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Exploring autistic females' experiences of diagnosis in adolescence: What difficulties are faced during the post-diagnosis period and what support could be provided?

Carla Tromans and Henry Wood-Downie
Doctorate in Educational Psychology, University of Southampton

Autism is increasingly recognised as under-diagnosed in females due to different symptom presentations. As a result, many females are not diagnosed until adolescence, a period that can be particularly challenging for autistic individuals. A new diagnosis may further challenge emotional wellbeing. Therefore, this narrative review explores the experiences of autistic girls diagnosed during adolescence, focusing on understanding the difficulties they face post-diagnosis. The research suggests that these difficulties occur at multiple levels: individual struggles with self-identity exist within a wider context of unhelpful treatment from others; stereotypical perceptions; and societal structures, policies and resources that do not provide adequate support. The review situates these difficulties within an ecological framework, highlighting how external factors influence individual experiences. Possible support strategies are explored within this framework. It is argued that wider change is needed to government policy, practices, and funding to prioritise development of societal infrastructures to better support autistic females.

Keywords: Autistic teenagers, adolescent females, after diagnosis, experiences of diagnosis, post-diagnostic support

Introduction

Autism[1], clinically known as autism spectrum disorder, is a neurodevelopmental condition characterised by difficulties with social communication and interaction and restricted, repetitive behaviour (American Psychiatric Association, 2013). Historically, autism has been characterised as a predominately male condition but there is an increasing understanding that females may be under-recognised due to differences in symptom presentation compared to males (Whitlock et al., 2020).

'Sex' commonly refers to the biological categories of male and female assigned at birth, whereas 'gender' relates to the psychological features, roles and expectations that are associated with these biological categories (Deaux, 1985). In this review, participants are categorised by sex: the research discussed here involved participants who were assigned female at birth and categorised as 'females', 'women' and 'girls', with sex taken to be a binary construct. However, there is increasing evidence that autistic individuals may not identify with their sex assigned at birth (Strang et al., 2014) and may not associate with a binary sex or gender identity (Bevan, 2017; Kristensen & Broome, 2015). Whilst it is not within the scope of this review to explore experiences of those who fall outside of the 'female assigned at birth' category, it is important to acknowledge that there are individuals who may identify as fitting within this group.

Research has suggested that the difference in male and female symptom presentation - such as being more likely to mask or suppress difficulties, known as camouflaging (e.g., Wood-Downie et al., 2021) - has created a diagnostic bias, with autistic females at disproportionate risk of not being identified (Loomes et al., 2017). Subsequently, many females may receive a diagnosis later than equivalent males (Begeer et al., 2013; Giarelli et al., 2010). This can mean that instead of receiving a diagnosis during childhood, many autistic females are not diagnosed until adolescence (Bargiela et al., 2016) when changes in social demands may make their difficulties more noticeable (Solomon et al., 2012).

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[1] Whilst 'autism spectrum disorder' is the current diagnostic label, this essay will henceforth refer to 'autism' because research has suggested that this is the term preferred by members of the UK autism community (Kenny et al., 2016). It is important to note that this refers to a majority preference, and that there is variation within preferences of language to be used. Wherever possible, when referring to a particular person it is advised to clarify with them how they wish to be described and this preference should supersede the published research recommendations (The National Autistic Society, 2024). However, for the purposes of this essay, language use will be guided by the existing understanding of current preferences of autistic individuals as guided by published research. This essay will therefore follow the guidelines from The National Autistic Society (2024) and use 'autism' in the place of 'autism spectrum disorder'. Identity-first language ('autistic person') will be used over person-first language ('person with autism').

The American Psychological Association's (2018) definition of adolescence is used in this review. It refers to the period of human development from approximately age 12 to age 19. This can be a challenging developmental period for autistic females. Moyse (2021) found that autistic females were at increased risk of leaving education in adolescence due to the difficulties that they encountered academically, socially, and emotionally. There is also an increased risk of developing mental health difficulties: research demonstrates that autistic females experience mental illness at higher rates than autistic males (Sedgewick et al., 2020) and non-autistic peers (O'Connor et al., 2023). It is possible that receiving an autism diagnosis could be an added stressor on the emotional wellbeing of adolescent females: although receiving a diagnosis can provide additional support, validation and acceptance for late-diagnosed females, research suggests that there can also be difficulties in the post-diagnosis period which impact negatively on well-being and identity, which will be the focus of this review (Harmens et al., 2022). These difficulties include a lack of care and support, a lack of acceptance and understanding from others, and stereotypical assumptions about autism (Harmens et al., 2022). Harmens et al. (2022) therefore suggest that females may benefit from support after diagnosis to manage difficult experiences arising in the post-diagnosis period.

To better understand what this support could involve, first the experiences of girls who received an autism diagnosis in adolescence will be explored to develop an understanding of possible difficulties in the post-diagnosis period. Suggestions for how individuals could be supported to manage these difficulties and better protect their emotional and mental wellbeing during this period will then be discussed.

Given the diagnostic bias, research into the experiences of autistic females is still in its infancy (Ayirebi & Thomas, 2023). Therefore, a narrative review was used to identify studies for this paper, as this approach can be utilised to explore topics that are under-researched to consider current evidence with a view to identify how the field may be advanced (Sukhera, 2022).

A scoping literature search was conducted across PsycINFO, Scopus, and Google Scholar. The search utilized the following keywords and their associated synonyms: "female autism diagnosis," "adolescence," "post-diagnosis difficulties", "post-diagnosis support" and "autistic experiences". Boolean operators (AND, OR) were used to refine and broaden the search results. Studies were included in the review if they explored the experiences of autistic females; discussed post-diagnosis experiences; considered autistic experiences during adolescence; and were published in the past ten years, either in peer-reviewed journals or as doctoral theses. Studies were excluded if they focused solely on male participants; if they only considered experiences of professionals and families of autistic individuals; and if they did not discuss experiences in the post-diagnosis period. Only a small number of studies were identified, due to the topic being in early stages of research, and therefore all papers that met the inclusion criteria are discussed here. See Appendix A for a table outlining the relevant studies identified for this review.

First, the findings that related to post-diagnosis difficulties were collated and organised into themes and presented in the following narrative review. Whilst key themes related to the experiences of autistic adolescent females are discussed in this review, it is important to note that no claims are made for a universal group experience. Autism is widely accepted as a complex, heterogenous condition where individuals present with unique and varied strengths, needs and developmental trajectories (Masi et al., 2017). This heterogeneity is reflected in the literature base around autistic adolescent females: whilst there is much consensus around experiences, there is also diversity within this (Milner et al., 2019). Therefore, any recommendations should be situated within a person-centred approach where the voice of the individual is central to their support (Da Mata Da Silva Costa, 2023).

Post-Diagnosis Experiences

Self-Identity

Post-diagnosis, many girls experienced a re-evaluation of their self-identity. Whilst there is evidence to suggest that this can be a positive experience of increased self-understanding (e.g. Colat-Parros, 2023; Harmens et al., 2022; Leedham et al., 2020), the re-evaluation of self-identity was challenging for many. Complicated emotions of grief and regret were attached to the diagnosis, as many wished they had been diagnosed sooner (Harmens et al., 2022). Some females experienced a sense of despair about how things could have been different, and how they need not have spent years feeling misunderstood by themselves and others (Leedham et al., 2020). Some experienced anger towards being overlooked leading to late diagnosis and consequential early struggles (Bargiela et al., 2016).

For others, difficulty was experienced in accepting the diagnosis. It led to feelings of shock, confusion and inadequacy because girls felt that a deficit had been identified in them (Zakai-Mashiach, 2023). Some girls may reject their diagnosis, viewing it as a disability and a sign of being abnormal (Da Mata Da Silva Costa, 2023). This view may be exacerbated by stereotypical representations of autism: some girls hid their diagnosis from peers as they were aware of negative stereotypes, and they felt disclosing it would cause damage (Zakai-Mashiach, 2023). Many felt that their autistic traits were not acceptable to others and therefore struggled with their sense of self in relation to how peers may evaluate them (Harmens et al., 2022). Due to not fitting society's understanding of autistic stereotypes, many females also experienced their diagnosis being questioned or disbelieved by others which, in turn, made them feel as if they belonged in neither neurotypical nor autistic communities (Harmens et al., 2022).

Family and Peers

As well as navigating their own reaction to diagnosis, research demonstrated that girls also experienced difficulties with how people around them reacted. Parents expressed complex, conflicting emotions as they came to terms with their child's diagnosis and what it might mean for their future (Craig, 2015). They shared concerns that the diagnosis would have ramifications in terms of employment and whether their daughters would be stigmatised (Colat-Parros, 2023; Gaffney, 2017). Parents also felt grief and anger towards late diagnosis, viewing it as a missed opportunity to access early intervention (Cridland et al., 2014). If girls identify that their caregivers have concerns around the diagnosis, it should be considered that this may exacerbate their own concerns and capacity for self-acceptance.

Some girls experienced emotional distress after sharing their diagnosis with their wider social network due to a lack of understanding of female presentations of autism (Leedham et al., 2020). School staff, peers and family members were reported to react with shock and disbelief, struggling to accept that the diagnosis was true because the individual did not fit with their understanding of autism (Colat-Parros, 2023; Leedham et al., 2020). Wider family members appeared particularly unwilling to accept the diagnosis and instead attributed behavioural struggles to poor parenting (Colat-Parros, 2023).

However, those whose diagnoses were believed then experienced further difficulties with prejudiced behaviour linked to stereotypical misunderstandings of autism (Leedham et al., 2020). Many noted changes in how others treated them, with stereotypical assumptions being made about their characteristics and abilities (Harmens et al., 2022). Adults' expectations of capability post-diagnosis might change, leading to girls being infantilised (Da Mata Da Silva Costa, 2023).

School

Relationships between families and schools had the potential to be strained following diagnosis. Girls and their parents attributed some level of blame to staff for not recognising their difficulties and referring them for assessment at an appropriate point (Moyse, 2021). It was felt that they had been misunderstood, unsupported and overlooked by teachers during their school experience (Colat-Parros, 2023; Cridland et al., 2014). Girls expressed the view that if their autism was identified by staff when they were younger, their school experiences would have been better (Colat-Parros, 2023). Delayed diagnosis restricts access to support services and early intervention, thus there was the implication that late identification on the part of school staff was partially responsible for autistic girls developing more severe mental health difficulties (Colat-Parros, 2023; Cridland et al., 2014).

Staff members' lack of understanding around autism in girls also contributed to a lack of suitable support in schools following the diagnosis (Moyse, 2021). Schools stated that they could not provide certain supports such as quiet areas because they did not have the capacity at their setting (Colat-Parros, 2023). It was also identified that there were often no procedures in place for providing support to pupils post-diagnosis: there were frequently no staff with specialised knowledge of how to support autistic pupils and limited, if any, opportunities were provided for girls to explore their feelings towards their new diagnosis (Colat-Parros, 2023).

Where support was provided, girls felt that it was not specific to autism or their individual needs (Colat-Parros, 2023). This aligns with research that suggests schools may be inclined to include pupils with autism diagnoses into intervention groups without a firm evidence base or careful consideration of the individual's needs (Gaffney, 2017). Furthermore, parental participants raised concerns around interventions being tailored for autistic males and therefore inappropriate for the girls receiving them (Cridland et al., 2014).

Services

In the research, there was very limited mention of individuals' experiences with support from external services in the post-diagnosis period. This is likely related to the scarcity of services available. Parents reported limited post-diagnosis support from health practitioners: they felt as if they received the diagnosis and then were left with no support to understand it and what it meant (Cridland et al., 2014). Research suggests that families are not adequately made aware of post-diagnostic support services for autistic girls, or how they can access relevant resources (Craig, 2015; Cridland et al., 2014).

McLinden and Sedgewick (2023) interviewed a range of professionals involved in the autism diagnostic process about their perceptions of the current diagnostic process. This group included CAMHS nurses, child and adolescent psychologists, and inclusion staff in schools. Some participants shared the view that diagnosis was not worthwhile due to a lack of post-diagnosis services and follow-up support (McLinden & Sedgewick, 2023). The diagnosis did not provide the girls with any support for autism-related needs, and provided a barrier to support with other mental health needs because services attributed their difficulties back to autism (McLinden & Sedgewick, 2023). Therefore, professionals expressed the view that girls were being given a diagnostic label and abandoned, with each service claiming not to hold responsibility for their support (McLinden & Sedgewick, 2023).

Situating Post-Diagnosis Difficulties within an Ecological Model

As outlined above, research suggests that post-diagnosis difficulties of adolescent girls occur at multiple levels, with individual struggles related to their sense of self set within a wider context of unhelpful treatment from others; stereotypical perceptions; and societal structures, policies and resources that do not provide adequate support.

Bronfenbrenner's (1977) Ecological Systems Theory proposes that human development occurs within a nested system of environments. Individuals are influenced not only by their immediate settings, but also the larger social contexts in which they are embedded (Bronfenbrenner, 1977). At a microsystemic level, individuals are impacted by relations within their immediate settings such as home, school and work. Relationships between these microsystems (for example, home/school interactions) make up the mesosystem. The exosystem extends the mesosystem to include major societal institutions such as neighbourhoods; mass media; local, state, and national governments; and the distribution of services. These structures influence and determine the experiences available in the meso- and micro-systems within them. Each of these layers is contained within the macrosystem, which refers to overarching institutional systems within a culture. The macrosystem is seen as a carrier of information and ideology, and includes wider values of economic, social, educational, legal, and political systems (Bronfenbrenner, 1977).

Situating post-diagnosis experiences within an ecological model serves to illustrate how girls' experiences are influenced by factors wider than their individual circumstances, as demonstrated in Figure 1. At the individual level, girls may experience difficulties with self-identity and navigating grief. Within the microsystem, they may struggle to navigate reactions of others and inappropriate educational support. Interactions in the mesosystem can be unsupportive due to strained relationships between family and school, family and community services, and family and wider family networks. Difficulties can be encountered within the exosystem as health and educational service infrastructure is not designed to prioritise support of autistic females.

Post-Diagnostic Support

For the second stage of this narrative review, the identified papers were reviewed again and findings that related to possible post-diagnosis support were collated and organised into themes. As identified above, due to difficulties beyond the level of the individual, change will need to be targeted at the wider contexts of the individual (Colat-Parros, 2023; Zakai-Mashiach, 2023). Therefore, the suggestions for support extracted from the reviewed literature are presented at multiple levels, resulting in recommendations that could be implemented by teachers, families, educational psychologists (EPs) and other professionals working with autistic females.

Individual Level

Research suggests that, following diagnosis, girls experience a re-evaluation of their identity. This may be a positive experience as it can have explanatory power, enable an increased sense of belonging and encourage self-acceptance (Colat-Parros, 2023; Harmens et al., 2022; Leedham et al., 2020). It may also be a negative experience as it can be associated with grief, regret, feelings of inadequacy and concerns about others' negative perceptions (Harmens et al., 2022; Leedham et al., 2020).

Therefore, post-diagnosis, autistic adolescent girls may benefit from individual level support to develop self-acceptance. This could be provided through tailored, individual interventions to explore self-identity along with professional psychotherapeutic support to navigate the process of accepting the diagnosis (Ayirebi & Thomas, 2023; Tomlinson et al., 2022). It has also been suggested that EPs could deliver individual level post-diagnosis work with autistic girls, using activities such as the Tree of Life and Drawing the Ideal Self to explore their constructions of identity (Da Mata Da Silva Costa, 2023). It should be recognised that the process of accepting a diagnosis can take time and, therefore, individuals are likely to need this

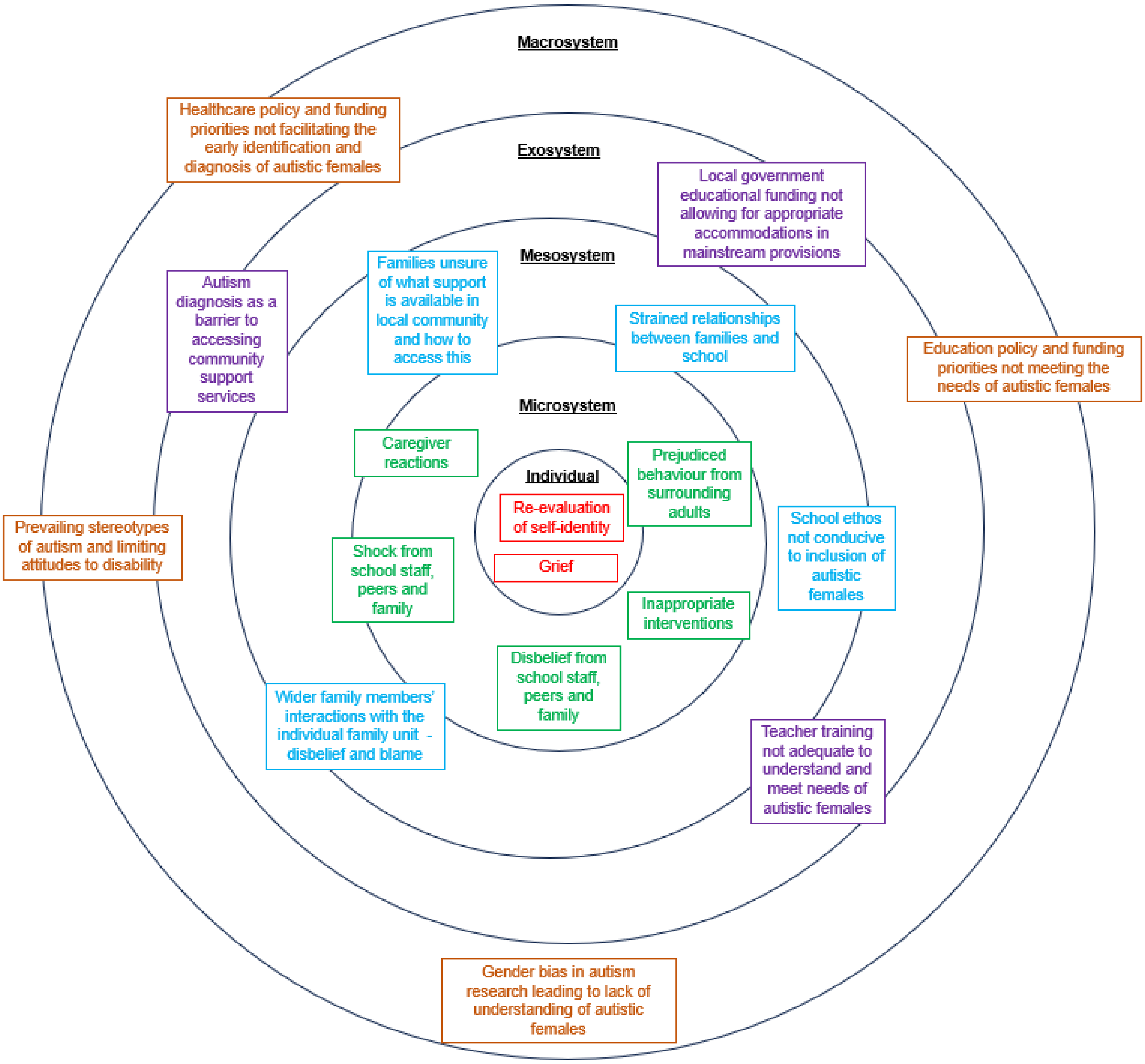

Figure 1

Ecological Model representing difficult post-diagnosis experiences of autistic girl

support to be ongoing (Leedham et al., 2020).

Actively engaging in activities to meet their own needs was also seen to support self-acceptance for autistic females (Leedham et al., 2020). In line with this, Zakai-Mashiach's (2023) study indicated that, post-diagnosis, girls felt they would have benefited from support to learn adaptive strategies and self-advocacy skills. Many girls also discussed using social media to understand their autistic identity by connecting with other autistic females and accessing information around autism (Da Mata Da Silva Costa, 2023). Assisting girls to identify and access safe online communities and resources may therefore support them to navigate their understanding of themselves post-diagnosis.

Beyond the Individual

Self-acceptance at the individual level, however, will continue to be difficult if set within a microsystem that does not accept the individual. Harmen's (2022) findings indicated that those who experienced greater levels of acceptance from others viewed diagnosis as more positive for their wellbeing than those who struggled with acceptance. This is reflected in the difficulties that girls experienced post-diagnosis due to the reactions of others: stereotyped beliefs around autism lead to upsetting reactions from adults and peers. Intervention could therefore be beneficial at the microsystemic level with EPs delivering workshops to education staff, families, and girls to explore their diagnosis and equip adults to be supportive during this process (Da Mata Da Silva Costa, 2023).

At the mesosystemic level, girls may be better supported in the post-diagnosis period by a school culture that promotes diversity and therefore allows the safe exploration of an autistic identity (Zakai-Mashiach, 2023). Stereotyped beliefs and treatment from others could be tackled through a whole-school approach, educating the school community about female autism with the aim of developing an inclusive ethos (Ayirebi & Thomas, 2023). Promoting peer awareness of female autism through anti-stigma programmes has also been found to foster inclusion (Ranson & Byrne, 2014). Involving autistic girls in this could serve both to promote more accurate understandings and enhance their sense of self-advocacy (Colat-Parros, 2023). Supporting the development of whole-school approaches is likely to be most effective if there is change at the exosystemic level: local governments could allocate funding for EPs to develop targeted organisational approaches and evidence-based training for staff and peers around inclusion for autistic females (Ayirebi & Thomas, 2023).

The above strategies for supporting autistic girls in the post-diagnosis period are reactive strategies: they identify changes that can be put in place following a diagnosis in adolescence. However, many of the identified difficulties – strained relationships with staff, disbelief of family members and peers, grief and self-identity struggles – are exacerbated by the fact that diagnosis occurred late and girls were therefore unable to access early intervention and support (Cridland et al., 2014). Late diagnosis needs to be tackled at a wider exosystemic level. A lack of understanding of female presentations of autism is believed to contribute to late identification on the part of educational staff and healthcare providers (Gray et al., 2021). Ongoing training for professionals in education and healthcare services is vital to increase awareness of autism in females and facilitate timely identification (Gray et al., 2021). However, changes at the exosystemic level will be ineffective if they are not set within the context of wider support from the macrosystem. To develop a better understanding of autism in females and effective support strategies, government policy and funding agendas will need to prioritise research and subsequent knowledge dissemination across educational, governmental and community settings (Leedham et al., 2020).

There must also, however, be a commitment to changing current practice based upon this research. Some professionals have indicated that training staff is not enough; many felt they already had strong understandings of female autism, but that this knowledge was not translating into formal changes to service delivery because government policy and procedures remained unchanged (McLinden & Sedgewick, 2023). Alongside focusing on research and training around female autism, therefore, government policy also needs to consider how this research can be used to establish appropriate pathways to early diagnosis and post-diagnosis support services in health, education, and social care teams (McLinden & Sedgewick, 2023). The knowledge and ability to identify female autism will do little to support individuals if it continues to be situated within a wider context where the infrastructure to support them does not exist.

The priority of individuals within the macrosystem is of vital importance in determining how they are treated within the layers because their experience of their immediate contexts is influenced by the ideologies, values, and resources of overarching systems (Allen et al., 2016). Figure 2 illustrates how post-diagnosis difficulties are interconnected, with the experiences at each level being influenced by the context of a macrosystem where government agendas do not prioritise research, funding, and support for autistic females. A key focus therefore needs to be utilising multi-agency working, conducting research, and influencing government policy on a wider level to develop an infrastructure that is designed to support inclusion of autistic girls (Colat-Parros, 2023).

Strengths, Limitations, and Avenues for Future Research

Given the diagnostic bias, research into the experiences of autistic females is still in its infancy and therefore the number of available papers is small (Ayirebi & Thomas, 2023). There is a very limited exploration of autistic adolescent females' experiences in general (Cridland et al., 2014), and even less into post-diagnosis experiences specifically. The under-researched nature of this topic area can be seen in the fact that three recent doctoral theses - Colat-Parros (2023), Da Mata Da Silva Costa (2023), and Moyse (2021) – identified the experiences of autistic adolescent females as an important gap in the literature. A key strength of the research selected is that it draws upon the experiences of autistic females directly and therefore involves them in the co-production of knowledge: previously, girls' voices have been missing in the research, with their views being represented by key adults instead

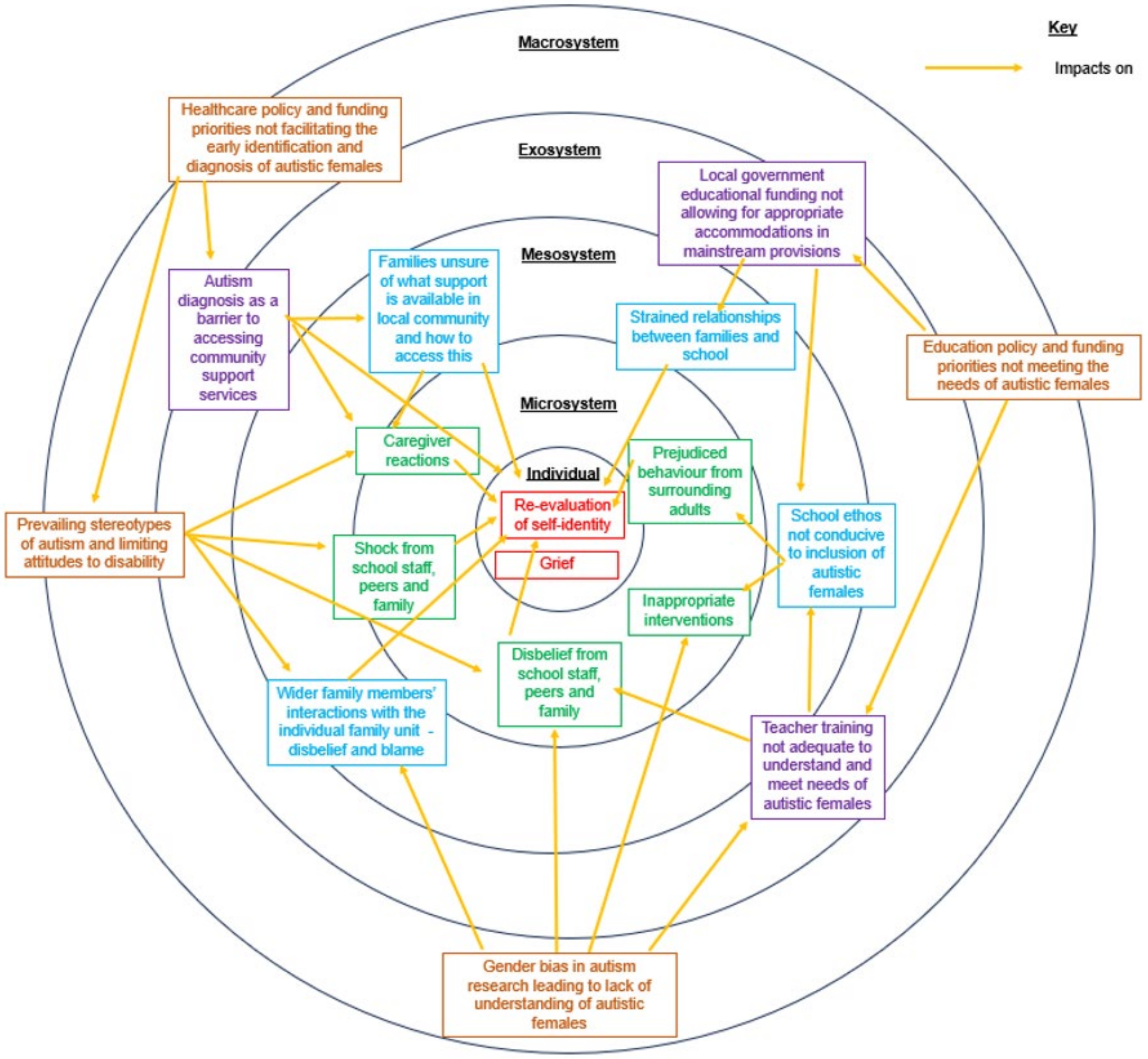

Figure 2

Ecological Model representing difficult post-diagnosis experiences of autistic girls and interrelationships between the systems

(Moyse, 2021). The inclusion of the girls' perspectives is vital: the Children and Families Act of 2014 demands that due regard be given to the views of the young person, to ensure that the support provided adequately meets their individual needs (Department for Education & Department of Health, 2015).

Due to the sparse literature base, however, there are limitations to much of the research discussed in this review. Four studies (Bargiela et al., 2016; Harmens et al., 2022; Milner et al., 2019; Zakai-Mashiach, 2023) explored the retrospective experiences of adult females. It should be noted that their memories of their post-diagnosis experiences may not be as detailed as participants who were more recently diagnosed, and that the strength of any emotions towards these experiences may have been moderated by time.

Three studies (Cridland et al., 2014; Mogensen & Mason, 2015; Zakai-Mashiach, 2023) included participants from countries other than the UK. These were included as they identified similar ideas to the UK-based research, but there may be differences in perception, knowledge and understanding of autism, and differences in support systems and structures between these countries. More research is needed into specific experiences of autistic individuals across cultures and countries - caution should be taken when applying findings from one to another (Kim, 2012).

Most of the existing research only explores the experiences of a narrow range of autistic girls: those who attended mainstream educational settings, were identified as cognitively able and who did not have speech and language needs. Therefore, the experiences discussed are not representative of a broader population of autistic females: more research is needed to determine what support may be effective for those with a wider profile of needs and in different educational settings (Ayirebi & Thomas, 2023).

Given the limitations of the literature base the information presented here should be considered tentatively. It must also be noted that this review drew on a scoping search of the literature only. To explore these initial tentative ideas in more depth, a systematic review of the post-diagnostic experiences of autistic adolescent females in the future will be beneficial. Nonetheless, we believe the current review provides important findings which will be useful to practitioners, such as Educational Psychologists.

This review focused only on the difficulties in the post-diagnosis period. There is evidence to suggest, however, that receiving a diagnosis can have positive effects that may be supportive during this time (e,g, Colat-Parros, 2023; Harmens et al., 2022; Leedham et al., 2020). It would, therefore, be beneficial for future research to focus on exploring the positive experiences in the post-diagnosis period and consider how these could serve as protective factors against the more difficult experiences.

Conclusion

In conclusion, post-diagnosis difficulties experienced by autistic girls occur at multiple different levels and therefore support will need to be provided at each of these levels. At the individual level, girls may benefit from individualised professional support to navigate their self-identity and to learn adaptive strategies, develop self-advocacy skills and access supportive communities and resource. Workshops delivered to education staff, families, and girls to explore the diagnosis together could reduce unhelpful reactions and treatment from others at a microsystemic level. At the mesosystemic level, development of whole-school approaches that promote diversity, acceptance, staff and peer awareness, and stigma-reduction could lead to girls feeling better supported by the school ethos around them. This may be most effective if support is provided for this at exosystemic level, through local government funding and prioritisation of EP time to develop organisational approaches and targeted training. Ultimately, however, the changes at each level will be most effective if macrosystemic changes occur to government policy, practices, and funding to prioritise development of societal infrastructures that will better support autistic females.

Disclosure Statement

The authors report there are no competing interests to declare.

References

Allen, K.-A., Vella-Brodrick, D., & Waters, L. (2016). Fostering school belonging in secondary schools using a socio-ecological framework. *Educational and Developmental Psychologist*, 33(1), 97–121. https://doi.org/10.1017/edp.2016.5

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed.). https://doi.org/10.1176/appi.books.9780890425596

American Psychological Association. (2018). Adolescence. In *Dictionary of Psychology*. https://dictionary.apa.org

Ayirebi, K., & Thomas, G. (2023). What could be considered as effective support for autistic females in high school? A systematic literature review. *Journal of Research in Special Educational Needs*, 1-13. https://doi.org/10.1111/1471-3802.12641

Bargiela, S., Steward, R., & Mandy, W. (2016). The Experiences of late-diagnosed women with autism spectrum conditions: An investigation of the female autism phenotype. *Journal of Autism and Developmental Disorders*, 46(10), 3281–3294. https://doi.org/10.1007/s10803-016-2872-8

Begeer, S., Mandell, D., Wijnker-Holmes, B., Venderbosch, S., Rem, D., Stekelenburg, F., & Koot, H. M. (2013). Sex differences in the timing of identification among children and adults with autism spectrum disorders. *Journal of Autism and Developmental Disorders,* 43(5), 1151–1156. https://doi.org/10.1007/s10803-012-1656-z

Bevan, R. (2017). *Gender identity and children with autism spectrum disorder. The Association for Child and Adolescent Mental Health*. https://www.acamh.org/research-digest/gender-identity-children-autism-spectrum-disorder/

Bronfenbrenner, U. (1977). Towards an experimental ecology of human development. *American Psychologist*, 513–532.

Colat-Parros, L. (2023). *School experiences of autistic girls who were diagnosed in adolescence: Views of young people and their parents/carers* [Doctoral Thesis, University College London]. UCL Discovery. https://discovery.ucl.ac.uk/id/eprint/10175492/

Craig, R. A. (2015). *"I don't know what's the Asperger's and what's me": An IPA exploration of young people and mothers' experiences of receiving and living with an autism spectrum condition diagnosis during adolescence* [Doctoral Thesis, University of Glasgow]. Enlighten Theses. https://eleanor.lib.gla.ac.uk/record=b3127716

Cridland, E. K., Jones, S. C., Caputi, P., & Magee, C. A. (2014). Being a girl in a boys' world: Investigating the experiences of girls with autism spectrum disorders during sdolescence. *Journal of Autism and Developmental Disorders*, 44(6), 1261–1274. https://doi.org/10.1007/s10803-013-1985-6

Da Mata Da Silva Costa, E. (2023). *"It's like the only way I have ever lived, I can't think of anything else": An interpretative phenomenological analysis of the lived experiences of adolescent autistic girls from minoritised ethnic backgrounds* [Doctoral Thesis, University of East Anglia]. UEA Digital Repository. https://ueaeprints.uea.ac.uk/id/eprint/93114/

Deaux, K. (1985). Sex and gender. *Annual Review of Psychology*, 36(1), 49–81. https://doi.org/10.1146/annurev.ps.36.020185.000405

Department for Education & Department of Health. (2015). *Special educational needs and disability code of practice: 0 to 25 years*. https://www.gov.uk/government/publications/send-code-of-practice-0-to-25

Gaffney, J. C. (2017). *'It's autism, it's just a name': Exploring the impact of autism spectrum diagnosis with adolescent females using Interpretative Phenomenological Analysis.* [Doctoral Thesis, University of Sheffield]. White Rose eTheses online. https://etheses.whiterose.ac.uk/18724/

Giarelli, E., Wiggins, L. D., Rice, C. E., Levy, S. E., Kirby, R. S., Pinto-Martin, J., & Mandell, D. (2010). Sex differences in the evaluation and diagnosis of autism spectrum disorders among children. *Disability and Health Journal*, 3(2), 107–116. https://doi.org/10.1016/j.dhjo.2009.07.001

Gray, L., Bownas, E., Hicks, L., Hutcheson-Galbraith, E., & Harrison, S. (2021). Towards a better understanding of girls on the Autism spectrum: Educational support and parental perspectives. *Educational Psychology in Practice*, 37(1), 74–93. https://doi.org/10.1080/02667363.2020.1863188

Harmens, M., Sedgewick, F., & Hobson, H. (2022). The quest for acceptance: A blog-based study of autistic women's experiences and well-being during autism identification and diagnosis. *Autism in Adulthood: Challenges and Management*, 4(1), 42–51. https://doi.org/10.1089/aut.2021.0016

Kenny, L., Hattersley, C., Molins, B., Buckley, C., Povey, C., & Pellicano, E. (2016). Which terms should be used to describe autism? Perspectives from the UK autism community. *Autism*, 20(4), 442–462. https://doi.org/10.1177/1362361315588200

Kim, H. U. (2012). Autism across cultures: Rethinking autism. *Disability & Society*, 27(4), 535–545. https://doi.org/10.1080/09687599.2012.659463

Kristensen, Z. E., & Broome, M. R. (2015). Autistic traits in an internet sample of gender variant UK adults. *International Journal of Transgenderism*, 16(4), 234–245. https://doi.org/10.1080/15532739.2015.1094436

Leedham, A., Thompson, A. R., Smith, R., & Freeth, M. (2020). 'I was exhausted trying to figure it out': The experiences of females receiving an autism diagnosis in middle to late adulthood. *Autism: The International Journal of Research and Practice*, 24(1), 135–146. https://doi.org/10.1177/1362361319853442

Loomes, R., Hull, L., & Mandy, W. P. L. (2017). What is the male-to-female ratio in autism spectrum disorder? A systematic review and meta-analysis. *Journal of the American Academy of Child & Adolescent Psychiatry*, 56(6), 466–474. https://doi.org/10.1016/j.jaac.2017.03.013

Masi, A., DeMayo, M. M., Glozier, N., & Guastella, A. J. (2017). An overview of autism spectrum disorder, heterogeneity and treatment options. *Neuroscience Bulletin*, 33(2), 183–193. https://doi.org/10.1007/s12264-017-0100-y

McLinden, H., & Sedgewick, F. (2023). 'The girls are out there': Professional perspectives on potential changes in the diagnostic process for, and recognition of, autistic females in the UK. *British Journal of Special Education*, 50(1), 63–82. https://doi.org/10.1111/1467-8578.12442

Milner, V., McIntosh, H., Colvert, E., & Happé, F. (2019). A qualitative exploration of the female experience of autism spectrum disorder (ASD). *Journal of Autism and Developmental Disorders*, 49(6), 2389–2402. https://doi.org/10.1007/s10803-019-03906-4

Mogensen, L., & Mason, J. (2015). The meaning of a label for teenagers negotiating identity: Experiences with autism spectrum disorder. *Sociology of Health & Illness*, 37(2), 255–269. https://doi.org/10.1111/1467-9566.12208

Moyse, R. (2021). *Missing: The autistic girls absent from mainstream secondary schools* [Doctoral Thesis, University of Reading]. CENTAUR: Central Archive at the University of Reading. https://doi.org/10.48683/1926.00097405

O'Connor, R. A., Doherty, M., Ryan-Enright, T., & Gaynor, K. (2023). Perspectives of autistic adolescent girls and women on the determinants of their mental health and social and emotional well-being: A systematic review and thematic synthesis of lived experience. *Autism*, 1-13. https://doi.org/10.1177/13623613231215026

Ranson, N. J., & Byrne, M. K. (2014). Promoting peer acceptance of females with higher-functioning autism in a mainstream education setting: A replication and extension of the effects of an autism anti-stigma program. *Journal of Autism and Developmental Disorders*, 44(11), 2778–2796. https://doi.org/10.1007/s10803-014-2139-1

Sedgewick, F., Leppanen, J., & Tchanturia, K. (2020). Gender differences in mental health prevalence in autism. *Advances in Autism*, 7(3), 208–224. https://doi.org/10.1108/AIA-01-2020-0007

Solomon, M., Miller, M., Taylor, S. L., Hinshaw, S. P., & Carter, C. S. (2012). Autism symptoms and internalizing psychopathology in girls and boys with autism spectrum disorders. *Journal of Autism and Developmental Disorders*, 42(1), 48–59. https://doi.org/10.1007/s10803-011-1215-z

Strang, J. F., Kenworthy, L., Dominska, A., Sokoloff, J., Kenealy, L. E., Berl, M., Walsh, K., Menvielle, E., Slesaransky-Poe, G., Kim, K.-E., Luong-Tran, C., Meagher, H., & Wallace, G. L. (2014). Increased gender variance in autism spectrum disorders and attention deficit hyperactivity disorder. *Archives of Sexual Behavior*, 43(8), 1525–1533. https://doi.org/10.1007/s10508-014-0285-3

Sukhera, J. (2022). Narrative reviews: Flexible, rigorous, and practical. *Journal of Graduate Medical Education*, 14(4), 414–417. https://doi.org/10.4300/JGME-D-22-00480.1

The National Autistic Society. (2024). *How to talk and write about autism*. https://www.autism.org.uk/contact-us/media-enquiries/how-to-talk-and-write-about-autism

Tomlinson, C., Bond, C., & Hebron, J. (2022). The mainstream school experiences of adolescent autistic girls. *European Journal of Special Needs Education*, 37(2), 323–339. https://doi.org/10.1080/08856257.2021.1878657

Wood-Downie, H., Wong, B., Kovshoff, H., Mandy, W., Hull, L., & Hadwin, J. A. (2021). Sex/gender differences in camouflaging in children and adolescents with autism. *Journal of Autism and Developmental Disorders*, 51(4), 1353–1364. https://doi.org/10.1007/s10803-020-04615-z

Whitlock, A., Fulton, K., Lai, M.-C., Pellicano, E., & Mandy, W. (2020). Recognition of girls on the autism spectrum by primary school educators: An experimental study. *Autism Research*, 13(8), 1358–1372. https://doi.org/10.1002/aur.2316

Zakai-Mashiach, M. (2023). "I was like a bird without wings": Autistic women's retrospective experiences in general schools. *Journal of Autism and Developmental Disorders*, 53(11), 4258–4270. https://doi.org/10.1007/s10803-022-05717-6

Appendix A

Table outlining features of the studies explored throughout the review

Citation	Country	Focus	Participants	Age of participants during study	Age of participants at diagnosis
Ayirebi and Thomas (2023)	UK	A literature review of effective support for autistic females in high school	Autistic children and young people / Parents of autistic children and young people	11-19 / Any	Unknown
Bargiela et al., (2016)	UK	Framework Analysis investigating the female autism phenotype and its impact upon the under recognition of autism in girls and women.	14 autistic women	22-30	15-30
Colat-Parros (2023)	UK	Reflexive thematic analysis of school experiences of autistic girls who were diagnosed in adolescence: views of young people and their parents/carers (doctoral thesis)	8 autistic girls / 5 parents of autistic girls	16-25 / Any	15-18
Craig (2015)	UK	IPA exploration of young people and mothers' experiences of receiving a diagnosis of autism and life during adolescence (doctoral thesis)	1 autistic girl + 3 autistic boys/ 4 mothers	14 -16/ Any	12-15
Cridland et al., (2014)	Australia	IPA exploration of the experiences of autistic girls during adolescence	3 autistic girls / 5 mothers of autistic girls	16-17 /Any	12-14
Da Mata Da Silva Costa (2023)	UK	IPA exploration of the lived experiences of adolescent autistic girls from minoritized ethnic backgrounds (doctoral thesis)	5 autistic girls	14-16	6-15

Harmens et al., (2022)	UK, USA, Australia	Thematic analysis of blogs written by autistic women about experiences and wellbeing during autism identification and diagnosis	23 autistic women	18+	4-49
Leedham et al., (2020)	UK	IPA exploration of the experiences of females receiving an autism diagnosis in middle to late adulthood	11 autistic females	43-64	40-62
Milner et al., (2019)	UK	A thematic analysis of the female presentation and experiences of autism from the perspective of autistic females and their mothers	18 autistic females / 4 mothers	11-55 / Any	Unknown
Mogensen and Mason (2015)	Australia	Thematic analysis of autistic teenagers' experiences of their autism diagnosis	2 autistic girls + 3 autistic boys	13-19	Unknown
Moyse (2021)	UK	Thematic analysis of autistic adolescent girls' key positive and negative experiences of secondary school (doctoral thesis)	10 autistic girls	12-15	8-15
Zakai-Mashiach (2023)	Israel	Thematic analysis of autistic woman retrospectively exploring their school experiences	8 autistic women	19-29	3.5-15