

How do teachers, therapists and others, as frontline' first responders' in Early Childhood, gather evidence to aid identification in the screening process?

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Cues & Clues: Early Indicators of Autism in Young Girls



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Where are the 'lost' girls?



Early identification of Autism spectrum disorders (ASD) is imperative for earlier intervention. Such targeted supports and interventions often lead to improved developmental outcomes [1]. While autism has historically been considered a disorder predominantly seen in males [2, 3], and despite modern population studies indicating a more balanced male-to-female ratio of 2-3:1 [4], **boys receive an autism diagnosis four times more frequently than girls** [5].

Although the core characteristics of autism are typically present in children before three years of age [2], girls are frequently unrecognised and undiagnosed in early childhood [6, 7].

There is a **striking lack of evidence exploring the gender differences in autism** symptom presentation, especially in young children.

Additionally, most of the available research on autism has been conducted with predominately male samples.

Much of the available research exploring gender differences in autism symptoms have mixed results. For instance, when compared to boys with autism, girls may show similar or increased levels of social communication difficulties but less or different types of restricted and repetitive behaviour (RRB) [9]. Conversely, heightened overall levels of parent-reported behavioural and emotional problems may increase the likelihood of an autism diagnosis in girls rather than boys [10]. Girls may be more likely to use mimicking to navigate social situations, such as imitating adults, peers, or social interactions seen on tv shows or movies (Hiller et al., 2016). Mimicking behaviour, paired with an unusually strong desire to fit in with peers, may mask core diagnostic criterion for an ASD diagnosis, such as deficits in social-emotional reciprocity [11].

Backer van Ommeren et al. (2017) used the Interactive Drawing Test (IDT) to explore the sex differences in the reciprocal behaviour of children with autism.

The results indicated that girls with ASD demonstrated more reciprocal behaviour than boys with ASD, such as the ability to reciprocate the researcher's drawing actions.

Other research has investigated the clinical presentation of autism symptoms in girls outside the stereotypical domain. While the results have been conflicting, some studies found that girls are more likely to show internalising problems than boys and less likely to show externalising problems [13-15].

Conversely, other research has suggested that externalising behaviour is of greater concern for girls rather than boys. For instance, [16] found that girls may show a strong desire to maintain stringent control over play activities, with subsequent tantrums if rules were ignored.

These inconsistencies may help explain why, **girls with autism often get diagnosed much later than boys**. Sometimes not until their teenage years, and usually only after erosion to their mental health state (this may show up as an eating disorder, through self-harm, or severe anxiety) [2]. Our research aims to address the following research question:

What is known about how girls with autism present in early childhood?