantha shared a disclaimer that she was not a medical professional ahead of providing information about autism (Stein 2019c; 2019e). In addition, though these bloggers often supported self-diagnosis, they often also shared that they personally felt they needed a medical evaluation or were relieved to have the ‘stamp of approval’ of a professional diagnosis (Tabb 2016; Dani 2022b; Stein 2019a).

Some bloggers tackled the question of what causes autism and why there has been an increase in autism diagnoses in recent years. None of the bloggers in this sample believed that a child could develop autism after birth and two of the bloggers (John and Morénike) explicitly stated that they believe autism is hereditary (Robison 2018a; Onaiwu 2018). John and Morénike also shared beliefs that autism diagnoses were increasing due to increased awareness rather than an uptick in the number of autistic people, with John stating: “autism isn’t something that happened one day. It was always here. It’s awareness that’s new” (Robison 2018a). Morénike also explicitly critiqued the idea of an ‘autism epidemic,’ which suggests that too many people are being born autistic due to various factors (Onaiwu 2018).

One blogger, Eileen Lamb, shared sentiments that were more in line with the pathology paradigm. Unlike the other bloggers, she frequently used functioning labels and similar descriptors, labelling how autism manifests in individuals as mild, severe, and profound, among other things. Most notably, quotes from her blog were coded for “severe autism” six times. Eileen often used “profound” and “severe” autism as labels to describe her son who is non-verbal and autistic. Furthermore, across her blog, she has argued in support of Applied Behavioural Analysis (ABA) therapy (Lamb 2017b; 2023), an autism therapy critiqued by self-advocates and

particularly those who have been subjected to it for conditioning autistic people “to look and behave like someone they’re not – conforming to social standards of behaviour rather than actually helping them with tools to exist in day-to-day living” (Durling 2022).

Eileen also argued that autism is a “disability. Not a cool feature. Not a trend” (Lamb 2017c) and criticized #actuallyautistic (Lamb 2018a), a social media movement to give autistic individuals space on social media not dominated by non-autistic caregivers (see Eartharcher 2017). Rather than only seeing autistic individuals as experts on autism, Eileen believed:

If you’re a neurotypical parent of an autistic child, I don’t think you should let anybody tell you what to say or not say about your child, or that your experience is somehow not relevant or valid. You have the right to share your kid’s journey with autism even if you’re not on the spectrum. Your experience and point of view is just as important. (Lamb 2017a)

While she typically relied on a pathologized view of autism, Eileen did critique the DSM-V twice, stating that its criteria were based on a ‘male presentation’ of autism (Lamb 2017b; Lamb 2018b). That being said, she still saw medical professionals as experts in autism, sharing that she “didn’t believe in self-diagnosis” and was not willing to consider herself as autistic without a thorough assessment (Lamb 2020).

Extreme male brain theory was referenced by two bloggers, Samantha and Ella, both of whom critiqued the theory. Ella explicitly disagreed with Baron Cohen’s ideas, saying that they “don’t think the difference in gender diagnostic rates is explained by an extremely male brain” (Tabb 2021). Samantha cited extreme male brain theory as a reason that she was unable to see herself as autistic despite having a psychology degree, saying that Baron Cohen has

been such an influence on autism research that when I did my psychology degree, which was 15 plus years ago now, I didn't recognize autism in myself because I didn't see my brain as being particularly male. (Stein 2021)

Despite rejecting the gender essentialist ideas of extreme male brain theory, a number of bloggers implicitly or explicitly agreed with the ideas of the Female Autism Phenotype, at least for part of their blogging career. As discussed earlier, Eileen, Ella, and Samantha all shared views that aligned with the Female Autism Phenotype. However, Samantha was the only one to use the term 'Female Autism Phenotype' explicitly in her blog and she only used this wording in a context where she was sharing that she no longer believed in it (Stein 2021). Those who had encountered ideas similar to the Female Autism Phenotype described learning about them from fellow autistic community members rather than medical professionals or autism researchers, suggesting that the idea of a unique female autism profile may have circulated initially and/or independently in autistic communities. Both Ella and Samantha described coming across media detailing lists of signs of female autism developed by autistic women themselves (Tabb 2021; Stein 2019c; 2019d). Interestingly, Eileen was the only blogger in the sample who continuously held the belief that there are inherent differences between the way that autism presents in boys and girls.

While some of the bloggers saw certain categories of autism (high/low-functioning, mild/severe, male/female) as being socially constructed, no bloggers suggested that autism itself could be socially constructed. In fact, some bloggers referred to autism as an inherent trait that existed prior to having a name. For example, John suggested in a blog that "autism isn't something that happened one day. It was always here. It's awareness that's new" (Robison 2018a). However, some bloggers did recognize how the category of who could be considered

autistic has changed and expanded over time, perhaps suggesting an understanding of how the category of autism is constantly being rewritten and shaped by medical professionals, autistic individuals, and other stakeholders. For example, Samantha acknowledged how while studying psychology “autism was taught to [her] as a male condition” (Stein 2019c). Ella also discussed how new diagnostic tools are being introduced for autism which may cause certain individuals who would not previously to receive a diagnosis, thus changing the parameters for who qualifies for an autism diagnosis (Tabb 2020).

The homogeneity of discourses present in autie-blogs may suggest that the majority of autistic adults subscribe to similar viewpoints around autism and that the one blogger who veered from these viewpoints (Eileen) is an outlier. However, this may also indicate researcher bias as I personally subscribe to the neurodiversity paradigm and generated a sample based on four bloggers who I personally see as prominent in the late-diagnosed community. There may be other late-diagnosed bloggers who are prominent in their own communities and share more similar views to Eileen but were missed by this sampling method.

It is also worth noting that compared to the other bloggers, Eileen’s blog is much more focused on parenting an autistic child than the other bloggers studied. While a majority of the sample (Ella, John, Morénike, Jules) discuss parenting autistic children in their blogs, they typically present themselves as bloggers who generally discuss autism and their own experiences rather than parenting bloggers. On the contrary, Eileen describes her blog as a space where she “shares the ups and downs of raising a severely autistic child while being on the autism spectrum herself” (Lamb n.d). As such, Eileen’s perspectives and affiliations may be shaped by her heavy involvement in the autism parenting blog community, in which views contrary to those shared by the autistic blogger community may be common. These affiliations may not simply be influenced

by the community that Eileen is situated in or learns from, but also the audience that she is speaking to. Looking at a number of posts on Eileen's blog, including those explicitly about her experience with autism, the majority of commenters seem to be non-autistic parents, often referencing their autistic child (or grandchild) or a child in their life who they suspect is autistic but does not have a diagnosis (Lamb 2017a; 2018b). As such, Eileen may use specific language or share specific sentiments to appeal to or create community with non-autistic parents of autistic children, who may share different opinions than autistic self-advocates.

Discussion

Neurodiversity Paradigm, Pathology Paradigm, and Views on Autism and Gender

Due to the fact that the majority (six out of seven) bloggers held very similar views in relation to autism, it is difficult to draw conclusions about whether affiliation with certain discourses shapes one's beliefs about gender and late-diagnosis. However, as stated earlier in this paper, the one blogger in the sample (Eileen) whose views aligned closely with the pathology paradigm (e.g. using functioning labels, seeing autism as a negative trait, and supporting ABA therapy) was also the blogger who subscribed the most to gender roles in autism, as she suggested that it presented differently in boys and girls due to inherent sex differences (e.g. seeing girls as naturally more passive while boys are naturally more aggressive, believing autistic girls try harder to fit in, and suggesting that autistic boys have more repetitive behaviours).

Reflecting on this specific example, could we view the Female Autism Phenotype (or similar understandings of gender differences in autism) as a form of pathologization in itself. In many ways, the views expressed by Eileen (regarding both ABA and gender roles) are reflective

of the entangled history of cis/heteronormativity, strict gender roles, and neuronormativity. In recent years, a number of autistic self-advocates and disability theorists have compared ABA therapies to the forms of ‘conversion therapy’ or ‘reparative therapy’ used to force queer subjects to conform to hetero- and cis-normative ideals (Sequenzia 2016; Autistic Collaboration 2021; Yergeau 2018, 28-29). These critics have argued that like ‘reparative therapy’ for queer and trans individuals, “ABA treats [autistic people] as if [they] are broken, as if [they] need to be repaired” (Sequenzia 2016) for an identity that they are born with and unable to change. While these critics recognize that these ‘treatments’ are not identical, the similarities between them have caused them to call for government bans of ABA therapy, particularly after said governments ban anti-LGBTQ+ ‘conversion’ therapies (Sequenzia 2016; Autistic Collaboration 2021).

This comparison is not a coincidence: there is a strong relationship embedded in the history and development of ABA for autistic individuals and ‘reparative’ or ‘conversion’ therapies for queer individuals. University of California, Los Angeles psychologist Ole Ivar Lovaas is often considered a ‘trailblazer’ in the ‘treatment’ of autistic children through ABA (see also Gibson and Douglas 2018, 3; Roscigno 2023, 11-12) due to his early work in applying “operant learning theory to treat ‘disturbed’ children, beginning early to focus on those with autism diagnoses” (Gibson and Douglas 2018, 9). However, he also developed and used similar behaviourist approaches for the ‘treatment’ of both autistic and gender non-conforming children (Pyne 2021, 351; Gibson and Douglas 2018, 3). Lovaas, alongside then-graduate student George Rekers, developed the Feminine Boy Project in the 1970s, which employed similar behaviourist interventions “with the goal of increasing ‘masculine’ behavior, play and activities [...] and decreasing ‘feminine’ behaviors, play and activities” (Gibson and Douglas 2018, 3) in young boys who were perceived as being too feminine. The ‘therapy’ delivered under this project relied

on similar techniques to both early and contemporary ABA delivered to autistic children, including the use of rewards in response to desired behaviours, non-responsiveness to undesired behaviours, and the training of parents (particularly mothers) to carry on therapeutic practices in the home (Gibson and Douglas 2018, 10).

Although the field of Applied Behavioural Analysis has disassociated itself from so-called ‘therapies’ to changed gender(ed) identities and behaviours (see Association for Behavior Analysis International 2022), it can be argued that in our cis/heteronormative society, the “desired behaviors” (Roscigno 2023, 1) sought by ABA practitioners are inextricably linked to gender roles. As Nick Walker notes in *Neuroqueer Heresies* (2021), in a world in which neurotypicality, heterosexuality, and cisgenderism are the dominant and desired norms,

the process by which [individuals are] pushed into the ill-fitting confines of heteronormative gender performance and the process by which [they are] pushed into the ill-fitting confines of neuronormative performance [... are] deeply and thoroughly entwined with one another, with no solid dividing line between them. (171)

Thus, Eileen holding views closely linked to the pathology paradigm (and in particular, being a proponent of ABA therapy) while also being the blogger who most strongly believes in inherent sex differences in autism can be read as a symptom of a larger entanglement of hetero/cisnormativity and neuronormativity. While Eileen does not chastise certain gendered behaviours in her blog posts, she does discuss autistic girls’ experiences in a way that reinforces essentialist gender roles. For example, in her post “Autism in Girls: 5 Reasons Why It’s Different,” Eileen states that autistic “boys tend to be more aggressive while [autistic] girls are more withdrawn and passive” (Lamb 2018b). She also suggests that girls have less repetitive and restricted behaviours (2017c), have more ‘normal’ interests (2018b), and are “better at copying

social behaviours to fit in” (2018b). By suggesting that girls inherently behave in certain ways (which is not universally true), Eileen is not describing an inherent truth but instead prescribing a certain set of behaviours onto the category female. I think about this alongside Ian Hacking’s (1996) notion of the ‘looping effect’, where he argues that by classifying a group, people change and even create the people classified within that group. As I will explore further in my discussion of the construction of the Female Autism Phenotype, I argue that those who describe a certain type of ‘autistic female’ inherently create that person, therefore constructing a form of acceptable female gender presentation within the category of autism.

Further, as I will explain in more depth in a subsequent section of this paper, the Female Autism Phenotype extends the umbrella of who is considered to fall under the autism umbrella, what their behaviours may look like, and how they can be ‘treated’. In a world in which the dominant response to autism is pathologization (i.e. medication, therapies, entrance into the psychological and/or psychiatric system rather than embrace and accommodation of neurological difference), a formal diagnosis with autism can be seen as a form of medicalizing that which a number of autistic self-advocates would argue does not require treatment or ‘fixing’ (Garcia 2021). As described by Aimee Morrison (2019),

diagnosis is [...] a primary site of the biographic mediation of disability, one in which authorized experts translate and transform patient (or parent, or teacher) complaints into patient histories into lists of observed and testable impairments into a coherent case file that resolves by naming the disorder according to standardized criteria and attaching the diagnostic label to the patient, to whom a standardized treatment regime can be applied.

(700)

As Morrison illustrates, by diagnosing a patient, the psychologist becomes able to then enact treatments to ‘cure’ (or otherwise modify the behaviour, thoughts, or actions of) the patient, who may have previously not been seen as in need of medical intervention. As such, the Female Autism Phenotype can be seen as a form of pathologization in that it allows those who would not formerly be labelled autistic to enter as a patient into the psychological or psychiatric system, where their differences can be subdued or eliminated through ‘interventions’. I would argue that this is particularly true when the Female Autism Phenotype is held up by those who also support ‘interventions’ like Applied Behavioural Analysis, which autistic self-advocates have argued is a process through which

autistic people are continuously battered with compliance strategies, with imposed ways of doing things that are not natural to us (even when our atypical way of doing things might achieve the same goal), until we break, and lose the energy to fight for our right to be ourselves. (Sequenzia 2016)

By arguing for “different autism scales used to diagnose autism in girls and boys, or some other metric to account for these inherent differences” (Lamb 2018b), Eileen is therefore arguing for further pathologization of individuals who portray so-called ‘autistic traits’.

I want to stress here that I am not suggesting Eileen is necessarily directly causing the pathologization of autism or the enforcement of gender roles in society. In fact, Eileen explicitly supports feminist actions on her blog (see Lamb 2018a). Rather, I argue that the sentiments she includes in her blog posts are part of a wider project to pathologize individuals who are autistic, gender non-conforming, or both. These viewpoints did not start or end with this particular blogger, but are a product of a combination of long histories of neuronormativity,

cis/heteronormativity, and the use of so-called ‘therapeutic treatment’ to reinscribe societal norms on ‘deviant’ subjects.

In the same way that there is a long and apparent connection between strict gender roles and pathologization of neurological ‘difference’, it may also make sense that those who follow the neurodiversity paradigm seem to care less about or even explicitly critique gender differences. The neurodiversity paradigm relies on the notion that “the idea that there is one ‘normal’ or ‘healthy’ type of brain or mind, or one ‘right’ style of neurocognitive functioning, is a culturally constructed fiction” (Walker 2021, 36). As such, proponents of the neurodiversity paradigm may also be likely to question the idea that there is a ‘normal’ or ‘right’ way of performing other identities, including gender. In fact, Samantha suggested in a blog that autistic people often “don't really feel the need to conform to society's expectations of [them] especially with regard to gender or sexuality” (Stein 2019e), perhaps suggesting that (at least in her perspective) those who have embraced a way of thinking/being that subverts the norm could be more open to rejecting other identity-based norms. This is also perhaps particularly evident in the fact that four out of seven of the overall bloggers both identified outside of the gender binary and embraced the neurodiversity paradigm. This is not to suggest that *everyone* who embraces the neurodiversity paradigm will automatically embrace gender diversity, but rather to demonstrate how the correlation witnessed in this study is simply unsurprising.

Shifting Viewpoints

A key finding of this study is that perceptions around the connection between sex and/or gender and timing of (or access to) autism diagnosis among late-diagnosed autistic adult bloggers have evolved over time. By the time this autistic blogging community emerged, the

extreme male brain theory had largely fallen out of fashion in academia and general discussions of autism in the public sphere, with a number of critiques emerging in the 2010s (McCarthy 2019; Jack 2011; Ridley 2019). This is also reflected in the blogs, with the only mentions of it by the studied bloggers being critical and sometimes backed up by evidence from psychological studies (Stein 2021; Tabb 2021a).

However, a number of these bloggers still frequently discussed (and supported) gender essentialist ideas about autism from the mid-2010s until 2020 in the form of the Female Autism Phenotype, which relies on the assumption that there are inherent differences between male and female brains, such as the notion that “boys tend to be more aggressive while girls are more withdrawn and passive” (Lamb 2018b). When discussing these ideas, bloggers often suggested that they were being recognized by the autistic community but not yet the medical system (Lamb 2018b). This resulted in some individuals calling on the medical system to make changes to how autism is diagnosed in girls and women (Lamb 2018b). By 2021, however, some former proponents of the female autism phenotype began to critique the ideas behind it (Stein 2021; Tabb 2021a), and no bloggers explicitly mentioned supporting it, demonstrating yet another shift in prominent views around gender and autism among late-diagnosed bloggers.

It is important to note that autistic bloggers did exist prior to the blogs included in the study. In fact, the Autism Hub, perhaps the most notable congregated autism blogging community³ to date, was founded in 2005 and operated into the early 2010s (see also Seidel 2020; Eidle 2022). The only blog from this study that was active before 2014 was that of John Elder Robison, who did not write about gender and late diagnosis. Without further study with a longer time frame and larger sample size, it is impossible to know whether this is because such

³ I refer to the Autism Hub as an “autism blogging community” rather than an *autistic* blogging community as its membership consisted of both autistic and non-autistic individuals. The non-autistic individuals were primarily parents of autistic children.

conversations were not prevalent at the time or whether they were simply not hosted on this particular blog. As such, any analysis I provide of the way these conversations have evolved over time only captures part of this broader history. Furthermore, with the rapid evolution of ideas happening on microblogging and short-form video sites (e.g. Twitter, Instagram, and TikTok), it is likely that conversations in segments of the autistic community have evolved past the point captured in this particular study.

At the time that I began this study, I anticipated seeing more frequent and more recent representations of a 'Female Autism Phenotype' line of thinking amongst the bloggers. As such, I was surprised to see more diverse orientations towards the relationship between gender and late diagnosis. I see two factors as largely creating my original impression of the current prevalence of the female autism phenotype. Firstly, I underwent my own autism evaluation in late 2020, which meant that I read and watched significantly more blogs about late diagnosis experiences around this time. As such, I have been less tuned into emerging discussions critiquing the Female Autism Phenotype as it relates to late diagnosis as I have interacted with the online autistic community in other ways. On the other hand, these perceptions may have also been shaped by popular content on microblogging and short-form video platforms, which I currently interact with more often and may vary from the content seen in these longer-form blogs.

That being said, this study focused on a relatively small sample and may not necessarily be representative of the larger autistic blogging community in which these conversations may still be happening but simply be outside of the circles this study concentrated on. I particularly anticipate that samples with a larger concentration of cisgender women might include more recent and more frequent discussions of the Female Autism Phenotype.

Constructing Female Autism

Research findings provide particular insight into how autistic adults (especially women) have co-created the category of the ‘Female Autism Phenotype’ alongside researchers in psy-fields (psychology and psychiatry).

Bloggers within the sample generated and shared lists of ‘female autism’ traits, often including personal examples (see Stein 2019c; Lamb 2018b), effectively creating and shaping a new list of (informal) autism diagnostic criteria. Sometimes, these lists also have included re-interpretations of ‘official’ autism criteria (i.e. from the DSM or ICD) which describe ways that traits may ‘unconventionally’ manifest in some individuals, particularly women, girls, and those assigned female at birth. For example, Samantha discussed her fixated interest in the Spice Girls and how this was evidence of the ‘restricted interests’ described in the DSM, even though it may have seemed like normal behaviour for an adolescent girl (Stein 2019c).

Often, bloggers have been influenced by other lists of ‘female autism traits’ developed by autistic individuals when writing their own. For example, in a couple of her video blogs, Samantha referenced a video by former YouTuber invisible i about autism in girls that made her consider she might be autistic (Stein 2019c; Stein 2019d). She also linked a blog post by Samantha Craft which detailed a list of ‘female autism traits’ in the description of one of her video blogs (Stein 2019e; Craft 2019). As such, we can see how the construction of the category known as ‘female autism’ has been partially constructed through a dialogue between autistic bloggers.

By popularizing the category of ‘female autism’, I argue that these individuals have reconstructed the category of autism itself in the popular imagination, expanding what has been relegated to a ‘male condition’ (Dani 2022a; Stein 2021) into something experienced by those of

diverse genders (though, proponents of ‘female autism’ would argue, not in the same way). As argued by Aimee Morrison (2019), “diagnostic categories and labels are constantly in flux: disorders are named, appear, become associated with other diagnoses, are formed into (or split apart from) categories, or disappear altogether” (700). This is particularly true with autism: Ian Hacking (2009) argues that the autism “spectrum itself is a ‘moving target’ that has evolved dramatically” due to social and cultural factors (1467). While I do not mean to suggest here that the experiences which we call autism are not real or disabling (in fact, I personally have an autism diagnosis that I deeply identify with), I argue that, particularly due to the lack of definitive biological evidence for autism, the criteria of what ‘counts as’ autism is malleable and has evolved as various stakeholders have contested it. In her book *Constructing Autism* (2005), Nadesan refers to this as a failure to “define the precise *essence* of autism” (9, emphasis in original). Further, particular cultural phenomena that exacerbate the disabling aspects of autism necessitate the labelling of such a ‘disorder’. Since the current social, political, and economic landscape necessitates certain social behaviours (e.g. ‘politeness,’ collaborative work skills, and tact) and responses to sensory input (e.g. being able to work in an office with strong lighting or sit still in class), subjects who are unable to meet these expectations are thus seen as disordered. While I am not attempting to argue that challenges attributed to autism would not exist without capitalism or other political institutions, these challenges may not necessarily be named, identified, or categorized in the same way.

The malleability of the criteria for an autism diagnosis is perhaps best illustrated through the changes to Autism Spectrum Disorder seen in the DSM-V⁴, which were influenced in part by

⁴ The DSM-IV included several classifications along the autism spectrum: Asperger’s Disorder, Pervasive Developmental Disorder (not otherwise specified), Rett’s Disorder, and Childhood Disintegrative Disorder. In the DSM-V, these classifications were grouped into a single diagnosis titled Autism Spectrum Disorder. For more information, see Herman 2019.

the autistic community's resistance to the existence of multiple autisms and eventual collaboration with the American Psychological Association in developing new criteria (see also Kapp and Ne'eman 2020). As such, I argue here that the construction of 'female autism' reconstructed the category of autism itself, shifting who and what could fall under the category of autism to align with the social demands of the time.

In fact, there is evidence to suggest that the conceptions of 'female autism' being shared in posts by these bloggers and others have had a direct impact on how clinicians diagnose and identify autism in female patients. For example, the National Autistic Society in the United Kingdom offers an online training module "to support professionals to identify autistic women and girls" which was developed "in conjunction with autistic women" including autistic content writers (National Autistic Society n.d.). This resource shows how online conversations about female autism and the circulation of 'female autism trait' lists are directly influencing autism evaluation, therefore reconstructing not only the category of autism in the public imagination, but also in medical fields.

In this process, other diagnoses are also reconstructed. Some bloggers described being misdiagnosed or personally misidentifying with other DSM diagnoses, including Borderline Personality Disorder (Stein 2019c), Depression (Stein 2019c; Tabb 2016), and Bipolar Disorder (Tabb 2016). By including traits or clinical presentations that would have previously led to a diagnosis of these disabilities under the classification of autism, not only is the category of autism remolded, but so are these other categories.

Further, I suggest that the notion of the 'Female Autism Phenotype' circulated within these online communities may impact the way that autistic individuals (particularly autistic women) *perform* autism. A number of authors have detailed how there is a performative

component to autism, particularly when seeking diagnosis or supports like social services, government funding, and academic or workplace accommodations (Nadesan 2005, 2; Morrison 2019, 694). As articulated by Morrison (2019),

diagnosis is often a kind of conflict-ridden Procrustean story-making exercise in which disabled people must perform or disguise disability in particular ways to be seen to fit a diagnostic model or category in order to achieve some action in the world. (700)

As such, those who see their experiences as falling under the category of ‘autism’ may intentionally perform specific behaviours in order to fit a clinician or other gatekeeper’s view of what autism looks like so that they can more easily obtain a diagnosis, services, or support that they believe will be beneficial for them. With the knowledge of a so-called ‘female autism profile’, then, women, girls, and people assigned female at birth may attempt to modify their behaviours to fit the impression of how autism is *supposed* to look in a woman according to the evaluator. I want to clarify that I am not suggesting that these people are ‘faking it’, but rather that the process of biographic mediation present within a number of disability-related situations (Morrison 2019) may necessitate a person altering the way they tell the story of their disability to satisfy gatekeepers and gain access to support that will be beneficial for them.

Overall, the way that autistic bloggers have described ‘female autism’ has constructed a new view of autism in the popular imagination and medical field, thus changing the category of autism itself and potentially impacting the behaviours of those who identify with it.

Implications for Autism Researchers

While the Female Autism Phenotype has been a focus of much of the recent research around late diagnosis, this study has shown that it may not be a high priority for late-diagnosed

autistic self-advocates, many of whom hardly discussed the relationship between gender and autism at all. Researchers looking to honour the wishes of the autistic community in improving diagnosis may choose instead to investigate possibilities for diagnosis which “treat every autistic person as an individual with an individual presentation of traits and an individual set of needs” (Tabb 2021a) that do not involve arbitrary gendered categorizations.

That being said, considering a number of the bloggers in this study were supportive of self-diagnosis, and due to increased access to tools that may aid in self-diagnosis (see also Engelbrecht 2023), autism research may instead benefit from a focus on strategies and tools to support self-diagnosed individuals. At the present moment, a number of autism-related services (e.g. government benefits, psychological and social support) are only available to those with an official diagnosis, which it becomes exceedingly clear represents only a portion of the autistic population. Work should also be done to contribute to the small body of existing research about autistic community viewpoints on self-diagnosis and why some individuals choose self-diagnosis. This research may include investigating the barriers to diagnosis discussed by the bloggers in this study (Tabb 2020; Edwards 2022) which cause some individuals to choose self-diagnosis and looking for ways to potentially eliminate those barriers for individuals who would prefer an ‘official’ diagnosis (while recognizing that self-diagnosis is sufficient and helpful for many individuals).

Further research may benefit from a larger pool of bloggers, specifically those assigned male at birth. However, it is important to note that there may potentially be fewer bloggers assigned male at birth due to boys more frequently being diagnosed in childhood. In fact, the only cisgender male blogger in this sample was diagnosed in the late 1990s, before which autism diagnoses were much less common as a whole (Silberman 2015, 13; Garcia 2021, xii). For this

reason, late-diagnosed bloggers assigned male at birth (and particularly cisgender men) may have smaller audiences due to their experiences potentially resonating less with people assigned female at birth who are late-diagnosed or pursuing an autism diagnosis. Based on the limited findings from the racialized bloggers in this study, further research may also be beneficial in understanding perspectives regarding late diagnosis and race.

Conclusion

Overall, this study has demonstrated that although a link between late autism diagnosis and gender was theorized by a number of autistic bloggers in the mid-to-late 2010s, such conversations may have become less common and been replaced by a critique of gender-essentialist approaches to autism in recent years. While the findings of this study cannot be universally applied to the vast autistic blogger community, they are useful in understanding the messaging circulating throughout wide segments of the online autistic community due to the prominence and reach of the bloggers studied.

Despite the fall in prominence of conversations surrounding the Female Autism Phenotype in recent years, the findings of this study have demonstrated that the late-diagnosed autistic blogging community has played a significant role in popularizing the notion of a distinct female autism profile in both community contexts and the medical system. As conversations about autism unfold at a rapid pace on short-form content platforms like TikTok and Twitter, further research to document the evolution of such constructions may be beneficial in the understanding of popular ideas about autism and gender. This finding is particularly important as it demonstrates the key role that online autistic communities play in shaping perceptions about autism and even the boundaries of what (socially and diagnostically) constitutes autism.

Further, this study reaffirms that the subjects prioritized in autism research (particularly in the psy-fields) are frequently not in line with the priorities and needs of the autistic community themselves. While recent autism research (particularly around late diagnosis) often focuses on the Female Autism Phenotype and similar theories, a study of prominent late-diagnosed bloggers has shown that these theories are not a current priority of autistic adults and may distract from issues that these adults find more pertinent. As such, this research demonstrates the need for further engagement with the actual perspectives of autistic people in autism research as a whole, as well as the key role that autistic researchers play in producing autism research.

Appendix A

Original discourse list:

- Neurodiversity paradigm
- Pathology paradigm
- Female autism phenotype
- Neuroqueer
- Extreme male brain theory

Appendix B

Discourse list following coding:

- Autism = disability
 - Autism is a hidden disability
- Autism has always existed
- Autism is hereditary
- Extreme male brain theory
 - Extreme male brain theory (critical)
- Female autism phenotype
 - Autism community circulating female autism ideas
 - Camouflage
- Human rights model of disability
- Neurodiversity paradigm
 - #actuallyautistic (positive)
 - Autism is positive
 - Autistic people as autism experts
 - Critiquing functioning labels
 - Relating to people across functioning labels
 - Diagnosis as positive
 - Drawing similarities between autism and other marginalized identities
 - Increased diagnosis is due to changes in understanding
 - Neurodiversity movement (positive)
 - Rejecting pathologization
 - Self-diagnosis (positive)
- Pathology paradigm
 - #actuallyautistic (negative)
 - Autism epidemic
 - Autism is not positive
 - Diagnosis as negative

- Wishing they were not autistic
 - Functioning labels (pro)
 - Guilt for passing down autism
 - Medical professionals are experts
 - Mild autism
 - Neurodiversity movement (negative)
 - Neurodiversity paradigm (negative)
 - Person-first language
 - Refrigerator mother theory
 - Severe autism
- Social model of disability
 - Identity-first language
 - Uses identity-first language

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