

Solving the puzzle: Autism diagnosis often takes longer for girls, whose symptoms can differ from boys'

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Autism spectrum disorder is a developmental disorder, characterized by difficulty with communication, social interactions and behavior, the

Centers for Disease Control and Prevention reports.

Some early signs of autism are when a child fails to make or keep eye contact or if they don't respond to their name by the time they're 9 months old. They may also seem unaware when someone speaks to them. At a year old, they might use few or no gestures—such as not waving goodbye—and they may not play simple games, like pat-a-cake.

The average age of diagnosis is 4½, according to the CDC—many other girls and women with the condition are not diagnosed until much later than their male counterparts. That latent diagnosis can impact when or if they receive support therapies, which experts says are key to improved long-term outcomes.

Gender-based differences in autism

The Organization for Autism Research reports that while 25% of boys with autism are diagnosed before age 6, only 8% of girls receive a diagnosis by that time. By 11 years old, about half of boys have been diagnosed, compared with 20% of girls.

UCLA Health reports that nearly 80% of autistic women are undiagnosed at age 18.

Why fewer girls and women get diagnosed early

There are several reasons that may cause a gender-based disparity.

Because a lot of autism research has historically focused on males, the diagnostic criteria has long been based on how they experience the condition. That has led to biases in screening practices, leading to girls and women being less likely to be identified.

"It's really in the last decade or so that we have been trying to get better at looking at some of the differences between girls and boys in terms of their presentation," Yanan Guo said.

She is a licensed clinical psychologist at the Developmental Evaluation Clinic with Rady Children's Hospital and board-certified behavior analyst who specialized in [autism spectrum disorder](#) before starting her doctorate.

One way autism can differ between genders is that autistic girls can sometimes present as being more social. They also might be quiet and less disruptive, meaning they might not be perceived as needing additional services, said Doris Trauner, Department of Neurosciences professor emerita at UC San Diego School of Medicine.

There are also cultural biases at play.

"If a 3- or 4-year-old girl doesn't want to talk to anybody else, kind of hides behind her mother or wants to look at books instead of talking to people, they are described as shy," Trauner said. "If a boy wants to do that, that's sometimes deemed to be more concerning because boys are supposed to be running around and playing with other kids."

Girls and women with autism are more likely to employ camouflaging strategies, masking their symptoms by imitating neurotypical social behaviors. This adaptive technique allows them to blend in with their peers, often leading to difficulties in receiving an accurate or early diagnosis.

"Even though they do these things, they're not necessarily understanding the nuance of the more subtle things that are included in these social relationships," Guo said.

This coping mechanism, aimed at fitting in, can also lead to increased mental health challenges for autistic girls and women.

"It's very stressful for somebody to do that because they're not being themselves, and so that may actually end up resulting in more behavior problems because of the stress and anxiety," Trauner said.

Camouflaging can also lead to someone being misdiagnosed. Some common diagnoses girls and women with autism receive include [borderline personality disorder](#), eating disorders, Tourette syndrome, bipolar disorder, [social anxiety disorder](#) or generalized anxiety disorder, the Autistic Women & Nonbinary Network reports.

"I'll see kids who come with a diagnosis of anxiety disorder, oppositional defiant disorder, [attention deficit disorder](#), [obsessive compulsive disorder](#), one kid with four or five different diagnoses," Trauner said. "It turns out when you put it all together, they meet criteria for autism."

Getting connected to autism resources

Researchers say early diagnosis is imperative because the therapies to support children with autism are most effective when they receive those resources before they're 3 years old.

Speech therapy for children with autism focuses on improving [communication skills](#), [occupational therapy](#) enhances everyday functional abilities and independence, and behavioral therapy helps manage behaviors, developing coping strategies for social interaction and emotional regulation.

All three can play important roles in supporting people with autism, fostering their communication skills, independence and emotional well-being.

These therapies provide tailored support, recognizing the unique strengths and challenges of each person, and empowering them to navigate the world with confidence and autonomy. By focusing on holistic approaches and respecting the diverse abilities of people with autism, these therapies promote inclusivity and ensure that everyone has the opportunity to thrive.

Having an [early diagnosis](#) helps families learn what support is available and can help them gain access to the services, especially if there are long wait lists for programs.

"You have to keep advocating for your children to make sure that they get what they need," Guo said.

The San Diego Regional Center—which reports that about 40% of clients have autism—supports individuals with intellectual or developmental disabilities and their families from birth throughout their lives. The center is the local coordinator of the California Early Start Program, which ensures that eligible infants and toddlers receive evaluation and support services.

Parents can also work with their child's school to start the process of receiving an Individualized Education Program, a personalized plan tailored to their unique strengths and challenges.

In some cases, parents may also qualify to be paid for the care they provide their children through the county's In-Home Supportive Services.

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