



14th Autism-Europe International Congress

Quality of Life - Research, Policy & Practice



Book of Abstracts

Part 3





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inclusive and supportive of neurodivergent children and adults. It brings together professionals to reflect, learn, and move away from outdated ideas that view neurodivergence as a deficit. The CoP focused on shared values and practical ways to implement neuro-affirming practice through national and local meetings. Members included neurotypical and neurodivergent professionals and professionals from neurodivergent families. Participants represented sectors such as education, health, higher education, government, and social care. A key challenge was encouraging people to shift from a 'medical model' that focuses on 'fixing' individuals to a 'neurodiversity paradigm' that values differences. Participants appreciated the opportunity to connect with others and reflect. The core principles of neuro-affirming practice continue to evolve, guided by neurodivergent voices. The group agreed on five key values: (1) Nothing about us without us - Neurodivergent people should be involved in decisions about them. (2) Difference, not deficit – Differences are part of human diversity, not flaws to be fixed. (3) Supporting authenticity - People should feel safe to be themselves. (4) Listening without judgment - Listening with an open mind and without assumptions. (5) Universal neuro-affirming practice - Making all environments more accessible and affirming for neurodivergent people. Looking ahead, participants committed to sharing their learning with colleagues, reflecting on unconscious biases, and applying a neuro-affirming approach in their daily work.

P2.10.14 - Exploration of the ways that diagnosis can contribute to misrepresentation of need and how this links with young people with Autism being 'out of school'.

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Trigger warning: No Trigger Warning

Practical impact: It has been widely demonstrated that a high proportion of people diagnosed with autism also have traits of other neurodivergent conditions. Though this knowledge offers the potential to contribute to a deeper understanding of the person, there is evidence that this does not translate to the lived experience of many young people with autism. Given the range and diversity of the conditions that can be described as overlapping with autism, in order to make an adequate assessment of a person and their needs, it follows that it is necessary not only to be able to identify associated traits within the individual, but to understand the unique ways in which these traits impact, or are likely to impact upon their life. Whether or not the extent of the presence of these traits is sufficient to meet diagnostic thresholds, it is necessary to give consideration to whether or not diagnosis or acknowledgement of overlapping conditions is likely to contribute to the needs of the person being met more effectively.

Not all conditions considered to be overlapping with autism are clinically recognised and there is debate as to whether some of these are distinct neuro-types or should be characterised as a profile of autism. PDA (sometimes referred to as RDA), is one such condition/term. There is a risk that the debate and controversy surrounding conditions/terms such as these can be misinterpreted by professionals as a dismissal of the notion that there are some young people with this type of autism profile – and that for their support needs to be appropriately and effectively met requires distinct approaches and strategies.

Existing research recognises that many autistic people experience significant anxiety and trauma. The purpose of this study would be to build on existing research in this area and to further explore the differences in what constitutes trauma in people with autism, and how autistic people experience and respond to trauma. It would also explore the potential links between trauma and people who may be described as having a PDA profile and examine the extent to which, and ways in which diagnostic assessment may contribute to a more meaningful understanding of the needs of this particular cohort within the autistic population.

We have worked for a number of years with young people with autism who are not attending school or engaging in education. Flexible Education practice is informed by experience of





supporting this particular cohort and their families. The knowledge that has been uncovered highlights the importance of continuous review and close scrutiny of the widely accepted notions of what constitutes 'best practice' for professionals supporting young people with autism. We have also learned the importance of effective collaboration between educators and other professionals and have been able to evidence ways that meaningful 'joined up working' has led to positive outcomes and a better quality of life for young people with autism who have previously been unable to engage in education.

By highlighting the ways in which 'best practice' and it's interpretation by professionals within the education system and social care systems has lead to the needs of young people in our Flexible Education cohort being misunderstood, we have been able to demonstrate how unmet need can create barriers to education and to engagement with the wider world among learners. Effectively and appropriately challenging 'best practice' in autism education and implementing strategies based on the perspective of autistic young people and their families can have a transformative effect on quality of life and can provide a pathway towards a successful life as an adult with autism. We hope that through this research we can contribute to the continual development of 'emerging practice' which we hope can lead to successful outcomes for more young people with autism whose unique learning needs have previously been misrepresented and misunderstood.

Abstract body: Introduction

Working with autistic young people non-attending school, Flexible Education approaches have explored and learned about the unique challenges faced by these young people and families. Common traits are present in this cohort whose specific educational needs are under-researched and widely misunderstood. Practice is informed by learning from each person supported. It is recognised that barriers to engagement in learning and school attendance can be traced back to unmet need.

Methodology

Use of case studies and predominantly qualitative data, reinforced with quantitative data, to uncover the ways in which the needs of learners can be misinterpreted. Exploration of how this links to diagnosis and how this has resulted in young people 'falling through the gaps' in the education and social care systems.

Expected outcomes

By understanding the ways that systemic failure can lead to trauma in young people with this particular profile of autism and the resulting risks posed by an expectation for people to conform to a system within which their needs are misrepresented. By uncovering knowledge and practice profiles the case studies represent how a different approach can lead to outstanding outcomes for young people within this cohort.

Implications

The research aims to showcase a comprehensive understanding of what 'Reasonable Adjustments' can be made by schools/Local Authorities within current systems to ensure that all young people have equal chances of success. Current successes highlight that with systemic change it may be possible to address the dramatic increase in young people with autism who are 'out of school'.

P2.10.15 - Differential associations between features of autism and internalizing and externalizing behaviours: a transdiagnostic approach

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Trigger warning: No Trigger Warning

Practical impact: The research findings offer an opportunity to target support for children with emotional and behavioural difficulties and autistic features. This includes those who have an autistic diagnosis, and those who do not. We believe the impact will lie in supporting emotional and behavioural difficulties by taking account of the child's autistic features. For example, a child's externalizing behaviours might benefit from support for their social communication (pragmatic language) while a child's difficulty with change in routine might benefit from specific emotion-related support. Beyond the potential application in education and home settings we believe that the transdiagnostic approach taken in this study will reinforce new research and policy initiatives that challenge the limitations of traditional diagnostic categories, calling for a more needs-led and less diagnostic-led way to support children who have both emotional and behavioural challenges and autistic features.

Abstract body: Introduction

While many autistic children have high levels of internalizing or externalizing behaviours, research seldom examines whether these behaviours are differentially associated with key features of autism. The current study used a transdiagnostic approach to characterize the inter-relationship between restricted and repetitive behaviours (RRBs) and social communication autistic features, and internalizing and externalizing behaviours.

Method

The study included 136 6-7 year-olds with school-identified emotional and behavioural difficulties. Parents reported on their child's current repetitive behaviour using The Repetitive Behaviour Questionnaire-2 (Leekam et al., 2007) and their difficulties with pragmatic language social communication using the Revised Children's Communication Checklist (Wellnitz et al., 2021). Internalizing and externalizing were measured using The Strengths and Difficulties Questionnaire (Goodman et al., 1997). Regression analyses examined differential and relative contributions made by RRBs and pragmatic language to internalizing and externalizing behaviours.

Results

RRBs, and particularly the insistence on sameness subdomain, made a stronger contribution than pragmatic language in the regression model for internalizing behaviours. For externalizing behaviours, the opposite was true; pragmatic language made a stronger contribution than RRBs. RRBs – specifically repetitive sensory and motor behaviours subdomain – only made a significant contribution to externalizing when entered before pragmatic language.

Discussion

By characterising the inter-relationship between autistic features and internalising and externalizing behaviours beyond traditional, categorically defined diagnostic boundaries, these results clarify potential target areas for supporting children with emotional and behavioural difficulties. For example, externalising behaviours might benefit from support for pragmatic language while difficulty with change in routine might benefit from emotion-related support.

Plain English version:

Many autistic children experience emotional and behavioural challenges. These are often classifed in research as *internalizing behaviours* (e.g. nervousness, fearful behaviour) and *externalizing behaviours* (e.g.aggressive, impulsive behaviour). Very few studies have explored how internalizing and externalizing behaviours are associated with the key autistic features of *restricted and repetitive behaviours* (*RRBs*) and *social communication behaviours*.

We used a transdiagnostic approach to study this association - setting aside diagnosis to focus only on autistic features themselves in children with emotional and behavioural difficulties identified by their school. Parents of 6-7-year-olds completed three questionnaires measuring (a) RRBs, (b) language aspects of social communication (pragmatic language) and (c) internalizing and externalising behaviours. These questionnaires were The Repetitive Behaviour Questionnaire-2 (Leekam et al., 2007), the Revised Children's Communication Checklist (Wellnitz et al., 2021) and





The Strengths and Difficulties Questionnaire (Goodman et al., 1997).

Using a statistical technique called regression analysis we examined the relative contribution of each autistic feature to internalizing and externalizing. We found that RRBs, and particularly its insistence on sameness subdomain, associated more strongly with internalizing than did pragmatic language. For externalizing behaviours, the opposite was true; pragmatic language made a stronger contribution than RRBs.

These results have practical implications. They could help professionals to identify target areas for supporting children with emotional and behavioural difficulties by focusing on support for the child's autistic features. For example, externalizing behaviours might benefit from support for social communication (pragmatic language) while difficulty with change in routine might benefit from emotion-related support.

P2.10.16 - Resting-state EEG features for differentiating autism

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Trigger warning: No Trigger Warning

Practical impact: It could streamline the diagnostic process, reduce reliance on subjective behavioral assessments, and facilitate earlier, more targeted interventions.

Abstract body:

Autism diagnosis relies heavily on behavioral observation, often leading to delays as symptoms typically become evident when social demands surpass capabilities. Identifying objective biological markers could enable earlier diagnosis and timely intervention to support development.

This study investigated resting-state eyes-closed EEG signals from 190 individuals from a psychiatric hospital dataset, focusing on distinguishing autistic individuals from those with other ICD-10 classified psychiatric disorders with overlapping behavioral features. Inter-electrode coherence within specific frequency bands and power spectrum density were evaluated.

Preliminary findings revealed trends suggesting distinct spatial distributions of power spectrum between autism and chosen psychiatric conditions. Ongoing efforts include detailed statistical analyses and the implementation of machine learning models to refine and validate these findings.

The ability to identify EEG features that differentiate autistic subjects has significant implications for clinical practice. It could streamline the diagnostic process, reduce reliance on subjective behavioral assessments, and facilitate earlier, more targeted interventions.

P2.10.17 - The road from Autism to Neurodiversity: Rewriting History! How Advocacy Transformed the Autism Narrative

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Trigger warning: No Trigger Warning





Practical impact: By raising awareness about the history of autism advocacy and the evolving understanding of autism, the presentation can help to reduce stigma and promote greater acceptance of autistic people in society.

Abstract body: The presenter has been working in the field of autism advocacy for nearly 20 years, both at national and European level. In her presentation, she consistently emphasizes the importance of advocacy, as (self)advocates (expert by experience) are the one who have repeatedly rewritten the history of autism and placed the concept in a new context. This presentation seeks to answer the following questions:

- How do social movements and advocacy influence attitudes towards autism, and what does this result in terms of expressions we use?
- In parallel, how have official classification categories (ICD, DSM) and the prevalence of autism changed?
- Why did neurodiversity only come into focus in the 2020s, even though the concept is over 30 years old?
- Does the term (and approach) of neurodiversity only offer advantages or are there also disadvantages?
- Did the principles of neuro-affirming therapy arrive with neurodiversity, or did they already exist long before?

The presentation draws on the presenter's personal experiences and extensive knowledge of autism advocacy, as well as on the literature on the subject (among others: Autism Europe guidelines, Prof. Fred V. Volkmar, Mitzi Waltz, Prof. Stephen Shore, Prof. Roy Richard Grinker, Ros Blackburn, Steve Silberman, Dr Damian Milton, Judy Singer)

P2.11.01 - How autistic adults communicate.

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Trigger warning: No Trigger Warning

Practical impact: These findings have implications for neurotypicals engaging in conversation with autistic people in any setting but particularly in environments were autistic people have to communicate with neurotypicals and experience high levels of stress, such as healthcare. Autistic people have described the challenges of communicating, what these challenges are and how they can be supported when communicating. They also affirm the strengths and joy that can be associated with autistic communication and potentially the benefits to be gained in communicating with other autistic people.

Abstract body: Introduction

The autistic experience of communication has not been well reflected in the literature. This study explored autistic individuals' perspectives on communication with others to address these gaps in the literature.

Methods

A qualitative design was used to explore eleven autistic people's communication experience in semi-structured one-to-one interviews. All participants spoke English fluently. Data were analysed by reflexive thematic analysis.

Outcome

Analysis generated three themes; Autistic joy in communication, I want to be understood, and "When I'm stressed, I'm very autistic".

When participants engaged in conversation with other autistic adults, autistic joy in communication





was apparent. Autistic communication was described as flowing easily and reciprocal; conversations contained no hidden meanings, was direct, and got to the 'nitty gritty' quickly. Where conversations included tangential information, this was experienced as advantageous to reciprocity and enjoyable. In contrast, communication with neurotypicals was often experienced as anxiety-provoking. Participants experienced frustration that their communicative intentions were misunderstood and that neurotypicals did not understand the challenges they experienced in communicating. Participants reported that communication caused stress but was also impacted by stress.

Implications

These findings increase our understanding of communication in autistic adults and affirm the strengths of autistic communication in an autistic dyad. They have particular implications for neurotypicals engaging in conversation with autistic people, such as those in the helping professions, and in stressful situations such as healthcare settings.

Plain English version: This study sought to answer the question - how do autistic people, who speak fluent English communicate? Eleven autistic people were asked to describe their experience of communicating with others. Interviews were conducted in one-to-one situations and the results recorded and analysed in detail. Three themes captured the essence of what was said. These were - Autistic joy in communication, I want to be understood, and "When I'm stressed, I'm very autistic".

When autistic people talked to other autistic people, they reported experiencing joy and two-way, flowing conversation. In contrast, communication with non-autistic people was experienced as frustrating as autistic people felt that the intentions behind their communication were misunderstood and that their challenges with communication were not appreciated. They also said that communication caused them to feel stress, but that communication also became more difficult because of stress. These are important findings for both non autistic and autistic people but are particularly important for professionals who communicate with autistic people in stressful situation such as healthcare or court settings. They are also important findings as they allow autistic people to recognise and celebrate the strengths of their communication style.

P2.11.02 - Exploring Communication Partner Training (CPT) for Autistic Adults and their Communication Partners: A novel approach to social communication support

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Trigger warning: No Trigger Warning

Practical impact: Our paper was co-created by a mixed-neurotype team of authors, with the intent to change how service providers view and approach social communication support for autistic adults. The paper focuses on applying Communication Partner Training (CPT), a social communication support model well-established with other populations, to support autistic adults and their communication partners to improve communication effectiveness. This work can have a positive practical impact for autistic people by introducing them to a novel way of thinking about social communication support - one that is non-pathologizing and emphasizes how others can change their behaviour and communication to better support autistic people. We hope that by sharing this work with other healthcare professionals and families, we can help shift perspectives on what social communication support can look like, and lay the groundwork for more neurodiversity-affirming supports that embrace authentic, autistic ways of communicating.

Abstract body: INTRODUCTION & CENTRAL QUESTION

Autistic and neurotypical people often have trouble understanding each other's experiences. Despite evidence that these breakdowns in communication occur at the interactional level, existing social communication interventions often focus only on changing autistic behaviour and teaching neurotypical social skills. Our mixed-neurotype team of authors published a Perspectives piece in





Autism in Adulthood discussing how communication partner training (CPT), an umbrella term for programs that teach strategies to people with communication differences and their communication partners, is a valuable framework to guide future social communication support for autistic adults and their neurotypical communication partners.

METHODS/APPROACH & OUTCOME

Our authorship team, led by a speech-language pathologist, applied the existing CPT literature, mostly established for adults with acquired communication differences (e.g., TBI), by synthesizing key principles and applying them to existing literature for autistic adults. We outlined how three components of CPT programs can be applied to support autistic people by (i) promoting increased knowledge and understanding of communication differences; (ii) adapting the communication environment; (iii) and identifying collaborative strategies that people both parties can use to foster meaningful interactions.

DISCUSSION/IMPLICATIONS

We provide recommendations for future CPT program development within autism research and discuss current research projects we are involved in to extend this work. Some recommendations include the need to acknowledge the dynamic impact of intrinsic and extrinsic factors on communication and intersecting identities, and the importance of centring the lived experience of autistic adults and their communication partners when co-designing future CPT programs.

Plain English version: INTRODUCTION & CENTRAL QUESTION

Autistic and neurotypical people often have trouble understanding each other's experiences. We know that both autistic and neurotypical people misunderstand each other, yet existing social communication interventions often focus only on changing autistic behaviour and teaching neurotypical social skills. Our mixed-neurotype team of authors published a Perspectives piece in Autism in Adulthood discussing how communication partner training (CPT), an umbrella term for programs that teach strategies to people with communication differences and their communication partners, is a valuable framework to apply when creating social communication support programs for autistic people and their neurotypical communication partners.

METHODS/APPROACH & OUTCOME

Our authorship team, led by a speech-language pathologist, applied what we already know about CPT from the literature, identified key principles, and looked at the literature from autistic adults to see how they might apply. We discuss how three key components of CPT programs can be applied to support autistic people by (i) promoting increased knowledge and understanding of communication differences; (ii) adapting the communication environment; (iii) and identifying collaborative strategies that people both people can use to improve two-way communication.

DISCUSSION/IMPLICATIONS

We provide recommendations for future CPT program development within autism research, and discuss current research projects we are involved in to extend this work. Some recommendations include the need to acknowledge all the facts that impact communication, including environmental changes and people's identities, and the importance of involving autistic adults when creating future CPT programs.

P2.11.03 - Advancing the Measurement of Social Competence: Development of a Newly Developed Children's Social Competence Questionnaire (CSCQ)

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Trigger warning: No Trigger Warning

Practical impact: The development of the Children's Social Competence Questionnaire (CSCQ) offers significant practical benefits for autistic individuals and their families. By addressing the unique challenges children on the autism spectrum face in social skill elements, social reciprocity, social adjustment, and social effectiveness, the CSCQ provides a tailored tool to assess social competence comprehensively. This tool enables caregivers and professionals to better understand specific social strengths and areas for growth, fostering more targeted and effective intervention strategies.

Abstract body: Social competence is essential for children to build meaningful relationships, encompassing four dimensions: social skill elements, social reciprocity, social adjustment, and social effectiveness. Children with autism spectrum disorder (ASD) often struggle in these areas, affecting their peer interactions and mental health. However, there is a lack of comprehensive tools tailored for assessing social competence in children with ASD. This study details the development of the Children's Social Competence Questionnaire (CSCQ), a parent-report tool designed for this purpose.

The CSCQ development involved four stages: reviewing social competence frameworks, transforming concepts into items, examining content validity, and conducting cognitive debriefing. A panel of six experts evaluated content validity using the Item-level (I-CVI) and Scale-level Content Validity Index (S-CVI), while seven caregivers of children with ASD aged 3-12 participated in cognitive debriefing interviews. Feedback from experts and caregivers informed refinements to item clarity, sentence fluency, and conceptual validity.

The CSCQ integrates six social competence frameworks into an overarching model, resulting in 142 items rated on a 4-point Likert scale across four dimensions. Revisions improved clarity, streamlined item structure, optimized difficulty levels, and emphasized unprompted behaviors. Experts confirmed its strong content validity, and the tool shows promise for reliably assessing social competence in children with ASD.

While the CSCQ has demonstrated initial validity, further research is needed to evaluate its reliability and construct validity, ensuring it meets the practical needs of caregivers and professionals in early intervention.

P2.11.04 - *Thinking in Speech*®: Developing inner speech helps autistic individuals improve their self-regulation ability

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Trigger warning: No Trigger Warning

Practical impact: 1. This autistic-friendly therapy focused on developing inner speech can reduce emotional dysregulation in autistic children.

- 2. This therapy can be administered remotely so that families with autistic children can be reached anywhere in the world.
- 2. This 11-hour training can be conducted remotely, so that therapists anywhere can learn this therapy without traveling.

Abstract body: INTRODUCTION. Autistic children often have difficulty regulating their emotions. This pilot study evaluated the effectiveness of an intervention to reduce emotional dysregulation by developing inner speech in autistic children. Inner speech is the voice in our head we use when thinking. The therapy, *Thinking in Speech (TiS)*, is a neurocognitive intervention; it was developed by an autistic speech-language pathologist in her private practice with over 100 neurodiverse individuals.





METHODS. Nine certified speech-language pathologists were trained remotely, in an 11-hour training program over five week. They remotely administered *TiS* to 22 autistic children. Participating children were randomly assigned to either a therapy immediate or a waitlist control condition. Both groups of children received sixteen 30-minute therapy sessions over 8-10 weeks. Parents rated the amount of emotional dysregulation on three measures before the intervention, and after the sixteen sessions were completed.

OUTCOME. Cross-over analysis were conducted. The autistic children showed significant improvement from pre-test to post-test on the Emotion Dysregulation Index-Dysphoria scale (p=.008), and a trend toward significance on the Emotion Dysregulation-Reactivity scale (p=.089). The Brief2 Emotion Control results were not significant.

DISCUSSION. These findings suggest a potential impact of developing inner speech to reduce emotion dysregulation in autistic children. Additionally, we were able to show TiS therapy can be trained remotely in a relatively short time, and the treatment can be administered remotely. This pilot study needs to be replicated with a larger sample size, more therapists, and more therapy sessions to determine the generalizability of these results.

Plain English version: Autistic children often have difficulty regulating their emotions. This pilot study evaluated the effectiveness of an intervention to reduce emotional dysregulation by developing inner speech, voice in our head we use when thinking, in autistic children. We found that nine speech-language pathologists trained remotely were able were able to reduce emotional dysregulation in 22 autistic children after delivering only sixteen 30-minute remote therapy sessions over 8-10 weeks.

P2.11.05 - Interrater reliability in the DAN-PACT RCT

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Trigger warning: No Trigger Warning

Practical impact: Teaching parents to become more sensitive towards their children's communication signal, will possible lead to better outcomes for those children and a better overall awareness of autistic children's needs.

Abstract body: INTRODUCTION & CENTRAL QUESTION

The DAN-PACT project is a national randomized clinical trial (RCT) investigating the effect of parent-mediated training for young children with autism spectrum disorder (ASD). The trial includes 280 families with children aged 2–6 years with an ASD. This pilot study evaluates the interrater reliability of therapists' adherence to PACT fidelity standards focusing on both the total fidelity score and overall estimate of the session quality.

METHODS

Randomly selected videos (N=16) from PACT sessions in the trial were assessed for therapist fidelity by the first and second author, who are both certified PACT associates and supervisors.





These videos were randomly selected using an algorithm to ensure representation across regions and therapists throughout Denmark. The videos were independently rated by the two PACT associates, applying the updated fidelity measure from the PACT manual. Interrater reliability was calculated for both the total fidelity score and the overall session quality.

OUTCOME

Interrater reliability achieved an Intraclass Correlation Coefficient (ICC) of 0.89 for the total fidelity score and 0.87 for the overall session quality, both indicating a high level of agreement between the raters.

DISCUSSION/IMPLICATIONS

The robust agreement between the raters emphasizes the effectiveness of the fidelity measure and quality measure, and supports the replicability of the results in future research.

P2.11.06 - The relationship between parent child interaction, child attachment and parental reflective functioning: results from the DAN-PACT trial

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Trigger warning: No Trigger Warning

Practical impact: Understanding the relationships between child attachment and parent sensitivity in caregiving as well as parental reflective functioning, may guide future directions for early intervention for autistic children. Attachment security in children is predictive for a beneficial development in all children, autistic or not.

Abstract body: INTRODUCTION & CENTRAL QUESTION

Parents' sensitivity to the child's communication relies on parental reflective functioning and achievement of synchronicity, which may improve parent-child interactions and nurture secure attachment. However, it remains unclear how child attachment, parental reflective functioning and parent-child interaction are related in parent-child dyads with autistic children. Results from baseline assessment in an ongoing randomised controlled trial of the Paediatric Autism Communication Therapy will be analysed and presented. This study aims to explore the relationship between child attachment security, parental reflective functioning, and measures of parent-child interaction such as synchronicity in dyadic communication in children with autism.

METHODS

Participants are 280 parent-child pairs recruited after the child aged 2-6.9 years had received a diagnosis of autism according to DSM-V criteria. Parent-reported questionnaires Parental Reflective Functioning Questionnaire (PRF-Q), and Maternal Perception of Child Attachment (MPCA) were collected. Twelve minutes playtime sessions between parent and child were videotaped to assess parent-child interaction using the Dyadic Communication Measure of Autism (DCMA).

OUTCOME





The recruitment period has just ended, and blinded DCMA ratings are ongoing. Analyses of correlations between parent-child interaction (DCMA) and results from the questionnaires will be performed and presented.

IMPLICATIONS

Development of attachment security in children is predictive of a beneficial development. We expect that further understanding of the development of child attachment security in autistic children that will guide future directions for early autism intervention.

Plain English version: INTRODUCTION & CENTRAL QUESTION

Parents' sensitive caregiving towards their autistic child is important for development of child attachment security. To date we know little about the associations between constructs such as the parent's interest and curiosity in the mental states of their autistic child and attachment security. Also, we lack knowledge on how communicative patterns between parent and child affect the sense of security in children needs to be examined. This study aims to explore the relationships between child attachment security and communicative patterns between parent and child using baseline data from a Danish trial of the Paediatric Autism Communication Therapy.

METHODS

Participants are 280 parent-child pairs recruited after the child aged 2-6.9 years had received a diagnosis of autism. Parent-reported measures on Parental Reflective Functioning Questionnaire (PRF-Q), and Maternal Perception of Child Attachment (MPCA) were collected. Twelve minutes playtime sessions between the parent and child were videotaped to assess parent-child interaction using the Dyadic Communication Measure of Autism (DCMA).

OUTCOME

The recruitment period has just ended, and blinded DCMA ratings are ongoing. Analyses of relationships between parent-child interaction (DCMA) and results from the questionnaires will be performed and presented.

IMPLICATIONS

Attachment security in children is predictive of a healthy development. We expect to get novel insights into the development of child attachment security in autistic children that will guide future directions for early autism intervention.

P2.11.07 - Exploring communication potential in autistic adult through French Sign Language (LSF)

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Trigger warning: No Trigger Warning

Practical impact: This work highlights the potential benefits of French Sign Language (LSF) for autistic individuals, particularly those categorized as "non-verbal" or "minimally verbal". By focusing on predictors of communication, such as imitation, joint attention, and interaction maintenance, this study aims to demonstrate how LSF can foster engagement in communication through tailored ecological interventions (namely, a regular LSF workshop led by a **Deaf** trainer within the participants' living environment).

In practice, these findings suggest that LSF could be integrated into specialized care structures and family practices as a pathway into communication, aligning with the strengths of autistic individuals who exhibit a visual cognitive style. The continuation of the workshops over three years further demonstrates the feasibility and long-term benefits of this approach in real-life settings (e.g., care homes).

Future applications could include training family members, educators, and administrative teams in the use of sign language, thus broadening communication accessibility for autistic individuals beyond vocal methods.

Abstract body: While communication challenges are common among autistic people, some are categorized as "non-verbal" or "minimally verbal" (Koegel et al., 2020). This study explores how French Sign Language (LSF) can support communication for a part of this population. Sign languages are entirely perceivable through vision and structured around visual imagery (Cuxac,





2000). This makes it particularly relevant for autistic people, as research suggests they may exhibit a heightened "visual cognitive style" compared to typically developing individuals (Bled et al., 2020). Additionally, Grandin (2009) described a "thinking in pictures" phenomenon, suggesting that visually structured languages like LSF may align with their cognitive strengths. Our study involved three adults categorized as "non-verbal" or "minimally verbal", including one with autism. Structured LSF sessions led by a deaf trainer were held weekly for nine months in a nursing home, using an ecological approach. These sessions were video-recorded, and 25 hours were annotated with ELAN software, focusing on predictors of communication: imitation (Nadel, 2021), joint attention (Tomasello, 2022), and maintenance of interaction. Preliminary results show progress in these indicators. The autistic participant demonstrated significant advances in imitation and joint attention, while others showed gradual yet meaningful improvements in maintaining interactions. Importantly, the workshop has continued for three years.

Although sign languages are increasingly used by families and associations to support autistic individuals, this remains underexplored in research. Further studies are needed to assess long-term outcomes and involve larger, more diverse groups, including verbal autistic individuals, to better understand the potential of LSF in communication.

P2.11.08 - How many autistic people in the UK are minimally or non-speaking, and how are they defined?

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Trigger warning: No Trigger Warning

Practical impact: Research suggests that autistic people who are minimally or non-speaking can have poor outcomes. They are also often excluded from research. In addition, we don't know how many minimally/non-speaking autistic people there are in the UK, or how their communication is defined. As a first step in a project run by a neurodiverse team that aims to improve the experiences of minimally/non-speaking autistic people, we conducted a systematic review of the literature, and report on the findings here.

Abstract body: Introduction

Minimally or non-speaking autistic people are a highly disadvantaged group, often excluded from research. Moreover, we don't know how many autistic people in the UK are minimally/non-speaking, and how this group is defined. Our systematic review, part of a broader project by a neurodiverse team into the communication of minimally/non-speaking autistic young people, addresses this gap.

Method

One researcher conducted the search, registered on Prospero, in PsychInfo and PubMed. To ensure rigour, both researchers screened all abstracts and full texts. After deduplication, the search returned 8,594 abstracts. A total of 323 full texts were then checked, of which only 10, published between 2011 and 2023 and UK-based, were included in the final set of papers. The total number of autistic individuals across the 10 studies was 425.

Outcome

None of the studies concerned the prevalence of minimally/non-speaking autistic people in the UK. The definition of minimally/non-speaking differed between studies: eight used the number of spoken words, based on parent-report. The number of spoken words in definitions ranged between 5 and 100 words. Two studies did not give a definition of minimally or non-speaking; this seemed to be inferred from the use of PECS.

Discussion

To identify the needs of this disadvantaged population, the lack of data on prevalence in the UK and the inconsistencies in definitions of minimally/non-speaking autistic people should be





addressed. This study is an important first step in a project aimed at understanding the experiences and improving outcomes for minimally/non-speaking autistic people in the UK.

Plain English version: According to research, autistic people who are minimally/non-speaking have poor outcomes. Our neurodiverse team has developed a project, focused on young autistic people in the UK who are minimally/non-speaking, to try to improve this situation. However, we realised that we don't actually know how many autistic people are minimally or non-speaking. We also don't know how consistently those labels are being used in the research. We felt it was an important first step in our project to get some better information on this.

Our team carried out a rigorous review of the literature. Firstly, we found that there were no studies at all that looked at how many minimally or non-speaking autistic people there are in the UK. Secondly, we found in our final sample of ten studies that this group of autistic people was described in different ways. How their speech was categorised was not consistent, and seemed reliant on parental description. Autistic people could be classified as minimally-speaking if they used between 5 and 100 words. A relatively low number of 425 autistic people were included in the studies.

If we want to understand and support autistic people who are minimally or non-speaking, we need first to have better information on how many people fit this description. We need better information on their communication and how it is described, so that they can have better access to support and their rights can be upheld. We need more research about and with minimally or non-speaking autistic people.

P2.11.09 - Empowering Caregivers: Implementing WHO's Caregiver Skills Training for Autism Support in Romania

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Trigger warning: No Trigger Warning

Practical impact:

- **Enhanced Caregiver Skills**: By equipping caregivers with effective training, this work empowers them to better support the developmental needs of autistic individuals, leading to improved daily functioning and quality of life.
- **Early Intervention Benefits**: The insights gained from the research can inform early intervention strategies, which are crucial in enhancing communication, social skills, and reducing challenging behaviors.
- **Improved Family Dynamics**: Strengthening caregiver skills not only benefits the autistic individual but also enhances overall family dynamics, reducing stress and improving the well-being of the entire family.

Abstract body: In 2024, Romania initiated the World Health Organization's (WHO) Caregiver Skills Training (CST) program to support families of children with autism spectrum disorder (ASD) and other developmental disorders. The program, delivered by master trainers (MTs) from theNeuroatipic Foundation and Atipic Association, began with the pre-piloting phase to evaluate its acceptability and identify strengths and limitations for future adaptations. Nine caregivers (8 female; mean age = 38 years) participated, most of whom had higher education, were married, and resided in urban areas. The children, aged 2–9 years, were primarily diagnosed with ASD. Before the program, participants expressed positive expectations and perceived the





training as highly useful, though scheduling flexibility was a noted concern. Seven participants had not received prior training, and eight had not attended caregiver support groups. Five reported obtaining similar information from their kids therapists. Post-session feedback after the first group meeting revealed that participants found the material easy to understand, relevant, and useful. Group discussions and practical demonstrations were particularly valued, though suggestions included adding more concrete examples. The first home visit was perceived as highly beneficial. MTs highlighted the program's success is due to an accessible, community-based approach, while challenges included participant retention and addressing urban-rural disparities. These findings underscore the program's potential for scalability, emphasizing the need for targeted adaptations to enhance participation and equitable access across diverse settings. This preliminary phase is ongoing and provides insights for refining the CST program in preparation for broader national implementation.

Plain English version:

P2.11.10 - Prosody in Children with ASD: Development and Data Analysis of an Assessment Tool (Test di Valutazione delle Abilità Prosodiche nel bambino con ASD - TVAP)

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Trigger warning: No Trigger Warning

Practical impact: The developed tool provides information that contributes to enhancing the planning of speech therapy interventions for children with ASD

Abstract body: INTRODUCTION: Many individuals with Autism Spectrum Disorder (ASD) exhibit deficits in prosodic comprehension and production, which affect their socio-communicative skills. The limited information available in literature, within an Italian healthcare service, led to the development the Test di Valutazione delle Abilità Prosodiche nel bambino con ASD, aimed at evaluating prosodic skills in Italian-speaking children.

METHODS: The project consists of four phases: a review of literature on prosody in typically developing children and children with ASD; development of the TVAP (comprising a response recording sheet and six tasks: verbal recognition of words, non-words, sentences, emotional and linguistic prosody comprehension, and prosodic production); administration of the TVAP to a sample of 41 children aged 6-12 years, ASD-diagnosed; administration of standardized tests assessing pragmatic skills to explore correlations between pragmatics and prosody; analysis of results based on age, gender, cognitive functioning, and severity of ASD.

RESULTS: The qualitative-quantitative analysis revealed weak correlations between the TVAP and pragmatic tests. The most significant difficulties were found in the linguistic prosody comprehension task. Male voices were more easily recognized in the verbal recognition tasks. In prosodic production, speech rate was slower than average, and the prosody was often abnormal (monotonal).

DISCUSSION: This project led to the creation of the TVAP, a useful tool for gathering information about prosody in children with ASD and for improving speech therapy interventions. Limitations and challenges remain, such as the use of non-professional recording equipment and discrepancies between some results and existing literature, indicating the need for further research.





P2.11.11 - Learning Together. Bridging Communication Gaps: A Path to Inclusion for Autistic Individuals with High Support Needs

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Trigger warning: No Trigger Warning

Practical impact: Autistic participants gained confidence in expressing their needs and emotions. The project strengthened mutual understanding and fostered empathy, breaking down stereotypes and building meaningful relationships.

Abstract body: Why is this important?

Autistic individuals with high support needs often face significant barriers to communication and social interaction, leading to misunderstanding and exclusion. Addressing these challenges requires creating opportunities to recognize and celebrate diverse communication styles.

What was done?

The "Learning Together" project facilitated weekly interactions between autistic individuals with high support needs and secondary school students aged 12-14. Activities such as gardening, creative workshops, and joint physical exercises were designed to emphasize non-verbal and alternative communication methods. The project created a safe, supportive environment where autistic participants could express themselves authentically, while students learned to understand and respond to their unique communication approaches.

What were the challenges?

Adapting activities to the varying needs of participants required careful planning and ongoing support. Facilitating meaningful interactions between individuals with different communication styles presented initial hurdles.

What were the benefits?

Autistic participants gained confidence in expressing their needs and emotions, while students developed skills to recognize, respect, and adapt to diverse communication methods. The project strengthened mutual understanding and fostered empathy, breaking down stereotypes and building meaningful relationships.

What does the future hold?

The project demonstrates how celebrating autistic communication can foster inclusion and connection. By sharing our methodology, we aim to inspire similar initiatives, ensuring that more autistic individuals with high support needs benefit from authentic interactions and recognition of their unique communication styles.

P2.11.12 - Enhancing Play Participation and Skills in Preschoolers with Autism Spectrum Disorder: A Preliminary Study on Structured Play Intervention

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Trigger warning: No Trigger Warning

Practical impact: This work demonstrates that structured play interventions can improve play and communication skills in preschoolers with Autism Spectrum Disorder (ASD), addressing key developmental challenges. It also aspires to help more children with ASD begin to enjoy play and experience its inherent joy.

Abstract body: INTRODUCTION & CENTRAL QUESTION

Play participation is vital for children's health, daily engagement, and social skills. However,





preschoolers with Autism Spectrum Disorder (ASD) often face challenges due to traits such as restricted interests and rigid thinking. Occupational therapy emphasizes play as both a therapeutic tool and a goal, but research in this area for preschoolers with ASD remains limited. This study aims to develop a structured play intervention and evaluate its impact on play participation, family outcomes, daily life, and social engagement.

METHODS/APPROACH

A 19-week structured play participation group was developed and implemented with 14 preschool children diagnosed or suspected of ASD and their caregivers. Assessments included the Social Skills Checklist (SSC) for play participation, the Family Outcome Questionnaire (FOQ) for family outcomes, and the Vineland Adaptive Behavior Scales-3 (VABS-3) for daily life and social participation. Pre- and post-intervention scores were analyzed using paired t-tests.

OUTCOME

SSC and VABS-3 communication scores showed significant improvements (t=-2.3, p=0.04; t=-2.5, p=0.03). However, FOQ and VABS-3 daily life and social participation scores showed no significant changes.

DISCUSSION/IMPLICATIONS

This study highlights the effectiveness of structured play interventions in enhancing play and communication skills in preschoolers with ASD, reinforcing the validity of play as a therapeutic focus. Limitations in daily life and social outcomes suggest the need for extended durations, enhanced caregiver involvement, and follow-ups. Expanding sample sizes, incorporating qualitative methods, and refining intervention strategies will provide stronger evidence to enhance play-based early interventions, ultimately supporting the development and social participation of children with ASD.

P2.11.13 - Massage and Video Editing – Inspirations of an Autistic Teen-age Boy

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Trigger warning: No Trigger Warning

Practical impact: During the trainings of the autism center we share our experiences, working strategies and we emphasize that the motivations of the autistic people are as much valuable as of the neurotypical persons. Moreover, we can utilize special interests to facilitate the expessive communication. The development of the autistic boy of our case is a significant practical impact on its own.

Abstract body: We present how we utilize the special interests of a teen-age autistic boy in order to support his expressive communication.

The adolescent attends to an autism center utilizing evidence-based methodology. His support is based on individualized assessments and careful planning. Still, he showed challenging behaviours in the school: he either showed passivity during the variety of activities or he unexpectedly went looking for different ICT tools in the school causing significant conflicts. While he is capable of speaking, his expressive communication was limited and mechanic: out of the functions only the requesting and rejecting appeared and he preferred the motoric form even in the very motivated situations. To facilitate his positive life quality, we had to understand how we could put his special interests into the service of his development and happiness. During this process it became a crucial question how the usage of the ICT tools can be kept in an optimal range.

Therefore, we put his school attendance on new bases. After the mapping of the possibilities of motivation we significantly increased the number of situations encouraging to communicate during school time. We defined clear limits of the ICT tools usage and we encouraged their creative utilizations.

During the first year his communication has improved measurably and in multiple dimensions and his challenging behaviours have eased significantly. His creations are worth to see: the short, humorous, sometimes artistic videos are compelling fragments of his unique mind.





P2.11.14 - Lens of Autism and Love: A photovoice study

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Trigger warning: No Trigger Warning

Practical impact: The findings insights into the perspectives and experiences of young adults with ASD regarding romantic relationships. Understanding both the positive and negative aspects of these experiences is crucial for the development of future intervention programs, support services, and policies.

Abstract body: Individuals with autism spectrum disorder (ASD) often face social challenges that extend to their romantic relationships. Due to repetitive behaviors, restricted interests, and atypical sensory responses, individuals with ASD may experience romantic relationships in different ways. Although increasing attention has been given to the social lives of individuals with ASD, research on their perspectives regarding romantic relationships remains limited. To address this gap, the present study employed the photovoice method to explore the views, expectations, and experiences of young adults with ASD regarding romantic relationships. The study included seven participants aged 18 to 25, all with ASD, and sought to investigate their views of romantic relationships, as well as the associated positive and negative aspects. Data were collected through semi-structured interviews and analyses of participant-selected photographs. A thematic content analysis identified three themes: the meaning of romantic relationships, the positive aspects of romantic relationships, and the negative aspects of romantic relationships. The first theme included two subthemes: emotional closeness and marriage. The second theme related to positive aspects included three subthemes as pleasant emotions, compatibility, and commitment, while that related to negative aspects consisted of jealousy, disappointment, and separation. The findings provide valuable insights into the perspectives and experiences of young adults with ASD regarding romantic relationships. Recognizing both the positive and negative experiences is crucial for developing intervention programs and policies aimed at supporting well-being of individuals with ASD. Such efforts can address their unique needs and expectations, ultimately fostering more inclusive and supportive environments.

P2.11.15 - Associations between imitation types and receptive and expressive language skills in autistic preschoolers

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Trigger warning: No Trigger Warning

Practical impact: Language abilities vary tremendously among autistic children, with about 30% remaining minimally verbal (Bacon et al., 2019). Language skills influence other areas of development and later quality of life (Magiati et al., 2014). Therefore, research on potentially related variables is crucial for gaining insights into language acquisition pathways, in children with heterogeneous language abilities. Because imitation is thought to play a key role in language development, it is often targeted in early interventions for autistic children (Bejarano-Martín et al., 2020). The findings of our study suggest a unique contribution of elicited verbal, object and gesture imitation abilities in explaining differences in the concurrent language abilities. In the long term, further knowledge may inform clinical practice.





Abstract body: Introduction

Language ability is a well-established predictor of later quality of life. In young autistic children language profiles vary from minimally verbal to well above the typical ranges. Imitation skills have been shown to relate to language abilities positively, but are mostly examined as one skill. This study investigates the unique contribution of diverse imitation types as predictors of concurrent receptive and expressive language abilities in autistic children.

Methods

132 autistic children (2-6 years), participating in the multi-site Belgian Language in Autism Study, were assessed in a mobile research van, to maximise participation of families with lower socioeconomic status (SES). Imitation abilities were measured using the Unstructured Imitation Assessment for spontaneous object imitation, the Preschool Imitation and Praxis Scale for elicited object and gesture imitation, and an elicited verbal imitation and deferred object imitation task. Standardised language tests were used.

Results

We regressed receptive and expressive language on chronological age, nonverbal cognitive abilities (NVIQ), testing site and SES. These baseline models yielded R^2 values of .64 and .60 for receptive and expressive language respectively. For receptive language, elicited verbal, and elicited and spontaneous object imitation improved model fit, explaining .12, .02 and .01 of the variance respectively. For expressive language, only elicited verbal and gesture imitation did so, explaining .15 and .02 of the variance.

Discussion

Different imitation abilities have different unique associations with concurrent language abilities, over and above the contribution of NVIQ. Verbal imitation accounted for most variance in both language skills, potentially because of related underlying capacities.

Plain English version: Introduction

Language is a well-established predictor of later quality of life in autistic individuals, and language skills vary widely among children. Imitation skills are positively related to language abilities, but as usually only one imitation score is used, we do not know which specific imitation skill contributes the most. This study examines the predictive value of different imitation skills for the language skills of autistic children, measured simultaneously.

Methods

132 autistic preschoolers, participating in the multi-site Belgian Language in Autism Study, were assessed in a mobile research van, to maximise participation of families with lower socio-economic status (SES). Different imitation abilities were assessed, namely: elicited object, gestural and verbal imitation (copying of actions with objects, without objects, and imitation of spoken words, respectively), spontaneous object imitation, and deferred imitation (imitation after a delay in time). Also, language comprehension and production were assessed.

Results

As expected, nonverbal cognitive abilities (NVIQ), age, testing site and SES strongly predicted language comprehension and production. However, language could be better predicted when we also added elicited verbal and elicited and spontaneous object imitation for language comprehension, and elicited verbal and gesture imitation for language production as predictors.

Discussion

Different imitation abilities have different unique associations with concurrent language abilities, over and above the contribution of NVIQ. Verbal imitation was the most predictive imitation skill. Overall, the predictions for language comprehension and production were very similar.

P2.11.16 - Expression of mental states in children on the autism spectrum: A comparison of open-ended and multiple-choice format

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Trigger warning: No Trigger Warning

Practical impact: This work contributes to reasonable accommodations in education and has the potential to expand the possibilities for language expression for autistic people.

Abstract body: Introduction: There are findings that children on the autism spectrum (AS) have difficulty expressing mental states verbally. However, most of these findings were based on responses in the format of open-ended question. Does a multiple-choice format facilitate the expression of mental states in children on the AS? We compared these two conditions, and then examined the relationship with theory of mind.

Methods: The participants were 20 children on the AS (mean CA 9:7) and 20 NT children (mean CA 8:1). There was no significant difference in mental age or nonverbal intelligence between the two groups. An animation of two shapes moving like people was presented, and the participants were asked to describe them in sentences. Two types of response format were set up: open-ended and multiple-choice. In addition, two types of first order false-belief tasks and one second order false-belief task were administered.

Results: The following results were obtained. (1) The AS group used mental expressions significantly less than the NT group in the open-ended answers. On the other hand, the NT group used mental expressions less in the multiple-choice answers, while the AS group used them more. (2) The scores of ToM significantly predicted the use of conjunction "but" that connects contrasting ideas in AS group.

Discussion: It was suggested that for children with AS, the expression of mental states is promoted under structured conditions such as multiple choice, and furthermore that for children who have acquired ToM, the use of language forms related to perspective taking is promoted.

P2.11.17 - Investigating the Complexity of Autistic Communication using Acoustic Phonetic Analysis

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Trigger warning: No Trigger Warning

Practical impact: Since our work contributes to societal awareness and acceptance of the diverse ways individuals on the autism spectrum communicate, the clearest practical impact for autistic people hopefully is improved social interaction, acceptance and the experience of being better understood in various situations and communities.

Abstract body: Individuals on the autism spectrum may exhibit distinct speech features, with differences in prosodic features such as pitch variability, intonation, speech rate, and pausing noted as potential indicators of ASD (Asghari et al., 2021; Fusaroli et al., 2021). The aim of our research is to explore the different ways of speaking regarding the autism spectrum by analyzing the speech of individuals on the autism spectrum using methods of acoustic phonetic analysis, since prosodic features reflect the varying conversational tendencies present in autistic communication.

In this study, the prosodic features of Finnish-speaking preadolescent males on the autism spectrum (ages 11–13) were investigated. To analyze intonation, mean fundamental frequency (f0), f0 range and f0 standard deviation were measured. To explore pausing patterns, frequencies and duration of pauses within utterances were measured.

Results showed that speakers on the autism spectrum exhibited greater f0 ranges and higher f0 standard deviation, indicating increased pitch variability and wider intonational contours. Additionally, they produced more frequent and longer pauses compared to controls. These findings, which were statistically significant, align with prior research and highlight greater





variability in prosodic features within the autism spectrum. This research underscores the heterogeneity of autistic communication and its nuanced conversational tendencies. By expanding understanding of prosodic intricacies, it contributes to societal awareness and acceptance of the diverse ways individuals on the autism spectrum communicate. Future work will explore additional prosodic measures, such as speech rate and volume, to further illuminate the complexity of autistic speech patterns.

P2.11.18 - The relation between motor skills and communication in autistic toddlers

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Trigger warning: No Trigger Warning

Practical impact: Understanding the role of motor development could enhance clinical practices and inform targeted treatment approaches for improving communication skills in autistic children.

Abstract body: Research highlights that motor impairments are common in autistic children, yet their connection to cognitive and communication development remains unclear. Early motor skills are critical for enhancing communication and social engagement, with evidence suggesting they are predictive of language development in typically developing children. The interplay between motor development and communication has been under-explored in children with ASD. The aim of this study is to investigate the relationship between motor skills and communication development in autistic children.

30 children aged 30-36 months diagnosed with autism spectrum disorder participated in this study. Their motor skills were assessed using the Mullen Scales of Early Learning and Peabody Developmental Motor Scales, while communication was evaluated through the Autism Diagnostic Observation Schedule (ADOS-2). The findings indicate a strong correlation between gross and fine motor skills and receptive language, but not expressive language. Overall motor skills were positively associated with communication skills assessed via ADOS-2, yet overall cognitive scores did not significantly relate to communication abilities.

These results suggest that early motor skills may influence communication development in autistic children, highlighting the importance of integrating motor activities into therapeutic interventions. Understanding the role of motor development could enhance clinical practices and inform targeted treatment approaches for improving communication skills in autistic children.

P2.11.19 - Enabling communities and fostering social change through participatory research

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Trigger warning: No Trigger Warning

Practical impact: This study may help empower the autistic community in Lithuania by allowing them to contribute to the research process and implement the results into practice. It may raise awareness of autistic sociality and assist autistic adults in connecting and building relationships through public events based on the study's findings, co-organised with the autistic adults' advisory board. It is hoped that this will also inspire other researchers in Lithuania to amplify the voices of marginalised communities.





Abstract body: INTRODUCTION

Autistic individuals have historically been excluded from autism research, perpetuating inaccurate narratives and distrust in researchers (Milton, 2012; 2014; Milton & Bracher, 2013). This study explores how autistic adults experience building connections with strangers, aiming to represent their perspectives and drive positive change. In Lithuania, where neurodiversity-affirming practices are still emerging, this marks the first instance of autistic adults co-producing knowledge and sharing decision-making power with researchers.

METHODS

In January 2025, seven in-depth interviews (synchronous and asynchronous) will be conducted and analysed using thematic analysis. The research process is guided by an autistic researcher and an advisory board of autistic adults, contributing to every stage – from assessing the topic's relevance to collaborating on results dissemination.

OUTCOME

Beyond academic insights, this collaboration empowered the advisory board to initiate activities, such as creating an educational video and organising public events, aimed at applying the study's findings to help autistic adults connect and educate society on autistic sociality. Our presentation will highlight the collaboration's experiences, outcomes, and key study findings.

DISCUSSION

This study demonstrates how participatory research bridges the gap between academia and real-world impact, offering autistic adults in Lithuania their first opportunity to influence research and knowledge production. The outcomes can improve understanding of autistic social experiences, inform professional practices, and encourage further collaboration with marginalised communities. Future steps include continuing collaboration, organising events to help autistic individuals build connections, raising awareness of autistic sociality.

This project has received funding from the Research Council of Lithuania (LMTLT), agreement No S-ST-24-56.

Plain English version: INTRODUCTION

Autistic individuals have often been left out of autism research, leading to inaccurate ideas and a lack of trust in researchers (Milton, 2012; 2014; Milton & Bracher, 2013). This study looks at how autistic adults experience building connections with strangers, aiming to understand their views and create positive change. In Lithuania, where neuro-affirmative practices are still developing, this is the first time autistic adults have worked alongside researchers to create knowledge and make decisions together.

METHODS

In January 2025, seven in-depth interviews (live and written) will be conducted and analysed to identify key themes. The research process is led by an autistic researcher and an advisory board of autistic adults, who are involved in every step - from assessing the research topic's relevance to sharing the results.

OUTCOME

This collaboration allowed the advisory board to start projects like creating an educational video and organising public events, that aimed to use the study's findings to help autistic adults connect and educate society about autistic sociality. Our presentation will highlight the collaboration's experiences, outcomes, and main study findings.

DISCUSSION

This study shows how participatory research can impact real-world change, giving autistic adults in Lithuania the chance to influence research process. The results can help improve understanding of autistic sociality, guide professional practices, encourage working with marginalised communities. Future steps will include continued collaboration, events to help autistic individuals connect, and raising awareness of autistic social experiences.

This project has received funding from the Research Council of Lithuania (LMTLT), agreement No S-ST-24-56.





P2.11.20 - Friends at the schoolyard: do autistic children enjoy recess time?

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Trigger warning: No Trigger Warning

Practical impact: This study suggests that autistic children may prioritise different aspects of friendships compared to their non-autistic peers. School staff should gain a deeper understanding of the social needs and challenges faced by autistic children. Recognising that non-reciprocal friendships also impact their well-being, schools should focus on creating environments where autistic children can interact comfortably, even if those interactions are not always reciprocal. This approach can enhance their overall school experience and well-being.

Abstract body: INTRODUCTION & CENTRAL QUESTION

This study explored how friendships relate to school enjoyment in autistic and non-autistic children, focusing on contacts with friends during school recess. Friendships, both reciprocal and non-reciprocated, are related to children's well-being, but how these relationships differ for autistic children is less understood. This study aimed to address these gaps, providing insights into friendships and their impact on school experiences for autistic children in context of special education environments.

METHODS

Forty-five autistic and 45 non-autistic children, aged 8 to 14, from two special education schools participated in the study. A multi-method approach was used, combining self-reports, peer nominations, and sensor data to measure enjoyment levels, friendship reciprocity and social contact time during recess.

OUTCOME

Autistic children had fewer reciprocal friends and spent less time with reciprocal friends during recess, compared to non-autistic peers. While non-autistic children spent more time with reciprocal friends than non-reciprocated friends, autistic children showed no such difference. Moreover, spending more time with non-reciprocated friends was associated with lower enjoyment levels in both groups.

DISCUSSION/IMPLICATIONS

The outcomes suggest autistic children may prioritise different aspects of friendship or find reciprocal friendships less accessible and more challenging. While reciprocal friendships might not necessarily enhance children's positive experience, lacking reciprocity contributes to reduced enjoyment. These findings highlight the importance of future research considering factors beyond reciprocity, such as the built environment and the broader perception of having friends, in affecting children's social experience at school.

Plain English version: Friendships are important for children's happiness, especially at school. In this study, we looked at autistic and non-autistic children's friendships, contacts on the playground, and enjoyment at school. We used questionnaires to ask children how much they enjoyed their time at the playground during recess, name their best friends, and used small devices clipped to their clothes to measure their face-to-face interactions. Outcomes showed that both autistic and non-autistic children enjoyed their recess time better when they spent less time with friends who did not reciprocate their friendship. Time spent with reciprocal friends did not contribute to this. Understanding how different children experience friendships can contribute to more inclusive environments.

P2.11.21 - Advancing Understanding of the Diverse Social Preferences of Children on the Autism Spectrum





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Trigger warning: No Trigger Warning

Practical impact: The findings of this study suggest that the CSPS-3 is a reliable tool for capturing the diverse tendencies towards social (dis)engagement among children on the autism spectrum, offering a more nuanced understanding of how children approach or avoid social interactions. By recognizing that social disengagement is not a uniform experience but rather a reflection of individual preferences, clinicians and researchers can more effectively tailor interventions and support strategies to meet the unique social needs of each child. Furthermore, the associations between distinct social preferences and clinical outcomes underscore the importance of considering these individual differences in both diagnostic and therapeutic settings.

Abstract body: Although social disengagement is commonly observed in children on the autism spectrum, there is significant individual variability in both its extent and underlying factors. The approach-avoidance motivation framework, which examines how individuals balance motivations to approach or avoid social interactions, provides useful insights into this variability. The Child Social Preference Scale (CSPS-3), originally developed for the general population, is designed to assess different forms of social disengagement based on varying approach-avoidance motivations: shyness (high approach, high avoidance); unsociability (low approach, low avoidance); and social avoidance (low approach, high avoidance). This study explored the factor structure and psychometric properties of the CSPS-3 among 689 children on the autism spectrum, aged 5-17 years (M=11.23, SD=3.56; 76% male). Results indicated that a bi-factor model, consisting of a general factor and three distinct factors corresponding to shyness, unsociability, and social avoidance, best fit the data (CFI=0.973, TLI=0.944, RMSEA=0.108 [90% CI: 0.099, 0.117], SRMR=0.024). These factors demonstrated strong internal consistency and reliability ($a \ge 0.760$). The factor structure was consistent across age and sex subgroups. Subscale scores exhibited distinct patterns of association with clinical correlates. Specifically, CSPS-3 subscales showed strong positive correlations with attachment and affiliation (Social Responsiveness Scale-2nd Edition), and weaker correlations with peer problems (Strengths and Difficulties Questionnaire [SDQ]). Notably, unsociability correlated with SDQ conduct problems, while shyness and social avoidance (but not unsociability) were associated with SDQ emotional problems. These findings support the CSPS-3 as a reliable tool for assessing the diversity of social disengagement among children on the autism spectrum.

P2.11.22 - Therapist fidelity in the DAN-PACT randomized clinical trial: a pilot study

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Trigger warning: No Trigger Warning

Practical impact: Measurement of quality of early interventions for ASD, including therapist fidelity, is crucial for understanding how therapy manuals are implemented and examining the moderators of treatment.

Abstract body: INTRODUCTION: Early parent-mediated intervention is internationally recommended for children with autism spectrum disorders (ASD). Measurement of the quality of early interventions, including therapist fidelity, is crucial for examining treatment quality and moderators of treatment. The aim of this pilot study is to examine therapist fidelity to Pediatric Autism Communication Therapy (PACT) in DAN-PACT, a Danish nationwide randomized clinical trial, including 280 children aged 2-6 years with ASD.

METHODS: Videos (N=16) of PACT sessions were assessed for therapist fidelity. The videos were randomly selected through an algorithm to ensure representation across regions and therapists. The videos were rated by two certified PACT associates, applying the updated fidelity measure of the PACT manual. The fidelity measure consists of 15 items scored pass/not pass and one item measuring overall session quality on a likert-scale from 1 (Poor) to 5 (Excellent). To pass fidelity, therapists need to pass 13 of 15 items (80%) and have an adequate score (3) on overall session quality.

OUTCOME: Of 16 therapists, 14 (87.5 %) passed fidelity with 80 % items passed and a score of 3 or above on the overall session quality. Two therapists received fidelity scores just below fidelity cut-off (60 % and 73.3 % respectively).

DISCUSSION: This pilot study indicates that therapists in the DAN-PACT trial have delivered PACT with a high degree of fidelity to the PACT manual. The treatment fidelity might act as a moderator of treatment outcome and is therefore critical when interpreting outcome findings of the trial.

P3.01.01 - □ Sensory processing sensitivity and Adverse childhood experiences: A correlation study in adolescent in Portugal

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Trigger warning: Mental illness

Practical impact: Neurodivergence is a different way of thinking and perceiving the world. Sensory processing sensitivity, in turn, involves the intensified perception of stimuli, leading highly sensitive individuals to more intense reactions to their environments. Adverse events in childhood have an even greater impact on sensory processing sensitivity. Early work helps to minimise the damage caused by adverse events.

Abstract body: Adverse childhood experiences (ACEs) are impactful events occurring within the first 18 years of life, often leaving lasting effects on physical and mental health. These experiences, including abuse, neglect, or household dysfunction, shape resilience and vulnerability. Sensory processing sensitivity (SPS) refers to a heightened responsiveness to environmental stimuli, where highly sensitive individuals experience deeper emotional reactions and greater environmental awareness.

This study investigated the connection between ACEs and SPS among Portuguese adolescents aged 11 to 18. Using questionnaires, researchers explored how adverse experiences might influence sensory sensitivity. The findings revealed a statistically significant correlation between ACEs and SPS, suggesting that individuals exposed to adverse childhood conditions may exhibit heightened sensitivity to their environments.

These results emphasize the critical need for early intervention during childhood, particularly in collaboration with parents and guardians, to mitigate potential psychological and physical risks. Proactive measures can help build resilience, reduce long-term negative outcomes, and support healthier development.

This research contributes valuable insights into the dynamic interaction between ACEs and SPS, shedding light on how early life experiences influence personality development and sensitivity to





stimuli. These findings underscore the importance of tailored approaches in healthcare, education, and therapy to address the unique needs of individuals affected by ACEs and heightened sensitivity. By doing so, it is possible to foster better outcomes and enhance overall well-being.

P3.01.02 - The use of the Infant-Toddler Checklist (ITC) for early screening of social-communication and language development in siblings of children with autism

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Trigger warning: No Trigger Warning

Practical impact: This work has significant practical importance for autistic children and their families, especially for siblings considered at high risk. The Infant-Toddler Checklist (ITC) helps to identify early challenges in language and social development, starting as early as 12 months. This enables timely interventions during the most crucial phase of a child's development. The ITC is a simple and quick tool, making it ideal for healthcare services with limited time and high demand. It supports families in better understanding their child's development and finding the most suitable strategies to assist them. Detecting and addressing difficulties early on can prevent larger issues in the future and promote more balanced growth. In the long term, this work improves the quality of life for autistic children and creates more educational and social opportunities for them.

Abstract body: Introduction: Siblings of children with autism are at high risk (HR) for autism spectrum disorders (ASD) or other neurodevelopmental conditions, such as language disorders. At the Autism Center of the Public Health Service (Cuneo, Italy), the Italian Network for the Early Recognition of Autism Spectrum Disorders (NIDA), led by the Italian National Institute of Health (ISS), targeted siblings aged 0-36 months. Between January 2021 and December 2024, the Infant-Toddler Checklist (ITC) by Wetherby (2002) and the ISS protocol evaluated social, communication, and language development in children aged 6 to 24 months.

Methods: We collected 114 ITC questionnaires for 55 children evaluated at 6, 12, 18, and 24 months (52% boys). At 36 months, 28 children were classified as high risk for ASD (HR-ASD), for language disorders (HR-LD), or no diagnosis (HR-ND). Classifications followed ICD-10 diagnostic criteria. Data were analyzed by age and developmental trajectory.

Results: At 12 months, 13% screened positive—8 times higher than low-risk populations (Carter et al., 2011). Boys were 1.5 times more likely to screen positive, with rates increasing with age. Verbal production (19.8%) was the most affected area. HR-ND children showed lower positivity rates (15.4%) compared to HR-LD (33.3%) and HR-ASD (100%). In HR-LD children, verbal difficulties were evident by 12 months. By 36 months, 50% of children diagnosed with language disorders had shown signs at 18 months.

Conclusions: ITC is a quick and effective tool for screening socio-communicative difficulties in HR siblings during the first three years, supporting early interventions in demanding healthcare contexts

Plain English version: Central Question: Siblings of children with autism face higher risks of autism spectrum disorders or language delays. Early detection is crucial to providing timely support. This study examines the effectiveness of the Infant-Toddler Checklist (ITC) in identifying social and communication difficulties in siblings aged 6 to 24 months.

Method: Between January 2021 and December 2024, 114 ITC questionnaires were collected from 55 siblings evaluated at 6, 12, 18, and 24 months. For 28 siblings who reached 36 months, developmental trajectories were analyzed: HR-ASD (high risk for autism), HR-LD (high risk for language disorders), and HR-ND (no diagnosis), using ICD-10 criteria.

Results: At 12 months, 13% of siblings screened positive, 8 times the rate of low-risk populations (Carter et al., 2011). Boys were 1.5 times more likely to screen positive. Verbal production was the most affected area. HR-LD siblings showed verbal difficulties by 12 months, while 50% of





language disorder cases were identifiable by 18 months.

Practical Impact: ITC is a quick and reliable screening tool, effective from the first year of life. Its use in public healthcare settings is well-suited to high-demand services with limited resources, guiding further diagnostic assessments. Early identification allows timely interventions, preventing larger challenges and promoting balanced growth.

P3.01.03 - ☐ A cross-lagged panel model of mental health amongst UK undergraduates: The roles of autism and gender

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Trigger warning: Mental illness, Suicide

Practical impact: This study provides valuable insights into the mental health of autistic undergraduates, offering practical implications for support systems in higher education:

- Enhanced Mental Health Support: The findings underscore the interconnectedness of anxiety, depression, and suicidality. Mental health services should offer holistic interventions tailored to address these co-occurring problems, recognising that they are not isolated issues.
- 2. Suicidality as a Priority: The strong link between suicidality and both anxiety and depression highlights the urgent need to prioritise interventions aimed at reducing suicide risk among autistic undergraduates. Proactive suicide prevention programs could make a significant difference in improving long-term mental health outcomes.
- 3. Informed Intervention Timing: The study reveals that while autism diagnosis affects mental health at baseline, its impact does not persist over six months. This suggests that targeted mental health support should be provided early in university life, particularly during the initial transition to higher education.

Abstract body: Introduction: Despite a growing interest in the mental health of undergraduates in the general population and an increasing number of autistic university students, research focusing specifically on the mental health of autistic undergraduates remains limited. The aims of this study were to explore:

- i) the bidirectional relationships between mental health problems among autistic and non-autistic undergraduates in the UK, and
- ii) the impact of gender and autism diagnosis on these relationships.

Method: Undergraduates across the UK were invited to participate in a two-wave online mental health survey (November 2022 – December 2023), with a six-month gap between waves. A cross-lagged panel model was used to examine bidirectional relationships between: i) anxiety and worry, ii) behavioural symptoms of depression and anxiety, and iii) suicidality. Autism diagnosis and gender were included as covariates.

Results: Cross-lagged relationships were observed over time between: i) suicidality and anxiety and worry, and ii) suicidality and behavioural symptoms of depression and anxiety. Mental health problems remained stable across participants over time. Although autism diagnosis impacted mental health at baseline, neither autism diagnosis nor gender was associated with mental health problems over six months.

Conclusions: The findings highlight an association between suicidality and increased i) anxiety and worry, and ii) behavioural symptoms of depression and anxiety over time. Although autism diagnosis influenced mental health at baseline, its impact did not persist over six months. These findings underscore the importance of addressing the interconnected nature of anxiety, depression, and suicidality in mental health interventions for both autistic and non-autistic undergraduates.





P3.01.04 - Positive-protective factors for quality of life among school-age autistic children and their parents

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Trigger warning: No Trigger Warning

Practical impact: Learning about the resources and strengths of autistic students (with good verbal and intellectual abilities) and their parents, their perceptions of their educational situation and its impact on their quality of life, in a scientifically controlled environment, can help families and professionals to work together successfully and lay the foundations for an improved quality of life.

Abstract body: Our research group is conducting a mix-method research to identify factors positively influencing the quality of life (QoL) of autistic school-age children and their parents. Based on the results of our previous nationally representative studies, showing striking disadvantages of groups and our international comparative studies covering 7 countries, we focused on potentially protective factors (e.g. child strengths, positive parent-professional cooperation) known from the literature.

The study sample included 51 autistic students with good verbal and intellectual abilities aged 7-16 years and their parents (54). Four times as many boys as girls participated. Students were cared for in two autism centres. We collected background and QoL (QoLA, Kidscreen-10), strengths and difficulties (SDQ) data, and sought for a more systematic understanding of the participants' perspectives on their educational situation through interview questions.

A strong positive correlation was found between parents' and their children's general QoL, while autism-related parental QoL was not associated with child QoL. We also found a positive association between children's QoL (especially energy, peers, attention) and satisfaction with their school situation, as well as between sub-domains of the SDQ (particularly emotions). The role of the professional appears to be a mediator between parents' perceptions of their child's strengths and satisfaction with education. The rich interview responses further strengthen and nuance the picture of the educational situation of families.

These findings provide solid grounds for an in-depth understanding of the QoL of autistic students and their parents which can be directly applied to the further development of educational support (systems).

P3.01.05 - ☐ The role of meta-dehumanization, masking, and autistic community connectedness on autistic people's mental health

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Trigger warning: Violence, Abuse

Practical impact: This directly addresses autistic peoples risk of poor mental health outcomes.

Abstract body: Meta-dehumanization refers to the perception of being dehumanized (denied human traits) (Bastian & Haslam, 2011). We investigated if 1) autistic people experience higher meta-dehumanization and worse mental health than non-autistic people 2) masking mediates the relationship between meta-dehumanization and poor mental health in the autistic cohort 3) whether autistic community connectedness (ACC) moderates the relationship between meta-dehumanization and masking.

Method: A cross-sectional purposive-sampling study with autistic (n=149) and non-autistic people (n=99).

Autistic people (M = 32.6, SD = 8.74) experienced significantly worse meta-dehumanization than non-autistic people (M =19.5, SD = 8.33), (t(246) = 11.75, p = <0.001) and worse mental health (M = 21.7, SD = 7.1) compared to non-autistic people (M = 16.7, SD = 6.13); t(246) = 5.78, p = <0.001). Meta-dehumanisation significantly positively predicts worse mental health (β = 0.37, t = 4.9, p < 0.001). When including masking behaviour (mediator) into the model, effect of meta-dehumanisation on mental health did not change (β = 0.31, t = 3.96, p <0.001). Mediation analysis revealed a significant indirect effect of masking behaviours on the association between meta-dehumanisation and mental health (indirect effect = 0.07, 95%CI 0.02 and 0.13, R = 0.44, R2 = 0.2). ACC had a significant direct effect on mental health through belongingness with higher belongingness predicting better mental health (p = .01), but no moderation effects. To address poor mental health outcomes we must first address autistic peoples dehumanization in society and foster belonging amongst autistic people.

Plain English version: This study looks at how autistic people feel dehumanized, or as though they are not seen as fully human, and how this affects their mental health. The study compared autistic (149 participants) and non-autistic (99 participants) individuals. The results showed that autistic people felt more dehumanized and had worse mental health than non-autistic people. The study also found that "masking"—when autistic people hide their true selves—was a key factor in the link between feeling dehumanized and poor mental health. The research also looked at whether being part of the autistic community helped improve mental health. While feeling a sense of belonging in the autistic community did improve mental health, it didn't change the relationship between dehumanization and masking. These findings suggest that to improve mental health for autistic people, society needs to reduce dehumanization and create a stronger sense of belonging for them.

P3.01.06 - Developmental dyadic and individual motor training intervention model (DIM-TIM) for school-age autistic children: preliminary results

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Trigger warning: No Trigger Warning

Practical impact:

This study on the Developmental Dyadic and Individual Motor Training Intervention Model (DIM-TIM) for autistic children shows promising practical impacts:

- 1. Providing a novel comprehensive developmental motor training that enables the educational staff to promote their students' motor abilities by applying the program, leading to improved motor and social skills.
- 2. Improved motor skills: The intervention led to significant improvements in individual (gross, fine) and dyadic (Joint Action) motor functioning which are considered challenging for autistic children.
- 3. Enhanced social interaction: Children who showed greater improvements in motor skills demonstrated higher levels of social initiations during free play with peers which potentially opens





up a new avenue of intervention to address the core social deficits in autism through the motor channel.

These preliminary results suggest that autistic children may experience improvements in both their motor abilities and social engagement through this type of intervention, potentially enhancing their overall quality of life and daily functioning.

Abstract body: Introduction: The diagnostic criteria for autism do not include motor impairment, but there is strong evidence that indicates a high prevalence of motor difficulties (87%) in autism that remain throughout development, while only a small percentage receive appropriate treatment. Furthermore, growing research demonstrates the link between motor impairments and social communication difficulties in autism.

Method: A pilot study examined the efficacy of motor training (DIM-TIM) provided in dyads of autistic peers (n=6) across three age groups (3-5, 6-8, 8-12 years). We also examined the link between motor improvement (post-pre) and children's peer engagement during free play. The intervention, based on motor learning principles, included 24 sessions, twice a week focusing on fundamental motor skills (FMS), fine motor skills, motor planning, dyadic coordination (Joint action), stability and balance. Pre-post-intervention assessments of motor skills included the Developmental Coordination Disorder Questionnaire (DCDQ), total score and its subscales (gross, fine and coordination), joint action task and dyadic peer interaction abilities during free play. **Results:** Preliminary findings showed significant improvements in all the DCDQ categories and in joint action post-intervention. A significant strong positive correlation (r=.74, p=.046) was found between improvements in DCDQ coordination abilities and the level of social initiations during free play with a peer.

Conclusion: This study innovatively suggests that comprehensive-developmental motor training improves children's motor skills and improvement in motor skills are linked with higher peer engagement qualities. Our preliminary results may open a new window for intervention programs targeting core social deficits in autism through the motor channel.

P3.01.07 - Facilitating autistic adolescents and young adults to exercise at a community gym

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Trigger warning: No Trigger Warning

Practical impact: The impact of this work for autistic people is it helps us to understand how we can make it easier for autistic young people to exercise. Exercise is important for everyone, including autistic young people. Having someone to exercise with at the gym can make it easier to exercise. Exercise may also have positive benefits on the mental health of autistic young people.

Abstract body: Introduction: Exercise is important for autistic adolescents and young adults as, on average, they have poorer physical and psychological health and reduced social participation relative to non-autistic peers. This study aimed to understand the experiences of autistic adolescents and young adults of a 12-week student-mentored community gym-based exercise programme called FitSkills.

Methods: This qualitative study was embedded within a large implementation trial. Semi-structured interviews were completed by telephone with 7 autistic adolescents and young adults (6 male; mean age 19 yrs) and 13 parents (11 mothers). Interviews were audio-recorded, transcribed and analysed using reflective thematic analysis.

Outcome: Participants and parents said they valued FitSkills because its structure involved commitment and routine, and its setting was a community environment. Three themes were identified: (1) improved physical health was a common goal but improved mental health was a common outcome. Participants and parents described improved mood, confidence and emotional regulation after *FitSkills*; (2) support from a student mentor 'made it'. Participants 'bonded' with their mentors of similar age, and mentors were perceived as someone to relate to, who got the





best out of participants; and (3) apprehensions about exercising at a community gym for personal (nervous or self-conscious) or environmental reasons (lights, sounds) were described as overcome early, and most participants reported adapting to the gym environment.

Discussion/implications: FitSkills can facilitate exercise participation among autistic young people, by helping them overcome apprehensions about the gym environment. Exercise has potential to have a positive impact on the mental health of autistic young people.

Plain English version: Exercise is important for autistic young people because their health is often not as good as non-autistic people who are the same age. We did this study to understand what autistic young people thought about a 12-week exercise programme called FitSkills. We interviewed 7 autistic young people and 13 parents of autistic young people. We recorded the interviews and read them many times to understand how the autistic young people felt about the exercise programme they did. They told us they liked the programme because it was at regular times and it happened in a place as where other people were exercising. They told us they wanted to do the exercise programme so that their body would be healthy, and what they found out was that exercise was good for their mood and their confidence. The thing they said they liked most about the programme was that they exercised with a non-autistic person who was the same age as they were, who helped them to exercise. They also told us at the start they were nervous about exercising at the gym and they worried the lights and sounds in the gym might not suit them. They found after a few times at the gym they felt comfortable. This research helps us to know how we can make it easier for autistic young people to exercise at a gym.

P3.01.08 - Ingredients of a multi-condition neurodevelopmental pathway model for assessment and diagnosis in children and adults

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Trigger warning: No Trigger Warning

Practical impact: For autistic individuals, the introduction of multi-condition neurodevelopmental pathways (NDPs) offers the opportunity for individualised assessment which takes account of the range of overlapping needs, such as autism and ADHD, at the same time. This approach eliminates the need for separate, often fragmented assessments, which can be time-consuming and stressful. By considering the full neurodevelopmental profile of a person, these pathways reduce the risk of misdiagnosis and delays in diagnosis, which are commonly reported as harmful and distressing by neurodivergent adults. This ensures that all aspects of an individual's neurodevelopment are recognised and addressed during the assessment process. The multi-condition diagnosis approach enables more personalised care, addressing the individual's needs in a holistic way. For autistic and other neurodivergent people, this means better-tailored supports. Accurate diagnosis is also crucial for self-understanding and identity. By reducing the stress and confusion of attending multiple specialists and appointments, these pathways ensure smoother, faster access to services and support, leading to better long-term outcomes. This streamlined process promotes more positive experiences and helps reduce disparities in care.

Abstract body: INTRODUCTION & CENTRAL QUESTION: Many neurodivergent individuals meet the criteria for more than one diagnosis. Multi-condition neurodevelopmental pathways (NDPs) are efficient, avoiding duplication and unnecessary resource use, and streamline processes to improve experiences. Single-condition pathways, while most common internationally, can miss other diagnoses, leading to misdiagnosis or delays. Understanding a person's full profile enables personalised support and self-understanding. This study aimed to identify the core "ingredients" necessary for developing and implementing multi-condition NDPs for neurodivergent people, including autism and ADHD, and to highlight the factors necessary for their development and operationalisation.





METHODS/APPROACH: The study gathered feedback from practitioners through discussions and a review of outcomes from health boards in Scotland that had adopted or partially implemented a multi-condition NDP model. Data collection was supported by review of international literature, and input from a nationwide practitioner network and neurodivergent individuals.

OUTCOME: A successful NDP is developed in partnership with neurodivergent people and their families. It involves a multi-disciplinary team with diverse expertise, a shared understanding of neuro-affirming practice, and a focus on inclusive care. Clear, accessible information for families and professionals is essential for decision-making. Key components include triage, timely pre- and post-diagnosis support, and inter-professional collaboration. Leadership buy-in, co-production with neurodivergent individuals and families, and a phased implementation approach are crucial. Services transitioning to multi-condition NDPs must address costs, workforce planning, and integration. Training programmes and local strategy groups are essential.

DISCUSSION/IMPLICATIONS: The findings provide practical guidance for practitioners and a framework for refining and operationalising multi-condition NDPs.

Plain English version: Many neurodivergent individuals have more than one diagnosis (e.g., many autistic people also have ADHD). Multi-condition neurodevelopmental pathways (NDPs) offer a better way to assess and support people, as they reduce the need for repeated assessment. While single-condition pathways are most common globally, they can overlook co-occurring differences, leading to delays or misdiagnoses. Taking a full neurodevelopmental profile into account allows for more personalised and effective support.

This study aimed to identify the key components required to establish multi-condition pathways. It focused on understanding what is needed to make these pathways effective and sustainable in practice.

The study examined the experiences of teams in Scotland that have implemented or trialled multicondition pathways. It gathered feedback from staff, reviewed wider research, and drew on guidance from a national network of practitioners. Local teams shared learning from neurodivergent people and families, gathered in the process of developing their pathway.

Findings revealed that successful pathways require multi-disciplinary teams, shared understanding of inclusive, neuro-affirming practice, and strong communication. Clear information for families and professionals is essential to support informed decision-making. Key features of effective pathways include timely screening, support before and after diagnosis, and collaboration between different professionals. Leadership support and the active involvement of families and neurodivergent individuals in pathway design are also crucial.

To ensure these pathways work well, services must consider costs, workforce planning, and long-term implementation. Training and local planning groups play an important role in this process. Together, these elements create a more inclusive and efficient system.

P3.01.09 - Identifying the contexts that facilitate neuro-affirming practice in health and social care for adults

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Trigger warning: No Trigger Warning

Practical impact: The findings from this study have important implications for autistic adults seeking support from health and social care services. By identifying the factors that support or hinder the adoption of neuro-affirming practices by professionals, the study offers insights into how services can be improved to better meet the needs of autistic people and other neurodivergent individuals.





One of the key outcomes is the strong support for modifying existing pathways to make them more neuro-affirming, flexible and inclusive. This could lead to services that are better tailored to the individual needs of autistic people, allowing for a more personalised and supportive experience. For example, if services become more adaptable, autistic individuals may find it easier to access the support they need, with fewer barriers related to eligibility or rigid structures. However, the study also highlights challenges that stop services from being neuro-affirming, such as limited resources and the growing demand for services. These issues may make it harder for services to provide good quality support. Nevertheless, the recognition of these challenges also opens the door for rethinking service delivery models, creating an opportunity for the development of improved services in the future.

Ultimately, the findings of this study suggest that with the right changes, autistic people could benefit from services that are more responsive, inclusive, and respectful of their individual needs.

Abstract body: INTRODUCTION & CENTRAL QUESTION: There has been limited research on the contextual factors that support or hinder neuro-affirming practice for adults seeking support around neurodivergence, including autism and ADHD. Contextual factors refer to conditions within organisations or systems, such as staffing, resources, leadership, and service structures that might enable or hinder implementation. The central question was: What contextual factors shape the adoption of neuro-affirming practices for neurodivergent adults?

METHODS/APPROACH: A Realist Evaluation approach was used to explore factors influencing neuro-affirming practice. A preliminary programme theory was developed to identify key aspects of support. Interviews were conducted with 32 senior professionals in leadership roles across Scotland to gather insights on current practices and challenges. Data were analysed to identify key contexts.

OUTCOME: The study found strong support for modifying pathways to better accommodate neuro-affirming approaches, with clear scope for change. However, contextual challenges such as limited resources, restrictive eligibility criteria for help, and rigid service structures were identified as barriers. The increasing demand for services was recognised as both a restrictive factor and an opportunity to rethink traditional models.

DISCUSSION/IMPLICATIONS: This study highlights the importance of understanding the contexts that support or hinder the adoption of neuro-affirming practices for adults. The findings provide insights for improving services for neurodivergent adults and offer lessons that could be applied across different regions. The study contributes to a growing body of knowledge on how to create more inclusive service models. Further research is needed to explore solutions and how to effectively integrate neuro-affirming practices.

Plain English version: There hasn't been much research into what makes it easier or harder for services to use neuro-affirming practices (which support autistic people and ADHDers). This study aimed to fill this gap by asking: What factors influence whether services for neurodivergent adults adopt neuro-affirming practices?

We used a method called Realist Evaluation to understand the factors that affect the adoption of neuro-affirming practices. First, we developed a plan to identify what support is needed for neurodivergent adults. We then interviewed 32 senior professionals from Health and Social Care services in Scotland to learn about their current practices.

Most professionals supported changing services to better include neuro-affirming practices, and there was clear potential for change. However, issues like limited resources, strict rules about who can get help, and rigid service structures were seen as obstacles. The growing demand for services was both a challenge and an opportunity to rethink the "one-size-fits-all" approach and make services more flexible.

This study shows how important it is to understand the factors that either help or hinder the use of neuro-affirming practices. The findings can help improve services for neurodivergent adults and could be useful for other regions too. More research is needed to see how these factors play out in real-world settings.





P3.01.10 - ☐ The impact of experienced stigma on camouflaging and mental health in young adults

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Trigger warning: Mental illness

Practical impact: Strategies to manage social communication challenges, such as scripting or copying body language, may be used by many young adults as a way of managing stigma. Young adulthood, a time when many young people are trying to fit in, may make the use and impact of camouflaging ubiquitous in this age group. The use of camouflaging seems to decrease in neurotypical adults as they move into middle adulthood, yet they appear to persist in autistic people which may lead to burnout. This suggests that young adulthood is an important time to help autistic young people advocate for accommodations and develop helpful coping strategies to reduce the impact that stigma may have on mental health. It is also a call to action for everyone in society to assist with making environments more inclusive and to help celebrate differences. This would aim to reduce the need for camouflaging strategies when autistic people interact with friends and family, and in broader society.

Abstract body: Introduction: Previous research has indicated relationships between stigma, camouflaging, and mental health. The present study investigated contexts that camouflaging is used, and whether they differ for people who identify as autistic. It also investigated whether camouflaging mediates the relationship between experienced stigma and mental health, and whether identifying as autistic moderates the relationship between experienced stigma and camouflaging.

Methods: Participants were a culturally diverse group of 161 young adults (M = 22.41 years). Seventy participants identified as autistic. Participants completed questionnaires related to camouflaging behaviours, camouflaging contexts, experienced stigma, depression and anxiety. **Outcomes:** Autistic young adults engaged in camouflaging more often in formal and informal contexts. Moderated-mediation analyses revealed that experienced stigma was a strong predictor of depression and anxiety for all types of camouflaging. Compensation mediated the relationship of experienced stigma with anxiety, but not depression. Masking and assimilation did not mediate the relationships of experienced stigma with depression or anxiety. None of the proposed models were moderated by identifying as autistic.

Implications: The impact of compensation strategies (such as scripting or copying body language) on anxiety was pertinent to young adults who experienced stigma, irrespective of whether they identified as autistic. Other studies have suggested that camouflaging continues to be used by autistic people past the young adulthood stage, thus increasing the importance of advocating for accommodations for autistic young adults and helping them learn adaptive coping strategies. This may help reduce the negative impact of stigma on mental health as they move into middle adulthood.

P3.01.11 - Virtual Bubbles, Real Insights: A Novel Approach to Mapping Peripersonal Space in Autism

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Trigger warning: No Trigger Warning





Practical impact:

Practical Impact for Autistic People:

This research has the potential to significantly improve the lives of autistic individuals by addressing sensory-motor challenges associated with Peripersonal Space (PPS). Insights from this work can guide interventions and environmental adaptations that enhance critical functions like spatial navigation, motor planning, and sensory integration.

- 1. Therapeutic and Assistive Applications: Understanding PPS variability can inform therapies targeting sensory-motor integration and guide the development of adaptive technologies, such as virtual reality and haptic feedback tools, to enhance engagement in daily activities.
- 2. Educational and Workplace Design: At the societal level, PPS insights can inform the design of classrooms and workspaces (eg: optimizing desk spacing and task setups). This promotes both inclusive and universal design, ensuring that disability accommodations are not an afterthought but an integral part of spatial layout and task delegation. These adjustments can reduce sensory stress and improve task performance and comfort for autistic individuals.
- 3. Social and Community Inclusion: Enhanced understanding of PPS can support social engagement by improving strategies for navigating crowded spaces, avoiding sensory overload, and facilitating interactions in dynamic environments.

By bridging fundamental neuroscience with real-world applications, this research has the potential to foster independence, improve quality of life, and promote greater inclusion for autistic individuals in education, workplaces, and the broader community.

Abstract body:

Peripersonal Space (PPS) is a dynamic sensory-motor interface critical for adaptive functions such as spatial navigation, motor planning, body schema awareness, and social engagement. Alterations in PPS processing have been linked to sensory-motor challenges in autism, affecting obstacle avoidance, object manipulation, and dynamic task recalibration. Understanding PPS in autism is crucial for addressing these challenges and developing tailored interventions.

We present a novel, multimodal approach to assessing PPS, integrating EEG, VR goggles, haptic gloves, motion tracking via Opti-Track, and physiological monitoring through smartwatch-based heart rate variability (HRV). This dynamic bubble-popping task immerses participants in a multisensory environment, allowing precise measurement of PPS flexibility and its neural and physiological underpinnings. The setup is designed to accommodate the diverse profiles of autism, ensuring inclusivity and ecological validity.





Preliminary pilot testing demonstrates feasibility, and anticipated results include detailed characterization of PPS variability in autism and insights into its role in adaptive responses. By linking PPS mechanisms to sensory-motor integration and functional outcomes, this research informs interventions aimed at enhancing spatial navigation, social communication, and sensory-motor coordination in autism.

By bridging fundamental neuroscience with real-world applications, this study offers actionable insights to support inclusion and improve quality of life for autistic individuals.

Plain English version:

Peripersonal Space (PPS) is the space around our body where our brain integrates information from our senses and guides movements. This space helps us navigate our surroundings, plan movements, avoid obstacles, and interact with others. For autistic individuals, differences in how PPS works can create challenges with tasks like understanding personal space, moving through crowded areas, or coordinating movements. Learning more about PPS in autism can help us address these challenges.

We've created a fun and interactive way to study PPS using a virtual reality game where participants pop virtual bubbles. This setup includes VR/AR goggles, gloves that vibrate when a bubble is popped, sensors that track movement, and tools that monitor heart activity and brain responses. It is designed to work for people with different needs and abilities, making it inclusive and accessible.

Our early tests show that this approach works, and we expect it will provide valuable information about how PPS works in autism. This knowledge could lead to practical ways to improve movement, social interactions, and everyday activities for autistic people. By combining technology and science, our goal is to create solutions that help autistic individuals live more independent and fulfilling lives.

P3.01.12 - Using co-created video stories to support better healthcare for families of autistic children with learning disabilities

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Trigger warning: No Trigger Warning

Practical impact: increasing families' voices in designing healthcare, improving healthcare environments

Abstract body: INTRODUCTION

Autistic children with learning disabilities have poorer health outcomes and higher mortality than other groups, with poorer access to healthcare. Time for Autism (TfA) is a programme that supports trainee doctors to understand and advocate for this group through home-visits to such families. A Digital Story-making method involves families creating short video-stories shared pre-





visit to support more neuroaffirmative engagement by professionals. Can Digital Stories enhance connection and understanding to support improved healthcare?

METHODS

An existing story-making toolkit was adapted via a parent with lived experience. Three families in the TfA programme were supported to create their own Digital Stories to share with the medical students making home visits. Two students also created personal stories. Participants shared their video-stories pre-visit. We interviewed 3 parents and 2 students to gauge method feasibility and acceptance, and performed reflexive thematic analysis on transcripts.

OUTCOME

Sharing digital stories supported authentic life aspects, addressed the child's own perspective, supported rounded views and parent voice, supplemented written reports, enabled appreciation of strengths, presented implicit information, enabled parent reflection and supported reciprocity in medical interactions. Student interviews showed the need to adapt methods for those in professional roles.

DISCUSSION

Co-creating digital stories is a practical way of supporting client voice in healthcare and elicited valuable ideas for adapting medical environments towards better healthcare for autistic children with learning disabilities. Families wanted their voices heard and students were keen to understand more. Future work will address evaluation in a larger sample and means of supporting larger-scale implementation.

P3.01.13 - Aquatic therapy for children with ASD; an Intervention Mapping Approach

<u>P. van t Hooft^{1,2}, J. Moeijes², J. van Busschbach^{3,2}, E. Hartman¹</u>

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Trigger warning: No Trigger Warning

Practical impact: This program offers meaningful activities which enhance a child's response to the properties of water. This helps the child feel more comfortable in the water, making learning how to move effectively easier. By improving motor skills, children can focus more on participating with and alongside others.

Abstract body: Regarding the vulnerability of motor development in children with Autism Spectrum Disorder (ASD), aquatic therapy seems valuable. Current aquatic therapy interventions are based on adjustment to the properties of water or objectives about safety but generally lack a basis of pedagogical and motor learning principles. To enhance the effectiveness of aquatic therapy in children with ASD, a planned, systematic and theory-based approach is needed. The principles of Intervention Mapping were applied to design an aquatic intervention tailored to the needs of children with ASD. Empirical findings, theoretical models, focus groups (n=9) and experiences of parents with children with ASD (n=13) and experts in aquatic activities (n=42) were combined to construct an aquatic therapy programme for children with ASD. A structured 12-week intervention programme with a focus on "water adjustment" concerning the unicity of a child with ASD has been developed. The intervention aims to promote participation in safe, versatile, and enjoyable swimming experiences, positive movement behaviour changes, and enhanced control over one's movements in the water. The program is based on the methodology of water adjustment, integrating key principles of implicit motor learning theories while incorporating pedagogical learning aids.





P3.01.14 - Learning Aquatic Skills? Stay balanced.

P. van 't Hooft^{1,2}, J. Moeijes¹, J. van Busschbach^{3,1}, E. Hartman²

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Trigger warning: No Trigger Warning

Practical impact: Balance control is necessary to get grip and feel safe in the aquatic context. If reduced balance skills on land affect learning to move in water, teachers/ therapists should consider this in the learning process to make it as enjoyable and successful as possible.

Abstract body: This study investigated whether the lower quality of motor skills found in children with Autism Spectrum Disorders also extends to water-related balance skills. Balance control is necessary to get grip and feel safe in the aquatic context.

In this cross-sectional study, land- and water-related balance skills of children with and without ASD were compared. A convenient sample of children (n=84) from different locations, between 5 and 10 years old with ASD (n=14) and without ASD (n=77), all without water safety certificates, have been assessed for their land-related balance skills with the Movement ABC-2 and for the water-related balance skills with the Water Orientation Test for ASD (Wot-ASD). The data were analyzed using the non-parametric Mann-Whitney U test.

Statistics indicate differences in age and gender diversion between the groups. The mean age of children with ASD is 7.6 years (sd 1,89), and of TD children, it is 6.1 (sd 1,57). The division between boys and girls in the ASD group is 6:1; in the TD group, 38:39. On total balance, dynamic balance and static balance, significant differences were found, respectively a is .001, .001 and .018 in favour of the TD group. No significant differences were found on the Wot-ASD subscales or total scale.

The higher mean age of the participants with ASD may be associated with more experience time in aquatic contexts, explaining that no significant difference in aquatic skills was found between these groups. The results show differences in land-related balance skills and not in water-related balance skills.

Plain English version: Since the motor development of children with Autism Spectrum Disorders (ASD) is vulnerable, we investigated if this affects their movement quality in an aquatic context. We measured the balance on land and water of 14 children with ASD and 77 typically developed children. These children were in the beginning phase of learning to swim. We found that TD children scored significantly better on balance skills than children with ASD. Regarding balance in the water, we did not find such a difference. The children with autism were, on average, older than the TD children, and the division between boys and girls in both groups was different. A cautious conclusion is that reduced balance skills do not significantly impact learning to swim.

P3.01.15 - Validating the Perceived Quality of Life (PQoL) Questionnaire for Neurodiverse Populations: A Rasch Measurement Theory Approach

<u>P.N. Andersen</u>¹, H. Søberg Finbråten², A. Løvheim Kleppang², A.M. Steigen², E. Øverland^{3,4}, E. Winther Skogli^{1,4}, S. Orm¹, M. Glenne Øie⁵

¹University of Inland Norway, Department of psychology, Lillehammer, Norway, ²University of Inland Norway, Faculty of Social and Health Sciences, Elverum, Norway, ³University of Inland Norway, Faculty of Social and Health Sciences, Lillehammer, Norway, ⁴Inland Hospital Trust Norway, Division of mental health, Lillehammer, Norway, ⁵University of Oslo, Department of Psychology, Oslo, Norway





Trigger warning: No Trigger Warning

Practical impact: Assessing quality of life in neurodiverse individuals is commonly done by using generic questionnaires validated for neurotypicals. This study seeks to see if one such generic tool is valid in a neurodiverse group, and proposes more suitable version for neurodiverse (and neurotypical as well).

Abstract body: Introduction

Neurodiverse conditions (here autism and ADHD) affect social cognition, learning, attention, and mental health. Neurodiverse individuals often face challenges due to societal expectations from a neurotypical-dominated society, impacting their quality of life (QoL). This study aims to investigate the psychometric properties of the Perceived Quality of Life (PQoL) questionnaire using Rasch Measurement Theory (RMT) to determine reliability and validity as a QoL assessment tool for neurodiverse populations.

Methods

PQoL consists of 19 items plus one global item, rated on an 11-point scale. Participants were 97 neurodiverse (autism=26, ADHD=71, M^{age} 21.6 years) and 40 neurotypical individuals (M^{age} 20.9 years). Their scores on PQoL were analyzed using RMT.

Outcome

Significant differences in PQoL scores were found between neurodiverse and neurotypical groups. Due to observed multidimensionality, the PQoL scale could not be considered statistically defensible. Reporting on sub-domain levels does not provide comprehensive QoL information. Therefore, a unidimensional PQoL scale that captures all subscales is needed. By excluding misfitting items and those displaying response dependence, a ten-item version of PQoL is suggested.

Discussion

The current PQoL scale is not unidimensional and thus not fully reliable for assessing overall QoL in neurodiverse populations. A revised ten-item version of the PQoL is proposed to better capture the multidimensional aspects of QoL while maintaining statistical defensibility. Future research should validate this revised scale to ensure it accurately reflects the QoL of neurodiverse individuals, facilitating more effective assessments and interventions.

Plain English version: Autism and ADHD, or being neurodiverse, can affect how people think, learn, pay attention, and interact with others. These differences often make it challenging for neurodiverse individuals to meet societal expectations, which can impact their quality of life (QoL). This study aimed to see if a questionnaire called the Perceived Quality of Life (PQoL) is a reliable and accurate tool for measuring QoL in neurodiverse individuals using a method called Rasch Measurement Theory (RMT).

We analyzed data from 97 neurodiverse participants (autism=26 and ADHD=71, average age 21.6 years) and 40 neurotypical participants (average age 20.9 years). The PQoL questionnaire has 19 questions plus one overall question, all rated on a scale from 0 to 10. RMT was used to check if the PQoL works well for both groups.

The results showed significant differences in PQoL scores between neurodiverse and neurotypical groups. However, the PQoL questionnaire was found to measure multiple aspects of QoL separately rather than as a whole, making it less reliable. To address this, we suggest a shorter, ten-item version of the PQoL that better captures overall QoL by removing questions that didn't fit well.

In summary, the current PQoL questionnaire isn't fully reliable for measuring overall QoL in neurodiverse individuals. A revised ten-item version is proposed to provide a more accurate and





meaningful assessment. Future research should focus on validating this new version to ensure it effectively measures QoL for neurodiverse people, helping to improve their well-being and support.

P3.01.16 - Sport and autism: a pedagogical model and guides

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Trigger warning: No Trigger Warning

Practical impact: Playing sport; improvement of the quality of life; helping autistic people to thrive; awareness-raising of the positive impact of sport on autistic people, boosting the acceptance of this group and their place in society by tackling discrimination, misunderstanding, and bias.

Abstract body: Introduction: There is little research about sport and autism and how fostering access to physical activity, adapted to autistic people's needs, through sustainable solutions, leads to a better inclusion and quality of life of autistic people in sports and society at large. **Methods:** A systematic literature review, construction of an evidence-based pedagogical reference model in a participatory manner, field tests during a triennial project in five countries, involving autistic and non-autistic people, good practices of partners and general data collection on the participation of autistic people in sports activities, APA (Adapted Physical Activity), and how sport impacts autistic people (quantitative study using a survey and qualitative study using interviews). **Outcome:** An evidence-based pedagogical reference model promoting inclusion in sports activities, replicable, scaleable, and transferable across the continent, including concrete guides for sporting context, autistic people and their families/support networks, good practices, and an online e-learning programme.

Implications: It is possible to improve the quality of life of autistic people by fostering social innovation and inclusion through sports in the longer term, according to our scientific methodology: sports, through this method, can be used to help autistic people thrive, at all ages, based on the project's person-centred model, adaptable to different situations, structures, and contexts. A collateral, yet key, side-effect of this research is the awareness-raising of the positive impact of sport on autistic people, boosting the acceptance of this group and their place in society by tackling discrimination, misunderstanding, and bias.

Plain English version: Title: Helping Autistic People Thrive Through Sport

We are exploring how sports can improve the lives of autistic people. By making sports activities fit autistic peoples' needs, we can help them feel included in sports and in society.

How did we study this?

- 1. **Research:** We compared studies and looked at examples from different countries.
- 2. **Field Tests:** We worked with autistic and non-autistic people to test ideas in real life.
- 3. **Data Collection:** We gathered information through:
- Surveys (numbers and facts).
- Interviews (stories and opinions).
- 4. Good Practices: We learned from successful examples.





We wrote a guide to help autistic people join in sports activities. It includes:

- A teaching model for inclusion in sports.
- Tips for sports professionals, autistic people, and their families.
- Examples of good practices.
- Online training and videos.

This guide can be used in different countries and situations.

Before, only a few studies talked about autism and sports. We went further by creating a method to make sports accessible and enjoyable for autistic people. Our work also helps:

- Show the positive impact of sports on autistic people.
- Raise awareness about autism and fight unfair treatment or misunderstandings.

P3.01.17 - □ A worrying trend in Social Anxiety: the mediating role of cognitive emotion regulation, theory of mind, and perceived social support in autistic and non-autistic adolescents

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²University of Padua, Department of Women's and Children's Health, Padua, Italy

Trigger warning: Mental illness

Practical impact: This study provides valuable insights into how social anxiety (SA) and worry are experienced by autistic adolescents and emphasizes the need for tailored approaches to support them. The findings show that autistic adolescents experience higher levels of SA and worry compared to non-autistic peers, with maladaptive emotion regulation strategies playing a key role in the connection between worry and SA. This suggests that addressing these strategies could be important in reducing SA in autistic adolescents.

Practically, the study highlights the importance of early identification and assessment of SA and worry in autistic individuals. Interventions can be designed to focus on improving emotion regulation skills, helping individuals manage worry more effectively, and ultimately reducing the impact of SA on their daily lives. Personalized psychotherapeutic approaches, such as cognitive-behavioral therapy, could be particularly helpful in supporting autistic adolescents with these challenges.

Abstract body: Social Anxiety (SA) is one of the most common comorbid conditions in autistic adolescents, significantly influencing their quality of life (Pickard et al., 2020). Worry is a key feature of SA (Rabner et al., 2017) and contributes to its maintenance (Borkovec et al., 1998; Sassaroli & Ruggiero, 2003). Although several factors are known to maintain SA in the general population, there is limited research on how these factors relate to SA in autistic adolescents. This study aimed to examine the relationship between SA and worry in autistic and non-autistic adolescents, considering the mediating role of emotion regulation (ER) strategies, Theory of Mind (ToM), and perceived social support.

A total of 333 Italian adolescents (110, 63M, autistic without intellectual disability, 222, 147M, non-autistic, aged 13-20) participated, completing tasks assessing SA, worry, ER strategies, ToM, and perceived social support. Between groups' differences were considered and a multigroup mediation analysis was run including social anxiety as a dependent variable, worry as a predictor, and the other variables as mediators.





Results revealed higher levels of SA (F(1,330)=7.53,p=.006) and worry (F(1,330)=9.64,p=.002) in autistic adolescents compared to the non-autistic group. Mediation analysis showed that maladaptive ER strategies significantly mediated the relationship between worry and SA in both groups (Autistic: β =.13,p=.01; Non-Autistic: β =.07,p=.02), while perceived social support only mediated the relationship in the non-autistic group (β =.03,p=.04).

These findings highlight the importance of assessing SA and worry in autistic adolescents, suggesting the need for personalized interventions to reduce SA, addressing worry and maladaptive ER strategies to mitigate their impact.

Plain English version: Social Anxiety is a common condition in autistic teenagers, which can make everyday situations more difficult for them. Worry is a big part of Social Anxiety and can make it harder to manage. While we know what factors can contribute to Social Anxiety in the general population, there is less research on how these factors relate to Social Anxiety in autistic teenagers. This study aimed to better understand the connection between SA, worry, emotion regulation, understanding others' feelings (Theory of Mind), and social support in both autistic and non-autistic teenagers.

The study involved 333 teenagers from Italy: 110 autistic teenagers with normal intelligence and 222 non-autistic teenagers, all aged 13 to 20. Participants completed tasks to measure Social Anxiety, worry, emotion regulation, Theory of Mind, and perceived social support. The results showed that autistic teenagers reported higher levels of Social Anxiety and worry compared to the non-autistic group. The analysis also found that using maladaptive (unhelpful) emotion regulation strategies played a role in increasing Social Anxiety for both groups. However, social support was only found to help reduce Social Anxiety in non-autistic teenagers.

These findings highlight the importance of assessing Social Anxiety and worry in autistic teenagers. They also suggest that therapy should focus on helping these teenagers reduce their worry and the use of maladaptive ways to regulate their emotions.

P3.01.18 - ☐ The National Autism Trainer Programme (NATP). Training NHS mental health professionals in understanding and responding to autism.

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Trigger warning: Mental illness

Practical impact: How a train-the-trainer model improves understanding of and responses to autistic people across a range of mental health and other settings.

Abstract body: The National Autism Trainer Programme (NATP) is a partnership between two non-profit organisations in the UK. Following a successful pilot within NHS inpatient settings, this three-year programme was funded by NHS England. The programme succeeded in training over 4,800 trainers over three years, the course was available to mental health professionals, across all seven NHS England regions, and other relevant staff, working with diagnosed or undiagnosed autistic people from the following settings;

- adult and children and young people inpatient mental health hospitals
- all age community mental health settings, including CAMHS
- residential special schools and colleges
- health and justice settings

It was emphasised that staff must commit to the course and its philosophy and objectives. Led by two senior academic practitioners, the training programme was co-designed, co-produced and co-delivered with autistic people and promoted an experience-sensitive, trauma-informed approach.





Trainers worked in pairs to deliver the course over 4 days. Of each trainer pair at least one was autistic. All courses were taken up with no cancellations. Training sessions were supported by experts with personal experience of mental health services and Trainers received close personal support throughout. A Community of Practice was available to delegates. The training was additional and complementary to The Oliver McGowan Mandatory Training on Learning Disability and Autism.

The congress session will explore and share key learning points from this major exercise in advanced specialised training for this group of professionals.

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The congress session will explore and share key learning points from this major exercise in advanced specialised training for this group of professionals..

P3.01.19 - □ 2000 ideas for suicide prevention: shared and differing priorities from autistic people and those who support them

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Trigger warning: Death and dying, Suicide

Practical impact: We focus on suicide, trauma and mental health, indicated as community priorities (Benevides et al., 2023; Roche et al., 2021). There is exceptionally little research on how to support autistic people who are suicidal or prevent people getting to that point, and the little knowledge that exists, was not co-produced with autistic people. Phase 1 of our survey allowed participants free rein in offering ideas for suicide prevention; specific ideas clustered across all areas of society, including education, health and social care, and are being ranked by a larger pool of participants. The survey was commissioned by the charity the Autism Centre of Excellence at Cambridge, who among UK autism charities, are leading on suicide prevention efforts in autistic people, convening with policymakers on this topic. They will use the findings to influence





policymakers and campaign for change. We believe all the findings from this survey will provide a startling call to action for policy-makers, and this particular survey gives them avenues for meaningful change. PLEASE NOTE: I submitted two abstracts, the other suggested for an oral presentation, this one suggested as a poster. If the conference organisers would prefer me to do the other one as a poster and this one as a talk, I would also be very happy with this.

Abstract body: **Background:** Worldwide, suicide is a leading cause of death for autistic people without learning disabilities (Brown et al., 2024), but there is remarkably little research addressing suicide treatment and/or prevention. Our practical knowledge remains severely underdeveloped, so national suicide prevention strategies lack specific, concrete policies to reduce suicide in autistic people.

Methods: Via online survey, our neurodiverse team gathered ideas from the autism community for policies and interventions aimed at preventing suicide (Phase 1). Subsequently, we will identify community priorities for which ideas warrant further development (Phase 2, finishing January). Phase 1 participants were 272 'supporters' of autistic people (72% parents), and 1481 autistic people with experience of suicidality (average age: 36.7 [SD: 15]). Participants wrote up to 3 ideas, which we analysed thematically.

Results: We analysed 1796 ideas from autistic participants and 295 from supporters, who differed slightly in their priorities. Autistic people prioritised addressing societal stigma/discrimination, expediating autism diagnoses, facilitating peer support and developing autism-specific services/support; supporters prioritised improving *existing* services and improving social support more broadly. Within the 10 most frequent themes in autistic data, we identified 63 specific ideas, recurrent in both groups, which will be ranked in Phase 2 by a larger sample.

Conclusions: Phase 1 highlights the need for societal and systemic change in response to suicide in the autistic community. Though ideas for suicide prevention policy and practice spanned multiple arenas from health- to social care, autistic people prioritised *autism-specific* and *peer* support, underscoring the need for co-production in steps towards suicide prevention.

Plain English version: Introduction: Suicide is a leading cause of death for autistic people without learning disabilities. While our understanding of risk factors is growing, our practical knowledge about how to prevent suicide in autistic people is severely lacking. All interventions should be informed by the needs and wants of the autistic community, so it was to the community we turned to hear their ideas of how to prevent suicide in autistic people.

Approach: In Phase 1 of this study, 1481 autistic people with experience of suicidality, and 272 'supporters' of autistic people with experience of suicidality (72% parents), completed an online survey. They could enter up to 3 ideas, which we analysed thematically. Phase 2 is ongoing: in it, we will identify community priorities for which ideas warrant further development.

Results: We analysed 1796 ideas from autistic participants and 295 from supporters, who differed slightly in their priorities. Autistic people prioritised addressing societal stigma/discrimination, expediating autism diagnoses, facilitating peer support, and developing *autism-specific* services/support; supporters prioritised improving *existing* services and improving social support more broadly. We identified 63 specific ideas from autistic people, which will be ranked in Phase 2 by a larger sample.

Conclusions: Phase 1 indicated that beyond focusing on the crisis point, autistic people highlighted the need for societal and systemic change. Their ideas for suicide prevention policy and practice spanned multiple arenas from health- to social care; they especially highlighted the importance of peer support, co-production and autism-specific offerings. Phase 2 priorities will be ready for the conference.

P3.01.20 - ☐ Suicide prevention interventions and supports for the autistic population: a scoping review

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Trigger warning: Death and dying, Mental illness, Self-harm, Suicide

Practical impact: This review synthesised data on suicide prevention interventions and supports which are currently being used with the Autistic community. This type of review has not been conducted to date. The review expands our understanding of suicide prevention for Autistic people. It is hoped that this review can inform further research on suicide prevention in the Autistic community which in turn will inform practise.

Abstract body: Introduction: Suicide is a leading cause of death among Autistic individuals, who are are up to six times more likely to die by suicide than non-Autistic individuals. Research highlights a lack of appropriate supports for Autistic individuals experiencing suicidality. This review aims to address this gap by synthesise evidence related to Suicide Prevention Interventions and Supports being used with Autistic individuals.

Method: A scoping review was conducted to map available literature on Suicide Prevention Interventions and Supports used with the Autistic community. The methodological guidelines set out by the Johanna Briggs Institute Manual for Evidence Synthesis were used. Electronic databases (PubMed, CINHAL Ultimate, PsycInfo, EMBASE), reference lists of included articles and grey literature was searched. Two reviewers independently screened all articles based on predetermined inclusion and exclusion criteria. Data extraction was piloted by two reviewers and continued by one reviewer. A narrative summary of findings was conducted. Results are reported in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Review (PRISMA-ScR) statement.

Outcome: This scoping review is currently in progress. The results will be available for presentation at the conference.

Discussion: The findings of this review will address the gaps in research related to suicide prevention intervention and supports used with Autistic individuals. The implications of this lack of knowledge will be discussed. It is hoped that the findings of this review will encourage further research in the area, thus improving interventions and supports aimed at preventing suicide in the Autistic community.

Plain English version: Introduction: Suicide is a major problem within the Autistic community. Autistic people are more likely to die by suicide than non-Autistic people. However, there is not much research about the use of interventions and supports to prevent suicide in Autistic people. The aim of this study was to gather available information about interventions and supports that are being used with Autistic individuals to prevent suicide.

Method: This is a 'scoping' review which is a type of review that collects and summarises information on a broad topic. It looks at what information is available and gathers it to identify gaps in knowledge. The review followed guidance from the 'Johanna Briggs Institute' manual for conducting reviews. Research databases along with other methods were used to find information about this topic. Two researchers examined the information and decided which fitted the objective of the research. When the final pieces of information were decided upon, the findings were examined. The review includes a discussion of the findings.

Outcome: The review is being conducted at present. The findings of the review will be available for presentation at the Autism Conference in September 2025.

Discussion: The findings of this review will help us to better understand the supports used as there is a lack of research on suicide prevention supports with Autistic people. Hopefully, this study will encourage other researchers to investigate this area. More research will hopefully lead to better supports being available for Autistic people experiencing suicidal thoughts and behaviours.

P3.01.21 - ☐ Exploring health and healthcare experiences among autistic individuals in Spain: a mixed-methods study

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Trigger warning: Mental illness

Practical impact: This communication highlights the practical need for systemic changes to improve healthcare experiences for autistic individuals. Key recommendations include creating autism-friendly, accessible environments and implementing personalized care protocols to meet diverse needs. Gender-sensitive approaches are emphasized to address disparities faced by autistic women, such as higher prescription rates and unmet support needs. Training healthcare professionals in autism-inclusive practices and integrating healthcare, social, and educational services are identified as critical steps to ensure person-centered care. The study also advocates for national guidelines and longitudinal research to remove structural barriers and promote equitable, specialized healthcare, ultimately enhancing the quality of life for autistic individuals.

Abstract body: This study examines the health and healthcare experiences of autistic people aged 16 and older in Spain, highlighting systemic disparities compared to the general population. A mixed-methods approach involved a national health survey of 1,333 participants, 261 of whom were autistic (64% male, 36% female), alongside 53 qualitative interviews and focus groups with autistic people (N=11), family members (N=15), and healthcare professionals (N=27). Findings reveal systemic barriers to equitable healthcare for autistic people. Compared to the general population, they reported higher rates of chronic conditions and mental health challenges, with notable gender disparities. Women faced greater disadvantages, including higher rates of tranquilisers, relaxants, sleeping pills, antidepressants and stimulants prescriptions (65.5% vs. 49.1% for men). Age correlated with increased health challenges and medication reliance, reflecting unmet support needs. Participants also expressed lower confidence in managing their health and navigating healthcare systems, along with dissatisfaction with providers' attitudes and practices.

For autistic individuals, being a woman or having an associated intellectual disability is linked to a higher number of diagnoses and prescriptions. Barriers included limited autism-specific accessibility in health services, sensory and cognitive inaccessibility, and insufficient professional training on autism. Fragmentation across healthcare, social, and educational systems further restricted access to person-centred care.

Recommendations emphasize creating accessible environments, personalized care protocols, extended consultation times, and family involvement. Training healthcare professionals in autisminclusive practices and systemic service integration are essential. National guidelines and longitudinal studies are urgently needed to dismantle structural barriers and foster equitable, specialized healthcare.

Plain English version: This study looks at the health and healthcare experiences of autistic people aged 16 and older in Spain. It found that autistic people face more health problems and difficulties in getting fair healthcare compared to the general population. Researchers collected data through a national health survey with 1,333 participants, including 261 autistic people, and through interviews and focus groups with autistic individuals, their families, and healthcare professionals.

The study showed that autistic people often have more chronic health issues and mental health challenges. Women, in particular, faced more difficulties, including higher rates of medication use, such as tranquilisers and antidepressants, compared to men. Older autistic individuals were more likely to have health problems and rely on medication, showing that their support needs are often not fully met. Many autistic people also reported feeling less confident in managing their health or using healthcare services, and they were often dissatisfied with how healthcare providers treated them.

Barriers included a lack of autism-friendly healthcare services, sensory and cognitive challenges, and limited training for healthcare professionals on autism. Problems with how healthcare, social, and educational services are connected made it even harder for autistic people to get the care they need.

The study recommends creating healthcare environments that are more accessible and personalized for autistic people, providing longer consultation times, involving families, and improving professional training. It also calls for national policies and long-term research to remove barriers and ensure better, more equitable healthcare for autistic people.





P3.01.22 - ☐ Preliminary development and psychometrics of the Neurodiversity Affirming Practice Index.

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Trigger warning: Mental illness

Practical impact: This work has significant practical implications for improving mental health care for autistic people. Autistic adults are overrepresented in Mental Health settings, but are less likely to receive care that meet their needs. Neurodiversity affirming practice (NAP) has been suggested as a good first step for creating assessible psychological practices. By developing a reliable tool to assess neurodiversity-affirming practice, it provides a framework for evidence to support the greater implementation of NAP in psychological care settings. The strong association between NAP and therapeutic alliance suggests that adopting these practices can foster more positive and effective relationships between autistic clients and psychologists. This could lead to better understanding of autistic experiences, increased trust, and improved access to tailored care.

Abstract body: **Background:** Autistic adults are over-represented in mental health services, and face challenges finding mental health support that meets their needs. Neurodiversity-affirming practice (NAP) aims to address this gap. A Delphi study involving autistic clients and psychologists identified 104 statements defining NAP, organized into seven core principles. This current study aimed to use these statements to develop the Neurodiversity Affirming Practice Index (NAPI), which assesses clients' perceptions of NAP.

Methods: Tool development aligned with the PROMIS framework (2013) in three stages. Stage 1 involved qualitative interviews with six autistic adults to refine items from the Delphi study. Stage 2 pilot-tested the tool with 40 autistic adults, resulting in 89 refined statements and a color-coded scoring system.

Stage 3 recruited 373 autistic adults (Mage = 31.84; 175 women, 138 men, 59 non-binary) via Prolific. Participants completed the NAPI, therapeutic alliance, and healthcare accommodation measures, with 287 re-rating the NAPI after five days.

Results: Exploratory Structural Equation Modelling (ESEM) analysed the factor structure based on the original seven principles. Dropping poorly performing items and two abstract principles (e.g., humility in practice) improved model fit indices. The final five-factor model included 63 items with strong internal consistency (all McDonald's $\Omega \ge .90$) and test-retest reliability (r=.86, p<.001). Positive correlations with therapeutic alliance (r=.78, p < .001) and healthcare accommodations (r=.66, p<.001) supported convergent validity.

Conclusions: The NAPI demonstrated strong psychometric properties. Higher NAPI scores were associated with stronger therapeutic alliances, suggesting that neurodiversity-affirming practices improve working relationships between autistic clients and their psychologists.

P3.01.23 - Evaluating a low-intensity group programme to support care-work-life balance in parents of autistic children with a multimethod study

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Trigger warning: No Trigger Warning

Practical impact: This study demonstrates the potential of a low-intensity support programme to enhance the quality of life of parents of autistic children. This might in turn have a beneficial effect on positive interactions between parents and children, which would then also have a positive impact on the well-being of the children. Further research is needed to support this claim.

Abstract body: Introduction and Objective: Parents of autistic children often struggle to balance personal and caregiving roles. This study evaluated whether a low-intensity group support programme could help parents manage these roles, ultimately improving their quality of life. Methods: This participatory study involved autistic adults in the design process to ensure relevance and inclusivity. Study 1 included 39 parents who attended four monthly group workshops offering tools to enhance balance in family life. Parents completed questionnaires on different aspects of their care-work-life balance and quality of life during the final workshop, 16 weeks and 8.5 months later. Study 2 involved interviews with 12 parents who had participated in the workshops over the past decade to explore the long-term impact and active ingredients. Results: A repeated measures analysis of variance showed significant improvements in parents' self-assessed care-work-life balance, perceived support and quality of life after the workshops compared to before, F(14, 25) = 7.00, p < .001, $\eta p^2 = 0.80$. Interviews highlighted the value of practical information about services and the opportunity to exchange experiences with peers as universally positive aspects. Most parents showed greater awareness about the importance of finding a good balance between different roles. Long-term impact varied among participants. Conclusion: This study demonstrates the potential of a low-intensity support programme to enhance the quality of life of parents of autistic children. Further research is needed to examine whether these improvements in parental well-being also positively impact their children.

P3.01.24 - Extending hospitality to all: an action project to deliver a more neuroaffirmative sensory environment and service at Lucena Clinic CAMHS

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Trigger warning: No Trigger Warning

Practical impact: This work at a Child and Adolescent Mental Health service has the potential to significantly improve the lives of autistic individuals by creating a more accessible and supportive environment tailored to their needs. Key practical impacts include:

- 1. **Enhanced Accessibility**: Implementing sensory-friendly changes, such as improved signage and lighting, ensures that autistic individuals can navigate and use the clinic's facilities with greater ease and comfort.
- 2. **Improved Communication**: The use of Plain English in materials and the development of a neuroaffirmative website promotes clearer and more accessible communication, reducing anxiety and misunderstandings for service users and their families.
- 3. **Inclusive Practices**: The comprehensive staff training fosters a deeper understanding of autism, enabling professionals to provide care that is respectful, empathetic, and aligned with neurodivergent perspectives.
- 4. **Representation and Voice**: Actively involving autistic individuals and their families through focus groups ensures their voices are heard, leading to services that are more aligned with their preferences and needs.
- 5. **Wider Influence**: As the first Autism-Friendly accredited mental health service in Ireland, this initiative sets a benchmark for others, encouraging broader adoption of neurodivergent-inclusive practices across mental health and related services.





By addressing sensory, communication, and inclusivity challenges, this work creates a more welcoming, supportive, and effective service for autistic people, promoting better engagement, reduced stress, and more positive outcomes.

Abstract body: Saint John of God Community Mental Health Services aims to foster a neurodivergent-inclusive environment at Lucena Clinic Child and Adolescent Mental Health Service (CAMHS). In 2023, we launched the "Extending Hospitality to the Neurodivergent Community" project, supported by funding from Saint John of God Hospitaller Services Group and the Better Life Programme. The initiative seeks to enhance the engagement and experience of neurodivergent service users and their families.

The project's planning phase spanned 12 months, involving the recruitment of a Project Coordinator and forming a multidisciplinary staff working group. Collaboration with stakeholders, including young service users, staff, and external neurodivergent organizations such as AsIAm, ADHD Ireland, and the National Adult Literacy Agency (NALA), was pivotal. Service evaluation focus groups with young people and staff training ensured a comprehensive approach. Key achievements include implementing recommendations from a sensory environmental audit by AsIAm. Changes included improved signage, lighting adjustments, staff training, a neuroaffirmative website, and reworded communication materials with the Plain English mark. Feedback from young service users aligned with audit recommendations, underscoring the project's relevance.

In July 2024, Lucena Clinic became Ireland's first Autism-Friendly accredited mental health service, marking a significant milestone. The initiative continues as a model for other Saint John of God services and external organizations, advancing universal accessibility practices.

P3.01.25 - Utility of the Autism Clinical Interview for Adults (ACIA) as a tool for autism assessment in adulthood

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Trigger warning: No Trigger Warning

Practical impact: The ACIA is a new measure used with adults in the assessment of possible autism. For the first time there is research evidence from clinical practice on the use and utility of the ACIA. The ACIA was reported by professionals to be neuroaffirmative and acceptable to autistic adults. The findings suggest the ACIA is meeting a clinical need for an interview designed for adults and filling a gap in service provision. This positive feedback about the ACIA can be used by professionals and services to consider whether to use the ACIA in their assessments of adults for possible autism. Professionals can contact the author team for opportunities about translation, and leading ACIA training courses in their own country.

Abstract body: **Background.** We developed a new diagnostic interview for adult autism assessment: the Autism Clinical Interview for Adults (ACIA). This study aimed to investigate the views of professionals trained about ACIA use since training and clinical utility.

Methods. Professionals trained in ACIA use were contacted by email with a questionnaire with closed/open-text questions about their experiences of the ACIA. Responses were analysed using framework analysis and descriptive statistics.

Results. 337/1092 (30.2%) professionals responded; 70% had used the ACIA in practice. 61% had incorporated the ACIA into their diagnostic service. The ACIA was considered useful for identifying autism spectrum characteristics (99%), and co-occurring conditions (73%); providing information to feedback following assessment (92%); and providing information for writing reports (89%).

Thematic analysis revealed five themes: (1) Client feedback on the ACIA and meaning of the diagnosis: 'Clients find that it's comprehensive, feels appropriate and affirming' (2) Changes to practice resulting from ACIA training and ACIA use: 'It's definitely increased my awareness and





changed the way I approach assessment' (3) How ACIA information was used in writing reports: 'To summarise key points in reaching my conclusions' (4). How the ACIA was helpful/not helpful to professionals: 'Supported more neuroaffirmative ways of thinking and working' (5) Barriers to ACIA use: 'Online/electronic ability to score and enter details so the report self-populates'.

Conclusions. Evaluation of ACIA utility shows most responders use the ACIA, and that the interview facilitates the assessment of autism in adulthood. Collaboration opportunities, and translation/training opportunities for other countries are available.

Plain English version: Background. We developed a new diagnostic interview for the assessment of adults with possible autism called the Autism Clinical Interview for Adults (ACIA). The aim of this study was to investigate the views of professionals who have received training about ACIA use since training and its usefulness in their clinical practice.

Methods. Professionals who had been trained were emailed a questionnaire about their experiences using the ACIA.

Results. We invited 1092 professionals to take part; 337 (30%) responded. 70% of professionals had used the ACIA and 61% had incorporated it into their diagnostic service. Professionals said the ACIA was useful for identifying autism spectrum characteristics (99%), and co-occurring conditions (73%). 92% said the ACIA was useful for providing information to feedback following assessment and providing information for writing reports (89%).

We identified five themes: (1) Client feedback: `clients find it's comprehensive, feels appropriate and affirming' (2) Changes to practice after ACIA training: 'It has definitely increased my awareness and changed the way I approach assessment' (3) How ACIA information was used in writing reports: 'To summarise key points in reaching my conclusions' (4) How the ACIA was helpful/not helpful: `Supported more neuroaffirmative ways of thinking and working' (5) Barriers to using the ACIA: an `Online/electronic ability to score and enter details so the report self populates' would be helpful.

Conclusions. The findings show most responders use the ACIA, finding it useful for the assessment of autism in adulthood. Collaboration opportunities, and translation/training opportunities for other countries are available.

P3.01.26 - Improving mental health in adolescents with autism spectrum disorder through enhanced self-awareness and parental support

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Trigger warning: Mental illness

Practical impact: Adolescents with ASD are particularly vulnerable to depression and anxiety due to challenges in emotional regulation, social integration, and self-awareness. These mental health difficulties can disrupt their academic performance, social relationships, and transition into adulthood.

By identifying the role of self-awareness and parental understanding in mitigating depressive symptoms, this research highlights actionable strategies that can be implemented in everyday contexts. For instance, empowering adolescents with tools to better understand and communicate their emotions can improve their ability to navigate social situations and reduce emotional distress. At the same time, providing parents with education and resources to accurately perceive their child's difficulties can foster more supportive family dynamics and ensure that adolescents receive the help they need.

In practical terms, this knowledge can inform the development of school-based programs, therapeutic interventions, and community initiatives tailored to the specific needs of adolescents with ASD. It also underscores the importance of integrating mental health training into teacher and caregiver education, ensuring that those who work closely with adolescents with ASD are equipped to recognize and address their mental health needs.





Abstract body: Adolescents with Autism Spectrum Disorder (ASD) face unique challenges that significantly impact their mental health, including heightened risks of depression and emotional isolation. The presented study explores the critical role of self-awareness and parental understanding of ASD-related difficulties in shaping mental health outcomes for this population. Utilizing data from 223 adolescents and their parents, the research examines correlations between self-reported and parent-assessed symptoms of ASD and depression.

The findings highlight a significant relationship between discrepancies in these assessments and the severity of depressive symptoms. Adolescents who perceive themselves as facing higher levels of ASD-related challenges than acknowledged by their parents exhibit the most pronounced depressive symptoms. Conversely, those whose parents report higher ASD traits than self-reported by adolescents also show elevated depressive tendencies.

This presentation will discuss the implications of these findings for improving mental health support for adolescents with ASD. It will emphasize the need for tailored interventions that enhance self-awareness, foster effective communication within families, and bridge gaps in perception. Strategies, including psychoeducation for parents and integrative school-based programs, will be explored as practical avenues to mitigate depression and promote emotional well-being.

By addressing both individual and systemic factors, this study underscores the potential for proactive, informed approaches to substantially improve the mental health and overall quality of life for adolescents with ASD.

P3.01.27 - □ Lived experiences of depression in autistic children and adolescents: A qualitative study on child and parent perspectives

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Trigger warning: Mental illness

Practical impact: This work highlight the lived experience of autistic young people in relation to their experience of depression. The findings highlight masking of mental health difficulties. They reveal a link between being autistic and developing depression and the difficulties of being autistic in a complex, neurotypical world.

Abstract body: Introduction: Depression is highly prevalent in autistic children and adolescents. Despite this, little is known about the nature of the autistic child's subjective experience of depression and the impact of depression on their lives.

Methods: The current study adopted a qualitative approach to understand the experience and daily life impact of depression for autistic children and adolescents from their own perspective. In order to provide a comprehensive understanding of child depression, parents of the same children were also interviewed.

We conducted a qualitative study with 7 autistic children and adolescents and their parents and used thematic analysis to identify common themes and individual differences. All children had previously experienced at least one depressive episode.

Outcomes: Six main themes were identified: (1) Autism related experiences; (2) Difficulties with peer relationships; (3) Co-occurring relationships between anxiety and depression; (4) Impactful pessimism and anhedonia; (5) Impactful difficulties with focus and concentration and (6) Feelings of irritability, including aggressive behaviours. Parent's accounts of their children's experience of depression mirrored the child's perspective. Novel findings included reports of depression related restriction of diet variety and masking of mental health difficulties. Children and parents linked being autistic and developing depression, referring to the difficulties of being autistic in what they perceived is a complex, neurotypical world.





Discussion: These results highlight key challenges that autistic children and their families experience, calling for increased awareness of the impact of depression on autistic young people.

P3.01.28 - ☐ School Distress and the School Attendance Crisis: Lessons from the forest

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Trigger warning: Mental illness

Practical impact: There is an increasing body of evidence to suggest that it is autistic children and young people (CYP) who experience the greatest difficulties accessing school-based education and that school attendance for autistic students often results in feelings of extreme distress. In the largest empirical study to date, which included data from 947 CYP struggling to attend school in the UK and an age-matched control group, we found that 92.1% of the CYP experiencing difficulties attending school were neurodivergent, 83.4% were autistic, and that the odds ratio of autistic CYP experiencing school attendance difficulties relative to their non-autistic peers was 46.61 (Connolly et al., 2023, see also Carrick et al., 2024; Fielding et al., 2024 for replications). Harrowing and enduring mental health difficulties for autistic youths were also documented, with similar deleterious outcomes reported elsewhere (Atkinson et al., 2024; Billington et al., 2024; Fielding et al.; Goodall, 2018; Horgan et al., 2023), and yet, despite these sustained experiences of distress, trauma, and mental health difficulties linked to school attendance for autistic students, there is little empirical research exploring how best to support autistic CYP in education when attending school is no longer viable. There is, however, increasing anecdotal evidence that trauma-informed, Neurodivergent-led Forest Schools are successfully re-engaging autistic CYP in group-based education. This study adds to this body of evidence, whilst simultaneously demonstrating how the learning environment (and those within this environment) can either enable or disenable autistic CYP's access to education.

Abstract body: Neurodivergent children and young people (CYP), particularly autistic CYP, are significantly over-represented amongst those who experience School Distress and school attendance difficulties. Sensory processing difficulties, elevated anxiety/demand avoidance, and a lack of understanding of the autistic lived experience amongst educational staff have all been associated with School Distress. As the sensory environment of Forest School offers a rich contrast to the busy, enclosed traditional school environment, we explored how autistic young people's sensory experiences of school and Forest School compare. We also compared whether levels of perceived stress and anxiety differ across environments.

Six autistic CYP (aged 11-19 years) were recruited from a neuro-affirming, neurodivergent-led, therapeutic forest school. All CYP had experience of both Forest School and mainstream school. The CYP took part in two online, semi-structured interviews - one focused solely on their experiences at forest school, and the other solely on experiences at school.

All CYP reported more sensory distress at school and, as a group, were significantly more likely to report feeling stressed, upset, panicky, and afraid whilst at school relative to whilst attending Forest School. They also reported trying to hide their autism significantly more often at school and being significantly less able to think clearly and less able to cope with challenges at school relative to Forest School.

These findings suggest that neurodivergent-led therapeutic Forest School provision may offer a more accessible learning environment for autistic CYP and may potentially reduce instances of School Distress, commonly associated with traditional school attendance in autistic CYP.





P3.01.29 - Enhancing the quality of clinical practice and moving towards more equitable services for autistic individuals in COUNTRY by establishing a national team of ADOS-2/ADI-R instructors

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Trigger warning: No Trigger Warning

Practical impact: Example of delivering best practice: Establishing a national team for ASD assessment training to support clinicians in the specialist health services and improve the quality of health services for autistic individuals.

Abstract body: Prevalence studies based on data in the COUNTRY Patient Registry show that the proportion of children diagnosed with ASD vary significantly across regions (REFERENCE). Similarly, a governmental inquiry into services available to individuals with ASD found great variability in terms of availability and quality of assessment and support (REFERENCE). In 2014, the Regional Resource Centers for Autism, ADHD and Tourette syndrome established a national team of ADOS-2/ADI-R instructors in order to improve the quality of health services for autistic individuals and support clinicians in the specialist health services who use ASD assessment tools. This team is comprised of experienced clinicians from each of the four health regions. Tasks include developing training material (PowerPoint presentations, LANGUAGE ADOS-2/ADI-R films with calibrated score protocols, templates for report writing), and calibration and networking with international ADOS-2 trainers.

The national instructors are responsible for training clinicians in their respective health regions, thus encouraging equal assessment practices across regions. Courses include:

- Introduction (ASD diagnostic criteria, heterogeneity, comorbidity, developmental qualities, assessment quidelines)
- Administration of ADOS-2/ADI-R
- Watching ADOS-2/ADI-R films and practice scoring
- Review of research, limitations of the instruments, clinical practice, report writing
- Support through regular clinician calibration meetings in the regions

Establishing a national instructor team has led to ADOS-2 and ADI-R being implemented in most ASD assessments in COUNTRY. Future plans include developing digital training resources and establishing local clinician networks for sustainable implementation.

P3.01.30 - ☐ Anxiety symptoms as prodromal to depression in neurodivergent youth





<u>S. Orm</u>¹, J.J. Wood², I.N. Fossum³, K. Adams², P.N. Andersen¹, K. Fjermestad⁴, M.G. Øie⁴, E.W. Skogli¹

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Trigger warning: Mental illness

Practical impact: The findings suggest that addressing and preventing anxiety symptoms in autistic youth can prevent negative developmental outcomes. Implementing programs to remove societal barriers and increase acceptance of neurodivergent differences may reduce anxiety by minimizing aversive situations. Additionally, autism-adapted anxiety treatments can help prevent the development of depressive symptoms, leading to better overall mental health for autistic individuals.

Abstract body: INTRODUCTION

Neurodivergent youth often experience anxiety and depressive symptoms that can hinder adaptive functioning and well-being. There is limited knowledge regarding the relationship between anxiety and depression in neurodivergent youth. This study aimed to investigate whether the relationship between anxiety and depressive symptoms is unidirectional or bidirectional in neurodivergent youth.

METHODS

The study involved 173 youth (mean baseline age = 11.7 years, SD = 2.1, 64% males, 36% females), including 38 autistic youth, 85 youth with ADHD, and 50 comparison youth. Data were collected at baseline (T1), 2-year follow-up (T2), and 10-year follow-up (T3). We used youth-reported measures of anxiety and depressive symptoms and analyzed the data using cross-lagged panel models to understand the temporal relationship.

OUTCOME

We found that in neurodivergent youth, higher levels of anxiety symptoms at T1 and T2 predicted higher levels of depressive symptoms at T2 and T3. These findings persisted even after accounting for the stability (i.e., autoregressive) effects of depressive symptoms. The results support a prodromal model, indicating that anxiety symptoms can predict the emergence of depressive symptoms over time but not vice versa.

IMPLICATIONS

Our findings suggest that early identification and intervention for anxiety symptoms in neurodivergent youth could play a crucial role in preventing the development of depressive symptoms. This has implications for clinical practice in improving the mental health of neurodivergent youth. For example, implementing programs to remove societal barriers and increase acceptance of neurodivergent differences may reduce anxiety by minimizing aversive situations and thereby preventing the onset of depressive symptoms.

P3.01.31 - "I went from feeling as if I was fundamentally broken, to just fundamentally different": The journey to an adult autism diagnosis in Ireland.

<u>T. Geraghty</u>¹, A. O'Connor¹

¹University of Galway, School of Psychology, Galway, Ireland

Trigger warning: No Trigger Warning

Practical impact: The aim of this study was to explore the lived experience of the journey to an adult autism diagnosis in Ireland. Whilst the literature yields some international qualitative studies exploring the experiences of an adult diagnosis, there are no published studies exploring these





experiences in an Irish context. This gap was the catalyst for the current research study. Within Ireland, there is no clearly defined pathway for an adult to pursue an autism assessment within the public service. The lack of public services was identified by participants as a barrier to assessment for many, leading to a further delay in diagnosis. Many participants also shared the financial implications of pursuing a private assessment. All participants in this study shared that they wished that they had been diagnosed earlier in life and lamented the associated missed opportunities that may have arisen from an earlier diagnosis. These findings have practical implications for the autistic community as it provides clear evidence of the need for an accessible pathway to an adult autism assessment through public services in Ireland. The study also highlights that autistic adults experience complex emotional responses to an adult diagnosis. From a practical perspective, this indicates that this cohort may benefit from psychological support to assist in exploring their identity in light of their diagnosis, with particular emphasis on reframing past experiences.

Abstract body: Introduction: The lived experiences of autistic adults diagnosed in adulthood is not well researched in an Irish context. Research from other countries has illustrated that an adult diagnosis can have a profound impact on an individuals' life, and their understanding of themselves. Both positive and negative responses to an adult diagnosis are documented in the literature. This study aims to answer the research question, "what is the lived experience of the journey to an adult autism diagnosis in Ireland".

Method: A panel of autistic researchers were consulted during the design of this qualitative research study. Semi-structured interviews were conducted with 8 autistic adults who had been diagnosed in adulthood within Ireland. Interpretative Phenomenological Analysis (IPA) was employed to explore participants' experiences.

Outcome: Analysis generated one Group Experiential Theme (GET), 'A Journey of Self-Understanding: Navigating My Autistic Identity'. Three subthemes emerged from this GET, 'Preparing for and Responding to a Diagnosis', 'Reframing Experiences through an Autistic Lens' and 'Dropping the Mask: Embracing Authenticity through Self-Compassion'.

Discussion: Previous international research has highlighted that receiving an adult autism diagnosis is fundamental to a person's understanding of themself and how they relate to the world. This theme was mirrored in the present study, with one participant describing his diagnosis as "a Damascus moment". This comparison highlights the profound and transformative impact of an adult diagnosis. The findings illustrate the need for increased awareness of autism and its diverse presentation amongst healthcare professionals and the wider public to facilitate and support earlier diagnoses.

Plain English version: Introduction: Not much research has been done on the experiences of autistic adults who are diagnosed later in life, especially in Ireland. Studies from other countries show that getting an autism diagnosis as an adult can affect someone's life and how they understand themselves. Some people have positive reactions to the diagnosis, while others have negative ones. This study aims to explore the experiences of adults in Ireland who received an autism diagnosis as adults.

Method: A group of autistic researchers helped design this study. The researcher completed interviews with 8 autistic adults in Ireland who were diagnosed when they were adults. The interviews were analysed using a method called Interpretative Phenomenological Analysis (IPA) to understand the participants' personal experiences.

Outcome: The analysis revealed a main theme, "A Journey of Self-Understanding: Navigating My Autistic Identity," and three subthemes:

- 1. "Preparing for and Responding to a Diagnosis"
- 2. "Reframing Experiences through an Autistic Lens"
- 3. "Dropping the Mask: Embracing Authenticity through Self-Compassion"

Discussion: Previous research from other countries has shown that getting an adult autism diagnosis can be life-changing and can help people to better understand themselves and the world around them. This study found similar results. The study shows that there is a need for more awareness of autism and how autism affects different people in different ways. This could help make earlier diagnoses easier for adults who may be autistic.





P3.01.32 - □ Autistic adults' experiences of suicidality: A cross-sectional study of the role of psychological and demographic factors.

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Trigger warning: Suicide, Self-harm

Practical impact: The findings of this study will help enhance our understanding of Autistic adults' experiences of

suicidality. This research will also provide insight into the factors that contribute to the experiences of suicidality in Autistic adults. Advancing our knowledge in these areas will assist future researchers in the development of tailored support for Autistic adults who experience suicidality.

Abstract body: Objective; Research indicates that suicidality is highly prevalent in autistic adults. However, few studies have explored this in community samples. The current study explores the role of demographic factors and the extent to which the interpersonal theory of suicide provides a useful framework for understanding of Autistic adult's experiences of suicidality. **Methods:** The researchers designed an anonymous online survey in partnership with an Irish Autistic charity (AsIAm) to explore the experiences of suicidality and the potential mechanism of suicidality in an Irish community sample. The online survey measured lifetime suicidality (SBQ-ASC), Autistic traits (RAADS-R), experiences of thwarted belongingness and perceived burdensomeness (INQ-10), and demographic characteristics.

Results: The researchers will present descriptive statistics and explore to what extent demographic factors account for Autistic adults' experiences of suicidality. The researcher will also explore whether the relationship between autistic traits and suicidal behaviour is mediated by perceived burdensomeness and thwarted belongingness. The results of the above analyses will be discussed.

Implications: This study will enhance our understanding of suicidality within this underresearched population and will assist future researchers in the development of tailored supports and interventions.

Plain English version: Objective: Research has shown that Autistic adults experience suicidal thoughts or behaviours more often than Neurotypical people. Up to now, few research studies have explored this with Autistic adults in the general population. This study was also the first to explore Autistic adult's experiences of suicidality in an Irish population. This study examined the role of participant characteristics (demographic factors) and whether the Interpersonal Theory of Suicide (IPTS) aligns with Autistic adult's experiences of suicidality.

Methods: The researchers collaborated with the Irish Autism charity, AsIAm, to develop an anonymous online survey. The survey measured lifetime experiences of suicidality, Autistic traits, demographic characteristics, perceived burdensomeness and thwarted belongingness (key components of the IPTS). Participants were invited to complete the online survey on various social media platforms and newsletters. Participation was entirely voluntary.

Results: Findings presented will include descriptive statistics and explore to what extent demographic factors account for Autistic adults' experiences of suicidality. The researcher will also explore the relationship between autistic traits and suicidal behaviour, and whether this relationship is explained or partially explained by IPTS factors (perceived burdensomeness and thwarted belongingness). The results of the above analyses will be discussed.

Implications: This study will improve our understanding of suicidality within this underresearched population and will assist future researchers in the development of tailored supports and interventions.

P3.01.33 - □ Building a global neurodivergent practitioner network: a model for professional peer support and service delivery





<u>T. O'Donnell-Killen</u>¹

¹Thriving Autistic CLG, Dublin, Ireland

Trigger warning: Mental illness

Practical impact: PRACTICAL IMPACT FOR AUTISTIC PEOPLE: This work directly improves access to mental health support by:

- Enabling autistic people to find practitioners who share their neurotype
- Reducing communication barriers in therapeutic relationships
- Creating clear pathways for autistic people to enter mental health professions
- Developing standards for neurodivergent-affirming mental health practice
- Building sustainable support networks led by and for the community

Abstract body: WHY IS THIS IMPORTANT?

Research on the double empathy problem demonstrates that autistic people understand and relate better to other autistic people than non-autistic practitioners typically can. Despite this evidence, mental health and support services sector has historically lacked authentic neurodivergent representation among practitioners, creating significant barriers to accessing appropriate support.

WHAT YOU DID:

Developed an international platform connecting autistic and otherwise neurodivergent mental health professionals, providing directory services, peer support, and professional development opportunities. The network has grown to include over 600 practitioners across multiple countries, building on the evidence that matched neurodevelopmental styles enhance therapeutic relationships and outcomes.

CHALLENGES:

Initial challenges included developing accessible platforms for global connectivity while ensuring financial sustainability. Additional complexities arose in creating quality standards that honoured neurodivergent-led principles while meeting professional requirements across different jurisdictions.

BENEFITS:

The network has significantly increased access to neurodivergent-affirming support services, leveraging the natural mutual understanding between neurodivergent practitioners and clients. It has created a robust professional community offering peer support and mentorship, while developing clear pathways for neurodivergent career development in mental health fields. **FUTURE:**

Current initiatives focus on expanding professional development programmes and creating standardised training for neurodivergent-affirming practice, grounded in double empathy research and lived experience expertise.

Plain English version: How We Built a Network of Neurodivergent Mental Health Professionals Research shows that autistic people understand each other better than non-autistic people understand autistic people. This is called the "double empathy problem."

We used this knowledge to create a website where autistic and neurodivergent people can find mental health professionals who are also neurodivergent. More than 600 professionals have joined our network.

What we learned:

- Autistic clients often feel better understood by autistic professionals
- · Having shared experiences helps build trust
- Professionals in our network support each other
- We can help more neurodivergent people become mental health professionals

We want to grow our network and help even more people find the right support from someone who truly understands them.





P3.01.34 - Change starts with us: improving autistic mental health through neuro-affirming care

<u>R. Dela Cruz</u>¹
¹no affiliation, Melbourne, Australia

Trigger warning: No Trigger Warning

Practical impact: Improving the mental health of autistic individuals

Abstract body: Psychology and disability have had a long and arduous relationship that has fueled a mental health crisis within the autistic community. Autistic individuals are at a higher risk of mental health difficulties, yet their experience of psychological support remains poor due to the deficits-orientated application of treatment. The strong emergence of neuro-affirming care in Psychology offers hope and provides a roadmap for all allied health practitioners to adopt a strengths-based approach that can improve the lives of autistic individuals. A psychology clinic developed and implemented a semi-structured online interview that explored the experiences of autistic individuals accessing psychological support. A thematic analysis of 38 responses (26 autistic individuals: N= 16, aged 18-58, N=10, aged 10-16 and 12 parents: N=12, aged 3-64) identified a number of themes that spotlighted the difficulties that autistic individuals faced when accessing psychological support and provided rich insight regarding how neuro-affirming care is critical to improve the mental health of autistic individuals. Although this study was relatively small, the results yielded a powerful narrative regarding the unmet needs of autistic individuals that must be addressed. The most significant finding of this study was the need for cultural humility within the therapeutic relationship. Autistic individuals reported that when their psychologist had a good understanding of autistic brains, were committed to understanding autistic culture, and willing to learn from others, there was a significant improvement in their mental health and wellbeing due to the therapeutic alliance allowing autistic individuals to feel 'seen' by their psychologists. This study identified a number of unmet needs that included being misunderstood, poor experiences of diagnosis, difficulties accessing support, limited funding to access appropriate support, poor acknowledgment of co-occurring mental health difficulties and generally poor understanding of autistic culture. When Psychologists adapt a neuro-affirming approach to care the experience of autistic individuals accessing psychological support significantly improves. This study explores this model and provides a framework for psychologists and all allied health professionals to empower and support autistic individuals.

P3.01.35 - ☐ Mind the gap: A review of the systematic gaps in care that are fueling a mental health crisis within the autistic community

R. Dela Cruz¹
¹no affiliation, Melbourne, Australia

Trigger warning: Mental illness

Practical impact: Improving autistic mental health through high quality neurological-affirming psychological support

Abstract body: While it is exciting to live in a time where many nations are embracing autism through national strategies and approaches, systematic gaps in care continue to place autistic individuals at significant risk of mental health conditions not being diagnosed or adequately treated. For many autistic individuals the intersection of neurotypical attitudes and practices expediently increases their experiences of stress and unmet needs which exacerbates their risk of co-occurring mental health conditions developing. Mental health issues in autism are poorly understood and under-researched which results in significantly poor support. This presentation explores the systematic gaps in service delivery that are fueling the current mental health crisis





within the autistic community. Autistic voices were captured in a series of case study vignettes that explored autistic experiences of psychological support. This study identified systematic gaps in mental health care for autistic individuals, revealing themes of: 1. Lack of autism understanding leading to missed diagnoses and inappropriate treatment. 2. Financial barriers to private psychology services and limited national funding support. 3. Challenges in accessing mental health services. 4. Ineffective support systems failing to meet individual needs. The findings underscore the urgent need for enhanced education and resources for the mental health workforce, including government officials, to better support autistic individuals. The study advocates for a tailored approach to autism care, offering practical recommendations for allied health practitioners to improve mental health support for autistic individuals.

P3.01.36 - Testing a cognitive behavioural therapy program for anxiety in teenagers on the autism spectrum: a feasibility study.

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Trigger warning: No Trigger Warning

Practical impact: This study suggests that the adaptation of the group programme 'Cool Kids ASA' into a teen version is feasible creating important and satisfactory treatment for this age group and enhancing possibility of education, development and independence in future life.

Abstract body: Autism spectrum disorder (ASD) includes core symptoms affecting general and social development. Up to 60% of adolescents with ASD suffer from comorbid anxiety disorders which can negatively influence educational, social and general development together with quality of life. This study is the first to investigate the feasibility of adapting the manualised cognitive behavioural therapy (CBT) group programme 'Cool Kids ASA' into a version suited for teens targeting topics related to this age group.

Methods: Fifteen adolescents, aged 14–17 years, with ASD were enrolled in the study. Outcome measures were collected from both teens and parents pre- and post-treatment and at 3-month follow-up and included evaluation and satisfaction with the program, school attendance, scores from a semi-structured anxiety interview, together with questionnaires on anxiety symptoms, life interference, and children's automatic thoughts.

Results: 92% of the families who completed the program found it useful and would recommend it to other families in a similar situation. All families attended 7 or more sessions – the minimum requirement for completing the program. At follow-up, 36% of teens were free of all anxiety diagnoses and 45% no longer met the criteria for their primary anxiety diagnosis. Of the five teens who did not attend school before treatment only two remained school absent after treatment. **Conclusion**: This study suggests that the adaptation of the group programme 'Cool Kids ASA' into a teen version is feasible creating important and satisfactory treatment for this age group and enhancing possibility of education, development and independence in future life.

Plain English version: The abstract is not very technical.

P3.01.37 - Quantitative study on factors related to the QOL of autistic adults in Japan

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Trigger warning: Abuse, Mental illness

Practical impact: This study identifies effective evaluation indicators and elements of support and care from childhood that enable autistic individuals to live with a good Quality of Life (QOL) in adulthood.

Abstract body: **Aim:** The aim of this study is to examine the current quality of life (QOL) of autistic adults without intellectual disabilities—an area that remains insufficiently explored in Japan—and to investigate the factors associated with it.

Methods: The study focused on individuals aged 20 years or older who had been diagnosed with autism spectrum disorder (ASD) at a specialist neurodevelopmental clinic. The QOL was assessed using the Japanese version of the WHO-QOL26. Factors influencing QOL were examined using the child-rearing environment, the severity of autistic traits during childhood, current autistic traits, psychiatric comorbidities, overall adaptive function, and Intelligence Quotient (IQ).

This study was conducted with the approval of the Ethics Review Committee of Taisho University. **Results:** A total of 120 participants (87 males and 33 females) responded to the WHO-QOL26. The mean age of the participants was 33.89 years.

A comparison between males and females indicated that males exhibited higher mean QOL scores, whereas females reported significantly higher rates of comorbid conditions and adverse childhood experiences (ACEs). Although Full-Scale IQ (FIQ) was not found to be associated with current QOL, a moderate correlation was observed between QOL and adverse childhood experiences.

Furthermore, while the severity of current autistic traits was not associated with QOL, a moderate correlation was identified between QOL and the severity of ADHD traits.

Conclusion: In the treatment of autistic adults, it is essential to assess psychiatric comorbidities and co-occurring ADHD symptoms. Furthermore, preventing adverse experiences and fostering a stable environment during childhood are considered effective strategies.

P3.01.38 - Connecting, co-working, creating a life of one's own: supporting autistic adolescents to live an autonomous and meaningful life – a therapeutic approach

<u>T.T. Vatula</u>¹

No affiliation, Helsinki, Finland

Trigger warning: No Trigger Warning

Practical impact: Research and education for parents and professionals working with people on the autism spectrum, facing the challenges of becoming an adult, best practices and/or guidelines to follow

Abstract body: WHY?

There is a remarkable amount of potential and talent in our new generation of young people on the autism spectrum that we – as professionals, as parents, as teachers – should aknowledge. We need to learn ways to support them through the teenage years, to empower them, to help them create an autonomous and meaningful life, where they can fully participate in evryday life as a members of society.

WHAT?

I work with autistic adolescents and young adults as an occupational therapist. I'm also a mum of an autistic young fellow, 17 years. Resently, I've started to conceptualize my own way's of working, to summarize the principles and best practice -notions.

OUTCOME

I've realized, that my work, the occupational therapy with my young autistic clients, is like "inventing a wheel again and building a vehicle that is different every time". In other words, it's impossible to create a manual "how to do it". Still, there is certain phases and practices that i would like to address: finding a unique and personal way to CONNECT with a client, the ways of CO-WORKING and aiming to CREATE a life of one's own.

NEXT?





I'm planning to start a more academic and/or educational approach around this topic. I'm currently in cognitive-behavioral psychoterapy training and i'm interested how theoretical frames of occupational therapy, cognitive-behavioral therapy and humanistic pragmatic philosophy resonates with each other and what could be useful when working with people on the spectrum.

P3.01.39 - Building a Life that Works for You: An Occupational Therapy neuroaffirmative sensory modulation group for mental health service users to promote recovery and meaningful lifestyle.

<u>Ú. Howard</u>¹, A. Armstrong¹, C. Murphy²

 1 No affiliation, HSE Louth Meath Mental Health Services, Ireland, 2 No affiliation, No affiliation, Ireland

Trigger warning: Mental illness

Practical impact: The continued delivery of the group within the service will support the accessibility of appropriate mental health interventions for the autistic community. We hope to lead by example in enhancing mental health services currently available to autistic people through education of peers about the neuroaffirmative paradigm of autism and promoting it within practice.

Abstract body: The prevalence of mental health challenges among autistic adults is significantly higher than the general population (Underwood et al., 2022). Nevertheless, most mental health interventions focus on neurotypical behaviours rather than personalised goals and, thus, lack a neuroaffirmative approach (Curnow et al., 2023).

An 8-week in-person neuroaffirmative sensory lifestyle group was designed by the Occupational Therapy Department with input from neurodivergent service users for adult mental health service users. The group focussed on how one's use of time (i.e., occupational balance) and using one's body to change how one feels (i.e., sensory modulation) impact well-being. This resulted in meaningful and sustainable lifestyle changes through a mix of educational and experiential activities.

Lack of appropriate community space resulted in using a mental health space for the group. The group supported participants to further their understanding of sensory modulation, discover new interests and passions and, subsequently, potential meaning in life, supporting their mental health recovery through personalised goals. One of the group participants will share a poem illustrating her experience of the neuroaffirmative space that was created for and by the group. The group culminated in a participant-led shared celebration of learnings, passions, and hobbies. The continued delivery of the group within the service will support the accessibility of appropriate mental health interventions for the autistic community. We hope to lead by example in enhancing mental health services currently available to autistic people through education of peers about the neuroaffirmative paradigm of autism.

P3.01.40 - A systematic review of the barriers to physical activity (PA) in children with autism spectrum condition (ASC) - Parents and caregiver perspectives

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Trigger warning: No Trigger Warning

Practical impact: There remains a lack of literature exploring factors that can influence physical activity participation in children with Autism Spectrum condition (ASC), from the perspective of parents. The aim of this systematic review is to investigate barriers children with ASC can face





when wanting to participate in physical activity, from the point of view of parents, as parents can have an impact on the activities children partake in. If policy-makers are aware of barriers that parents are facing, it is hoped that they will then be able to implement tailored interventions for children with ASC, which will support participation in physical activity. Engagement in physical activity is a concern for children with ASD, due to interpersonal, intrapersonal and infrastructural factors (which will be discussed further in this systematic review). This, therefore, means these children face an elevated risk of health problems as they enter adulthood, such as diabetes, obesity, cardiovascular conditions and mental health problems. With the work we are doing, we anticipate that this work will not only be beneficial for the physical and mental wellbeing of individuals with ASD during their childhood, but also during adulthood.

Abstract body: Introduction: Children with Autism Spectrum Condition (ASC) face increased sedentary behaviour and obesity, raising risks for chronic health issues like diabetes, hypertension, and mental health problems (Li et al., 2021). Parental influence can impact participation in physical activity (PA) (Columna et al., 2024).

This study therefore synthesises existing literature on barriers to physical activity in children with ASC, from a parent or caregiver perspective, aiming to tailor interventions and policies that might increase physical activity in children with ASC.

Methods: A systematic literature search across seven databases was conducted, followed by data extraction, quality assessment, and meta-synthesis using N-Vivo 11.

Outcome: Parents and caregivers across 11 eligible studies identified intrapersonal factors (metatheme 1), such as limited resources and lack of capacity experienced by parents, as barriers to physical activity in their children with ASC. Interpersonal challenges (meta-theme 2) were discussed, including issues of inclusivity, balancing children's conflicting interests, and navigating relationships with other stakeholders. Infrastructural issues (meta-theme 3) such as lack of environments or activities suited to the unique sensory or functional needs of children with ASC, were discussed.

Conclusion: These parent or caregiver perspectives on barriers to physical activity in children with ASC complements perspectives held by children with ASC. Together, these findings can shape tailored interventions and policies (e.g. adapting activities to sensory needs, creating supportive and safe environments) for children with ASC. Development of stakeholder-informed strategies may facilitate increased participation in physical activity, improving outcomes and enhancing inclusivity for children with ASC.

Plain English version: Existing research shows children with Autism Spectrum Condition (ASC) often do not get enough exercise, which can lead to physical and mental health issues in the future. Parents play a crucial role in encouraging their children to exercise. We examined the challenges parents may face in getting their children with ASC involved in exercise. By understanding these challenges, we aim to create better exercise programs that meet the needs of children with ASC.

We used a thorough and reliable research method, called a systematic review, to gather evidence from multiple research studies that explore the challenges parents face in supporting engagement with exercise in children with ASC. This approach provides stronger evidence from different groups of parents and caregivers.

Firstly, personal challenges experienced by parents, including limited time or knowledge, were flagged. Social challenges, like finding inclusive activities where children with ASC can effectively interact with others, and balancing the child's interests, were discussed. Environmental challenges, such as finding safe and accessible places to exercise which accounted for sensory or other needs specific to children with ASC, were raised.

This study sheds light on the challenges parents face in supporting exercise in children with ASC. By combining insights from parents, children, and other stakeholders, we can provide a fuller picture of these challenges. The findings can guide policy changes to promote inclusivity, such as developing tailored accessible exercise programs, parent education, and more community opportunities for children with ASC, ultimately improving their physical and mental health.





P3.03.01 - Eliciting flow through collaborative song creation- an AuDHD music therapist's autoethnographic practice-led PhD investigation

A. Lehmann-Kuit1

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Trigger warning: No Trigger Warning

Practical impact: The practical impact of this practice-led research on collaborative song creation framework, may empower Autistic and ADHD individuals to better understand how expressing their authentic selves through improvising words and melodies in a flowing stream consciousness may support wellbeing. This process draws on commonly identified strengths of autistic and ADHD individuals - specifically musicality, accessing flow states and seeking autonomy. Neurodivergent individuals commonly access flow states as a coping strategy to manage stressors (McDonnel & Milton, 2014)

Abstract body:

In the music therapy field there is a growing call for neurodiversity affirming approaches that prioritise participants' autonomy and focus on the strengths of neurodivergent individuals (Davies, 2022; Leza, 2023; Pickard et al., 2020). Privileged with an 'insider' view as an AuDHD music therapist, the researcher will share a collaborative song creation framework, aimed at empowering individuals to express their authentic selves through improvising words and melodies in a flowing stream consciousness. This process draws on commonly identified strengths of autistic and ADHD individuals - specifically musicality, accessing flow states and seeking autonomy. Neurodivergent individuals commonly access flow states as a coping strategy to manage stressors (McDonnel & Milton, 2014). Flow is a specific state of consciousness which supports emotional regulation (Sabzaligol & Nojavan, 2017). Engaging in song creation has been found to be a more effective way to reach a state of flow (Csikszentmihalyi, 1990) than writing, performing, yoga, dancing or sport (Baker & MacDonald, 2013).

Adopting a practice-led research methodology using performative autoethnography framed as a hermetic phenomenological reflexive approach (Holman Jones, 2018), the researcher describes, analyses and shares personal critical reflections through performance to generate knowledge. The preliminary findings of this autoethnographic practice-led research, share how providing instantaneous musical feedback through collaborative musicking, may create an environment conducive to flow states, providing a framework to express one's authentic self, support wellbeing and promote quality of life gains.

Plain English version: Autistic and ADHD individuals often seek experiences where we are fully absorbed in something that is meaningful to us as a way to manage stress. This is called flow. Making up songs in the moment has been found to be one of the best ways to access flow.. The researcher is an AuDHD (autistic and ADHD) music therapist who draws on her own experiences of engaging in song creation. This approach to making up songs draws on strengths many autistic and ADHD individuals share such as musicality, accessing flow states and seeking autonomy. Making up songs in the moment can improve our well being.

P3.03.02 - The A.P.E.C.S.S. Model of Environmental Accessibility: Making equity of access the standard.

*C. McCarthy*¹, <u>S. McCarthy</u>¹
¹No affiliation, No affiliation, Ireland





Trigger warning: No Trigger Warning

Practical impact: This work has the potential to promote holistic wellbeing amongst the whole autistic community, and provide equitable access for the autistic community across a variety of situations- from employment, to education, to leisure activities.

Abstract body: As two autistic and otherwise multiply-neurodivergent professionals- one working as a Speech and Language Therapist, the other as lecturer, court-appointed advocate and training facilitator in the neurodiversity field- we feel the area of autistic experience that requires further exploration the most is the impact that the environment can have on an autistic person's holistic wellbeing. While touched on by things like the 'Social' model of disability, and contributions such as Luke Beardon's 'Golden Equation', we still feel that the importance of environmental accessibility in relation to autistic experience has yet to be satisfactorily explored or represented. This has led to the creation of the "A.P.E.C.S.S. Model of Environmental Accessibility". Building upon a book we authored alongside another professional, published in 2023, the A.P.E.C.S.S. Model aims to visually represent the environment as a set of different interconnected components, all of which are built upon a foundation of autonomy. From here, we have developed training aimed at parents, educators, clinicians and autistic people themselves wherein not only the theoretical basis for the model is outlined, but various practical strategies to create environmental accessibility in any situation are also demonstrated. The benefits thus far include equitable access to education and workplace for a number of autistic children and adults. Ultimately, while in it's infancy, we believe that this model has the potential to not only change how autism support is delivered, but also to improve the holistic wellbeing of the autistic community as a whole.

P3.03.03 - Amplifying Voices: Empowering Autistic Women through Candid Portraits and Stories on Instagram #FANN #actuallyautistic #letsputafaceonthatasd

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Trigger warning: No Trigger Warning

Practical impact: The project creates a ripple effect of empowerment, education, and acceptance, directly benefiting participants and indirectly inspiring and supporting the broader autistic community.

Abstract body: Background:

FANN is a network of therapists, researchers, and autistic women that uses Instagram to positively impact autistic women by sharing their candid stories. These stories, accompanied by photographs by a female autistic photographer (MS) and interviews (EBH), highlight personal experiences, achievements, and tips for autistic peers. With over 6,000 followers, the posts foster connectedness, hope, and empowerment, showcasing resilience and authenticity while promoting personal recovery.

Objectives:

To explore the experiences of women featured in the project, focusing on the photoshoot and the impact of the Instagram posts on their lives.

Methods:

A survey was distributed to 71 featured autistic women (average time of diagnosis: M = 26.70 years, SD = 10.12), with 44 (62%) responding (M age = 32.02 years, SD = 8.80). The survey addressed motivations for participation, feelings about the photoshoot, reactions from others, social media responses, and personal reflections. Data were analyzed using qualitative content analysis.





Results:

Participants reported motivations such as improving the image of autistic women (18), sharing experiences (7), and challenging stigma (4). The photoshoot was largely enjoyable (30), with some finding it a therapeutic or empowering experience. Positive responses from family, friends, and social media (41) were common, fostering self-acceptance (13), confidence (10), and a sense of community (10).

Conclusions:

The project demonstrates the potential of similar initiatives to enhance self-acceptance, confidence, and community for autistic women. Future research could expand on these findings to promote well-being and quality of life in the autistic community.

Plain English version: Background:

FANN is a group of therapists, researchers, and autistic women who use Instagram to share the stories of autistic women. The posts include photos by an autistic female photographer (MS) and interviews (EBH) that highlight their lives, achievements, and advice for others. With 6,000 followers, these posts aim to inspire hope, build connections, and show the strength and authenticity of autistic women.

Goals:

The project wanted to understand how the women featured in it felt about their photoshoot experience and the impact of sharing their stories on Instagram.

Methods:

A survey was sent to 71 women who took part in the project. Of those, 44 responded. The survey asked about their reasons for joining, how they felt during the photoshoot, reactions from family and friends, and how they felt about the project overall. The results were analyzed to look for common themes.

Findings:

Women joined the project to improve how autistic women are seen, share their experiences, and reduce stigma. Most found the photoshoot enjoyable, with some saying it was therapeutic. Many received positive responses from friends, family, and social media, which helped boost self-confidence and self-acceptance. Many also felt a stronger sense of belonging.

Conclusion:

This project shows how sharing personal stories can help autistic women feel more confident and connected. Future projects could use similar methods to support well-being in the autistic community.

P3.03.04 - Social interactions amongst autistic young adults: development toward agency

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Trigger warning: No Trigger Warning

Practical impact:

This study suggests that autistic adults may find greater satisfaction in recognizing and valuing their differences, rather than attempting to conform to traditional identities. It also focuses on specific strategies that can contribute to better well-being, such as preferring quiet environments and embracing daily routines.

Abstract body: INTRODUCTION

Autistic people often experience social communication and interactions as challenging. There is growing research on how autistic people use different compensatory strategies to better fit the





social communication and interaction style of their surroundings. A greater awareness of how some of these compensatory strategies could have negative effects on Quality of Life, is rising. In this project, we wanted to gain an in-dept understanding of how autistic young adults understand and experience social interactions, the perceived impact of their way of interacting with others, and how these experiences contribute to the shaping of their identity formation.

METHODS

14 participants who were earlier diagnosed with autism in childhood/adolescence, took part in semi-structured interviews (Mage = 22). We asked questions about how they described their social interactions with others. We followed reflexive thematic analysis to identify patterned meanings within the dataset.

OUTCOME

In the analysis of the data, we identified three themes.

The participants described that they noticed differences in social interactions (theme 1) when compared to non-autistic peers. They reflected on helpful strategies (theme 2) that they felt were of help in navigating the social world. Gradually, identity formation (theme 3) was built during the experiences of everyday social interactions. Most participants described a development of self-awareness, and with that, a growing acceptance of not living a standard life.

IMPLICATIONS

The findings call for a more enhanced focus on how to support identity development and strategies that promote well-being amongst autistic people, especially during emerging adulthood.

Plain English version: INTRODUCTION

Autistic individuals often find social communication and interactions challenging. Research shows that autistic people use various strategies to better fit in socially, but some of these strategies may negatively impact their quality of life. This project aimed to deeply understand how young autistic adults perceive and experience social interactions, how these interactions affect them, and how these experiences shape their identities.

METHODS

We interviewed 14 young adults who were diagnosed with autism earlier in life, either as children or teenagers. They were about 22 years old on average when interviewed. We asked them about their social interactions and then analyzed their answers to identify common themes.

FINDINGS

Our analysis revealed three main themes:

- 1. Differences in social interactions: Participants observed that their social interactions differed from those of their non-autistic peers.
- 2. Helpful Strategies: The participants shared strategies that helped them navigate social situations.
- 3. Identity Formation: Over time, everyday social interactions contributed to the development of their self-awareness and a growing acceptance of their unique lifestyle.

IMPLICATIONS

The findings suggest that we need to focus more on helping autistic people develop their identities and find ways to improve their well-being, especially as they enter adulthood.

P3.03.05 - Empowering Neurodivergence: The Development and Impact of AutistApp

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Trigger warning: No Trigger Warning





Practical impact: AutistApp has a profound practical impact by simplifying daily life for autistic individuals through tools for managing routines, reminders, and emotional regulation, fostering greater autonomy and reducing stress. By consolidating diverse resources—such as employment support, pension management, and emotional aids—into a single platform, the app minimizes financial and technical barriers, making it accessible to users with limited resources or device storage. Its unique focus on supporting individuals across all stages of life, from children to seniors, addresses a significant gap in resources for older autistic adults, promoting lifelong learning and personal growth while enhancing their quality of life.

Abstract body: WHY IS THIS IMPORTANT?

As an autistic adult, I recognized a lack of comprehensive, accessible tools tailored to the diverse needs of autistic individuals. Many existing resources are fragmented across multiple applications, and there is limited support for adults and seniors on the spectrum. This fragmentation creates significant barriers, especially for those with limited financial resources or device storage, preventing access to crucial aids.

WHAT YOU DID OR EXPERIENCED

I created AutistApp, a mobile application designed to unify essential tools into a single, user-friendly platform. Developed with input from the autistic community, the app offers features like routine management, emotional self-regulation aids, employment resources, and other tools, ensuring its relevance across all life stages. Since its launch, it has gained over 35,000 users and continues to evolve based on user feedback.

WHAT HAVE BEEN THE CHALLENGES?

Developing AutistApp presented financial and technical challenges, including securing funding for continuous updates.

WHAT HAVE BEEN THE BENEFITS?

AutistApp has empowered its users by improving their independence and quality of life. It provides families and caregivers with tools to better support their loved ones and has contributed to fostering inclusive employment by connecting users with job opportunities. Its comprehensive design has received positive feedback for addressing practical needs in an accessible and inclusive way.

WHAT DOES THE FUTURE HOLD?

Moving forward, AutistApp aims to expand its features, such as multilingual support and advanced customization options. With continuous updates and user collaboration, AutistApp will remain a resource for promoting independence in the autistic community.

P3.03.06 - BRIDGE Project - Building Relationships for Inclusive Digital Growth and Engagement: understanding how Autistic youth use the Internet

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Trigger warning: No Trigger Warning

Practical impact: This project aims to provide an Autism informed understanding of the use of the Internet by autistic youth and provide an opportunity for them and their families to learn from each other about online experience and behaviour. The findings of the co participative research will inform workshops for autistic youth and their families to discuss, agree on and co-design awareness raising materials for the Autism community. The findings, workshops and literature reviews will inform an online toolkit for professionals working with the Autism community. All materials will be disseminated online and freely accessible.





Abstract body: The BRIDGE project is an Erasmus+ funded Youth project that aims to explore different views and experiences of the Internet by engaging with autistic youth, their families and quardians and the professionals who work with them. There is a lack of research with autistic youth on how appropriate use of the Internet can support social interaction and community participation. The project aims to promote responsible and safe digital use in the autism community by engaging with autistic youth to learn their views of the Internet and how they interact with online platforms, content and others online. Families and quardians will also participate in research to share their views and perceptions. All participants will work together through co-participative research approaches to build an Autism informed and nuanced understanding of the use of technology by autistic youth. Autistic youth and their families will work together to agree, design and create awareness raising materials on positive and safe digital use. The combined inputs from research, workshops and literature reviews will inform awareness raising materials for all stakeholders, and an online toolkit and training for professionals such as youth workers, psychologists and educators who support the autism community. Ireland is leading this project with partners from non profit organisations and support services in Greece, Cyprus, Spain and universities active in autism studies in Croatia and Cyprus. Partners will present preliminary findings and progress from the first eight months of this recently funded project.

P3.03.07 - <u>Understanding Character Strengths in Autistic Children</u> and Young People - Reflections from a Parent/Carer workshop (Example of delivering practice, and reflections from parents/carers)

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Trigger warning: No Trigger Warning

Practical impact: We co-produced with parents/carers of autistic young people, an online training session to support parents/carers of autistic children and young people to build awareness of. explore, and consider ways of applying character strengths to support their children in everyday life. We were able to reach many families with autistic young people from a diverse range of backgrounds and abilities, and our parent reflections demonstrate the power of having protected time and space to learn a new framework that enabled them to connect with their autistic children's strengths in everyday life, celebrate their unique differences, and feel empowered in being able to share their children's strengths with other family members, friends, and professionals. We felt that the practical impact of this workshop is to equip parents/carers with an easy to implement model that is evidence-based and strengths-focused, that allows to them spot strengths in their child's everyday activities, and support their children to explore values most important to them, and build positive self-esteem through understanding their personal strengths at play. We hope that this workshop serves as a meaningful pilot to develop further online training materials to support parents/carers to understand how to adopt character strengths framework when supporting their autistic children and young people at home, and advocate for others to spot character strengths in their children in other settings.

Abstract body: Autistic young people (AYP) and their parents/carers often experience societal judgement for not meeting standards perceived to be important by neurotypical norms. Such deficit-focused models leave families feeling like they do not have permission to celebrate, embrace, and feel empowered by their AYP's unique display of strengths in everyday life. Together with parents of AYP, we co-produced and co-delivered two virtual workshops with the aim to support parents/carers build a better understanding of their AYP's character strengths (CS). CS Framework refers to 24 qualities key to all human experiences that transcend time and culture (e.g., Love, Kindness, Bravery, Curiosity). We co-produced materials to support parents' understanding of CS framework. We discussed breakout room set-up to ensure psychological safety and maximise parents' opportunity to connect. To focus conversations on strengths, all





facilitators shared personal/professional stories of turning points in using CS to support AYP to improve self-understanding.

Parents (n=20) felt CS framework gave them a different perspective to see, feel empowered, celebrate, and communicate their children's strengths. Parents noticed greater compassion towards themselves and their children through reframing difficult home situations due to individual CS differences at play. All facilitators felt a sense of pride and achievement in making a difference to shift parents' perspectives toward AYP's strengths. In the future, we will support families to creatively document AYP's strengths use in everyday life, providing more examples to help parents think flexibly on supporting AYP to apply strengths in autonomous ways, boosting positive self-esteem and identity.

P3.03.08 - <u>Supporting Community Youth Workers to explore</u> <u>Character Strengths in Autistic Children and Young People –</u> <u>Reflections from Professional Workshop and Training</u> (Delivering practice)

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Trigger warning: No Trigger Warning

Practical impact: We co-produced this professional training to support youth workers that work across Child and Adolescent Mental Health Services (in school, community, and in-patient settings) in our local area, to understand how to identify and explore character strengths in the neurodivergent young people they support. Our feedback is evident that practitioners valued having the space to reflect on both their own character strengths that they bring to their work, and also extending this framework to support autistic young people to build a more positive autism identity and self-esteem when accessing mental health support. We hope that this work, alongside parent/carer and other stakeholder workshops we are delivering in schools to train up teachers in character strengths framework, will be the first step towards creating systemic change to ensure people supporting autistic young people across settings to use consistent language framework to strengths spot. We hope professionals will able to support young people take ownership of their strengths and unique individual differences, to boost engagement with mental health services, and build resilience and self-determination in leading a more fulfilling life.

Abstract body: Many autistic children and young people (CYP) experience deficit-focused narratives that highlight their difficulties, and professionals may lack evidence-based consistent frameworks to effectively identify, explore, and support autistic CYP to apply their strengths in everyday life. Limited strengths-spotting in autism may perpetuate stigma and negatively impact on autistic CYP's self-esteem.

We co-produced and delivered two workshops to youth workers (n=13) from a mental health charity to embed the Character Strengths (CS) framework when supporting autistic CYP across school, community, and in-patient settings. CS Framework, from Positive Psychology, refers to 24 qualities key to all human experiences that transcend time and culture (e.g., Love, Kindness, Bravery, Curiosity). In workshop 1, participants reflected on how they made use of their own CS in personal and professional lives. In workshop 2, participants learnt about how to use the Signature Strengths Survey to help autistic CYP to build awareness of, explore, and apply their own CS in everyday life.

Team reflections highlighted the benefits of CS strengths-spotting to build connections with each other and validate lived experiences. Participants acknowledged the power of extending CS strengths-spotting to help autistic CYP build a more positive self-image and autism identity. A main challenge for professionals was finding the time to attend CS training whilst balancing clinical duties. We hope to track professionals' confidence and competence in embedding CS into their routine practice when helping autistic CYP to spot their strengths and disseminate this training to help more professionals adopt a meaningful strengths-based approach.





P3.03.09 - Increasing Community Participation: Adapting Environments and Layering Supports

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Trigger warning: No Trigger Warning

Practical impact: Autistic individuals can thrive in their communities when supports are layered and implemented for success. Having a choice about where and how to participate and finding belonging in the community are possible when the community adapts and when strategies are in place.

Abstract body: Why Is This Important?

Autistic individuals want to play on teams, attend camp, eat at a restaurant, attend an event and participate in their communities. Assisting community members in recognizing the strengths of autistic individuals and offering options for support creates scenarios with better outcomes, increased belonging, and choice for participation.

What Is The Need?

There is a need for increased understanding of community members as well as increased available supports. Adaptations to the environment and offering layered strategies allow for engagement in a more wholistic and inclusive manner. Limited options due to little-to-no supports dictates to autistic individuals where they are welcome. By increasing the opportunities through enhancing the environments, more training of community members, and layering supports, more participation, inclusion, and community is created.

What Have I Experienced?

Often there is a lack of knowledge more than a lack of compassion. Community members need assistance recognizing the limitations they may unknowingly place as barriers for participation. By providing insight to characteristics, baseline supports, and more individualized strategies, community leaders are often open to making adjustments for increase inclusion.

What Does the Future Hold?

Autistic individuals should have choice in what and where they want to participate in their communities- and be met with adaptations to the environment, protocols, and increased understanding for the additional specified interventions/strategies the individual brings in with them. Through layering interventions and building a comprehensive program around an individual, adapting the environment, and training the community, we will see increased participation, community, and belonging.

Plain English version: Through the training of community members, layering of interventions, and making adaptations to the environment, we can increase opportunities and options for autistic individuals to engage in their communities and experience increased belonging.

P3.03.10 - From Mother to Special Educator? – How Maternal Self-Education Improves the Quality of Life of Autistic Children

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Trigger warning: No Trigger Warning





Practical impact: This research demonstrates that maternal self-education can significantly improve the quality of life for autistic children by ensuring consistent, personalized support. Mothers who acquire specialized knowledge can apply evidence-based interventions tailored to their child's specific needs, leading to increased independence, adaptability, and engagement in learning and daily activities. Additionally, maternal empowerment reduces stress levels and fosters a more stable family environment, benefiting both the child and their caregivers. On a broader level, these trained mothers often contribute to their communities by sharing knowledge, supporting other families, and mitigating the effects of professional shortages in autism-related services. Therefore, promoting accessible training and mentorship programs for parents could be a valuable step toward enhancing both individual and systemic support for autistic individuals.

Abstract body:

In many countries, there is a severe shortage of qualified professionals—especially special educators—who are equipped to work effectively with autistic children. My personal experience as a special educator and the mother of a nine-year-old, non-speaking autistic son suggests that maternal self-education can substantially address this gap while also improving the quality of life for children and their families. The aim of my research is to explore this process by focusing on the direct commitment of mothers, rather than relying on institutional or formal policy solutions.

I conducted a PRISMA-based systematic review of 32 publications (from 2010 to 2024) on parental involvement and maternal training. In addition, I carried out 21 in-depth interviews with mothers in three countries—Hungary, Austria, and Turkey—who had participated either in formal (e.g., special education) or shorter, autism-focused training programs.

Preliminary findings indicate that mothers who acquire in-depth theoretical knowledge and practical skills related to autism report lower stress levels, while their children become more actively involved in learning and leisure activities. Several of these mothers also volunteer to assist other families, drawing on their own experiences to offer empathetic guidance.

Maternal self-education builds on parental motivation and dedication, providing personalized and consistent support for autistic children. Even without formal policy measures, this may serve as a viable solution: mothers transitioning "from parent to professional" can fill the gaps in professional services, improving the daily lives of autistic children and strengthening family resilience.

P3.03.11 - Centering self-determination in coaching support with autistic young adults

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Trigger warning: No Trigger Warning

Practical impact:

Self-determination has emerged as a key evidence-based predictor of positive post-school outcomes for students with disabilities including those with autism (Mazzoti et al., 2021). Research shows that students who exhibit higher levels of self-determination—inclusive of the ability to set goals, make decisions, and advocate for oneself—are more likely to experience success in areas such as employment, independent living and community participation (Shogren, Wehmeyer, Palmer, Rifenbark, & Little, 2015). Becoming more self-determined means that young adults have an understanding of their skills, strengths, and limitations combined with belief in themselves (Field et.al, 1998). Support personnel, such as executive functioning coaches and autism specialists, emphasize skill development and implementation of the core components of self-determination for autistic young adults in real-world contexts. This best practice can lead to success for autistic young adults in navigating barriers and taking action with more confidence.





Sources:

Field, S., Martin, J., Miller, R., Ward, M., & Wehmeyer, M. (1998). Self-determination for persons with disabilities: A position statement of me division on career development and transition. *Career Development for Exceptional Individuals*, 21(2), 113-128.

Mazzotti, V. L., Rowe, D. A., Kwiatek, S., Voggt, A., Chang, W.-H., Fowler, C. H., Poppen, M., Sinclair, J., & Test, D. W. (2021). Secondary Transition Predictors of Postschool Success: An Update to the Research Base. Career Development and Transition for Exceptional Individuals, 44(1), 47-64. https://doi.org/10.1177/2165143420959793

Shogren, K. A., Wehmeyer, M. L., Palmer, S. B., Rifenbark, G. G., & Little, T. D. (2015). Relationships Between Self-Determination and Postschool Outcomes for Youth With Disabilities. The Journal of Special Education, 48(4), 256-267. https://doi.org/10.1177/0022466913489733

Abstract body: Best Practice: Centering self-determination in coaching support with autistic young adults

Which Field: Education

Why is this Important:

By centering my work on self-determination, I have seen autistic young adults develop skill and confidence, evidenced by their comments and actions. Through guided conversation they share values in personal (health, interests, spirituality), social (friends, family, romantic relationships), and education/career areas of their life. This reflection helps them generate short/long-term goals. Autistic young adults and their families hire my coaching support services to focus on executive function (organization, planning, time management, etc.) and college success (passing grades, accessing campus resources, finding community, etc.). The most impactful work happens through our focus on self-determination: choice making, decision making, problem solving, goal setting, planning, goal attainment, self-management, self-advocacy, self-awareness, and self-knowledge. By bringing attention and awareness to these components, young adults are able to take action on their goals, increasing agency and satisfaction.

What have been the challenges? Young adults feeling overwhelmed with prioritizing their goals, discomfort with pivoting goals, tension between what they want to do vs. what others/society/family have told them to focus on

What have been the benefits? They are often able to identify what was getting in the way of success. Additional benefits: better physical health (e.g. joining a gym), doing something that will improve quality of life (e.g. using a cash machine), increased self-knowledge, developing self-advocacy

What does the future hold? Continued skill development in areas which enable autistic young adults to lead purposeful and meaningful lives; peer mentorship

P3.03.12 - Do "Restricted, Repetitive Patterns of Behavior, Interests, or Activities" Reduce Wellbeing? A Philosophical Analysis involving Monotropic Attachments, Richness, and Neurodiversity

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Trigger warning: No Trigger Warning

Practical impact: This work provides theoretical support for understanding autistic wellbeing. The conclusion justifies rejection of some interventions that autistic people may find harmful.

Abstract body: Many assume that autism, as a diagnosable neurodevelopmental difference, must make life worse. But worse for whom? According to whose lights? We approach the issue of autism and wellbeing as philosophers whose research has involved the autism community for several years. In this presentation, we explore autistic wellbeing. We use philosophical theories of wellbeing based on "attachments" (a concept related to interests, goals, and commitments) to address the question: do "restricted, repetitive patterns of behavior, interests, or activities" reduce wellbeing? (Phrase quoted to mark it as an object of examination and critique.)

Attachment theories of wellbeing characteristically use concepts like "richness" to explain what makes a set of attachments sufficient for a high level of wellbeing. These theories might attribute low wellbeing on the basis of a person's narrow ("poor") set of attachments. We discuss how autistic "monotropism" (Murray, Lawson, and Lesser 2005) challenges the use of richness in these theories. We argue that having atypically narrow attachments does not reduce wellbeing, although it may increase a person's vulnerability to illbeing. The discussion sheds light on how theories of wellbeing and related concepts (health, quality of life) can fail to assess autistic lives appropriately. The discussion also opens opportunities for correction and refinement through dialogue across the broad community that gathers at the Autism Europe Congress.

P3.03.13 - Empowering Youth with Autism Through Service Learning: Creating Community Inclusion and Connection

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Trigger warning: No Trigger Warning

Practical impact: Participants will be able to: 1. Describe the benfits of service learning projects as the relate to community inclusion for youth with autism. 2. Have a collection of resources including curricula and program guides for two current service learning projects. 3. Learn how to engage with the community to ensure community embraces projects.

Abstract body: Service learning provides an innovative and inclusive approach to community engagement, it also cultivates accecptance and understanding within the community. For youth with autism, it provides the unique opportunity to engage in the community while developing social, emotional, and vocational skills.

This presention highlights the importance of service-learning in supporting youth with autism and showcases a range of successful project examples that empower participants while enriching their communities.

P3.03.14 - Using PictogramRoom to enhance engagement in visual supports meaningful use.

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Trigger warning: No Trigger Warning





Practical impact: Implementation of a learning structure to enhance understanding of human representation on pictograms. Gaining in understanding and engaging with visual supports. Using pictograms with increased understanding. Using PictogramRoom as a normalized tool in educational settings. Provide support to maximize the impact for a key resource: visual supports.

Abstract body: Example of delivering best practice.

WHY IS THIS IMPORTANT?

Making a meaningful use of visual supports that employ pictogram sets, whether they are from ARASAAC, MINSPEACK or annoy other set is a huge asset for the person with autism. Very frequently people with autism are using visual supports with its content in pictograms that they don't understand or interpret correctly. As pictographic content represent a basic resource for people with autism improving accessibility and improving abstraction abilities is critical.

WHAT YOU DID OR EXPERIENCED

Apart from exposure there is a huge lack of resources to enhance a better understanding of pictographic contents. PictogramRoom is a highly motivating tool that's completely accessible for learners with autism.

WHAT HAVE BEEN THE CHALLENGES?

Defining a pre and post testing to actually assess the gains from implementing the program, has been the biggest challenge. The structured presentation from PictogramRoom is a a great advantage as the intervention scheme is well defined and provided by the system.

WHAT HAVE BEEN THE BENEFITS?

The structured use of PictogramRoom in an enriched environment with a high exposure to pictograms and visual supports has a positive impact in increased understanding. Using AR developments and specifically PictogramRoom is highly motivating for the learners and reinforcing. Additionally it's accessibility reduces dependency on it's use which also impacts positively on the learners self steam. Though being a individual activity it's easily readapted to a small group setting that allows many other social outcomes to be addressed.

P3.03.15 - ASD & Museums: a model to improve the cultural experience for all visitors.

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Trigger warning: No Trigger Warning

Practical impact: Creation and discussion of a model of support and adaptations of the museum experience for people on the autism spectrum

Abstract body: an example of delivering practic

Plain English version: Access to culture is a right for all people with autism. However, current practices, always valuable, are based on personal will and not on generally accepted protocols. This reflection discusses a global model for the design of institutional supports to promote the inclusion of people with ASD in cultural institutions such as libraries, theatres or museums. Specific programs should be based on an institutional Strategic Plan with an inclusive vision, which plans objectives from values, which reviews the management model, the institutional offer, spaces, content, narratives and exhibition messages, as well as training plans for mediators and service personnel, support materials and activities, technological formats, review of narratives, sensory maps, spaces and routes, without forgetting the cognitive accessibility of exhibition





messages. In addition, programs should take into account the empowerment of participants, families, groups, etc.

Institutional adaptation to the enormous differences in the spectrum implies a flexibility of adjustments that will subsequently be possible to adapt to other segments of neurodivergent people and, in short, will be improvements for all audiences.

This model has been discussed in academic and professional circles, and in educational, healthcare and museum environments. In the last three years, and in collaboration between the university and the world of culture, four training seminars and two days of dissemination of inclusion have been organized, with the participation of national and international speakers and with a sustainable attendance of the public.

P3.03.16 - Autistic Adults in Improv Comedy: the Benefits and Experience

N. Keates¹

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Trigger warning: No Trigger Warning

Practical impact: Improv comedy appears to alter brain connections, helping individuals move from survival mode to creative thinking and problem-solving, enhancing their connections with themselves and others (DeMichele and Kuenneke, 2021). While autistic individuals are just as social as non-autistic individuals, their social interactions differ, and improv may create a community that fosters acceptance. This supportive environment seems to reduce social anxiety and promote confidence (further work must clarify all the components of this). Dr. Luke Beardon's (2024) "golden equation" suggests that the outcomes for autistic individuals depend on their environment.

However, improv can also occur in less supportive settings, as noted in my research. In mental health research, social capital plays a crucial role, and improvisation has been successfully used in group therapy, rooted in ideas by Jacob Levy-Moreno. While improv can signify a way of being and is not solely about its artistic value, research on its broader applications is limited. I acknowledge that some neurodivergent individuals involved in improv still face mental distress, as life circumstances can influence what one gains from it. As a participant in my research stated, "Improv is not a panacea." Autistic participants have observed that their day-to-day lives can affect the benefits they gain from improv, which may contribute to increased anxiety regardless of

Thus, the impact of improv is wide-reaching but dependent on the autistic individuals. What is known currently is limited, but we can understand autistic people can experience both hedonistic well-being at the start of their improv journey and, as they progress, they identify factors that lead to eudaimonic well-being—meaning a deeper sense of purpose and fulfilment. Data indicate that anxiety levels may decrease after a short improv course, although further empirical research is needed to specifically assess the effects on autistic individuals.

Abstract body: Introduction

their participation in the activity.

In improv (comedy), participants create scenes or songs spontaneously without scripts, which offers various benefits, particularly in enhancing communication skills. I conducted a study to explore how autistic adults experience and perceive the advantages of engaging in improv comedy.

Methods

In Study 1, I recruited 20 adult participants through snowball sampling and conducted semi-structured interviews. These were analyzed using interpretative phenomenological analysis (IPA) to delve into the lived experiences of autistic individuals in improv, whether professionally or as a hobby. Qualitative content analysis (QCA) identified the benefits gained from participation. In Study 2, 17 participants shared their experiences and perceived advantages of taking the improv course. Qualitative data were also analyzed via QCA. Additionally, I implemented a mixed-methods approach to study anxiety levels. To complement quantitative data, I administered anxiety measures, including the Tolerance of Uncertainty, Liebowitz Social Anxiety Scale, and State-Trait Anxiety Inventory, both before and after the course, paired with focus groups and log





forms.

Outcomes

The findings from both studies reveal that improv offers similar benefits to autistic adults, such as improved quality of life, mental health, acceptance, and a sense of flow. Participants recognized the value of their autistic skills in improv, and those with more experience noted its applicability in daily life. However, improv is not a "panacea," as daily life challenges can influence the benefits experienced and may contribute to persistent anxiety.

Implications

Improv allows autistic individuals to create scenes together, benefiting all participants by boosting social cognition, reducing anxiety, and fostering community.

Plain English version: Introduction

Improv comedy involves participants creating scenes or songs spontaneously without scripts. This practice can help improve communication skills. I studied how autistic adults feel about the benefits of participating in improv comedy.

Methods

In Study 1, I recruited 20 adult participants and conducted interviews. I sough to understand the experiences of autistic individuals in improv, whether as a profession or a hobby. I focused on identifying the benefits of participation and their lived experiences in relation to improv. In Study 2, 17 participants shared their experiences and perceived benefits of taking an improv course. I combined methods to study anxiety levels in addition to a general understanding of the experiences and benefits of the course.

Outcomes

The findings from both studies show that improv offers similar benefits to autistic adults. These benefits include a better quality of life, improved mental health, acceptance, and a sense of flow. Participants recognized the value of their autistic skills in improv. Those with more experience noted that these skills helped in daily life. However, improv is not a "cure-all," as everyday challenges can affect the benefits experienced and may continue to cause anxiety.

Implications

Improv allows autistic individuals to create scenes together. This process benefits everyone involved by enhancing social understanding, reducing anxiety, and building community.

P3.03.17 - The Value of Access Riders in Discovering and Communicating Neurodiverse Needs.

J. McDonald¹

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Trigger warning: No Trigger Warning

Practical impact: Access Riders can help autistic or other neurodivergent people to focus on their actual needs in any particular situation - in education, employment or socially, They're a short accessible document that support the individual and those they will engage with to provide the best environment for successful interaction.

Abstract body: Access Riders are documents used by disabled people in the arts as they frequently encounter new settings with each new contract.

Access Riders have three main components - the person states their **strengths**, then explain what conditions are **necessary** for them to be at their best in a particular situation. Also included is what supports may be **desirable** to allow optimum performance. Sometimes people include links to further explain certain medical labels or features that the individual considers to be important.

As a teacher and autism trainer, I've supported individuals and groups to create their own Access Riders. Groups have included autistic adults, teachers and professionals working in autism support.

For autistic or other neurodivergent individuals, creating this document enables them to be specific





about any needs or concerns around a situation and to state either what they may need to do, *e.g.* wear ear protection or to receive from the other party *e.g.* provision of a quiet space. It allows advance clarity of needs arising which proves advantageous fall round. Creating the document helps the person's self-awareness and can increase their confidence in advocating for their needs.

Equally powerfully, professionals attending workshops on creating Access Riders can be surprised how complex it can be to clearly define their needs, and even more importantly how difficult it can be to have the confidence to share any requests with others who may be able to help.

The exercise demonstrates human neurodiversity showing that everyone has different needs and preferences.

Plain English version: An Access Rider is where a person writes down their needs to give to people in new places.

They can be used in school, at work or when out socially.

Access Riders have three parts:

- 1. The person's strengths,
- 2. The things they **need** to have to make things easier.
- 3. The things they'd **like** to have to make things easier.

Sometimes they include computer links too to help explain things.

I'm a trainer who has helped people and groups to write Access Riders.

They can help autistic people be very clear about what they need so they can be in the new place e.g. ear plugs, or a quiet spot.

Knowing the needs in time helps everyone.

Its also good for people to be clear about their needs and it can help them to speak up for themselves.

When staff like teachers make their own Access Riders, it helps them to see that its not so easy! That it's sometimes hard to be clear about what you need and even harder to ask for it!

Making Access Riders shows that all humans are different with different brains. We like different things.

We need different things.

The fact that we all have different brains is called neurodiversity.

P3.03.18 - Creating Meaningful Connection and Interaction With The World Through Simple Plays for Young Children on Autism Spectrum

R. Koşar¹

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Trigger warning: No Trigger Warning

Practical impact: The practice that has been implemented for many years, is based on simple plays allows young children to have meaningful connections at the very beginning of the early intervention and through these simple plays the children with autism can relate with the world with meaning as the practise contents and the practitioner implement meaningful, simple plays with the themes of daily life such as going to park, going to market, going to the doctor, going to the vet, going to the forest, going to the farm. Activities involving daily life with simple puppet figures guide children to enjoy playing meaningfully and interacting with the world meanigfully.





Abstract body: The young children on Autism Spectrum presents significant challenges in playing meaningful plays, creating meaningful plays and difficulty interacting with the outside world through these plays. However, for all mammals on earth, life begins with play. Discovering the world, discovering the self, start with these simple plays. Through the plays, children perceives the world with joy and trust. The secure connection with the world in early childhood will later help the child to form more meaningful bonds. This meaningful bonds are very important in maintaining mental health and in reducing anxiety.

Early intervention based on simple plays that include very simple themes related to the practise of concrete daily life applied to very young children on autism spectrum aims to establishes a more secure bond with the practitioner through these simple plays which applies with puppet family and other play materials in a structured play room and the plays tailored to the needs and potentials of each child .

When children first starts this intervention, they mostly focus on their own on geometric shapes, numbers, and letters. Some children show interest in simple puppet family toys and simple and meaningful plays with them right from the beginning of intervention and comes to play with joy and motivation, while others resist to play together with simple plays. But, usually this resistance is very short time. And, by creating meaningful connections through meaningful play motivates the child to interact with the world.

P3.03.19 - Autistic Wellbeing: A Q-Sort Exploration of Autistic Adults' Perspectives

<u>M. Botha</u>¹, C. Crompton², S. Dantas³, S. Morgan-Appel⁴, M. Robinson⁴

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Trigger warning: No Trigger Warning

Practical impact: Currently, autistic wellbeing is often assessed using measures developed with non-autistic norms. This study will help us understand what facets and domains of wellbeing matter to autistic people, and may form the basis of new measures of wellbeing for autistic people. By centering autistic perspectives, our findings will deepen current understanding of autistic wellbeing and contribute to the development of healthcare, policy, and service provision that promotes positive wellbeing in autistic people.

Abstract body: Introduction: The Striving to Transform Autism Research in Scotland (STARTS) is a collaboration of autistic and non-autistic, university-based and community-based researchers. Our priority setting study (Cage et al., 2024) identified "mental health and wellbeing" being the top priority for autistic people, with particular interest in the research questions 'How do autistic people conceptualise autistic wellbeing?' and 'What factors contribute to autistic wellbeing?'. **Methods:** Purposeful sampling will be used to identify a diverse sample of 40 autistic participants living in the UK, who will be presented with a set of statements about autistic wellbeing — codeveloped by STARTS' co-researchers — and rate these statements based on agreement about relevance to their personal experiences. This method is known as a Q-sort, and the data generated will be analyzed using factor analysis, to identify patterns and differences across participants' sorting. This is both a quantiative and qualitative method that prioritises subjectivity of participants.

Outcome: We will be collecting data in February/March 2025 for analysis in April. Results will create dimensional "profiles" of factors of autistic wellbeing. These factors will represent clusters of people who conceptualize wellbeing similarly, while the differences across factors will represent divergence of perspective and facilitate the exploration of heterogeneous profiles. This method allows for an intersectional and subjective analysis, with qualitative insights from open-ended responses adding nuance to quantitative data.

Discussion: built upon autistic perspectives, our findings may form the basis of new measures of autistic wellbeing and inform the development of healthcare, policy, and service provision that promotes positive wellbeing.





Plain English version: Introduction: STARTS (Striving to Transform Autism Research in Scotland) is a team of autistic and non-autistic researchers working together. In our first research study, autistic people in Scotland told us that the most important autism research priority for them is understanding and promoting wellbeing for autistic people. In response, this study looks at two key questions: "What does autistic wellbeing mean to autistic people?" and "What contributes to autistic wellbeing?"

Method: We will select a diverse group of 40 autistic people living in the UK. These participants will sort and rate statements about autistic wellbeing (created by STARTS' researchers) based on how much the statements match their own experiences. This research activity is called "Q-sorts," using a mix of participants' ratings and written responses to understand patterns in how people think. This activity values participants' individual perspectives and combines statistics with detailed personal insights.

Outcome: Participants will take part in this activity in February and March 2025, and researchers will analyze the data in April. The results of the analysis will group people based on how they view wellbeing, showing similarities and differences across the groups. These findings will highlight both shared and unique perspectives, with a deep understanding of what influences wellbeing for different autistic people.

Discussion: The results, based on autistic people's views, could lead to new ways of measuring autistic wellbeing. They could also guide improvements in healthcare, policies, and services to better support positive wellbeing for autistic individuals.

P3.03.20 - Painting, Style and Independence

M. Sexton¹
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Trigger warning: No Trigger Warning

Practical impact: show others that people thrive with independence and opportunities make more opportunities.

Abstract body: I am a talented artist and have a unique perspective on art and life. Being able to express myself through my sense of style, passion for painting has allowed me to grow and fulfil my potential.

Recently I moved to an apartment of my own attached to a Residential house where I could avail of support from staff. My whole meaning of life began to change.

This year I had my first holiday abroad with my friends with staff support. It was a life changing moment. My parents and I were so excited and proud of me. I was delighted when my mum made a book of photos of my travels!

I was supported to study with Connection Arts. I exhibited my paintings at a national level at the Royal College of Surgeons and at a local level in the city hall and local library.

I am an autistic man who has lived in residential centre shared with other adults with an intellectual disability, it is not easy to share sometimes.

The transition to a new house was difficult.

My brother lives near and I get to go out for a meal with him during the week. Family is important to me.

This move also provided me also with the opportunity to make new friends and experience different activities. I love chatting with my family about all these experiences and friendships I have formed over the past few years.

I am planning more new experiences in the future





P3.03.21 - Self-Centrism and Self-Determination

Y. DUBOIS1

¹SAMSAH TSA PASSIERO, 13, SALON DE PROVENCE, France

Trigger warning: No Trigger Warning

Practical impact: Promote the realization of a life project that meets the needs of people with ASD in their social environment

Abstract body: For a hundred years, international law has defined the right of peoples to self-determination; The most humanistic societies today want to be inclusive and advocate the self-determination of people with disabilities. Referring to the functional model proposed by Wehmeyer in 1999 (behavioral autonomy, self-regulation, psychological empowerment and self-realization), the question of the autistic person's life project is: how to articulate self-determination and self-centeredness specific to ASD?.

The difficulties of social interaction do not allow them to integrate the cultural sense of the social environment. Autism must be understood as self-centeredness. Therefore, is the autistic person's life project a priori self-centred or should it be carried by his or her environment? Is self-determination a matter of course or, on the contrary, a paradox? Indeed, who appreciates the self-determination of a person with ASD? Him or the others?

The experience of long-term support work for adults with ASD on the entire spectrum (200 situations), over many years and through outpatient structures, will lead us to put these reflections into practice through an analysis of the various forms of life projects developed. The support for DSM 5 level 1 ASD is troubling. Some can only live inside their homes and resist any effort to help social inclusion, while others want to have a social life comparable to neurotypicals (spouse, housing and work) but fail because of their particularities. It remains very difficult for these people to find balance and meaning in their lives in accordance with their social environment.

P3.03.22 - "As We Are" Teen Workshop Series: Empowering Autistic Youth

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Trigger warning: No Trigger Warning

Practical impact: The "As We Are" Teen Workshop series has the potential to create significant practical impacts for autistic individuals in various ways Enhanced self-understanding and identity acceptance, improved mental health and wellbeing, development of social connections, increased parental awareness and support, community engagement and advocacy and long-term societal change.

Abstract body: The "As We Are" Teen Workshop series, aims to support autistic teenagers aged 13-17 in understanding their unique identities and navigating the challenges of adolescence. The workshops seek to foster self-advocacy, mental health awareness, and social connections among participants.

Methods/Approach:

Three engaging workshops for teenagers will be conducted, each centring on important themes:

- Workshop 1 will delve into personal identity and neurodiversity.
- Workshop 2 will tackle mental health issues, offering strategies for coping with burnout, meltdowns, and puberty.
- Workshop 3 will encompass topics like navigating relationships, friendships and school life.





Additionally, two parent support workshops will run simultaneously. Following each session, participants will receive a follow-up resource pack to enhance and solidify their learning experience.

Outcome:

The program aims to empower autistic youth by fostering a sense of belonging and understanding within their communities. Participants will learn to embrace their identities, navigate social relationships, and manage mental health challenges, while parents will gain insights into supporting their children through the adolescent years.

Discussion:

By providing a supportive environment for autistic teenagers and their parents, the "As We Are" workshop series seeks to bridge gaps in understanding and acceptance of neurodiversity. The initiative will not only enhance the wellbeing of participants but will also promote a culture of respect and inclusion within the wider community, benefiting families and society as a whole.

P3.03.23 - Case Study: The Role of an Autism Spectrum Therapist in Developing Self-Efficacy and Psychological Resources in a Adolescent with ASD with a PDA Profile

<u>Z. Buczma¹</u> ¹CDT Spektrum, Warszawa, Poland

Trigger warning: No Trigger Warning

Practical impact: This study holds considerable significance as it offers valuable insights into how individualized support for adolescents with autism, particularly those with the PDA profile, can impact their emotional and social functioning. Adolescents with this profile often face challenges in responding to external social demands and expectations, resulting in stress and avoidance of interactions. An approach that emphasizes the patient's strengths, rather than focusing exclusively on deficits, fosters a greater sense of self-efficacy, which in turn can reduce anxiety symptoms and enhance overall psychological well-being. Therapy delivered by professionals with a similar neurotype, due to a deeper understanding of the patient's unique experiences, can substantially enhance the effectiveness of the therapeutic process. The findings of this study may serve as a foundation for the development of more effective interventions that address the individual needs of autistic individuals, while also promoting the importance of seeking therapists with a similar neurotype. Such an approach can improve the quality of therapeutic interactions and lead to better alignment of support with the specific experiences of autistic patients.

Abstract body:

Research highlights the importance of supporting self-efficacy and mental well-being in adolescents with autism, given their increased risk of mental health challenges (Cooper et al., 2024). In this context, strength-based approaches that emphasize the abilities of autistic individuals rather than focusing on their deficits have shown promising results in improving mental health and reducing anxiety (Murthi et al., 2023). Furthermore, therapy conducted by a clinician with a similar neurotype has been suggested to be more effective for individuals on the autism spectrum (Taylor & Sims, 2024). Building on these findings, the aim of this study is to explore the role of a therapist within the autism spectrum in promoting self-efficacy and psychological resources in an adolescent patient with autism and a Pathological Demand Avoidance (PDA) profile. This case study is based on therapeutic observations and an analysis of the patient's progress, assessed using the Revised Children's Anxiety and Depression Scale (RCADS) and the Generalized Self-Efficacy Scale (GSES). Additionally, the study reviews the methods employed and identifies factors that may have contributed to the improvement in the patient's functioning.





P3.03.24 - Establishing pathways and removing barriers to enable one-year olds access to diagnosis and intervention

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¹No affilition, Tauranga, New Zealand

Trigger warning: No Trigger Warning

Practical impact: Early diagnosis and intervention leads to better outcomes for children enabling them to flourish

Abstract body: Parents often suspect in the first year or two that their child may be on the autism spectrum however there are many barriers for accessing support, intervention and assessments. Families are wanting to understand their child's behaviour and to help them develop skills to enhance a good life.

In our 2023 cohort 50 percent of parents recognized that their children may be on the autism spectrum at 10 months of age, yet in New Zealand the average age of diagnosis is 6 .5 years.

In line with recent Australian research on the merits of early intervention we prioritized children under the age 2 years of age . We established pathways within our service and in the community, that resulted in support, intervention, and speech language therapy often prior to assessment. Over a three-year period, we diagnosed 77 one-year olds on the autism spectrum. The process of prioritizing under 2-year-olds was challenging for management and staff. ASC emerges in the early months of life and we need to be responding in a timely manner to ensure best practice and best outcomes. Ideally families need immediate access to services when parents recognize or wonder, if their child is developing differently. To help children flourish, we need to remove the barriers for families. This will require a major paradigm for some clinicians and services.

P3.04.01 - Lived Employment Experiences of Autistic Adults and Key Stakeholders in the UK

A. Barbeau¹

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Trigger warning: No Trigger Warning

Practical impact: This study highlighted the barriers and supports in employment for autistic people. It entailed in-depth interviews from autistic adults and key stakeholders on lived experiences in employment as well as seeking employment.

Abstract body: Background:

Employment is a human right and is linked to mental well-being, social relationships, and economic independence (Khalifa et al., 2020; Tomczak et al., 2021). Moreover, Mason (2018) reported in a study that the positive predictors of quality of life included employment and receiving social support. Despite the known strengths in this population, employment rates are low and below other disabilities with the figures for the Western countries being 34% for autism, 54% for other disabilities and 83% for the neurotypical population (Howlin, et al., 2004).

Methods:

The participants were recruited from multiple sources. The participant groups represent three main groups: autistic (n=15); employers and service providers (n=8) and parents (n=5). Further, the participants were all residents of the UK, over 18 and working, have worked or desired to work. This study utilised the method of reflexive thematic analysis, utilising the six phases developed by Braun & Clarke (2022) to code for convergent and dissonant themes and subthemes.





Results:

Through the process of thematic analysis there emerged a superordinate theme of misalignment and 4 themes and 13 subthemes. This

demonstrates how the differing perspectives of the participant groups did not match in the themes: knowledge, intent, actions or effects. Crucially, this

misalignment impacts if an autistic person is able to obtain and maintain employment. Most notably, the negative effects of misalignment had the greatest impact on the autistic participant group. Employment environments need to have social and communication mechanisms that are universally designed to optimize inclusion for the autistic employees.

P3.04.02 - Employment of individuals on the autism spectrum – perspective of employers

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Trigger warning: No Trigger Warning

Practical impact: The goal of the study is to enhance employer education and improve the training and preparation of individuals on the autism spectrum for the workforce

Abstract body: research submission

Plain English version: Studies indicate a significantly low employment rate among adults on the autism spectrum, ranging from 5% to 50%, depending on the context. However, the more pressing concern lies in the nature of their employment. Research consistently shows that, despite their education, social skills, family background, or academic qualifications, adults on the autism spectrum, if employed, typically work only a few hours per week, engage in volunteer roles, or occupy low-paying jobs that are far below their skill level. They also struggle to maintain long-term employment. This ongoing study seeks to examine the perspectives of potential employers regarding the employment of adults on the autism spectrum. Specifically, it will explore employers' attitudes, expectations, concerns, and potential accommodations and support systems for these individuals. The goal of the study is to enhance employer education and improve the training and preparation of individuals on the autism spectrum for the workforce.

P3.04.03 - Empowering Education: Embedding Experiential Knowledge and Expertise in Higher Education

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Trigger warning: No Trigger Warning

Practical impact: This work empowers autistic individuals by providing them with professional opportunities to leverage their lived experiences, enhancing their visibility and inclusion in education and society. By fostering understanding, reducing stigma, and promoting personalized care, it bridges the gap between formal systems and the realities of autistic individuals, ultimately improving their quality of life and societal integration.

Abstract body: Experiential knowledge and experiential expertise are invaluable resources for shaping inclusive and effective education. These concepts are increasingly recognized in some countries as essential complements to theoretical and practical knowledge in higher education, particularly in fields like Social Work and Healthcare.





Experiential knowledge refers to strategies and insights derived from personal and collective lived experiences, while experiential expertise involves the deliberate, professional application of these experiences to support and educate others. By embedding these perspectives in curricula and research, we can address socioeconomic health disparities and promote personalized learning environments.

Study programs, such as the Associate Degree in Experiential Expertise in Care and Welfare, empower individuals to leverage their recovery journeys to drive systemic change. These professionals bridge the gap between clients' lived realities and formal care systems, fostering equality and empowerment.

Individuals with autism can work as professionals, methodically and inventively applying their own experiences to contribute to client recovery or as (guest) lecturers at universities to share their unique perspectives. These contributions not only enrich academic content but also foster greater empathy and understanding among students, equipping them to view challenges through a "neurodiversity lens."

The transformative potential of integrating experiential knowledge and expertise into education highlights its role in advancing socially just and inclusive academic and professional practices.

P3.04.04 - Inclusion of people with ASD in the workplace

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CHUV Centre hospitalier universitaire vaudois, Vaud, Lausanne, Switzerland

Trigger warning: No Trigger Warning

Practical impact: The development of a hybrid e-learning system, allowing both a broad awareness of the field and the dissemination of tools adapted to each professional context, is intended to encourage a profound cultural change, so that companies and society understand the unique opportunities offered by hiring these people with unconventional minds. In the long term, this could not only improve the professional prospects and quality of life of people with ASD, but also generate savings in terms of social costs.

Abstract body: Families and associations defending the rights of people with autism spectrum disorder (ASD) have highlighted the need to respond to calls for efforts to include people with ASD in employment. To meet this need, we have developed an innovative scheme aimed at training company staff to provide an appropriate welcome, to young apprentices. Our support system is designed to offer several activities: First, two E-learning modules, the first to raise awareness of ASD among company staff and professionals, and the second to deal with the challenges involved in integrating people with ASD into different professional contexts, including personalized tutoring to help trainers implement specific adaptations according to their work environment. Furthermore, a customized 'toolbox' is developed for each participant, considering their professional context. Finally, we also provide a community of practice and shared database to exchange experiences, discover successful initiatives and draw inspiration from developments proposed by other members. In time, we hope to see an increase in the recruitment of people with ASD as companies realise the benefits they can bring to their business, including increased productivity through the adoption of streamlined processes that will ultimately benefit all employees. In addition, people with ASD will benefit from a working environment that is adapted to their needs.

P3.04.05 - ☐ What is known about the lives of autistic doctors? A narrative review of the literature.

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Trigger warning: Suicide, Mental illness

Practical impact: This comprehensive narrative review of the documents circulating about autistic doctors will enable them, and others, to know what has been written about them, including their strengths and challenges. It demonstrates that real-life autistic doctors are not as portrayed in the media and in TV medical dramas. The occupation of 'doctor' can be a good fit for people with autistic traits. These traits also allow autistic doctors to function well as physicians but also impose specific challenges, which produce stress and mental health co-morbidities. This study sheds light on what those are, in preparation for future studies to investigate these features in more detail.

Abstract body: Introduction

The public has shown interest in media accounts and TV dramas about autistic doctors, yet real-life autistic doctors note 'We're not exactly as portrayed on TV'. The study's purpose was to discover and examine published documents about the lives of real-life autistic doctors. The primar question: 'What is known about the lives of autistic doctors?'

Methodology

A narrative literature review was completed, searching seven biomedical, life science, nursing, allied health, psychology, educational and thesis databases as well as non-scientific literature using three internet search engines. Multiple keywords and combinations, relating to both doctors and autism, were used with Boolean operators, adjacency techniques and stopping rules. The bibliographies of retrieved literature were also searched. Inclusion and exclusion criteria were set. Descriptive analyses evaluated publication numbers and types as well as data about the described doctors and their lives. Qualitative analysis using NVivo software sought out common themes and sub-themes..

Results

Thousands of academic papers, editorials, commentaries, letters-to-editor, book chapters, newspaper stories, disciplinary proceedings, internet forums and A/V presentations were reviewed. Documentation was sparce before rapidly increasing in 2018. The expanding documentation fell into 4 sequential, but overlapping, themes: anecdotal accounts 45, internet forums 29, commentaries 77, research studies 10. Most doctors were functioning well in various specialties but masking was common because of concerns about stigmatisation. Stress, mental ill-health and suicide ideation rates were high.

Conclusions

Autistic doctors have much to offer but more high-quality studies are needed to know how to best utilize their unique strengths.

P3.04.06 - Creating a diversity climate in the workplace: a mixed methods study into knowledge of autism and attitudes toward hiring autistic people in the United Kingdom

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Trigger warning: No Trigger Warning

Practical impact: Autistic people experience various barriers to employment. This presentation reports on levels of knowledge of autism and hiring attitudes among workplace professionals in the UK using both validated measures and qualitative interviews. By better understanding the gaps in





understanding among hiring managers and colleagues, it will be possible to establish targeted training interventions and move towards creating more autism-affirming workplaces.

Abstract body: Introduction and central question

Autistic individuals face challenges accessing employment, particularly as a result of limited knowledge and understanding of autism. This mixed methods study was driven by the central question: What are UK professionals' levels of knowledge of autism and hiring attitudes towards employing autistic people?

Method

To determine knowledge of autism, n=101 professionals in the United Kingdom responded to a survey that included the Autism Stigma & Knowledge Questionnaire (ASK-Q). Open-ended and closed-ended questions were used to examine hiring attitudes and particularly perceived barriers or drivers to employment for autistic candidates. Nine respondents took part in further semi-structured interviews.

Outcome

Findings report adequate knowledge with a lack of stigma endorsement. Data also indicate a significant relationship between self-reported autism knowledge and the overall ASK-Q total. Autism knowledge was statistically significantly higher in participants who knew an autistic individual through work and where professionals or their companies had knowingly employed an autistic person. Qualitative data provide more nuanced understanding about the barriers and the possibilities for more inclusive autistic employment. Four themes were identified through the qualitative data analysis: (1) Gaps in understanding; (2) Knowledge bridges; (3) Organisational 'risks'; and (4) Avenues to enabling change.

Discussion / Implications

A strong case was made for recognising the needs and strengths of autistic individuals to generate a diversity climate in the workplace. By better understanding the gaps in understanding among hiring managers and colleagues, it will be possible to establish targeted training interventions and move towards creating more autism-affirming workplaces.

Plain English version: Why was this study done?

Autistic people face difficulties getting jobs and this is often to do with hiring managers and colleagues in workplaces not knowing enough about autism. If we can understand more about what levels of knowledge they have and their attitudes towards hiring autistic people, then it might be possible to find solutions to improve opportunities.

What did the researchers do?

We conducted an online survey with 101 people in workplaces in the United Kingdom from a range of job types. They completed an online survey which assessed their levels of autism knowledge using a measure called the Autism Stigma & Knowledge Questionnaire (ASK-Q) and then we asked about their attitudes towards hiring autistic people. Following this, nine professionals took part in a semi-structured interview to shed more light on the barriers and enablers to employment for autistic people.

What did we find out?

Our study found that professionals had adequate levels of knowledge and did not endorse stigmatizing views about autism. This was significantly higher for participants who knew an autistic individual. We found four themes from our interview data: (1) Gaps in understanding; (2) Knowledge bridges; (3) Organisational 'risks'; and (4) Avenues to enabling change.

What is the impact?

By recognising the needs and strengths of autistic individuals we can generate a diversity climate in the workplace. By better understanding the gaps in understanding among hiring managers and colleagues, it might be possible to establish targeted training interventions and more autismaffirming workplaces.

P3.04.07 - Autistic Educators' Experiences of, and Views on, Workplace Inclusion





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Trigger warning: No Trigger Warning

Practical impact: This current study is part of broader PhD work that I am undertaking as an autistic teacher to identify ways to improve the inclusion of autistic teachers working in schools. This stage of the research aimed to understand autistic educators' experiences of inclusion and exclusion at work. From here, we plan to conduct further studies with school leaders and teacher colleagues, to develop inclusion measures. By identifying the workplace experiences of autistic educators and ways to implement better inclusion at work, we hope to develop practical recommendations that are supported by autistic teachers and other stakeholders in their employment.

Abstract body:

We know from previous research that, for autistic people in work, education is a popular field to enter. Having to disclose autistic identity, however, can be difficult and it is therefore important to know how to develop inclusive workplaces so that people do not necessarily feel the need to disclose in order to access their jobs.

To understand autistic educators' views of inclusion and exclusion in school workplaces, fourteen school educators (79% women), with a range of roles such as teaching assistants, classroom teachers, and leaders, wrote diary entries over a month about their ongoing experiences. Thirteen of these people agreed to be interviewed afterwards about what they wrote. Together, the diary entries and interviews were analysed using reflexive thematic analysis. This drew on the insider autistic experience of the researcher (JS) and an Autistic Advisory Group, comprised of four autistic people who each have experience of working in the UK education system.

Autistic educators reported facing ongoing exclusion in the school workplace. Their inclusion depended on the attitudes of others, which varied considerably. In particular, respondents reported experiencing stigma about autistic identity and were affected by systems of poor communication in schools.

Encouragingly, however, some educators reported working in predominantly inclusive schools, where their professional expertise was valued. Findings from this study highlight that inclusive school cultures supported the inclusion of all staff and students, which led to feelings of greater inclusion for autistic staff.

Funding: This project was supported in part by the John and Lorna Wing Foundation.

P3.04.08 - The experiences of autistic doctors transitioning into clinical practice: a phenomenological study

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Trigger warning: No Trigger Warning

Practical impact: These results highlight the importance of tailored support to autistic people during stressful transitions and the importance of specific policies that underline that autistic people should be celebrated and provide value. They also highlight how negative interactions in the workplace can have a massive impact on already overwhelmed disabled people and suggest the need for stronger support and policies so that autistic people don't feel actively victimized. The positive interactions with colleagues detailed in the study suggest that there is some benefit in





having openly autistic role models and that an inquisitive nonjudgmental attitude in those who hold more institutional power may prove to be a good start in supporting autistic people transitioning into work.

Abstract body: Introduction/ central question

Autistic doctors bring valuable contributions to healthcare but face challenges like managing healthcare's unpredictable nature and difficult colleague interactions. The shift from medical student to junior doctor is stressful, and significant life changes can be stressful for autistic people. No research has examined how autistic doctors experience the critical transition from medical student to qualified doctor, which is what this study aims to do.

Methods/ approach

This study utilised an interpretive phenomenological approach, conducting qualitative interviews that were subsequently analysed using interpretive phenomenological analysis. Participants were UK-based doctors recruited through Autistic Medical Students or Autistic Doctors International. Ethical approval was obtained from the University of Sussex Research Governance and Ethics Committee.

<u>Outcomes</u>

Preliminary results suggest participants had mixed relationships with colleagues, feeling some offered support, but others left them isolated and overwhelmed with new responsibilities. Despite developing coping strategies, medical culture disrupted their support systems and hindered their ability to employ them. Participants felt increased pressure to mask during the transition into clinical practice but their attempts to mask were less successful. The impact on their sensory experiences was profound and exacerbated by a culture that prioritised disregarding personal needs.

Discussion/ implications

This study highlights how transitioning into a work environment can be stressful for autistic people, and how work environments can inadvertently exacerbate this experience by disrupting long-developed coping strategies, pressuring autistic people to mask and increasing stress and isolation. Creating environments that embrace diversity and support needs is vital for autistic people to thrive.

P3.04.09 - Competitive inclusive employment and autisme

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Trigger warning: No Trigger Warning

Practical impact: The knowledge derived from this review may support employers and workplaces to create a more autism-friendly work environment, and by this increase autistic people's participation and thriving in the workforce.

Abstract body: Individuals on the autism spectrum without intellectual disabilities face significant challenges in mainstream employment due to difficulties in social communication, adaptability, and sensory sensitivities. Despite possessing unique strengths such as intense focus, attention to detail, and innovative problem-solving abilities, their employment rates remain notably lower than those of individuals with other disabilities. This scoping review aims to provide a comprehensive overview of existing research on employer-implemented strategies that facilitate the inclusion of autistic individuals into mainstream paid employment. A systematic search across multiple databases identified 149 relevant studies, which were analyzed to extract key practices for employers. The findings highlight the importance of creating supportive and inclusive work environments aligned with employees' strengths, offering flexibility in workplace practices, providing autism-specific education and training, integrating assistive technologies, adopting effective leadership styles, implementing proactive recruitment strategies, and ensuring sustained





support. By adopting these strategies, employers can enhance employment outcomes for autistic individuals and foster more inclusive, neurodiverse workplaces.

Plain English version: People on the autism spectrum without intellectual disabilities often struggle to find and keep jobs in mainstream workplaces. This is mainly due to challenges with social communication, adapting to changes, and dealing with sensory issues. However, they often have unique strengths, like being highly focused, detail-oriented, and great at solving problems in creative ways. Despite these talents, their employment rates are much lower than those of people with other disabilities.

This review looks at research on what employers can do to help autistic people succeed in regular jobs. After analyzing 149 studies, it identifies key strategies employers can use. These include:

- Creating supportive workplaces that build on employees' strengths.
- Offering flexible work arrangements.
- Providing autism-specific training and education for staff.
- · Using helpful technologies.
- Adopting inclusive leadership styles.
- Having proactive hiring strategies.
- Offering ongoing support for autistic employees.

By using these approaches, employers can improve job opportunities for autistic people and create more inclusive, diverse workplaces.

P3.04.10 - "Your Story, Your Career": A Creative, Narrative Approach to Career Reflection for Neurodivergent Young Adults

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Trigger warning: No Trigger Warning

Practical impact: Empowering Neurodivergent Participants

By offering multiple forms of expression (videos, text, music, LEGO® SERIOUS PLAY®, etc.), the workshop helps autistic and other neurodivergent individuals articulate and reflect on their strengths and needs, fostering greater career self-awareness and a concise for self-advocacy narrative

Inclusive Tools for Counselors and Educators

Facilitators gain practical methods—combining the Career Construction Interview with creative exercises—to support participants who may find traditional career counseling approaches less accessible or engaging.

Abstract body: The transition from education to employment is often a complex and daunting process for autistic and other neurodivergent emerging adults. Standard career guidance can feel restrictive, failing to acknowledge the depth of individual experiences and the range of communication styles that exist. In response, we developed "Your Story, Your Career" as a multimodal, narrative-based workshop to enhance self-awareness and a personal career story, among neurodivergent participants. This workshop integrates key principles of the Career Construction Interview (CCI) (Savickas, 2011) with creative, hands-on methods such as LEGO® SERIOUS PLAY® and optional multimedia elements (videos, music, books, or stories).

A central premise of our workshop is that **personal stories** can be powerful tools for career exploration. We encourage participants to reflect on formative life events—whether difficult challenges or inspirational successes—and translate these into clearer understandings of their strengths, values, and ambitions. To accommodate differing communication preferences, participants can choose how they wish to express themselves: through written narratives, books, spoken discussion, video clips, or even curated music playlists. We have found that this flexibility





greatly enhances engagement and comfort, especially for neurodivergent individuals who may find standard discussion-based formats difficult or unhelpful.

Workshop Structure

Over the course of Your Career, Your Story, we guide participants through a series of structured activities designed to uncover and shape their career stories. These include:

- 1. **Identity and Values Exploration**: Using CCI-inspired questions, participants think through early memories, favorite hobbies, personal heroes, and pivotal moments that have shaped their worldviews.
- 2. **Creative Expression**: Attendees create tangible representations of their career narratives using written or spoken stories, pictures, video, music, or other media. This hands-on element allows participants to visualize their personal story and articulate their aspirations more clearly.
- 3. **Peer Feedback and Reflection**: In the group, participants shared aspects of their career story in a supportive environment, offering one another encouragement and additional perspectives on potential paths or solutions.
- 4. **Action Planning**: Drawing on insights from the reflective exercises, the participants identify specific, practical next steps—such as exploring certain industries, seeking mentorship, or adjusting job search strategies—to move forward confidently.

A **pre-post measurement** has indicated a strong increase in self-awareness among participants, suggesting that Your Story, Your Career positively impacts their self-awareness in the context of their careers.

Workshop Experience

In this conference session, we will demonstrate selected steps from the complete workshop, allowing attendees to experience firsthand the blend of narrative interviews, creative construction, and collective reflection. Participants will practice brief exercises from the CCI framework and learn how different modes of storytelling can be integrated into career counseling sessions for autistic students or clients.

Ultimately, this workshop seeks to inspire counselors, educators, and other professionals to adopt more inclusive and empowering methods of career exploration. By prioritizing individual strengths, embracing diverse forms of expression, and fostering an atmosphere of mutual support, "Your Story, Your Career" aims to help neurodivergent individuals craft meaningful, authentic career paths that align with their personal stories and future ambitions.

P3.04.11 - How my mild Asperger syndrome as well as obsessional anxiety diagnosis helped to create a more supportive employment opportunity.

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Trigger warning: No Trigger Warning

Practical impact: To illustrate Employment can be improved if there are sufficient supportive people or funding to assist people who are autistic.

Abstract body: WHY IS THIS IMPORTANT?

To illustrate how much benefit correct diagnosis alongside supportive employers can benefit an individual.

To encourage more funding to help people who are autistic who are wanting to work.

Working can help an individual at different ways not least their self esteem.





WHAT YOU DID OR EXPERIENCED

My diagnosis opened the doors to various organizations being able to support me when I was preparing to work alongside later at the workplace.

My diagnosis helped me to understand myself which meant I could then explain myself more easily to my employer.

This awareness or knowledge can help my Manager as well as colleagues as they know more about me than at previous workplaces I worked at.

They can accept as well as understand why I work the way I work. This may help them at their work as they know more about me than if I wasn't diagnosed.

WHAT HAVE BEEN THE CHALLENGES?

My literal understanding alongside my historical anger.

WHAT HAVE BEEN THE BENEFITS?

If a person who is autistic is supported they may work many years at the same organization.

WHAT DOES THE FUTURE HOLD?

I recommend more Permanent Employment Support Schemes as well as Employment Support Workers are enabled to support those who are autistic starting at their careers to enable them to more closely achieve their Employment potential. As a result those people would've greater self esteem as well as financial independence.

P3.04.12 - GREEN VOCATIONAL EDUCATION FOR PEOPLE ON THE AUTISM SPECTRUM

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Trigger warning: No Trigger Warning

Practical impact: The Erasmus+ Green ASC VET Project empowers autistic individuals by expanding career opportunities, integrating XR-based vocational training, and promoting inclusion through advocacy for equal job opportunities and fair working conditions.

Abstract body: The Erasmus+ Green ASC VET Project challenges the common stereotype that STEM

careers are the most natural or suitable paths for individuals on the autism spectrum. Through extensive research and innovation, the project broadens opportunities for vocational education and careers across diverse fields, expanding pathways to meaningful employment.

The project's primary goal is to provide individuals on the spectrum with an integrated, interactive, and lifelong vocational education model. This model combines training through Extended Reality (XR) with hands-on, real-world learning experiences. Specialized programs for teachers and trainers further ensure the effective development of competencies in both learners and educators.





The initiative is reinforced by the "Include Me, I Can Do It" campaign, which raises awareness among employers and society at large to promote fairness and inclusion. The campaign advocates for equal opportunities in the job application process, access to stable employment, and fair working conditions and wages.

By leveraging innovative technologies and inclusive practices, the Green ASC VET project envisions a future where individuals on the autism spectrum can unlock their full potential, thrive in varied career paths, and contribute meaningfully to society.

P3.04.13 - Harnessing Social Networks to Support Career Growth in Young Professionals with Autism: Insights from a Multiple Case Study

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Trigger warning: No Trigger Warning

Practical impact: By documenting successful approaches to leveraging social networks as an intervention for enhancing the career development of individuals with autism, this case study research offers actionable insights that can be adapted and scaled to real-world applications. Specifically, the framework developed through this research will empower autistic young professionals and stakeholders to build peer-driven social networks independently. These networks will harness the collective strengths of the autism community, fostering mutual support while balancing responsibilities and expectations among stakeholders. This approach not only advances career development opportunities but also provides a fresh perspective on promoting social inclusivity and embracing neurodiversity.

Abstract body:

Introduction

Young professionals with autism may face barriers in their attempt to find satisfying job opportunities and subsequent career development. While current support mostly relies on workplace accommodations and coaching, a new study explores how peer social networks could provide more empathetic and cost-effective interventions improving the opportunities of young professionals with autism while improving their personal capabilities.

Methods

This multiple case study examines social network interventions for young professionals with autism in a metropolitan city in the UK, with diverse cultures and high competitiveness of employment. Initial interviews with local practitioners (January- February 2025) will provide metrics for successful networks. Three cases meeting these metrics will be selected for in-depth practitioner interviews. In April 2025, a participatory workshop with stakeholders will be facilitated, including practitioners and professionals with autism, to reflect on case study data and to co-create future quidelines.

Outcome

This research aims to develop guidelines for creating social networks that enhance career opportunities and professional development for young adults with autism, based on the case study and co-creation.

Implications





The guidelines developed through this research will harness the autism community's collective strength to address employment satisfaction challenges, particularly as society faces increasing pressure from growing neurodiversity awareness and job market competition.

Plain English version:

Finding a satisfying job and getting a promotion is challenging in this competitive market. Especially autistic young professionals are facing barriers as they are misplaced in their capability. Furthermore, the requirements for career development are usually based on the neurotypical brain, limiting the chances of getting a job for those who are autistic and, when they have a job, limiting their career opportunities in spite of their specific qualities.

Nowadays, with the growing awareness of neurodiversity, companies have started providing reasonable changes in the workplace and people with autism can find specific employment coaches to help them. However, there is another powerful and potential intervention, social networks of the autism community. Instead of relying on the efforts of third parties like companies and trainers, creating a social network as a solution can effectively use internal peer power.

Researchers have proved that peer communities can improve the study experience of autistic children. Professionals commonly use networks to get career opportunities and developments. In this research, we are interviewing practitioners who create social networks for young professionals with autism, and we are also inviting them to join a co-creation workshop and contribute to a network-building guideline to be published. Everyone can reference the guidelines to create their social network, which we summarized from successful experiences.

P3.04.14 - Educational and vocational outcomes in a cohort of young adults with ASD in Greece

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Trigger warning: No Trigger Warning

Practical impact: The current research study has been designed to study vocational and educational outcomes in a cohort of young adults diagnosed with ASD in childhood. Such data are scarce in Greece, and, while the present study is not epidemiological in nature, the cohort (n=700) is large enough to allow us to explore which factors are associated with better adult outcomes. Also, characterizing what a cohort of adults with an ASD diagnosis is doing in adulthood will also allow us to assess the quantity and quality of the services that are on offer in Greece. Finally, recent changes have been introduced to entrance exams in postsecondary education in Greece. The present study will allow us to assess the impact of such changes. As we have baseline data from their time of diagnosis we will also be using those data to explore prognostic factors. In the present abstract, we are reporting on 50 young adults and their secondary, post secondary and vocational outcomes.





Abstract body: INTRODUCTION

The present study is designed to investigate the educational and vocational outcomes in a cohort of young adults in Greece diagnosed with ASD in childhood. Data on adult outcomes are very limited, which hinders comparisons with other countries.

METHODS

This is an ongoing study funded by the Hellenic Foundation for Research. Parents of young adults (18-35 years of age) with a childhood ASD diagnosis are recruited from our dedicated ASD clinic that runs within the Child Psychiatry University Clinic. They are asked to complete a questionnaire related to their offspring's secondary and post-secondary educational outcomes as well as rank their child's current activities based on the Taylor and Seltzer (2011) vocational index (VI).

OUTCOME

Presently, we are reporting on the outcomes of 50 young adults (M:38) with a mean age of 23.2 years (range: 18-31 years). In terms of secondary education, 16% didn't graduate from high school, 26% graduated from a special education high school, 20% graduated from a technical education high school and only 32% graduated from a mainstream high school. Following the classification scheme provided by Taylor and Seltzer's VI, we report that 31.9% are currently studying in university or are in employment and 53.2% are either spending time in a day center (27.7%) or are reported as having no activities (25.5%).

IMPLICATIONS

One out of four young adults in our sample are reported as having no daily activities. This points to a gap in inclusionary practices that calls for institutional change.

P3.04.15 - Autism Sevilla Employment Platform

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Trigger warning: No Trigger Warning

Practical impact: The Autism Sevilla Employment Platform has a significant practical impact by creating real job opportunities for individuals with ASD. By providing personalized support, the program bridges the gap between vocational training and successful employment, ensuring individuals are equipped to enter and thrive in regular job settings. The platform's comprehensive approach includes tailored vocational guidance, job search assistance, and emotional support for those reentering the workforce after long periods of unemployment.

Real-world experiences, such as internships and on-the-job support from employment technicians, allow participants to gain hands-on skills in a supportive environment. This increases their confidence and job readiness, making the transition to permanent employment smoother. Additionally, the program offers training in key areas like resume writing, interview preparation, and job search strategies, which enhances participants' marketability and independence. The Employment Training component further enhances practical skills through real-life experiences, fostering professional development in inclusive work environments. This integrated approach not only empowers individuals with ASD to secure jobs but also helps them maintain long-term employment, thereby improving their quality of life.

Ultimately, the platform provides a sustainable pathway for individuals with ASD to achieve financial independence, social inclusion, and personal fulfillment, making a meaningful and lasting impact on their lives and communities.

Abstract body: The Autism Sevilla Employment Platform aims to create job opportunities for individuals with ASD, as we believe employment is a right and a quality of life indicator. We provide individualized support for the personal and professional development of working-age individuals with ASD through Individual Employment Insertion Pathways, following the guidelines of the European Association of Supported Employment.

Our support covers vocational guidance and training from an early age (secondary school) to emotional assistance for those reentering the workforce or facing long-term unemployment. The program focuses on vocational training and developing participants' career profiles, with the goal





of securing and maintaining jobs in regular work environments. Key activities include:

- Personalized counseling and support in job searching, including vocational guidance, resume creation, cover letters, interview preparation, coaching, and emotional support for individuals reentering the job market.
- Support in real employment experiences and internships, with employment insertion technicians providing assistance during the process to ensure a positive experience.
- Participation in Employment Training, designed to achieve professional development through tailored training, work experience, and external training opportunities. The content covers personal competencies, practical and theoretical knowledge, and real-life experiences such as internships and company visits.
- Preparation and support for public employment process preparation. Our ultimate goal is to help individuals with ASD develop the skills and support needed to thrive in regular employment settings.

P3.04.16 - ☐ Self-Technologies of Young Adults on the Autism Spectrum in Career Orientation

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Trigger warning: Violence, Abuse

Practical impact: The research aims to make power structures in vocational guidance visible so that more inclusive access to vocational guidance and therefore to the labour market is possible in line with the UN Convention on the Rights of Persons with Disabilities. In particular, the focus is on the individuality of young adults on the autism spectrum, in the sense of neurodiversity theory, in order to counteract stereotypical thinking. This information can be used by institutions, professionals as well as people on the autism spectrum and their relatives to promote diversity-sensitive coexistence.

Abstract body: The aim of the research is to visualise the hegemonic and associated power structures in vocational orientation and their practical effects by investigating the effects of vocational education discourses and the classification of competence acquisition they provide on the self-image and ability to act of young adults on the autism spectrum. The methodological foundation of the dissertation project is sociological subjectivation research, which represents a further development of discourse-analytical of knowledge and biographical analysis. The research questions of this dissertation are: 'How are the self-techniques of young adults on the autism spectrum organised and what competencies do they describe in the transition to work?' To this end, the dissertation is divided into three sections: In the first part, a preliminary determination of the social identitary (self-) position of young adults on the autism spectrum and the associated hegemonic structures in vocational education and training are described. In the second part, the theoretical references are shown. The research programme of sociological discourse analysis is used to enable a critical deconstruction of the special discourse on the concept of competence in the context of vocational education and training. Neurodiversity theory forms another key theoretical point of reference for this research. In the third part, the empirical-analytical investigation is carried out by subjecting the biographical self-technologies to a sequenceanalytical evaluation on the basis of three contrastively selected case studies and analysing the self-technologies of young adults on the autism spectrum. The cases will also provide insights into forms of intersectional discrimination.

Plain English version: The aim of the research is to visualise the powerful structures of vocational orientation and the individual paths that young adults on the autism spectrum develop in this exciting phase of their lives. Therefore, the scientific method is divided into two areas: Firstly, an analysis of the discourse on competences and secondly, the presentation of three different case portraits based on individual biographies. The key question is: What are the personal practices of young adults on the autism spectrum and what competences do they describe about themselves in terms of career orientation? The study is divided into three parts: The first part





describes the self-identity of young adults on the autism spectrum and possible social unfairness by summarising in particular publications by activists on the autism spectrum. The second part describes the concept of competence in career orientation, as well as neurodiversity theory. In the third part, the three different cases are presented anonymously to visualise the personal practices in career orientation. The three cases are very different. The aim is to make individuality visible to work against exclusion structures in vocational orientation. The neurodiversity paradigm is one of the central positions of research. The practical impact is to create a more inclusive approach to career guidance.

P3.04.17 - Coaching students on the autism spectrum in higher education: a pilot single case study

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Trigger warning: No Trigger Warning

Practical impact: The existing scientific literature reveals a lack of evidence-based coaching models specifically designed for students on the autism spectrum within higher education. This gap highlights a dual imperative: first, the development of a comprehensive model to support students on the autism spectrum in pursuing self-determined academic pathways, and second, the systematic documentation of the effectiveness of such a coaching program. The present study aims to present the initial findings of a pilot project that addresses both of these needs.

Abstract body: Students on the autism spectrum in higher education (HE), despite strong academic skills, face a higher risk of dropout compared to neurotypical peers. This impacts their employment prospects and raises ethical concerns. While support during transitions could mitigate these challenges, evidence-based interventions remain limited.

The AHEAD program, grounded in the Causal Agency Theory, promotes self-determined actions by fostering autonomy, self-awareness, and goal-directed behaviours. Structured around students' self-identified priorities, AHEAD consists of ten sessions — five completed independently — offering tailored coaching to address individual needs.

The presentation will discuss preliminary findings from a pilot program (January–May 2025) involving fifteen HE students on the autism spectrum. A single-case research design assesses the program effectiveness on each participant. Additionally, the experience sampling method implemented via a mobile application allows to capture students' daily real-world experiences. A focus group further provides qualitative feedback for program refinement.

The presentation will go through the analysis of three key research questions: Does the AHEAD program enhance autonomous goal attainment, self-awareness, and self-determination? How do students perceive their performance, satisfaction, and progress? What are the actual support needs of HE students on the autism spectrum?

Existing literature highlights the strong link between self-determination and academic success. Inclusion-focused practices emphasize the need for support that empowers all students to achieve their full potential while maintaining institutional excellence. By examining AHEAD's impact, this study contributes to future evidence-based practices, fostering a more inclusive and supportive HE environment for students on the autism spectrum.

Plain English version: Students on the autism spectrum in higher education (HE) often have strong academic skills, but they are more likely to drop out than other students. This can affect their job opportunities and raises ethical issues. While providing support during important transitions could help, there aren't enough proven strategies available yet.

The AHEAD program helps students take control of their own actions by promoting independence,





self-awareness, and goal-setting. The program focuses on students choices. It includes ten sessions, five of which are done independently, and offers personalized coaching to address each student's specific needs.

This presentation will share early results from a trial of the AHEAD program, which involves fifteen students on the autism spectrum in higher education. The program's effectiveness will be measured by looking at each student's progress. A mobile app will also collect real-time data on students' daily experiences. In addition, a focus group will provide feedback to help improve the program.

Three questions will be discussed in the presentation:

- 1. Does the AHEAD program help students reach their goals, become more independent, and be more self-aware?
- 2. How do students feel about their performance, satisfaction, and progress?
- 3. What kind of support do students on the autism spectrum need in higher education?

Research shows that self-determination is strongly linked to academic success and that all students should be supported to reach their full potential while maintaining high academic standards. This study aims to offer useful insights to improve support for students on the autism spectrum in higher education.

P3.04.18 - Labor market trends towards employing people with autism spectrum disorder in Saudi society

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Trigger warning: No Trigger Warning

Practical impact: Clarifying the skills needed for people with autism spectrum disorder to increase their employment opportunities

Abstract

body: https://drive.google.com/file/d/1J_Lm_DxxBH5YejL3h37mq7YDCFDvhYvi/view?usp=drivesdk

Plain English version: Employing people with autism spectrum disorder is an important element of quality of life, in light of the lack of guidance for institutions on employing people with autism, and the limited number of specialized professional programs and skills needed to employ people with autism spectrum disorder. The study sought to identify the skills needed to employ people with autism spectrum disorder from the perspective of business owners, with the aim of identifying the skills that can be relied upon in designing professional programs and supporting people with autism spectrum disorder in developing their skills to obtain suitable jobs. The study was applied to a sample of 109 business owners. The tools included a scale to determine the skills needed in the labor market, using analysis by comparing the percentages and averages of the responses. The results indicated a high percentage of support for commercial institutions, the profit sector, institutions with less than five years of experience, and large institutions for the importance of communication skills, self-control, independence, and care for appearance, and technical and technological skills. The response rates varied on the dimensions of the scale with average percentages of 60.05%, 61%, and 54.5% for the skills dimensions. The highest percentage was recorded for communication skills and self-control, then independence and care for appearance, then mastering technical and technological skills. The study recommends the importance of training on the skills that business owners need in the work environment to increase the employment of people with autism spectrum in Saudi society.





P3.04.19 - Secure futures: How a university has created an initiative focused on providing training and experience for autistic students seeking a career in cybersecurity.

R. Palm¹

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Trigger warning: No Trigger Warning

Practical impact: One university's autism support program has launched an initiative to provide advanced training and vocational opportunities in the cybersecurity space for their students studying for a career in that field.

Abstract body: The landscape of employers actively seeking neurodivergent talent focuses heavily in the technology space, often in the cybersecurity domain. Recognizing an opportunity to help autistic university students find meaningful employment, one institution of higher education has created an initiative that provides advanced training and practical work opportunities for autistic students majoring in cybersecurity. The university has partnered with cybersecurity and other organizations to create real-world work experiences for their students, helping overcome the minimal experience that a typical university graduate brings to their first job interviews. This initiative has also created dual enrollment opportunities for high school students interested in cybersecurity and has been recognized by their country's National Cyber Director for being an innovative way of creating a more skilled and diverse cybersecurity workforce. Learn best practices specific to cybersecurity, but also in creating partnerships and hands-on work opportunities for university students to help with employment outcomes post-graduation.

P3.04.20 - Careers guidance for autistic young people in specialist settings

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Trigger warning: No Trigger Warning

Practical impact: It is hoped that this work will provide advice and guidance about how to support autistic young people as they transition from education to employment. For example, as an output of the research, guidance documents will be co-produced with key stakeholders about effective ways to provide work experience to autistic young people.

Abstract body: Introduction and central question

While good careers guidance supports young people's transition from education to employment, little is known about how this guidance is provided to autistic young people in specialist educational settings within the UK. This research examines UK-based staff and parents/carers' perspectives on careers guidance for this group.

Methods

Five autistic young people (aged 17-23), with lived experience of accessing careers guidance, collaborated in designing materials and interpreting results. Using a mixed-methods design, we gathered insights from staff and parents/carers through online surveys and semi-structured interviews. In the staff study, 103 participants completed our online survey, with 20 interviewed. In the parent/carer study, 83 participants completed surveys, with 20 interviewed.

Outcome

Results demonstrated that staff value the careers guidance framework they are provided with





(known as the Gatsby Benchmarks) but still face barriers in implementing it. Most notably, staff reported that despite feeling that work experience was crucial, employers' attitudes around autism make it challenging to find suitable placements. Findings from the parent/carer study show they value schools' efforts to prepare young people for employment, but express frustration at limited opportunities post-school.

Discussion

This research is the first to evaluate careers guidance in specialist settings for autistic young people. Findings highlight the schools' commitment to careers guidance while also revealing systemic gaps in post-school opportunities. The next stage of our research will examine autistic young people's perspectives on this topic, to further enhance understanding and inform practice.

P3.04.21 - Belonging as an autistic researcher in a team of Disabled and non-Disabled staff members

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Trigger warning: No Trigger Warning

Practical impact: This talk comprises of my own experiences as an autistic person working in academia. Practically I hope that this experience will hope to change opinions of employers about employing and including autistic staff in academic teams.

Abstract body: The experiences of autistic postdoctoral researchers are seldom documented. It is important to discuss the experiences of autistic researchers, due to the anecdotally documented growing numbers of autistic people in academia. I am an autistic researcher working within a school of education at a university. I am interested in exploring how universities can ensure that the academic environment and research culture are accessible and inclusive to Disabled staff and postgraduate researchers. I have experienced both joy of being with other disabled staff members and also felt the tensions when some disability labels attract differing status and hierarchies in the wider university (with autism featuring as lesser). My expectations of instantly feeling I belonged were not met, but this has allowed me to reflect upon how the tensions between neurodivergency and disability play out within an academic context. However, I have been able to provide different viewpoints and opinions that I attribute to my neurodivergence. Going forward I think it is important for the intersections between autism, more broadly neurodiversity and disability to be considered more explicitly. It is important to not only advocate for more autistic people to be employed in academia, but to consider how they belong and are included both by other Disabled and non-Disabled staff. However, in the shorter term, employers need to consider the value of ensuring intersectionality in academic teams, specifically in relation to disability.

P3.04.22 - Positive Manager-Employee Relationships Fuel Career Success

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Trigger warning: No Trigger Warning

Practical impact: This study emphasises the importance of positive employee-manager relationships particularly for career development opportunities. These findings show the importance of building strong, supportive relationships between autistic employees and their managers. This can help autistic adults feel valued, use their strengths, and





grow in their careers. The study also highlights the need for workplaces to provide training for managers and create environments where autistic employees can thrive. By improving these relationships, workplaces can become more inclusive and better support the career growth of autistic employees.

Abstract body: **Background**: Positive employee-manager relationships are critical for workplace success, enabling employees to use their strengths and achieve career satisfaction. Although this is established in the general population, the specific impact of the employee-manager relationship for autistic employees remains underexplored. This project examined the relationship between the perceived quality of employee-manager relationships and workplace outcomes, and whether these differed between autistic and non-autistic employees.

Method: We surveyed 189 employed participants (92 autistic, 97 non-autistic) from the United Kingdom. Participants completed measures of: employee-manager relationship quality; workplace behaviours, e.g. strengths use, job crafting, and; outcomes, e.g. career development opportunities, job satisfaction. Multiple regression analyses ascertained the association between employee-manager relationship and autism diagnosis on behaviours and outcomes.

Results: One's relationship with their manager was a significant predictor of all workplace behaviours and outcomes, this explained 22% of the variance in career development opportunities and 7 to 11% in other outcomes. Autism diagnosis was not an independent predictor, nor did it moderate the relationship between manager quality and outcomes. Autistic participants also rated the relationships with their managers as poorer than non-autistic employees.

Conclusion: This study emphasises the importance of positive employee-manager relationships irrespective of neurotype, particularly for career development opportunities. The poorer ratings of manager-employee relationships by autistic employees highlight a critical need for tailored strategies to enhance these relationships.

Plain English version: Purpose

The project aimed to explore whether the quality of the relationship between employees and their managers affects autistic employees' workplace success. The researchers wanted to know if this relationship impacts factors like job satisfaction, career development opportunities, and the ability to use their strengths at work. They also compared autistic employees to non-autistic employees to see if there were any differences in these areas.

What did the researchers did

The researchers surveyed 189 employees from the United Kingdom (UK), including 92 autistic and 97 non-autistic participants. They asked participants about their relationship with their manager, how often they used their strengths at work, their job satisfaction, and their career development opportunities. The researchers analysed this data to see how much the quality of the manager-employee relationship influenced workplace outcomes.

Results and conclusions of the project

The project found that the quality of the relationship with one's manager was a strong predictor of positive workplace outcomes for both autistic and non-autistic employees. This relationship was more important than whether an employee was autistic. However, autistic participants rated their relationships with their managers as poorer than non-autistic participants.

P3.04.23 - An attempt to examine factors that improve the working environment through cafe-style discussions

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Trigger warning: No Trigger Warning

Practical impact: Through organizing 'colleague cafés' where people can talk across organizational boundaries, questionnaires, and interviews, an attempt was made to investigate the needs of people working with autistic people and to find out what factors are needed to create a comfortable working environment for everyone.





Abstract body: Background and Objectives: For people with developmental disabilities, interpersonal relationships with colleagues can often be a factor in their leaving their jobs. The perceptions and needs of colleagues who work with people with developmental disabilities have not been clarified. This study aims to understand the actual situation and their needs and to explore environmental factors that make workplaces pleasant for everyone.

Methods: We investigated the actual status by conducting questionnaires and interviews in Science Cafe. We recruited participants from companies that recommended the hiring of persons with developmental traits. The questionnaire had a response rate of 42.1%. Participants' comments were transcribed from the recordings and classified.

Results: 72.2% and 52.8% of participants were familiar with the two terms "developmental disorder" and "reasonable accommodation," respectively. They commented that their understanding of various disabilities was enhanced, the atmosphere inside the workplace improved, and their workload increased. They showed an understanding of disabilities, and questioned the idea of "work reduction or exemption = reasonable accommodation". They gave their views on the importance of assigning work that matches each person's unique characteristics.

Discussion: The current status of reasonable accommodation and issues with job matching were revealed by the coworker's conversation. It also showed the usefulness of providing opportunities for colleagues to interact across organizational boundaries. Further research is needed to find the effectiveness of cafe-style interaction between colleagues in improving the work environment.

- There are no conflicts of interest to disclose.
- This work was supported by JSPS KAKENHI Grant Number JP19H00149.

P3.04.24 - EMPOWERING NEURODIVERSITY AT WORK: A Scientific Approach to Autism Inclusion in the Workplace

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Trigger warning: No Trigger Warning

Practical impact: By leveraging current scientific research, we aim to demonstrate to private employers that fostering neurodiversity in the workplace is a realistic objective with positive impacts across multiple dimensions, including profitability and competitiveness. To support this, we have developed a practical roadmap to help employers implement recommended best practices into their recruitment and inclusion processes. Our ultimate goal is to increase demand for autistic individuals, who represent a valuable pool of untapped talent.

Abstract body: Why is this important?

- The employment of individuals with autism impacts not only their personal well-being, but also economic competitiveness and government budgets.
- Paradoxically, unemployment among autistic individuals may exceed 80% in many Western countries, even though studies and anecdotal evidence suggest that their skills should be in high demand and could enhance their employers' competitiveness.
- From a government's perspective, employing autistic individuals turns them into contributing taxpayers rather than recipients of social benefits.

Approach

Scientific research was reviewed to identify root causes, which revealed the role of cognitive biases as well as the economic benefits for employers. These findings were presented to the services of the French Prime Minister, which led to the creation of an Autism & Employment Commission tasked with recommending best practices to private employers.





Challenges Addressed

- Reviewed existing academic research and employment guides.
- Conducted over 80 interviews, 40+% involving neurodivergent individuals.
- Identified 80+ best practices, structured into a 4-step roadmap: Plan, Recruit, Integrate, and Adjust, before starting a new cycle.
- Developed a concise publication and short videos tailored to private businesses, offering the assurance of being scientifically validated.

Preliminary Impact

The findings will be presented to French businesses in 2025. Early feedback has been promising, highlighting the practical value of such scientifically validated recommendations.

Future Plans

- Creating a research lab to advance studies on the management of neurodiversity.
- Transforming the commission into a permanent organization to continuously improve the recommendations.
- Developing training programs for managers and recruiters, grounded in a scientifically validated framework.

P3.04.25 - Empowering Inclusive Learning Through the NLN Tech Wheel: Supporting Students in a Digital World

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Trigger warning: No Trigger Warning

Practical impact: The NLN Tech Wheel has transformed how students with disabilities, including autistic students, engage with technology at the National Learning Network. By providing access to a curated selection of digital tools, the NLN Tech Wheel helps students enhance their learning experiences and develop essential skills for employment, life, and education. The adaptability of the NLN Tech Wheel supports instructors in tailoring learning experiences to engage students and meet individual needs, ensuring learning is both impactful and inclusive. The adaptability of the NLN Tech Wheel ensures that students are equipped with both current and future skills, preparing them to thrive in an evolving technological landscape.

Abstract body:

National Learning Network (NLN) is a further education and training provider with centres across Ireland, delivering training that supports students with disabilities, with the highest demographic being autistic students. NLN's Tech Wheel is a curated resource designed to provide students with access to a wide range of digital tools, fostering their engagement with technology. By listening to how students want to learn and what they enjoy, the selected tools empower students to engage with technology in ways that enhance their learning, building essential skills for employment, life, and education.

Tools like Canva and Clipchamp enable students to express their creativity, while Office 365 provides essential productivity tools for collaboration and organisation. These tools support students in developing digital skills, fostering independence and confidence. Additionally, the integration of Microsoft Co-Pilot highlights the importance of teaching students how to use AI ethically and safely. As technology continues to evolve, the NLN Tech Wheel adapts to meet future learning needs, ensuring students are prepared for the present and equipped for the digital





challenges and opportunities ahead.

The tools and support provided through the NLN Tech Wheel also assist instructors in tailoring learning experiences to the most suitable means of engagement, ensuring that learning is inclusive and accessible. By continuously updating the tools and resources, the NLN Tech Wheel ensures that students develop both current and future skills required to thrive in an increasingly digital world. This initiative exemplifies how thoughtful, student-centred technology integration bridges the gap between access and empowerment in education.

P3.06.01 - Virtual Reality-Based Intervention Program to Improve Executive Functions in Individuals with Autism

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Trigger warning: No Trigger Warning

Practical impact: The use of virtual reality (VR) in intervention programs targeting Executive Functions (EF) offers a safe, engaging, and interactive environment where individuals with Autism Spectrum Disorder (ASD) can practice critical cognitive skills. By simulating real-world scenarios, this approach minimizes external risks while maximizing focus on task-specific goals. The integration of ecological tools like VR not only improves EF but also promotes a better quality of life by equipping individuals with strategies to manage everyday challenges effectively.

Abstract body: Introduction & Central Question

The findings of various studies indicate that the difficulties experienced by individuals with Autism Spectrum Disorder (ASD) in many daily situations, including social interaction processes, are related to their executive functioning (EF). Therefore, developing intervention programs targeting EF can have a positive impact on their quality of life. Recently, EF intervention tools using technological platforms have been developed, as they offer an interactive and engaging environment. Among these, virtual reality holds great potential by simulating everyday life situations while minimizing the interference and risks inherent in real-world settings.

Methods/Approach

An intervention program was designed to enhance various components of EF, involving 26 young participants from Madrid. A program consisting of 24 sessions divided into two parts was developed. The first part focused on cognitive training and used the Enhance VR application. The second part employed escape room-style applications with an integrated and ecological approach, involving 'The Room VR: A Dark Matter' and 'A Fisherman's Tale. To evaluate the program, preand post-intervention quantitative measures (neuropsychological assessment of executive functions) and qualitative measures (interviews with participants and professionals) were collected at the program's conclusion.

Outcomes

- To improve EF components in the study's participants.
- To understand the effectiveness and implications of the intervention program.

Discussion/Implications

The results of the intervention program will be presented, and their implications for improving the quality of life of individuals with ASD will be analyzed.

P3.06.02 - Virtual Reality as an Ecological Assessment Tool for Executive Functions in Individuals with Autism





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Trigger warning: No Trigger Warning

Practical impact: The development of VR-based tools for assessing Executive Functions in individuals with ASD bridges the gap between traditional neuropsychological assessments and real-world applicability. These tools offer a more accurate representation of daily life challenges, providing a nuanced understanding of how individuals with autism navigate complex, uncertain, and dynamic environments. This enhanced ecological validity leads to more targeted and effective interventions. Practically, this means caregivers and professionals can develop personalized strategies and supports, reducing frustration and enhancing autonomy in daily activities.

Abstract body: Various studies indicate that the barriers faced by individuals with Autism Spectrum Disorder (ASD) in social interaction processes and other open-ended situations in their daily lives are linked to executive difficulties. However, assessing Executive Functions (EF) can be challenging, as traditional tools have limited ecological validity. These tools are based on scenarios whose conditions (task structuring, defined goals, detailed explanations, etc.) differ significantly from many real-life situations, which are often more ambiguous, uncertain, and challenging for individuals with autism. Virtual Reality (VR) offers environments like everyday life; furthermore, its computational support allows the collection of numerous valuable indicators for assessment, intervention, and research. Nevertheless, although these technologies promise significant advantages for EF assessment in individuals with ASD, they have scarcely been applied to this population.

Methods/Approach

An intervention program based on VR was designed to improve EF, and neuropsychological assessment measures were taken using both traditional tools and VR tools in a pre- and post-intervention phase (pretest-posttest design). Additionally, progress data were collected during the program's implementation. A comparison of the reliability and validity of both assessment methods was conducted.

Outcome

To explore and compare the reliability and various types of validity of traditional neuropsychological assessment tools and VR-based tools.

Discussion/Implications

de Granada, Granada, Spain

The results of the application comparison will be presented, and the implications for the assessment and research processes of EF in individuals with ASD will be analyzed.

P3.06.03 - An eye-tracking study on how adolescent students with autism adapt their reading behaviour to task goals and text structure

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Trigger warning: No Trigger Warning

Practical impact: This research aims to explore how adolescents with autism adapt to reading task characteristics, such as purpose and text structure, and the role of executive functions in their adaptive reading behavior. The findings aim to inform educational practitioners in designing reading tasks that enhance reading comprehension and promote adaptive reading strategies for students with autism.

Abstract body: INTRODUCTION & AIMS

Adolescents with autism often require support in reading comprehension and in their executive functioning and may have difficulties adapting reading behaviour to task demands or text





characteristics. This study investigates how adolescents with autism adjust their reading to task goals (Experiment 1) and text structure (Experiment 2) compared to their typically developing (TD) peers, and how executive functions influence these processes.

METHODS

Experiment 1 involved 22 adolescents with autism and 22 TD peers reading narrative texts under two conditions: understanding an initial statement or answering a question, both presented as titles. Experiment 2 involved 24 participants in each group reading expository texts with or without section headings. Eye movements during reading, comprehension outcomes, and executive functions (working memory, planning, cognitive flexibility, and inhibitory control) were assessed. OUTCOMES

In Experiment 1, both groups showed similar task-based adaptations, with more gaze regressions and time spent on titles when answering questions, but no differences in comprehension outcomes. Executive functions did not moderate these results.

In Experiment 2, adolescents with autism read differently from their TD peers, making fewer gaze transitions between questions and headings. Consequently, they might not have benefitted from headings to the same extent as the TD group. Planning skills predicted gaze transitions only in the TD group.

DISCUSSION

While adolescents with autism adapted to task goals similarly to TD peers, although they appeared to use headings less. Other factors, such as meta-textual knowledge or strategic reading skills, may better explain these differences than executive functions.

P3.06.04 - Co-Creating a Neurodiversity-Informed Postgraduate Curriculum Through Universal Design for Learning

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Trigger warning: No Trigger Warning

Practical impact: This presentation exemplifies how a team of neurodiverse professionals can work together, demonstrating that societal change is not only possible but achievable through collaborative efforts (Shaban, 2016; Boyd et al., 2021). Throughout the presentation we share how we cultivated an inclusive academic environment that removes barriers to learning through UDL, integrates the lived experiences of autistic people, and exemplifies the value of co-design in curriculum development.

Abstract body: Introduction: This project outlines the design and delivery of an innovative postgraduate programme in Autism Studies, which embodies principles of Universal Design for Learning (UDL) and combines the specialist knowledge of a neurodiverse team of researchers from the Middletown Centre for Autism (MCA) and Mary Immaculate College (MIC). By fostering a neuro-affirmative approach, this initiative supports deeper understanding of inclusion and neurodiversity, empowering students to enhance their professional practice.

Why is this important: The need to exemplify how a team of neurodiverse professionals can work together is crucial in demonstrating to students from a range of professions that societal change is not only possible but achievable through collaborative efforts (Shaban, 2016; Boyd et al., 2021).

What we did: Our programme addresses this dual need by cultivating an inclusive academic environment that removes barriers to learning, integrates the lived experiences of autistic people, and exemplifies the value of co-design in curriculum development.

Challenges and Benefits: Through case studies and lived experiences from both students and team members, we will explore the challenges encountered during the development process (e.g. aligning diverse communication styles, incorporating student feedback implementing UDL); and benefits achieved (e.g. enhanced student confidence, greater understanding of neurodiversity, improved educational and workplace practices, and recognition through the Education Awards 2024).





Future Outcomes: We aim to build on this success by expanding the course offerings and continuing to support our students in the future.

P3.06.05 - Luck and Judgement: Analysing the Lived Experiences of Autistic Student Teachers

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Trigger warning: No Trigger Warning

Practical impact: This research calls into question the current accepted route into the teaching profession as potentially discriminatory against neurodivergent student teachers. Our findings should be utilised as a call to action to examine how education programmes, school placements and interpretation of professional standards may be made more sympathetic to the needs of neurodivergent students. We advocate for change to increase the chances of a more representative teaching profession by reducing stigma for neurodivergent educators and allowing more neurodivergent adults to access the profession. Increased representation would lead to better understanding of neurodivergence, impacting positively on educators and learners.

Abstract body: **Background:** While research highlights the importance of autistic teachers as key facilitators of inclusive educational environments, autistic people face disproportionate hurdles to qualification. There is a dearth of research considering the experiences of autistic student teachers navigating university and education placement settings. We addressed this gap by using qualitative methods to explore key barriers and enablers for autistic student teachers. **Methods:** Fifteen autistic adults (mean age = 22 years; 10 female, 4 male, 1 non-binary) enrolled

on Education programmes participated in a semi-structured interview (n=13) or open-ended survey (n=2). Neurodivergent consultants co-produced the interview questions. Data was analysed following Braun and Clarkes six phases of thematic analysis (2022). This method incorporated the lead researchers own neurodivergent experience as a methodological lens.

Results: Three key themes were generated: (1) The Role of Luck – aspects of placement (e.g. school inclusivity and ethos) were identified key for success but highly influenced by luck. (2) The Role of Judgement – reactions to disclosure and not fitting the 'teacher type' mould were influential aspects of placement experiences (3) The Role of Equity – consistency of mentoring, capacity and transition considerations were crucial for success, but students lacked equity of access.

Discussion/implications: we built on previous knowledge by identifying key areas for change to improve placement and educational experiences for autistic student teachers. Implementing these much-needed changes will support sustained, successful programme attendance and retention pre- and post-graduation. Amplifying autistic voices is key to facilitating necessary change, and will increase positive representation of this community within the profession

P3.06.06 - Exploring Lecturers' Experience of Supporting Female Autistic Students.

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Trigger warning: No Trigger Warning

Practical impact: This work aims to understand whether university lecturers feel confident in their ability to support their autistic female students. Through this, it hopes to identify knowledge and training gaps that have the potential to be targeted to improve lecturers' ability to support autistic students. Lecturer and student relationships are important to academic success.





Understanding lecturers' perspectives on supporting autistic female students could help identify areas in which they struggle to support these students fully. Therefore, this may improve female autistic students university experience as a whole.

Abstract body: This study aims to examine the perspectives of university lecturers in supporting female autistic students. The study's focus came from past research and the researcher's personal experience. Perspectives from female autistic students' have highlighted that lecturers' autism awareness significantly affects students' university experience. The current research will seek lecturers' perspectives so that a holistic view of the issue can be understood.

The study is being undertaken as part of a final higher diploma research project. The study design will be qualitative. Interviews with six to eight university lecturers will be conducted. The data will be analysed using inductive reflexive thematic analysis. Common themes within the data will be generated to explore the research question: What are lecturers' experiences of supporting female autistic students?

The study's results will provide insight into lecturers' experiences with female autistic students. It hopes to understand lecturers' awareness of autism in females and determine how this awareness impacts their ability to provide support. The study's outcome seeks to highlight barriers and facilitators that impact support provision and provide insight into whether levels of autism training impact lecturers' ability to support students fully.

This study will determine whether lecturers feel they can confidently provide sufficient support to female autistic students, which will help highlight current effective practices and areas where increased training is needed. Research has shown that lecturers' lack of autism awareness in women negatively impacts academic success. Addressing these knowledge and training gaps could improve support, ultimately enhancing these students' university experience.

P3.06.07 - Autistic medical students' experiences of online support: a phenomenological study

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Trigger warning: No Trigger Warning

Practical impact: To support autistic medical students,

To positively influence autistic people who are considering a career in medicine or considering attending university,

To provide role-modelling that autistic people CAN attend university and become doctors, To help university institutions improve support for autistic students/medical students

Abstract body: Previous studies report that autistic medical students experience specific challenges throughout their studies, including isolation, bullying, and discrimination from their institutions – alongside receiving minimal support. Despite this, it has been argued that many autistic characteristics are well aligned with practising medicine, bringing key benefits to patient care. 'Autistic Medical Students' (AMS) is an online international support group, containing over 200 members – a sub-group of Autistic Doctors International. This study aims to explore the experiences of AMS membership and if membership has any wider impacts on medical studies or wellbeing.

This is a qualitative study. Five participants from AMS were recruited. Semi-structured, 1:1 interviews were conducted via Zoom. These were audio recorded, transcribed verbatim, and analysed using interpretive phenomenological analysis.

Group experiential themes included: medical culture, belonging, safety, ability to thrive, internalised optimism for the future, and real modelling. Participants experienced systemic ableism





and weaponised professionalism, which led to a sense of helplessness for their futures. They experienced a sense of belonging, alongside an improved ability to both recognise their own needs, implement accommodations and advocate for support. 'Real modelling' from peers and autistic doctors motivated participants in their wider medical studies. Of particular benefit was that AMS uniquely encompassed both being autistic and a medical student, making its specific support invaluable.

Findings were in keeping with previous research. Autistic peer-to-peer communication enabled development of social relationships and self-identity. This study highlights the need for knowledge, acceptance and representation of autism within medical education – to enable autistic medical students to thrive.

P3.06.08 - The quality of education – perspective of autistic students

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Trigger warning: No Trigger Warning

Practical impact: The results will provide insights into social relationships, the quality of the teaching process, the implementation of accommodations, and the challenges faced by autistic students in education. The findings will highlight the necessary changes to enhance the educational quality for these students. The practical value of this research lies in identifying the improvements needed in mainstream education and developing guidelines for its enhancement

Abstract body: The aim of this research is to gain insight into the experiences of students with autism in mainstream schools and their perspectives on the quality of their education. The study seeks to deepen the understanding of autistic students' educational experiences in regular school settings by exploring their views on various aspects of education, including relationships with teachers and peers, the quality of adjustments in the teaching process and environment, and both the challenges and positive aspects of schooling in mainstream schools. This study is part of a larger initiative to evaluate the quality of education for autistic children, initiated through a collaboration between autistic self-advocates, clinicians, and researchers. The study involves seven autistic children, aged 11 to 15, who are enrolled in mainstream schools and follow the standard curriculum with accommodations. Data is collected through semi-structured interviews, which will be transcribed and analyzed using thematic analysis. The results will provide insights into social relationships, the quality of the teaching process, the implementation of accommodations, and the challenges faced by autistic students in education.

The findings will highlight the necessary changes to enhance the educational quality for these students. The practical value of this research lies in identifying the improvements needed in mainstream education and developing guidelines for its enhancement. These insights aim to have a concrete impact on the lives of autistic individuals by informing better educational practices, policies, and support systems.

P3.06.09 - The home learning environment of autistic preschoolers: a systematic review

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Trigger warning: No Trigger Warning





Practical impact: Academic achievement impacts overall well-being and quality of life for both autistic and non-autistic individuals. Autistic children often struggle to master certain academic skills and the home learning environment (HLE) may be a way to support their learning development. By giving an overview of existing literature, we zoom in on the HLE of autistic children, differences in HLE with non-autistic peers and associations between HLE and child characteristics and skills. While our review shows that many autistic children grow up in a rich HLE, at the same time it highlights that there is a large variability within the group of autistic children. Furthermore, we pinpoint some important unanswered questions, such as how the HLE influences autistic children's academic achievement in the long term. From this review, it is also evident that home numeracy - activities parents do with their child that stimulate numeracy learning – is a largely understudied area in autistic children. These findings build the foundation for our future research. With our research, we aim to contribute to supporting autistic children in a way that is best suited for them, which may promote their academic achievement and thus have positive long-term effects on their overall well-being.

Abstract body: INTRODUCTION

Academic achievement in autistic children varies widely, with some excelling and others facing challenges (Keen et al., 2016). Academic achievement is closely tied to well-being and quality of life (Adelantado-Renau et al., 2023). The foundation for academic achievement is laid in preschool, through interactions with important adults (Vygotsky, 1978). Parent-child activities that foster learning, known as the Home Learning Environment (HLE), have clearly shown to be important for non-autistic children's learning development (Lehrl et al., 2020). The HLE remains however underexplored in autism research.

METHODS

This systematic review addresses the following questions: What characterises the HLE of autistic preschoolers? Is their HLE different compared to their non-autistic peers? Are child characteristics or skills associated with the HLE?

OUTCOME

Parents of autistic preschoolers generally provide a rich HLE. They employ diverse teaching strategies, read frequently with their child from an early age onwards, provide a variety of children's books, and hold positive beliefs about their child's learning. A large variability is reported, and no consistent differences are found with the HLE of peers. Child language skills and interests influence the HLE and some links are found with the child's academic skills, though most studies are cross-sectional. Research on numeracy activities is scarce, with only one study identified.

DISCUSSION/IMPLICATIONS

Further research is needed, particularly regarding home numeracy and long-term influences of the HLE for autistic children. This will contribute to our understanding of what autistic children need to thrive academically, positively influencing their well-being and quality of life.

Plain English version: INTRODUCTION

Autistic children show a range of school performance. Some excel, while others face challenges. Success at school is linked to children's overall well-being and quality of life. Early learning experiences in interactions with caregivers help build the foundation for school performance. For non-autistic preschoolers, activities at home that encourage learning—known as the Home Learning Environment (HLE)—are key to their learning development. However, the HLE of autistic preschoolers has not been studied very often.

METHODS

We synthesised all studies about the HLE of autistic preschoolers to answer these questions: What does the HLE of autistic preschoolers look like? Is it different from that of non-autistic children? Are there links between the HLE and children's skills or traits?

FINDINGS

Parents of autistic preschoolers often provide a rich HLE. They use various teaching approaches, start reading with their child at an early age and do this frequently, provide many children's books, and think positively about their child's learning. There are large differences in HLE within the group of autistic preschoolers, but no consistent differences with non-autistic preschoolers. Children's language and interests play a role, and some evidence connects the HLE to early academic skills.





However, research on parent-child numeracy activities is very limited.

DISCUSSION/IMPLICATIONS

More studies are needed, especially on numeracy activities and the long-term influences of the HLE. This can help us better understand how to support autistic children's learning and improve their overall well-being.

P3.06.10 - Reaching and Teaching Through Play: Using UNO to Build Genuine Relationships with Autistic Children and Young People in Primary School

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Trigger warning: No Trigger Warning

Practical impact: The practical impact of this approach is multifaceted, focusing on relationship-building, trust, and creating an environment where primary school autistic children and young people (CYP) can feel safe, understood, and empowered. By using UNO as a tool for interaction, this method facilitates genuine connections, moving beyond the traditional teacher-student dynamic. This shift is crucial for fostering trust, which is often the first barrier for autistic individuals in both educational and social settings.

Relationship Building and Trust

The non-hierarchical nature of the game creates an opportunity for mutual respect, with the teacher stepping out of the typical role of authority and engaging as a partner. This lays the groundwork for strong relationships between students and teachers, which can have long-lasting effects on students' willingness to engage in future learning experiences. For autistic CYP, having an adult who demonstrates empathy and vulnerability is key to forming bonds that foster confidence and openness.

Double Empathy

This approach supports the concept of double empathy, where both the teacher and the student share in the experience of understanding each other. By actively engaging in the student's strategies and showing genuine curiosity about their thought processes, the teacher validates the student's perspective, encouraging them to feel seen and heard. This reciprocal understanding strengthens the connection and increases the student's comfort in expressing themselves.

Creating a Safe Space for Self-Expression

In many classroom environments, autistic CYP may feel pressure to conform or suppress their true selves. UNO provides a low-stakes, non-academic environment where students can freely express their thoughts and behaviors. It offers a safe space to "tease out issues," where students might reveal underlying challenges such as anxiety, social difficulties, or the strategies they use to cope with school dynamics. These insights can be incredibly valuable in tailoring further support for their learning and emotional needs.

Time Out of the Busy Classroom

By incorporating play into learning, this approach allows the teacher to give individual attention to the student, away from the hustle and bustle of the classroom. This one-on-one interaction can help reduce the sensory and social overload that can often accompany a busy classroom environment, providing the student with the opportunity to regulate and focus. It also offers a space where the student can engage in meaningful interaction without the distractions of typical classroom expectations or social pressures.

This approach provides autistic CYP with the opportunity to develop stronger connections with their teachers, fosters an environment of trust and understanding, and creates a supportive space where they can feel safe enough to express their feelings, strategies, and challenges. It offers a





path toward greater self-confidence and emotional regulation, while encouraging teachers to engage in a deeper, more empathetic understanding of the needs and experiences of autistic CYP.

Abstract body: This approach explores using the game of UNO to build genuine relationships with autistic primary school students, fostering trust and empathy in a non-hierarchical, low-pressure setting. By starting each game by winning, then gradually letting the student win repeatedly, I create a space where the student experiences moments of success and empowerment. In addition, I openly share my vulnerabilities, such as losing, and show genuine interest in the student's strategies and thought processes. This approach removes the traditional teacher-student power dynamic, focusing instead on building rapport through mutual respect and shared experiences.

UNO serves as a tool to uncover insights into how students navigate challenges, both academically and socially. Some students "sabotage" the game before losing, using this tactic to regain control. This behaviour mirrors coping strategies they may use in other areas of life. The game offers a safe space to explore these actions and guide students towards healthier ways of managing challenge. The game becomes a safe space to explore these behaviours and offer alternative ways to approach challenges.

This method has a profound impact on autistic students by fostering relationship building, trust, and genuine connection. It supports double empathy, where both teacher and student seek to understand each other. The approach also provides a brief respite from classroom sensory overload, offering individualised attention and a moment to regulate. By engaging the child before teaching, this method paves the way for future learning and emotional growth, empowering autistic students academically and socially.

Plain English version: This approach uses the game of UNO to help build strong, trusting relationships with autistic primary school children. At first, I let the student see me win, but then I let them win repeatedly. This shift gives them a sense of control, which is important in an environment where they may often feel powerless. I also share my own feelings, such as losing, and ask the student about their strategies, showing real interest in how they think and play.

The game helps uncover how students deal with challenges in school and life. For example, some students "sabotage" the game before they lose, which is a way for them to regain control. This behaviour is something they might do in other parts of their lives too, like at school. UNO gives us a safe, fun space to talk about these actions and explore other, more positive ways to cope with challenges.

This method has a big impact because it helps build trust and understanding between the teacher and the student. It allows for real connections and breaks down the usual teacher-student hierarchy. The game also gives students a chance to take a break from the busy classroom, with some quiet, individual attention that helps them feel more relaxed. By connecting with the student before teaching, this approach helps them feel more comfortable and confident, creating better opportunities for learning and emotional growth.

P3.06.11 - Developmental trajectories of autistic preschool children in French inclusive classrooms

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Trigger warning: No Trigger Warning

Practical impact: This study highlights the importance of personalized, inclusive educational environments in promoting the social development of autistic children. The findings enhance our





understanding of the developmental trajectories of autistic children and suggest adaptations to educational programs in inclusive preschool settings.

Abstract body: Despite the growing interest for inclusive programs for autistic children, little is known on how, social skills evolve during classroom activities or how individual developmental factors influence social skills in inclusive settings. Our study followed the developmental trajectories of autistic children in French inclusive preschool classrooms, focusing on social engagement, communication, and the differential role of cognitive, sensory, and severity of autistic characteristics.

Thirteen autistic children (mean age= 39.6 months, SD = 3.88) were observed over three years. Social interactions were directly observed during structured (work time) and unstructured (free play) activities. A fine-grained observation grid used focused on social engagement, communicative forms and intentions of communication. In addition, standardized assessments of cognitive, communicative, sensory, and autism-specific traits were conducted each year . Results show that peer interactions increased over time, especially during play, while adult interactions remained stable. Initiations of social interactions increased during unstructured situations. Verbal communication increased over time during both situations. Progress in cognitive and communicative developmental age were positively correlated with increases in peer interactions, while sensory processing difficulties were negatively associated with social engagement. Three developmental profiles were identified:1) children with significant gains in developmental age and peer interactions; 2) children with improvements in verbal communication and interaction initiatives; 3) children with stability in cognitive and communicative and social skills.

Findings highlight the heterogeneity of developmental trajectories among autistic children in inclusive preschool settings. Educative adjustments are discussed in order to promote social skills and enhance social interaction with autistic and neurotypical peers.

Plain English version: This study explores how social skills develop in autistic children in inclusive preschool classrooms. Thirteen children were followed up from age 3 to 6. They were observed during both structured (work time) and unstructured (free play) activities over three years. The study focused on social engagement, communication, and how cognitive, sensory, and autism-specific traits influenced social interactions. Results showed that peer interactions increased over time, especially during play, while interactions with adults remained stable. Children with higher cognitive and communication skills had more interactions with their peers, while children with sensory specificities engaged less in social interactions. Three developmental profiles were identified: 1) children with significant progress in both social interactions and developmental age, 2) children with improved verbal communication and interaction initiation, and 3) children with stable cognitive, communication, and social skills. These findings highlight the diverse developmental trajectories of autistic children in inclusive settings and suggest the need for individualized educational strategies to improve social skills and interactions with both autistic and neurotypical peers.

P3.06.12 - Integrating Student Voice in the development of Teacher Professional Learning

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Trigger warning: No Trigger Warning

Practical impact: Integrating autistic student voice will provide teacher educators with understanding to provide appropriate supports

Abstract body: Introduction and Central Question

The purpose of this poster presentation is to demonstrate how schools can best support autistic students to thrive in their school community through listening to their voice and integrating this into the development and provision of TPL. By talking to students, the researcher(s) can better inform themselves on what would enhance the school experience for the autistic school





community.

Methods/Approach

The study for the poster will be undertaken between January and June 2025, in newly established autism classes (established in school year 2024/25) in Irish primary schools. Teachers from the newly established classes will be asked if they wish their school to participate in the study, and consent/assent will then be sought from the students and their families. The discussion questions will be co-created with autistic adults and will be provided to both the teachers and parents of the participating students to ensure they are appropriate for the students. A qualitative method will be adopted.

Outcome

The research has not yet been undertaken.

Discussions/Implications

It is hoped that by enabling and integrating the autistic voice and autistic experience around how they can be best supported by teachers in autism classes, that this information can be used to enhance Teacher Professional Learning opportunities. Next steps may include setting up a Community of Practice for autistic students to include them in the planning and content of autism specific approaches to teaching and learning.

P3.06.13 - "There's a bit to go": Perspectives of Young Autistic Adults on Their Post-Primary Educational Experiences in Ireland

 $\underline{T.\ Vernon}^1$ No affiliation, Cork, Ireland

Trigger warning: No Trigger Warning

Practical impact: The purpose of this research was to capture the perspectives of autistic young people on their post-primary educational experiences in Ireland. The practical impact that this research may have is that it highlights specific everyday challenges experienced by the students alongside identifying a number of supportive factors that enabled positive school experiences. Furthermore the research put forward guidance from the participants for present-day students and valuable insights for schools and educators.

Abstract body: This qualitative research study sought to capture the voice of autistic young adults, to detail their experiences of the Irish educational environment, and to learn from the students themselves as to what works and what does not. The study participants comprised eight autistic young adults, primarily female, aged 18-22. Semi-structured interviews were held online, or in-person, with each participant in the spring of 2024. A thematic approach was used to analyse the participant responses. Among the main findings of the study was the widespread lack of autism awareness and understanding amongst peers, teachers, support staff, and management; the high sensory demand environment of a mainstream school; the importance of positive staff attitudes and peer relationships; the power of engagement with preferred subjects: the need for reduced uncertainty; and the value of listening to the student. The participants also recommended for autistic students to be themselves; to connect through shared interests; to reach out for support and to self-advocate. Furthermore, the participants stressed the need for educators to listen and learn from their autistic students. The need for a widespread increase in autism awareness and neuroaffirmative practices was deemed critical. The hope of this study was to put forward the perspectives of participants and contribute to the national understanding of the mainstream post-primary educational experiences of autistic students in Ireland. The position of this study is that autistic students need to not only be in the conversation on how to achieve an equitable and meaningful education, but to lead it.





P3.06.14 - Important factors associated with resilience in a group of parents with a young adult diagnosed with ASD

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Trigger warning: No Trigger Warning

Practical impact: Social support for families

Abstract body: In the present study, we wanted to explore the main concerns/needs reported by parents during this critical time period and also explore the levels of resilience in this population.

Plain English version: Aims:Parenting a young adult on the spectrum comes with its unique set of challenges. In the present study, we wanted to explore how parentsdescribea number of factors related to themselves e.g. quality of life (QoL), as well as investigate their resilience levels during this critical period.

Methods:Parents of children between the ages of 18-35 years previously seen in our ASD clinicwere asked to participate. Upon agreeing, they completed:(a) a study designed questionnaire with itemsrelated to QoL, health etc., and, (b)the Connor-Davidson Resilience Scale [CD-RISC]. **Results and Conclusions:** Eighty-oneparentsagreed toparticipate (Child's age: m = 23.6;66 Males). Mean score on the CD-RISC was 62.2 (SD:16.18) with parents of a young adult male (m = 61.01; SD = 17.1) obtaining a lower score than parents of a young adult female (m = 67.2; SD = 10.9) (p = 0.09). Fifty-one parents (63%) reported having a good or very goodQoL, and, had significantly higher resilience scores thanthose reporting a bad or very bad QoL (p = 0.04). Similarly, 46.9% reported being very satisfied with their physical health and had higher resilience scores than parents who characterized their healthas neither good nor bad (p = 0.001), and, parents who characterized their health as bad (p = 0.01). The above results call for an indepth exploration of the relationship between resilience and other important variables to promote better designed societal support initiatives for parents with a young adult on the spectrum.

P3.06.15 - Accessing Meaningful Education : Our commitment to deliver individualised educational pathways

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No Affiliation, No Affiliation, United Kingdom

Trigger warning: No Trigger Warning

Practical impact: Our Alternative Education Programme has enabled people to access education in a meaningful and individualised manner.

Abstract body: WHY IS THIS IMPORTANT?

Prosperity Care and Wellbeing provides support to people with a diagnosis of Learning Disability, Autism and/or Mental Health needs. Some individuals who access support have longstanding unmet educational need which impacts their ability to pursue personal goals. We developed a separate education facility where support was combined with education in a bespoke manner.

WHAT YOU DID OR EXPERIENCED

We developed a specific team of education facilitators with diverse backgrounds including qualified teachers and experienced trainers. The required training was sourced to be able to deliver AQA accredited units within a familiar environment and by familiar people.

WHAT HAVE BEEN THE CHALLENGES?





Encouraging people to access education has been challenging at times due to individual reasons, however as we provide support to people and the units are delivered on a 1:1 basis, we have been able to overcome this by offering a level of flexibility and specialism which is not accessible locally.

WHAT HAVE BEEN THE BENEFITS?

To note, we have observed increased social engagement, increased communication and expression of emotions and increase in motivation.

One individual hadn't engaged in education since the age of 13. He has since achieved 17 AQA certificates of achievement and subsequently gained voluntary work. He is now accessing education in a community setting with further support from us.

WHAT DOES THE FUTURE HOLD?

We are working on reaching out to more individuals who have unmet educational needs and offer this level of bespoke education to people outside of our organisation.

P3.08.01 - Autistic Female Students' Experiences of Mainstream Education Provision at Post-Primary Level in the Republic of Ireland

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Trigger warning: No Trigger Warning

Practical impact: While my study focuses on the experiences of 6 autistic female students attending post-primary education in the Republic of Ireland, each with their own unique insight into their schooling experiences, some commonalities emerged. This study will build a foundation for research on school experiences with autistic girls in Ireland while also adding to an small but emerging research base internationally.

Sharing my research at the AE congress will allow me to reach various stakeholders who hold influence in education. Dissemination to policy makers will allow me to highlight systemic changes needed at a national level, dissemination to teachers/educators will allow me to share the student insights, not only to share the findings of the research but to also emphasise how important it is to elicit experiences at an individual level, asking students themselves, rather than taking a group lens. My research also used various alternative, creative methods which I think have been invaluable in terms of the depth of the insights the students shared with me. Sharing my research at AE Congress will allow me to alert others to the approaches I used which may inspire others to adopt more inclusive research practices. The AE congress will be an amazing platform to share this unique, timely and important research on the school experiences of an underrepresented cohort, autistic females.

Abstract body:

Introduction: Autistic female students often go unrecognised and unsupported in education contexts due to differences in the presentation of autism and inadequate teacher knowledge of the internal presentation of autism (Gould, 2017; Munroe and Dunleavy, 2023). This research was guided by the central research question of 'how do autistic female students experience mainstream education provision at post-primary level?'





Methods: Underpinned by Interpretative Phenomenological Analysis (IPA), the views of 6 autistic female students between the ages of 13 and 15 years old were elicited. Data collection consisted of two sessions; a walk-and-talk session around their school and an 'interrupted' interview (Shephard, 2015). The 'interrupted' interview enabled the incorporation of activities e.g. diamond ranking, photo-elicitation and Dixit® cards.

Outcome: Three main findings emerged; 'Being Autistic in a Neurotypical School System', 'Being in the School Environment', and 'Being with Others'. The findings detailed the demanding nature of the mainstream context but also highlighted some of the positive aspects of school life. Commonalities existed among the students' experiences while efforts were made to capture the nuanced and diverse experiences of each individual experience.

Discussion/Implications: This research emphasises the importance of listening to the voices of autistic students and providing opportunities for them to engage with research. The findings are of relevance to schools at a local level to reflect on current practices, but also to policy makers where systemic changes are required to improve school experiences. Finally, Initial Teacher Education providers should ensure course content adequately addresses the internal presentation of autism.

P3.08.02 - Making Autism Trials More Inclusive: Research Strategies for Bridging Gaps and Engaging Underrepresented Families.

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Trigger warning: No Trigger Warning

Practical impact: This study offers significant practical benefits for autistic individuals and their families by addressing barriers to participation in early intervention trials. By implementing inclusive recruitment strategies and multiple formats of intervention delivery—such as in-person and remote telehealth sessions—this work highlights how diverse families can be better engaged in research and clinical care. Remote options, in particular, reduce geographic and logistical constraints, making evidence-based interventions accessible to more families, regardless of location or socioeconomic status.

Greater representation of families from varying socioeconomic backgrounds in clinical trials ensures that research findings are more generalizable. This diversity in participation helps develop interventions that reflect the real-world needs of autistic individuals across different communities, fostering more equitable healthcare practices.

Involving caregivers in designing recruitment materials and emphasizing clear communication enhances trust in healthcare providers and clinical research. When families feel well-informed and supported, they are more likely to engage with both research and intervention services, promoting long-term developmental outcomes for autistic children.

The study also highlights the importance of addressing financial and logistical challenges faced by families. Recommendations for flexible scheduling, telehealth options, and supportive recruitment materials can guide service providers and policymakers in designing more accessible autism interventions.





This research supports sustainable, localized care delivery by promoting community-based services and partnerships with early intervention centers. Ultimately, this work contributes to making early autism interventions more inclusive, equitable, and accessible for all autistic individuals and a more diverse family background.

Abstract body: Introduction

Autism clinical trials often struggle to recruit socioeconomically diverse families, leading to limited generalizability of findings and inequitable access to evidence-based interventions. Our study evaluates the efficacy of the Community Early Start Denver Model (C-ESDM) intervention through a controlled trial adapted for future local community use. The trial includes in-person or remote telehealth sessions and a control group with online materials in a parent-mediated modality. All groups have an in-person comprehensive assessment across time points (pre-post-follow-up). The present study aimed to implement and assess inclusive recruitment strategies to engage underrepresented families.

Method

The study was conducted in two phases: *Phase 1*, recruitment materials, including consent forms and infographics, were co-developed with caregivers through focus groups to ensure clarity and comprehensibility. In *phase 2*, families were referred by community early intervention centers to the Children's Hospital autism diagnostic services. Detailed sociodemographic data were collected, and a post-recruitment questionnaire assessed families' experiences, focusing on communication, logistical barriers, and perceptions of support.

Outcome

The trial achieved an 81.4% participation rate, with significant socioeconomic diversity. Families who participated reported clear understanding and comfort with the recruitment process. Non-participating families often cited logistical and financial barriers as reasons for declining participation.

Discussion and Implications

This study highlights that co-designed materials, inclusive recruitment strategies, and community partnerships can improve the engagement of underrepresented families in autism trials. These findings underscore the need for equitable research practices to ensure that early interventions are accessible to all types of families, fostering broader applicability of clinical outcomes.

Plain English version: Autism research studies often find it challenging to include families from different backgrounds, especially those with fewer financial resources or less education. This can make the study results less useful for everyone because they may not reflect the needs of all autistic children and their families. Our study tested a program called the Community Early Start Denver Model (C-ESDM), which helps parents support their young autistic children's development. We wanted to ensure families from various backgrounds could join, so we used strategies to make participation easier and information more transparent.

The study had two parts. First, we worked with families to create easy-to-understand materials, including consent forms and guides with visuals. Families gave feedback to improve these materials, helping us make them more accessible. In the second part, we invited families who met the autism diagnostic criteria before 30 months of age to participate in a study about early identification and intervention for autism. We gathered detailed information about families who joined and those who didn't and asked about their experience during recruitment. Overall, 81.4% of the families agreed to participate, representing a wide range of backgrounds. Families said they found the materials helpful, though some who didn't join mentioned time or travel difficulties. Our study shows that working with families and offering flexible options can make autism programs more inclusive and ensure more representative research outcomes.

P3.08.03 - ☐ A Qualitative Study on the Intersectionality of Autism and Gender on Mental Health and Camouflaging

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Trigger warning: Mental illness, Sexism and misogyny, Suicide, Transphobia and transmisogyny

Practical impact: This account of camouflaging experiences and their mental health correlates from autistic people identifying as women or gender diverse will inform how to better support these groups when they experience mental health challenges.

Abstract body: Background: Autistic people report using camouflaging techniques to reduce stigma and discrimination. In line with the minority stress model, autistic people with intersectional identities from minority groups are often more vulnerable to experiencing stigma and discrimination, and therefore might rely more on camouflaging strategies. Research has described that autistic people identifying as women or a gender-minority report higher rates of camouflaging than autistic men, which has adverse effects on mental wellbeing. No study has qualitatively delved into gender-related aspects of camouflaging and the mental health outcomes.

Objectives: This study qualitatively examines the relationship between mental health and camouflaging amongst autistic females and autistic gender diverse individuals.

Methods: 40 UK-based autistic women and 32 autistic gender diverse adults (mean age=25.4 years; 45 diagnosed; 60 assigned female at birth; 15 heterosexual) completed an online questionnaire including six open-ended questions about camouflaging and mental health. A thematic analysis was conducted on their responses.

Results: Participants reported pressure to conform to societal norms. They also described various coping mechanisms and behavioural strategies (i.e. preparing themselves for social interactions). They detailed difficulties during social interactions and extensive wellbeing issues. Finally, they covered the effect of autism and gender on interpersonal relationships, educational and occupational contexts.

Conclusions: This study highlights the role of conformity in individuals' approaches to adjusting their behaviours and appearance to align with societal expectations. Participants linked this social pressure to mask to feelings of isolation and low self-esteem. Gender minorities also discussed the necessity they felt of camouflaging their gender expression.

P3.08.04 - Closing the intersectional gap of inequity in autism : Training professionals in Autistic Girls, Women and Gender Diverse Individuals

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Trigger warning: No Trigger Warning

Practical impact: Gender and low income are two intersections that have a huge impact in autistic lives worldwide. The training of professionals in the recognition, presentation and support for girls women and gender diverse individuals on the spectrum in low income countries will generate early identification and supports when needed. Early identification and support will also lead to a better understanding of autistic individuals themselves on early stages and develop skills to advocate for their rights, and a better understanding of their strengths, talents and a better quality of life and a it is step forward in terms of equity in autism.

Abstract body: INTRODUCTION: Diagnosis and support for girls, women and gender diverse (GD) autistic individuals has been increasing worldwide. Findings and services are not always accesible for spanish speaking countries that are also low and middle income countries (LMIC) revealing many intersections. This gap generates a lack of equity.





METHODS: Our aim is to describe a 6 year university training project. We design a university program of 50/100 hours with 20 lecturers from 5 countries during 2019-2024. We partnered with expert professionals and autistic advocates and professionals and families. From 2020 the program was delivered online in six editions.

OUTCOME: Between 2019and 2024, 520 professionals from 13 countries participated. The data is being analyzed to assess the impact of new services and replications. Most valued features were: 1) Themes were new to professionals 2) Having so many different autistic individuals, advocates and professionals lecturing was very helpful. 3) Professionals had to propose new services to design in their communities as a part of assignments 4) 10-20 % of alumni were also autistic professionals. 5) Gradually more professionals from medicine participated (pediatricians, psychiatrists, neurologists) though the majority were psychologists, speech and occupational therapists.

IMPLICATIONS: Gender, Income and Language are clear intersections in autism. However, efforts to disseminate and train professionals in a university setting can be a crucial factor to replicate knowledge and generate new services and research questions. Autistic lecturers are crucial and valued. Professionals, families and self advocate, as well as trained professionals can make a considerable contribution working together to close the double equity gap.

P3.08.05 - Implementing DIATEC Program (Early Support Device for Social Communication) for autistic children aged 12 to 48 months in a Public Hospital in Patagonia, Argentina.

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Trigger warning: No Trigger Warning

Practical impact: DIATEC Program (Early Support Device for Social Communication) (Valdez, 2024) is part of Naturalistic Developmental Behavioral Interventions (NDBI). The WHO supports this type of intervention and promotes its large-scale implementation in public policies (WHO, 2022).

This approach seeks to overcome economic barriers. In addition, it promotes access to services in communities that have few specialized professionals or are far from more populated centers. These advantages are currently joined by the possibility of combining face-to-face support with telehealth, in order to monitor families and answer their concerns or questions (Davis et al., 2022).

The DIATEC Program (Early Support Device for Social Communication) systematizes action strategies with the child and the family, the first 50 days after diagnosis, protocolizing interventions in key areas of social communication in 4 modules deployed in 7 weekly sessions of two hours duration with the inclusion of parents in all sessions. A pilot test will be carried out at the Regional Hospital of Río Gallegos, in Patagonia, Argentina, with families in order to consolidate this proposal for free and public access for families in the region who do not have access to services, either for economic reasons or because they are far from specific centers.

Abstract body: Introduction

Parents observe autism risk signs between 18 and 24 months of age, but research shows that the diagnosis ranges from 38 to 120 months of age, depending on sociocultural, economic and access to services factors (Penney et al., 2022).

Methods

Initial pilot phase that will have an analysis through a quasi-experimental design with pre-post measures. Data analysis will be performed using SPSS version 26. Child and caregiver characteristics will be reflected through a descriptive analysis of sociodemographic variables. An inferential analysis will be performed by carrying out an intra-subject comparison of the variables





using the t test for related samples.

Instruments: M-CHAT (Robins et al., 2001), QRS-F (Questionnaire on Resources and Stress), PSOC (Parental Sense of Competence Scale)

Outcome

This proposal is in process and is about the piloting of the program that allows us to make adjustments, consulting the degree of satisfaction of families, strengths and weaknesses of the program, aspects to be modified if necessary.

It is expected that DIATEC will promote a significant increase in the opportunities for communication, play and social interaction of parents with their children, improvements in coping attitudes and a decrease in stress levels.

Discussion

Regarding the objectives proposed with children, possible significant changes are expected in the variables of gestures, vocalization directed at others, enjoyment, integration of verbal and non-verbal communication modes and dyadic involvement.

This program does not replace other types of intervention, but rather offers early and free access for families who encounter many barriers to get services.

P3.08.06 - 'I think my child's is autistic': An exploration of parental early concerns and experiences and their encounters with healthcare professionals.

M. Nevin¹

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Trigger warning: No Trigger Warning

Practical impact: It is hoped that findings from this review can contribute to improving early autism identification.

Abstract body: Research suggests that more often than not parents have to deal with complicated diagnostic pathways, and advocate strongly for their children. When parents or carers first become aware of developmental differences in their child, they are likely to seek advice from health care professionals (HCPs). However, research suggests that parent's concerns are often dismissed or minimised by professionals. Despite studies exploring parents' experiences of diagnostic pathways, there are no studies that focus specifically on parents' initial interactions with professionals and the impact those interactions had on their child's autism identification journey. To improve pathways to autism assessment, it is important to explore the impact of professionals' responses on autism assessment and identification. Twenty papers were included in this systematic literature review. Findings revealed three key themes which included: healthcare professionals' responses to parents' initial concerns; autism awareness and knowledge; and the impact of racial, ethnic, and gender biases in the initial stages of the autism assessment process.

P3.08.07 - Autistic Involvement in Enhancing Accessibility in Archaeological Sites

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¹No affiliation, None, BIRKIRKARA, Malta

Trigger warning: No Trigger Warning





Practical impact: It is rare for autistic people to be included in the design of a space meant for them. In my research, autistic people identified key barriers in archaeological and cultural heritage sites. As cultural heritage is integral to our collective identity and belonging, heritage sites should be designed with disabled people in mind, preferably by disabled people. I hope that my research has demonstrated the potential and value of including autistic people in developing an accessible space meant for them so that a more inclusive environment can be created.

Abstract body: This research took place in Malta. Several heritage sites from museums to archaeological sites have begun to implement accessible measures to make them more accessible to disabled people, in line with legislation and international conventions. However, the people that are meant to directly benefit from accessible measures are not often consulted on the design and implementation. The scope of the present study is to investigate what accessibility in archaeological sites would look like from the autistic perspective. The researcher recruited autistic participants and walked with them around two archaeological sites to assess the features, aspects and experience accessible to them as autistic individuals in an unstructured interview. The participants identified several barriers that prevented them from enjoying their experience while walking around the archaeological sites. These responses were then analysed using thematic analysis. The issues that were raised included direction and wayfinding, the sensory environment, willingness to engage with the site, the shortcomings of accessibility for other people with disabilities as well as several recommendations to improve the accessibility at both sites. This research has demonstrated the potential for including autistic voices in the discourse of accessibility to cultural heritage. The autistic participants have also suggested solutions to improve accessibility to archaeological sites not just for them but for other disabled people who can benefit from accessible measures, such as reducing noise levels, inputting more tactile and interactive exhibits to explore, better signage and wayfinding, as well providing more information that can be easily accessible before visiting the site.

Plain English version: The study that was conducted in Malta aimed to understand how autistic people experience accessibility in archaeological sites. While these sites are trying to become more welcoming to disabled people, they don't often ask disabled people for their input. The researcher, who is also autistic, took autistic participants on a visit to two archaeological sites in Malta. During these visits, the participants talked about what made the sites easy or difficult to visit. The participants pointed out several problems, such as overwhelming sounds and sights, and a lack of interesting things to do at the site. They even noticed other issues that could affect other disabled people such as poor signage. Other than the issues, the autistic participants offered helpful suggestions for improvement, such as making the sites quieter, creating more interactive exhibits, and providing clearer directions. This research shows how valuable it is to include autistic voices in places that concern them, thus showing that cultural heritage sights should be made more accessible to all.

P3.08.08 - Online Peer Support and Acceptance and Commitment Therapy (ACT) Informed Intervention for Caregivers of Autistic Adults with Learning Difficulties in Peru

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Trigger warning: No Trigger Warning

Practical impact:

1. Improved caregiver support: By identifying the specific challenges faced by caregivers of autistic adults in Peru, the study can inform the development of more targeted and effective support programs.





- 2. Enhanced accessibility of services: The online nature of the interventions tested could lead to increased accessibility of support for caregivers, especially in underrepresented and under-resourced regions.
- 3. Reduced caregiver stress: The ACT-informed intervention and peer support groups may provide effective strategies for caregivers to manage stress and improve their emotional well-being, potentially leading to better care for autistic individuals.
- 4. Better family dynamics: As caregivers reported improvements in their relationships with their autistic family members, this could lead to a more positive home environment for autistic adults.
- 5. Increased self-care among caregivers: The interventions appear to promote better self-care practices among caregivers, which could result in more sustainable long-term care for autistic adults.
- 6. Cultural adaptation of interventions: By focusing on Peru, this study provides insights into adapting support interventions for different cultural contexts, potentially leading to more effective global support strategies.
- 7. Technology-based solutions: The success of these online interventions could encourage the development of more digital tools and resources for caregiver support, increasing the reach and availability of assistance. By improving caregiver well-being through these practical impacts, the study indirectly benefits autistic adults by ensuring their caregivers are better equipped to provide consistent, high-quality support.

Abstract body: **Background**: Caregivers of autistic adults with learning difficulties face unique challenges, particularly in underrepresented regions like Peru. Online interventions combining peer support and Acceptance and Commitment Therapy (ACT) offer promising approaches to enhance caregiver well-being.

Objectives: To evaluate the feasibility, acceptability, adherence, and impact of an online group ACT-informed intervention for caregivers in Peru.

Methods: A mixed-methods, multiple-baseline experimental design was employed. Participants (N=14) were randomized to either an 8-week ACT-informed intervention or an online peer support group. Quantitative data were collected using standardized measures at baseline, post-intervention, and 5-month follow-up. Qualitative data were gathered through semi-structured interviews (n=12).

Results: Preliminary qualitative analysis indicates positive outcomes for both intervention groups. Participants reported improvements in self-care, coping strategies, and emotional tolerance. Many experienced increased support and reduced isolation. Some noted positive changes in relationships with their children. Quantitative analyses are ongoing.

Conclusions: Early findings suggest that online ACT-informed interventions and peer support groups may benefit caregivers of autistic adults with learning difficulties in Peru. These results highlight the potential of technology-based interventions to improve accessibility and sustainability of caregiver support in underrepresented cultural settings. Further analysis is expected to provide more comprehensive insights into the intervention's effectiveness and broader impact

Plain English version: In Peru, people who care for autistic adults with learning difficulties often face many challenges that affect their well-being. This study looked at two ways to help these caregivers: online support groups and a therapy called Acceptance and Commitment Therapy (ACT). We wanted to see if an 8-week online program based on ACT would be helpful and easy to use for caregivers. We also wanted to know if people would stick with it and what impact it might have. We created this program and tested it with 14 caregivers. Half of them tried the ACT-based program, while the other half joined an online support group. We collected information through surveys and interviews. Our early results look promising. Caregivers in both groups said they felt better after the program. They reported taking better care of themselves, dealing with stress more effectively, and managing their emotions better. Many felt less alone and more supported. Some even said their relationships with their autistic family members improved. These findings suggest that online programs like this could really help caregivers in Peru, especially in areas where it's hard to get support. Using technology in this way could make it easier for more caregivers to get the help they need. We are still looking at all the data, but so far, it seems like these online programs could be a good way to support caregivers of autistic adults with learning difficulties in Peru





P3.08.09 - Exploring Cross-Cultural Support in Autism Services: Experiences of Social Care Workers in the UK

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Trigger warning: No Trigger Warning

Practical impact: The practical impact of this work for autistic adults lies in its potential to improve the quality and inclusivity of the support they receive in multicultural social care settings. By addressing challenges faced by Social Care Workers (SCWs), such as communication barriers, ethical dilemmas, and inadequate training, the findings advocate for culturally inclusive service models and enhanced professional development. Autistic adults may benefit from more personalised care through the integration of cultural beliefs and family dynamics into support strategies, the fostering of trust through culturally sensitive communication, and the equipping of SCWs with skills to navigate cultural complexities. These changes empower autistic adults by promoting their independence while respecting their cultural contexts. Furthermore, the findings offer guidance for inclusive policy development, enabling management and policymakers to implement systemic changes that ensure services are equitable and responsive to diverse needs. Ultimately, this work aims to enhance the inclusivity and quality of social care services, improving outcomes and the overall quality of life for autistic adults accessing them.

Abstract body: Introduction: Social care services in the UK operate in an increasingly multicultural society, with diverse clients and support teams. Despite this, there is a lack of research focusing on the challenges and strategies involved in cross-cultural support for autistic adults within these settings. This study explores the experiences of Social Care Workers (SCWs) delivering such support.

Methods: Using a qualitative approach, semi-structured interviews were conducted with 13 SCWs from different cultural backgrounds, job roles, and levels of experience. Thematic analysis identified key themes in their experiences, highlighting how they navigate cultural differences in delivering support.

Findings: SCWs reported that cultural beliefs and family dynamics profoundly shaped the support needs and expectations of autistic adults, often conflicting with service delivery models. They faced communication barriers with clients and families, insufficient institutional support and ethical dilemmas when cultural expectations clashed with professional duties. SCWs highlighted the challenges of balancing their own personal cultural identities with professional responsibilities and client expectations. Building relationships and trust were seen as critical, but SCWs often lacked adequate training or guidance to address or navigate cultural complexities effectively.

Discussion/Implications: The study highlights the mutual impact of cultural dynamics on SCWs and clients, underscoring the need for enhanced training, culturally inclusive service models, and stronger institutional support to enhance the cross-cultural competency of SCWs. These findings are invaluable for enhancing management practices, developing targeted training, and improving outcomes for autistic adults. Systemic changes are essential to support SCWs in their vital role of delivering culturally competent autism services.

P3.08.10 - ☐ The Experiences of Mothers of Autistic Girls Growing Up in Algerian Society: Narratives from Arabic-Speaking Countries

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Trigger warning: Abuse, Sexual assault, Sexism and misogyny, Violence, Mental illness

Practical impact: This study tells the story of Algerian autistic women and their parents. Although the narratives are told by mothers due to cultural and ethical complexities, they still reflect and bring new voices into the international conversations and discussions about autistic women.

Abstract body: In Arabic-speaking countries, there has been a recent surge in the recognition and discussion of autism. This is partly due to the rising number of diagnosed cases and the unclear reasons behind this rapid increase. Contributing factors may include heightened awareness, advancements in diagnostic methods, and a growing focus on inclusive education and the rights of individuals with disabilities. Despite this growing interest, there is a scarcity of studies exploring the experiences of mothers raising autistic children in the region.

This study was conducted using qualitative data collection techniques. We used individual semi-structured interviews to gather insights into the experiences of mothers of autistic girls in Algeria. These interviews took place either in person or remotely via phone calls, WhatsApp audio/video calls, or text messaging, based on the participants' preferences. The research was guided by a cultural disability theoretical framework and a religious/cultural model of disability. For data analysis, we followed an interpretivist approach, utilizing constructionist thematic analysis.

The findings revealed a strong prevalence of the medical model. Practitioners were oriented towards the medical model, and their approaches lacked social inclusivity. The study also identified various factors influencing mothers' perceptions of autism, including social, religious, and economic status. Additionally, mothers expressed concerns about their children's independence, future after their own death, risks of sexual harassment, puberty, the challenges of being a woman, and basic self-protection. In summary, the experiences of mothers of autistic girls are shaped by a range of social, religious/cultural, and political factors.

Plain English version:

- More people in Arabic-speaking countries are talking about autism because more kids are being diagnosed.
- This study looks at what it is like for mothers raising autistic girls in Algeria.
- **How we collected data**: researchers talked to these mothers through interviews, either in person or via phone, WhatsApp, or text.
- **Guiding ideas**: The study used ideas about disability from cultural and religious perspectives.
- **How we analysed interviews**: the researchers used a method that looks at themes and patterns in the mothers' stories.
- Key Findings:
 - Doctors mainly use a medical approach, not considering social aspects.
 - Mothers' views are shaped by their social, religious, and economic backgrounds.
 - Mothers worry about their daughters' independence, future, safety from harassment, puberty, challenges of being a woman, and basic self-protection.

P3.08.11 - ☐ The Impact of a Neurocollaborative Theraplay-informed Intervention on the Presentations of Developmental Trauma and





Attachment Difficulties in Autistic Looked after Children: A Service Evaluation

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Trigger warning: Abuse, Child abuse, paedophilia and incest

Practical impact: Theraplay is a widely used and impactful psychotherapeutic intervention for children who have experienced developmental trauma and attachment disruption. There is a tentative misconception in clinical practice that some Autistic children who have experienced developmental trauma and attachment disruption may not benefit from or be able to access Theraplay, as the model places an emphasis on reciprocal social-emotional experiences such as sharing eye contact and touch. However, this research highlights that Theraplay can be just as impactful for Autistic children who have experienced developmental trauma and attachment disruption as their non-Autistic counterparts. Therefore, Autistic looked after children presenting with difficulties relating to developmental trauma and attachment disruption should be considered for referral for a Theraplay-based intervention which can reduce difficulties relating to trauma, behaviour, emotion, and regulation.

Abstract body: Introduction & Central Question: The intersection between Autism, developmental trauma, and attachment disruption contributes to unique difficulties for care experienced Autistic children. However, understanding regarding therapeutic support for this cohort is lacking. Therefore, this study evaluated the impact of a 30-hour neuro-collaborative Theraplay-informed psychotherapeutic intervention on the presentations of developmental trauma and attachment difficulties in care experienced Autistic children compared to a non-Autistic control group.

Methods/Approach: Between April 2020 and April 2024, intervention efficacy was evaluated utilising a mixed design with an Autistic group (N=35) and non-Autistic group (N=172). The 30-hour intervention included 10-hours of therapy informed by Theraplay principles for parents and children, 10-hours of sensory regulation delivered directly to children or psycho-educationally to parents, and 10-hours of therapeutic parenting informed by the principles of dyadic developmental parenting. Therapeutic outcomes were measured at pre- and post-therapy utilising the Trauma Symptom Checklist for Young Children (TSCYC), the Child Behaviour Checklist (CBCL), the Behaviour Rating Inventory of Executive Function 2nd Edition (BRIEF-2), and the Assessment Checklist for Children (ACC).

Outcome: Wilcoxon Signed Rank tests showed that post-treatment scores significantly improved compared to pre-treatment scores in the TSCYC, CBCL, and BRIEF2. Analyses of Covariance (ANCOVA) controlling for age, gender, and attendance, with pre-test scores as covariates and post-test scores as dependant variables showed no significant effect of Autism on changes in scores between pre- and post-treatment.

Discussion: The Theraplay-informed intervention was of comparable efficacy for children with a history of developmental trauma and attachment disruption, with and without Autism. Implications are discussed.

P3.08.12 - □ Analysis of mental health-related factors in an intersectional view of minority stress experience in neurodiverse gender minority individuals

J. Gierzyński¹

Trigger warning: Transphobia and transmisogyny

¹The Maria Grzegorzewska University, Warsaw, Poland





Practical impact: The results of the project can serve as a starting point for the development of guidelines for professionals working with people from minority groups and for individuals and institutions carrying out affirmative action and destignatization campaigns.

Abstract body: Recent research has highlighted minority stress and its impact on various populations, including individuals with Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD), especially within gender minorities. The Minority Stress Model (MSM), extended to include ASD, remains an emerging area of study, with limitations in its theoretical and methodological approaches. This research, part of a doctoral dissertation, aims to explore the psychosocial mechanisms behind mental health disorders in individuals with ASD/ADHD and/or minority gender identities, using an intersectional approach and both qualitative and quantitative methods.

The study includes two main components: the first develops two questionnaires to measure minority stress and microaggressions for people with ASD and ADHD. The second involves a longitudinal survey with three measurements to test the theoretical model. Structured interviews with 40 neurodiverse individuals (20 with ASD, 20 with ADHD) will explore their minority stress experiences.

The research question examines which factors linked to minority stress influence depressive/anxiety symptoms and suicidal behaviors, and how these associations are moderated or mediated. The proposed model includes distal stress, minority identity identification, and identity-specific mental health processes as predictors, with proximal stress, community affiliation, and rumination as mediators, and coping styles as moderators.

This study aims to expand knowledge about the mental health challenges of neurodiverse and gender minority individuals, offering insights for professionals and institutions involved in destigmatization and supportive actions. Conducted in Poland, one of the least LGBTQ-friendly EU countries, the study highlights the urgent need for better understanding of these populations' mental health determinants.

P3.08.13 - ☐ Identity and stigmatisation in Chinese autistic young people: a qualitative study

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Trigger warning: Mental illness

Practical impact: This study sheds light on Chinese autistic young people's daily lives and seeks to understand how they reflect on their own identity. In our study, we used the social model of 'disability' and actively involved autistic people's perspectives. We aim to include insights from Chinese autistic young people and their living experiences. From their experience, we hope to find a way to raise public awareness in Chinese society and create a more inclusive environment for the Chinese autistic community.

Abstract body: Autistic adolescents in China can face stigma sometimes daily. Misconceptions towards autism can be met frequently in the Chinese society. For example, parents may believe that their autistic children will be "less autistic" and become "normal" when they get older, or they might be 'cured' eventually. And in the mass media, autistic people in China often are portrayed as 'patient'. This study aims to give young autistic people in China a voice, and seeks to understand how autistic adolescents in China view their identity and are they affected by societal stereotypes. A total of 15 Chinese autistic adolescents and young adults participated. Semi-structured online interviews were conducted to gain their insights. Findings showed that most autistic young people have a certain level of knowledge and acceptance regarding their autism, and in fact, embrace their autistic identity. Meanwhile, they also agreed on the 'savant or patient' societal stereotypes in China. Participants also shared how their teachers and parents generally lack knowledge towards autism and neurodiversity, thus failing to provide sufficient support. For the future, we advocate that researchers and practitioners work closer with the autistic community to break down





stereotypes and raise public awareness together. Moreover, the autistic community in China may be more actively involved in the inclusive awareness dialogues that are going on at societal level and hold a stronger voice in how society discusses and respects autism.

P3.08.14 - Developmental Trajectories of Adaptive Behaviour Preceding an Autism Diagnosis in Young Children

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Trigger warning: No Trigger Warning

Practical impact: Findings of this study indicated the heterogeneity of early adaptive behaviour development in young children who were later diagnosed with autism by the age of 4.5 years. While improvement in adaptive functioning could be expected in young children with better mental abilities, early intervention should be offered soon after diagnosis to support adaptive behaviour development especially for those with lower mental abilities.

Abstract body: Adaptive behaviour determines required support and later outcomes in autism (e.g., Kanne et al., 2011). However, very little is known regarding the developmental trajectories of adaptive behaviour and their predictors preceding an autism diagnosis in early childhood. This issue is also very under researched in non-Western cultures but have crucial implications to early intervention soon after diagnosis. This study thus investigated this issue in young children with suspected developmental delay in Taiwan.

One hundred and one children (85 males, 16 females; mean age = 25.08 months, SD = 4.56 months, age range = 17 - 35 months) were assessed twice (18 months apart) on the Mullen Scales of Early Learning and the Autism Diagnostic Observation Schedule (ADOS). Their caregivers were also asked to complete the Adaptive Behaviour Assessment System-Second Edition (ABAS-II) and the Clancy Behaviour Scale (CBS) twice.

Three trajectory classes of adaptive behaviour were identified: recovering to average, increasing but below average, and decreasing and below average. Class 1 and 2 showed better mental abilities than Class 3 at both time points. While a similar pattern was also showed for autistic characteristics, only mental abilities at Time 1 significantly predicted class membership.

Findings indicated the heterogeneity of early adaptive behaviour development in young children who were later diagnosed with autism by the age of 4.5 years. While improvement in adaptive functioning could be expected in young children with better mental abilities, early intervention should be offered to support adaptive behaviour development especially for those with lower mental abilities.

P3.08.15 - Understanding the needs of autistic students in mainstream secondary schools: Insights from the Netherlands and Mexico

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Trigger warning: No Trigger Warning





Practical impact: Our research has several practical implications that could enhance the educational experiences of autistic students in mainstream secondary schools. For instance, our research revealed that teachers need to pay close attention to the social part of attending school of autistic females. Moreover, it was found that autistic males in the Netherlands and Mexico had a strong need for teachers to be more understanding of their autism and the implications it has for their learning.

Abstract body: Secondary education can be challenging for autistic students. Research indicates that some autistic learners face distressing school experiences, (partially) due to a lack of recognition and understanding of their unique needs. However, research on these needs, particularly from the students' perspectives, remains limited. This study aimed to distinguish distinct need-profiles for autistic students in the Netherlands and Mexico (n=82); two countries with inclusive educational approaches. We employed Q-methodology, a quantitative and qualitative research technique. The O-instrument, co-developed in consultation with six autistic students from both countries, addressed potential needs related to the school environment, teaching methods and tools, teachers, classmates, and feelings at school. To our surprise, many responses were received from Dutch participants who identified as female. Since gender can influence the school experiences of autistic people (Baldwin & Costley, 2016) and the female perspective remains under-researched (Cridland et al., 2014), separate analyses were conducted by country and gender. Findings revealed that autistic female students exhibited more sociallyoriented needs compared to their male counterparts. Male students in both countries emphasize the need for teachers' understanding of their autism and the implications it has for the way they learn. These results suggest tailored strategies to support autistic students in Dutch and Mexican mainstream secondary schools.

P3.08.16 - Empowering Autistic Women's Voices in Autism Advocacy

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Trigger warning: No Trigger Warning

Practical impact: Empowerment: Encourages autistic women to embrace their identity without camouflage, fostering confidence and personal growth.

Improved Support: Advocates for better diagnosis and tailored support strategies, ensuring appropriate recognition of autistic women's needs.

Community Building: Creates support networks through meetups, providing a sense of belonging and collective problem-solving.

Collaboration: Bridges autistic individuals and professionals, fostering mutual understanding and developing effective support systems.

Advocacy: Acts as an autism observatory, addressing rights violations, challenging ableism, and promoting changes for inclusion..

Abstract body: Our organization is an exclusive group of adult autistic women who represent themselves. As a pioneering movement in Spain, we support autistic girls and women by increasing their visibility, advocating for their rights, and addressing the unique challenges they face, including gender bias and barriers to full societal inclusion.

We work to empower women, encouraging them to embrace their full identity without camouflage and striving for equality, recognition, and authenticity in all areas of life.

Our core goals include raising awareness about autism in women, eliminating stigmas, advocating





for better diagnostic practices, and fostering self-awareness. We also promote inclusion in political, educational, social, and labor domains.

In line with our mission, we focus on fostering collaboration by creating spaces where autistic women and professionals can connect. These exchanges promote mutual understanding and the development of support strategies tailored to our needs, ensuring our voices guide the solutions designed for us.

Among the different activities we carry out, we organize member meetups to discuss common concerns, share experiences, and create support networks. These gatherings strengthen connections within the organization and empower participants to address shared challenges collectively.

Equally important is our commitment to activism. One of our key objectives is to act as an autism observatory, monitoring and responding to rights violations faced by autistic individuals. We actively denounce ableist attitudes and promote advocacy to defend the rights and dignity of the autistic community.

P3.08.17 - Supporting Women with Autism: Best Practices in Raising Awareness, Diagnosis and Empowerment.

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Trigger warning: No Trigger Warning

Practical impact: Awareness among general population and professionals has been raised through different methods. This led to women with autism that had not been previously diagnosed finally being adequately identified and being able to access resources and personalized treatment.

Abstract body:

Compared to men, women are at a higher risk of being undiagnosed with autism, being misdiagnosed or being diagnosed later in life. These women may endure years of inadequate medical and psychological treatment before being adequately identified.

Based on this information, an awareness campaign was launched, including several initiatives such as the creation of an informative video featuring real testimonies of women diagnosed later in life (with over 11.000 views), and informational sessions for professionals in public mental health centers.

Following this initial phase, a diagnostic service with an established protocol for adults was enabled. A total of 53 people have been assisted, 49% of whom are women, and among them 96% eventually received a diagnosis of autism.

Women diagnosed with autism in adulthood often express feelings of relief and validation, finally feeling seen and understood. In addition, the diagnosis allows them to access resources and treatments appropriate to their needs, including psychological interventions and essential support across various areas of life.





To further the goal of improving self-understanding and personal acceptance among recently diagnosed adult women, self-awareness workshops, mutual support groups and psychotherapeutic groups have also been organized to create and nurture a safe space where participants can share their experiences and reflect on their characteristics and strengths, while also gaining knowledge about autism in women, communication, masking and its impact, emotional management, sensory profiles, and personal relationships.

P3.08.18 - Educational experiences of marginalised children and their families

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Trigger warning: No Trigger Warning

Practical impact: This presentation highlights some of the structural and practical barriers in accessing educational provision by children and young people from marginalised communities and their families. Schools and educational organisations can make their services accessible to individuals on the autism spectrum from these communities by addressing some of these issues.

Abstract body: Introduction

There is very little research in the field of autism that has tried to understand how individuals with multiple minoritised identities experience education. This study focused on four groups of children and young people (1) those who belong to a minority ethnic community, (2) who have English as an additional language, (3) who belong to poorer economic backgrounds, and (4) who are in social care.

Methods

Online survey was completed by 37 educational professionals working in England either in schools or working for local authorities. Semi-structured interviews were conducted with 20 education professionals and 22 parents and carers. Descriptive statistics and thematic analysis were used for data analysis.

Outcome

Our results highlight the challenges that parents and carers face in navigating the education, health and social care systems when they belong to a marginalised group. They feel their voices or experiences are not considered by autism services or research. The lack of diversity in education work force was also considered as a barrier. Educational professionals find there is insufficient support for them to support students on the autism spectrum from marginalised groups or their families.

Discussion/ implications

This study highlights the need to consider the experiences of children and their families who face multiple reasons for marginalisation. It highlights the need to develop more training for educational professionals to understand these complex experiences, and appropriate educational resources to help teachers and schools to develop a truly inclusive setting.

P3.08.19 - The Carnivalesque Autistic: The Hermit Stereotype and the Ableism Faced by Extroverted Autistics.





S. Lasevitch1

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Trigger warning: No Trigger Warning

Practical impact: This work has the practical effect of raising awareness about underrepresented modes of autistic existence, such as that of the *carnivalesque autistic*. Highlighting autistics who participate in Carnival helps combat the ableism more intensely experienced by extroverted autistics, as they embody a challenge to the hermit stereotype, which remains the primary archetypal image associated with autism in the collective unconscious.

Abstract body: One of the main stereotypes about autism is that of introversion and isolation: for many people, autistics are those who don't like going out, don't enjoy parties and have a limited circle of friends. However, neurodiversity studies have contributed to deconstructing this stereotype about autism through three main points: (i) breaking the idea that all autistics are the same, with the creation of the concept of the spectrum (WING, 2002); (ii) recognizing that many autistics also have other neurodivergences, such as ADHD (PRICE, 2022); and (iii) understanding that cultural differences also influence how autism manifests in each individual (MORGAN; HILLS, 2019). Autistics from more festive cultures, such as those hosting Carnival, tend to develop an emotional connection to this celebration - especially if they also have ADHD or sensory hyposensitivities that predispose them to seek stronger stimuli, such as the vibrant colors of the costumes and the sounds of the drums played in parades. However, the dominance of the hermit archetype as the reference image for autism in the collective unconscious makes it significantly harder for autistics who are more outgoing and/or extroverted to obtain a diagnosis and social validation. For this reason, this study aims to shed light on the figure of the *carnivalesque autistic* - a mode of autistic existence that remains underexplored and is, therefore, subject to even more intense ableism.

P3.08.20 - Comparison of translated and culturally adapted diagnostic measures of autism spectrum condition: the Autism Diagnostic Observation Schedule and the Autism Diagnostic Interview-Revised

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Trigger warning: No Trigger Warning

Practical impact: This study evaluates the validity of translated and culturally adapted versions of widely used measures supporting diagnosis of autism spectrum condition. This study also compares the effect of different perspectives (parents versus clinicians) on the behaviours and interests unique to the autistic community.

Abstract body: Background:

The Autism Diagnostic Observation Schedule (ADOS) and the Autism Diagnostic Interview-Revised (ADI-R) are widely used measures to support the clinical diagnosis of autism spectrum condition (ASC). Both measures have been translated and culturally adapted to multiple language versions. While the ADOS is typically administered by a health professional, the ADI-R is a parent-proxy interview. The current study aims to evaluate and compare the validity of a translated and culturally adapted version of the ADOS and ADI-R.

Methods:





Participants (N=2666, 84% males, 16% females) were drawn from a retrospective record review of neurodiverse individuals who visited a developmental-behavioural pediatrics clinic, and were divided into two groups, the ASC (n=2224) and non-ASC group (n=442). To evaluate concurrent validity, Pearson's correlations analysis was used to compare corresponding domains of the ADI-R and ADOS. For convergent validity, we calculated Cohen's kappa to compare clinician's diagnosis of ASC and diagnosis suggested by the measures.

Outcomes:

Preliminary results show that Pearson's correlation coefficients were highest for domains of nonverbal communication (0.52-0.68) and reciprocal social interaction (0.43-0.51), but lower for domains of restricted, repetitive behaviours and interests (0.17-0.26). Kappa agreement was highest when comparing clinician's diagnosis to each diagnostic measure separately, but relatively lower for agreement between the two measures. Further results will be included in the presentation.

Discussion:

These translated versions of the ADOS and ADI-R were found to have good concurrent and convergent validity. Perspectives of clinicians and parents should both be considered to support ASC diagnosis.

Plain English version: For a very long time, diagnostic assessments have been used to inform clinical diagnosis of autism spectrum condition (ASC). Two of the most commonly used assessments are Autism Diagnostic Observation Schedule (ADOS) and Autism Diagnostic Interview – Revised (ADI-R). These two assessments have been translated and culturally adapted to many different language versions. The current study uses a large sample of people to evaluate how useful the ADOS and ADI-R are in another language version in the clinical diagnosis of ASC. This study also examines the alignment between the two assessments. Results show that this language version of the ADOS and ADI-R provide useful information in the clinical diagnosis of ASC, and that there is moderate agreement between these two assessments.

P3.11.01 - □ The Autistic Wonder Years: Analyzing Videos From An Autistic Childhood During Adulthood

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Trigger warning: Pregnancy and childbirth

Practical impact: The discovery that autistic symptoms can emerge in infancy before an individual can formally receive an autism diagnosis, and the realization that many individuals with autism who have been formally diagnosed had routinely displayed autistic tendencies in infancy and early childhood prior to their formal diagnosis, has led to studies wherein the archived video footage of infants and young children who would eventually receive a diagnosis of autism are being observed by researchers and others, in the hopes that they can find observable patterns of autistic behaviors and tendencies in infants and young children who eventually receive an autism diagnosis. Indeed, Florida Early Steps, an organization sponsored by the State of Florida in the U.S.A. that offers intervention services to families of infants and toddlers exhibiting potential symptoms of autism spectrum disorders and other disabilities, has created a list of "telltale signs and symptoms" that may indicate potential autism and/or other developmental disabilities from infancy.

In addition, at various autism conferences, I have come across researchers studying archived video footage of infants and toddlers who would eventually grow up to receive a formal autism diagnosis, including while attending the Autism Society of Minnesota's annual autism conference in Minneapolis, Minnesota, USA. The researchers I personally met at this conference concluded, based on their observations, that the brains of individuals with autism naturally develop and wire themselves differently than non-autistic individuals as they grow and develop, and that these differences in brain development may begin at birth. I also crossed paths with researchers





studying potential autistic symptoms and developmental differences in infancy while attending the 2023 INSAR (International Society for Autism Research) conference in Stockholm, Sweden. If their research is accurate, and it is proven that some people with autism begin to develop differently from birth, analyzing the video footage of infants and young children who eventually are diagnosed as having autism can be a valuable tool in analyzing how those differences in development start at young ages.

Abstract body: I am an autistic adult male who was born in 1988. From birth to 18 months, I was filmed as part of a "case study" regarding neurotypical infant development. After receiving my first formal autistic diagnosis at the age of three, I continued to be filmed by my family members, who utilized the footage to observe my behaviors with the goal of developing a greater understanding of my autistic tendencies.

Decades later, during adulthood, my family reviewed the video footage that had been created during the "case study" and realized that I had actually been displaying symptoms of autism from birth that had not been noticed by the researcher at the time of filming. Meanwhile, I myself started viewing the video footage that was taken of me during my early years, and began to explain to my family the reasoning within my mind that caused the autistic tendencies and behaviors I displayed in that same video footage, from my direct memories.

In this session, I will present video footage from my infancy and childhood that will feature various autistic tendencies I displayed during my early years. While doing so, I will explain the reasons behind many of the behaviors being shown, based on either direct memories or my own internal understanding of how I am uniquely affected by autism. My hope is that these insights can help people develop a greater understanding of the internal mechanics behind various behaviors that autistic people routinely display during their early years.

P3.11.02 - Exploring teachers' autism knowledge, perceived teaching efficacy and reported inclusive practice use

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Trigger warning: No Trigger Warning

Practical impact: The present study contributes to a better understanding of the role of teachers' autism knowledge on effective teaching practices for pupils on the autism spectrum within an inclusive environment.

Abstract body: Previous research points out that teachers can play a key role in the successful inclusion of pupils with autism in mainstream educational settings. At the same time, appropriate teaching strategies for pupils with autism have been identified a big challenge for teachers, educational psychologists and school policy makers. It is essential to understand the current practices used to foster inclusive education for pupils on the autism spectrum. The current study examines differences in and associations among autism knowledge, teaching strategies, selfefficacy and teacher-pupil relationship in general and special education teachers. Three hundred and twelve teachers (157 general education and 155 special education) from primary schools with mean age 32.8 years (s.d.=9.1) participated in the study. Participating schools were allocated in the broader of Athens and the participants formed a convenience sample. The findings showed that special education teachers are significantly more knowledgeable regarding autism, more aware of potential classroom practices for inclusion and have higher self-efficacy as compared to general education counterparts. No significant differences in teacher-pupil relationship quality between the two groups were found. Moreover, positive correlations emerged among teaching strategies for inclusion, teachers' self-efficacy and closeness in teacher-pupil relationship. Autism severity was negatively associated with teacher-pupil closeness and conflict. Autism knowledge was found to be a significant predictor of effective classroom practices and teacher self-efficacy.





The present findings contribute to a better understanding of the role of teacher autism knowledge on effective teaching practices for pupils on the autism spectrum within an inclusive environment.

P3.11.03 - Brain Responses to Musical Emotions in Autism

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Trigger warning: No Trigger Warning

Practical impact: This study serves as proof-of-principle data for the development of novel applications and innovative ways to meet the unmet and varying social communication support needs of autism community.

Abstract body: Introduction & Central question

Music is argued to automatically engage social cognition (Koelsch, 2014). Previous behavioural and neuroimaging studies largely support difficulties emotion recognition in autism. However, it is currently unclear whether these results reflect insensitive data or a true support for the null. Moreover, the difficulties typically observed with social stimuli (i.e., voices and faces) may not generalise to music. Here we compared neural processing of affective sounds presented in music and vocalisations.

Methods

We conducted an EEG study with 42 adult (Mean age = 28.5, range = 20 - 39 years) participants with and without a formal diagnosis of autism spectrum conditions (21 autistic adults, 21 age- and gender-matched comparison group). EEG data were recorded while listening affective auditory stimuli expressed through music and vocalisations. The data were analysed with the event related potentials (ERPs) and time-frequency analysis.

Outcome

We contrasted music and vocalisations across both participant groups. We expected 1) moderate to strong evidence indicating that musical emotion processing would not be explained by group 2) higher suppression of oscillations in autistic adults for vocally expressed emotions in comparison with musical emotions. Using Bayes Factors, we calculated the odds ratio to quantify the evidence supporting an intact processing of musical emotions in autistic adults.

Discussion/Implications

The present study offers a more comprehensive understanding of affective processing in autistic adults than previously known. It also serves as proof-of-principle data for the development of novel applications to meet varying social communication support needs within the autism community.

Plain English version: Introduction & Central question

Music is argued to automatically engage social cognition (Koelsch, 2014). Previous studies generally found difficulties recognising emotions among autistic individuals. However, these results might simply reflect insensitive data (rather than difference between autistic and non-autistic individuals). Moreover, the difficulties typically observed with voices and faces may not generalise to music. Here we compared how autistic brain responds to emotional sounds in music and in vocalisations.

Methods

We measured electrical activity in the brain from 42 adult (Mean age = 28.5, range = 20 - 39 years) participants with and without a formal diagnosis of autism spectrum conditions (21 autistic adults, 21 age- and gender-matched comparison group). Brain data were recorded while participants listened to musical and vocal emotion sounds. We analysed the data using event related potentials (ERPs) and time-frequency analysis methods.





Outcome

We compared music and vocalisations across both participant groups. We expected 1) moderate to strong evidence that brain responses to musical emotions would not be explained by autism diagnosis 2) higher suppression of brain oscillations in autistic adults for vocal emotions in comparison with musical emotions. Using Bayesian statistics, we quantified the evidence for processing musical emotions in autistic adults.

Discussion/Implications

The present study offers a more comprehensive understanding of emotion perception in autistic adults than previously known. It also serves as proof-of-principle data for the development of novel applications to meet varying social communication support needs within the autism community.

P3.11.04 - Uncovering Distinct Profiles of Social Motivation in Youth on the Autism Spectrum

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Trigger warning: No Trigger Warning

Practical impact: This study highlights the heterogeneous nature of social motivation in children on the autism spectrum, suggesting that reduced social motivation is not a universal trait but may stem from varying challenges across different underlying facets. By identifying distinct subgroups based on unique social motivation profiles, which correspond with differences in other clinical features, the findings underscore the need for personalized intervention strategies. Tailoring interventions to target the specific social motivational challenges of each subgroup could lead to more effective outcomes, enhancing social functioning and overall quality of life for individuals with autism.

Abstract body: Reduced social motivation is commonly observed among youth on the autism spectrum, but its inconsistent definition and measurement have made it difficult to fully understand how it varies and impacts outcomes. This study aims to address this gap by identifying subgroups of autistic youth, aged 5 to 21 years (M=10.43, SD=3.67; 81% male), who exhibit distinct patterns of social motivation, as reflected in fine-grained reticence, seeking, and maintaining facets of social motivation. These facets were derived from a comprehensive multiinstrument factor analysis of symptom and screening measures. Data from 509 participants in the Healthy Brain Network were analyzed using latent profile analysis, which revealed four subgroups characterized by unique configurations of social motivation facets: (1) Engaged (n=247), with the fewest challenges in all facets; (2) Inhibited (n=143), marked by high reticence and mild difficulty seeking social interactions, but few challenges with maintaining them; (3) Aloof (n=68), with challenges in seeking and maintaining interactions, but lower reticence; and (4) Avoidant (n=52), showing the most significant challenges in all facets. Pearson's chi-square tests and one-way analysis of variance revealed no differences sex or age across subgroups. The Engaged subgroup showed the fewest difficulties in other areas of social functioning and co-occurring mental health issues, while the Avoidant subgroup showed the greatest challenges. The Inhibited and Aloof subgroups had intermediate levels of difficulty. These results highlight the diverse ways social motivation manifests in autism and suggest that interventions could be more effective if tailored to the specific social motivational profiles of individuals.





P3.11.05 - Pragmatic skills between children on the autism spectrum and children with developmental language disorder

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Trigger warning: No Trigger Warning

Practical impact: The current study provides the basis for a deeper understanding of pragmatic language skills in children on the autism spectrum and insights for improving educational and social outcomes. Understanding how children on the autism spectrum use pragmatic language skills allows for the interpretation of their perspective and the acceptance of diversity in social interaction and enhancing pragmatic language skills in children on the autism spectrum can enable them to become more independent and happy as they will be able to express their needs, wishes and feelings clearly. In addition, the investigation and study of pragmatic skills between children on the autism spectrum and children with developmental language disorder can help professionals to recognise the specific pragmatic difficulties found in children on the autism spectrum which is important in reliable identification of autism spectrum condition so that children can receive targeted support according to their needs.

Abstract body: Introduction & Central Question: Children on the autism spectrum and children with developmental language disorder (DLD) share some similarities in their language skills. The aim of the present study is to investigate the similarities and differences in pragmatic skills between school aged children who are on the autism spectrum and children with developmental language disorder (DLD).

Methods: 75 children were recruited in the study, equally divided into three groups; the group of children on the autism spectrum, the DLD group and the group of typically developing children (TD group), matched for chronological age and gender. Each group consisted of 25 children aged 6-8 years. The participants were assessed on linguistic-pragmatics and social-pragmatics abilities and specifically in the ability of using the social context to make inferences, in general communication and in social interaction.

Outcome: The results showed that children on the autism spectrum experience difficulties in all the aspects of pragmatic language abilities and significant difficulties were found mainly in the abilities related to social-pragmatics. In contrast, children with DLD exhibited difficulties in linguistic-pragmatics, while social-pragmatics did not seem to be significantly affected in this group of children.

Discussion/ Implications: Children on the autism spectrum and children with DLD exhibit distinct pragmatic language difficulties, which are more prominent in children on the autism spectrum. The study identifies key differences to distinguish children on the autism spectrum from those with DLD and insights for developing effective targeted support.

P3.11.06 - Mutual gaze and vocal feedback in inter-autistic face-toface conversation

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Trigger warning: No Trigger Warning

Practical impact: Our work highlights communicative differences among autistic and non-autistic people and supports understanding that some autistic people experience mutual gaze differently, which could:





- help reduce the pressure on autistic individuals to conform to non-autistic norms, and instead empowering autistic individuals to engage authentically rather than masking
- help families, caregivers, and peers of autistic individuals better understand and respect
 the subjective nature of mutual gaze and feedback. This could reduce misunderstandings
 and improve social relationships
- help to design interventions that respect the variability and personal contexts of autistic social behaviours, making them more effective and inclusive
- contribute to promoting acceptance of diverse social behaviours and shifting societal norms

Abstract body: Autistic individuals often face challenges in social interaction, with research and self-reports highlighting differences in (mutual) gaze and vocal feedback behaviour compared to non-autistic individuals. However, much of this work focuses on mixed-neurotype dyads in controlled settings, overlooking the dynamics of inter-autistic face-to-face interactions. Social interaction is inherently situated and involves mutual engagement between interacting minds, yet studies primarily investigate autistic individuals in isolation.

To address this gap, we analysed naturalistic, multimodal interactions involving 16 autistic and 24 non-autistic participants across three conversational contexts: small talk, task-oriented conversation, and discussion of the task. In total, 10 hours of face-to-face conversations with mobile dual eye-tracking and stereo audio were recorded.

Autistic dyads engaged in less mutual gaze and vocal feedback compared to non-autistic dyads across all contexts, with group differences clearest in small talk and least pronounced in task-oriented interactions. Behaviour among autistic participants was more variable, with some displaying no face-directed gaze during entire interactions, particularly in the task-oriented condition. Qualitative interviews revealed that most autistic participants experienced mutual gaze in fundamentally different ways than non-autistic participants, emphasising the subjective nature of eye contact and high levels of self-reflection in this regard.

Integrating qualitative and quantitative data provides a richer understanding of the social experiences of autistic individuals, highlighting the need to consider variability and personal context. By exploring these dynamics, we aim to increase awareness of the diverse ways autistic individuals experience and navigate social interactions.

Plain English version: Autistic people often experience social interaction differently from non-autistic people. This includes differences in eye contact and in providing verbal feedback, such as "mm-hm" during conversations. Most studies have looked at interactions between one autistic and one non-autistic person, typically in controlled, artificial settings. Despite relevant work in recent years, we still lack extensive experimental work addressing how autistic people interact with each other in real-life situations.

In our research, we studied natural conversations involving 8 pairs of autistic and 12 pairs of non-autistic people. These conversations included small talk, working together on a task, and discussing the task afterward. We recorded 10 hours of face-to-face conversations using special equipment to track eye movements and record speech.

We found that autistic pairs looked at each other's faces and gave verbal feedback less often than non-autistic pairs, especially during small talk. These differences were less noticeable in task-oriented conversation. Different autistic people varied considerably in their behaviour. Some, for instance, used eye contact like the non-autistic participants, while others hardly looked at their conversation partner's face at all.

Interviews after the experiment showed that most autistic participants experienced eye contact differently than non-autistic participants, reflecting a great degree of self-awareness, and that many (but not all) described eye contact as uncomfortable. By combining observations from the experimental study with personal interviews in this way, we want to better understand—and raise awareness of—how autistic people experience social interactions.





P3.11.07 - *It's Hard to Know*; Identifying how assessment of evidence-based practices that support young autistic children in Irish primary schools needs a more holistic approach.

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Trigger warning: No Trigger Warning

Practical impact: This presentation captures the difficulties teachers have using assessment to guide their practice supporting young autistic learners in primary schools. The study findings suggest that more appropriate approaches should be considered in schools that will incorporate the autistic student voice in assessment of their learning and the practices that teachers adopt to support their learning. This has practical applications for autistic students experiences and the work of their teachers in schools today.

Abstract body: Vygotsky's sociocultural theory is widely recognised for his explanation of how children's learning can be maximised when their teachers understand what the child can achieve within their zone of proximal development (ZPD) (Vygotsky 1978). Learning social communication competency (SCC) within the ZPD is particularly relevant as understanding what the child's strengths and needs are provides an insight into what that individual is 'able to perform independently and the ability to perform a more difficult task with assistance, yet without frustration' (Semmar and Al Thani 2015, p.2). This presentation highlights teachers' perspectives in relation to assessment of evidence-based practices (EBPs) that support SCC for young autistic children in Irish Primary Schools and is captured by the sentiment It's hard to know. The findings identified some challenges to fully operating Vygotsky's (1978) ZPD theory component and the difficulties included; an absence of emphasis on the autistic student voice in the assessment process, the lack of availability of varied assessments, teacher confidence in decision making and observations. Findings from the study suggest that developing a more holistic approach to understanding autistic students' individual strengths, emphasising the inclusion of the autistic student themselves in the process would create a better platform for assessment. To realise this, teachers need support, professional learning, resourcing and time, to implement the full range of assessments for autistic children; thus, supporting implementation of EBPs in a systematic way based on a better understanding of each autistic child within their own ZPD.

Plain English version: n/a

P3.11.08 - A virtual reality system for the classification of nonverbal behaviours in autism

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Trigger warning: No Trigger Warning

Practical impact: We present a virtual reality tool that can support the autism detection process by automatically distinguishing body movement and gaze characteristics between autistic and typically developed individuals. This may help to further find objective criteria and categorization for autism.

Abstract body: INTRODUCTION & CENTRAL QUESTION

A lack of trained specialists to conduct autism diagnostics and potential misdiagnosis can have an impact on the individuals' wellbeing. Objective measures are needed to ensure and accelerate





these processes. Our research goal was to investigate whether and to what degree virtual reality technology can support the autism detection process by automatically distinguishing body movement and gaze characteristics between autistic and typically developed individuals. We present a full clinical sample proof-of-concept study.

METHODS/APPROACH

40 autistic and 35 typically developed individuals took part in the study (N=75). Participants performed a task in a virtual reality supermarket, to simulate a social situation in which non-verbal behaviour data from participants (eye gaze, hands, and head movement), was acquired and recorded using a high-tech computer head mounted display, controllers, and trackers. Then, pattern analysis and machine learning classification techniques were applied.

OUTCOME

Results suggest strong differences in the mean fixation times in the background for the autistic participants, whereas their focus on the eye region was reduced when compared to typically developed individuals. Reduced focus on the mouth and head regions were also observed in autistic individuals. Differences in head and hand movements were not observed between groups.

DISCUSSION/IMPLICATIONS

Confirming previous studies, focus behaviour seems to be a strong feature to distinguish between autistic and typically developed individuals. We believe that such tools may help to further find objective criteria and categorization for autism.

P3.11.09 - Personalized tools to support caregivers in fostering communication in siblings of children with an ASD diagnosis during the early years of life

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Trigger warning: No Trigger Warning

Practical impact: The booklet is a useful and practical tool to support caregivers of HR-ASD children in targeted stimulation of communicative and linguistic development during the early years of life.

Abstract body: INTRODUCTION: Recent studies suggest a significant genetic contribution to the pathogenesis of Autism Spectrum Disorder (ASD). Siblings of children with ASD are considered "high-risk" (HR), with a 10-19% likelihood of developing the disorder, while 28% may experience communication-language difficulties without a full diagnosis. Caregiver-mediated interventions to stimulate language development have been effective in improving these communicative skills. OBJECTIVE: The main goal of this project was to create resources to support the development of communicative-language skills in HR children during their first three years of life. After identifying areas for stimulation, practical activities were proposed to caregivers, specific to each defined objective.

METHOD: Materials were designed for five age groups (0-6, 7-12, 13-18, 19-24, 25-36 months), including five questionnaires to assess communicative skills and an Excel file that automatically generates personalized booklets based on the responses. A satisfaction survey was administered to 25 families after three months of use.

RESULTS: The materials are personalized to the needs of individual children and automated in a very short time. Families found the experience positive, with clear activities that were easily integrated into daily routines. This allowed active caregiver involvement and improvements in children's communicative skills within three months. The results confirm the effectiveness of the materials in an initial phase of experimentation. The plan is to expand the sample and resources to distribute the materials to HR caregivers and assess the impact of the booklets on children's





communicative development (standardized tests) and on the parent's perception as a communication model (self-perception questionnaire).

P3.11.10 - Adapting SCHOOL KONTAKT[™], a Social Skills Group Program for Autistic Youth, for use in a High School Setting: A Feasibility Study

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Trigger warning: No Trigger Warning

Practical impact: This work describes a feasibility study of a school-based social skills program that enables students to access support and practise social skills in a familiar environment. The results of this study are promising, indicating the program can support students to achieve their personally meaningful social goals. Expansion of this program to other schools could provide more autistic students with the opportunity to develop their social skills in the school environment, where children spend a large proportion of their time and are required to socially interact with others in both social and academic situations. In addition, this program upskills teachers to deliver the program, providing them with greater awareness and understanding of the strengths and challenges of the autistic students they work with every day, which may also improve the students' overall school experience.

Abstract body: KONTAKT™ is an evidence-based, manualised social skills group training program designed for autistic youth between the ages of 8 and 17 years. Traditionally, the program is delivered by health professionals at a clinic or service provider. However, previous research has identified the need for school-based intervention programs to support the social skill development of autistic youth in more naturalistic settings. The specific benefits and challenges of implementing such programs in school environments within specific cultural contexts has not been comprehensively explored. This study aimed to explore the feasibility of implementing an adaptation of the KONTAKT™ program (SCHOOL KONTAKT™), delivered by trained teachers, in an Australian high school setting, with a specific cultural and educational context. A total of 69 students from four schools participated in the study, attending the program for one hour, twice per week, across two school terms (16 weeks). A pre-test post-test design was used to measure change, primarily in participants' self-reported progress towards their personally meaningful social goals, but also in friendship, social anxiety, social skills knowledge, autistic traits, emotion regulation, and school inclusiveness, from the perspective of students, parents or teachers. Focus groups were conducted with students and teachers after the program to qualitatively explore their experiences of participating in SCHOOL KONTAKT™. Findings suggest that SCHOOL KONTAKT™ can support autistic high school students to achieve their personally meaningful social goals and can be successfully implemented within the confines of the school timetable within this specific cultural and educational context.





Plain English version: KONTAKT™ is a social skills group training program for autistic youth between the ages of 8 and 17 years. This program has had success as a clinical program and has been trialled in a school in Sweden. However, the benefits and challenges of running the program in Australian schools is unknown. A total of 69 students from four schools with Specialised Learning Programs for Autism participated in this study. Teachers were trained to deliver the program twice per week as part of their timetabled social skills lessons, across two school terms. The main outcome of the study was students' progress towards their own personally meaningful social goals. Focus groups were also held with teachers and students to understand their experiences of the program and identify the positive and negative aspects of implementing a social skills group program in a school environment. The findings of this study suggest that a school-based version of KONTAKT™ can support autistic students to progress towards their social goals and, despite some challenges, it is possible to successfully run the program in Australian high schools with a Specialised Learning Program for Autism.

P3.11.11 - Comprehension of Additive and Contrastive Focus Particles in Children with Autism Spectrum Conditions

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Trigger warning: No Trigger Warning

Practical impact: This study has practical implications for supporting autistic children in improving their understanding of focus particles, such as *mo* (additive) and *wa* (contrastive), which are essential for effective communication. Autistic children often face challenges in interpreting these particles, affecting their ability to engage in conversations and social interactions. The findings suggest that interventions targeting vocabulary development and explicit instruction on focus particles could enhance their comprehension and communication skills. By addressing these specific language challenges, this research can inform educational strategies and therapies, ultimately helping autistic children navigate social situations more effectively.

Abstract body: Background

Japanese focus particles, such as *mo* (additive) and *wa* (contrastive), are reported to emerge in production by ages 1–2 and continue to develop in comprehension beyond age 6. These particles require inferencing beyond explicit linguistic input, which can present challenges for children with autism spectrum conditions (ASC), who often experience differences in pragmatic language use. This study aimed to examine the understanding of Japanese focus particles among ASC children, referencing a task reported by An et al. (2020) that demonstrated Mandarin-speaking autistic individuals have difficulty interpreting additive particles (e.g., "also").

Method

Thirty children with ASC and 34 typically developing (TD) children aged 6-12 participated. Participants completed a picture-selection task under three conditions: ga (nominative case particle), mo, and wa.

Results

The TD group demonstrated near-perfect accuracy (99.0%), while ASC children showed lower performance (67.9%). Within the ASC group, performance was highest for ga (85.0%), followed by mo (60.0%) and wa (58.8%). Correlation analyses indicated a significant relationship between vocabulary development and task performance. Autistic participants with a vocabulary age over 7 years showed relatively strong comprehension. Error analysis revealed that ASC participants often overlooked focus particles or relied on content words.

Discussion

These findings highlight differences in the way ASC children interpret focus particles, compared to TD children. The strong association between vocabulary and performance suggests that interventions targeting lexical and pragmatic skills could support this population. Further research is needed to explore effective methods to improve focus particle comprehension.

Plain English version: Background

Japanese has special words called focus particles, like mo (which adds information) and wa (which





shows contrast). These words appear in children's speech between ages 1-2 and continue developing in understanding beyond age 6. Understanding these words requires making inferences, which can be difficult for children with autism spectrum conditions (ASC). This study aimed to investigate how children with ASC understand Japanese focus particles, based on a study by An et al. (2020) that showed Mandarin-speaking children with autism struggle with similar additive words (e.g., "also").

Method

Thirty children with ASC and 34 typically developing (TD) children, aged 6-12, participated. They completed a picture-selection task with three conditions: ga (subject marker), mo, and wa.

Results

The TD group showed near-perfect accuracy (99.0%), while ASC children performed at 67.9%. Within the ASC group, the best performance was with ga (85.0%), followed by mo (60.0%) and wa (58.8%). Children with a vocabulary age of over 7 years performed better. Error analysis revealed that ASC children often overlooked focus particles or relied on nouns and verbs.

Discussion

These findings highlight differences in how ASC children understand focus particles compared to TD children. The link between vocabulary and performance suggests that interventions to improve vocabulary and pragmatic skills could support this group. Further research is needed to explore effective strategies for improving focus particle comprehension.

P3.11.12 - School-Based Research and Intervention: How do the Emotion-Behaviour and Adaptive Skills of Autistic Adolescents Impact Parental Quality-of-Life (QoL)?

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Trigger warning: No Trigger Warning

Practical impact: Support for relationships and emotional regulation

Improvement in parent QoL Curriculum development Individual student support

Abstract body: BACKGROUND

Parents of autistic children report a lower Quality-of-Life (QoL) than those of typically developing children. To address this, our schools listen to student and family voice on important issues to them, through weekly keyworking sessions and termly QoL in Autism (QoLA) questionnaires. This information is then used to identify 'Areas of Focus' to improve QoL outcomes for both students and their families.

OBJECTIVES

This practice-based study investigates the relationships between child emotion-behaviour and adaptive functioning on parent QoL, to provide a more comprehensive evidence base for school-based curriculum planning as well as therapeutic and pastoral support.

METHODS

In two UK specialist secondary schools for autistic boys, we conducted assessments and performed a multivariable linear regression analysis to explore the relationships between students' emotional and behavioral difficulties, adaptive functioning, and parent QoL. Analysis was conducted on a sample of 37 student-parent-keyworker trios (mean age 15.3 [SD 3.4]). The results showed that increased student communication and socialization skills positively influenced parent QoL, while conduct and emotional problems had a negative impact.

CONCLUSION AND IMPLICATIONS





Our findings suggest that focusing on strengthening students' communication skills, alongside providing support for relationships and emotional regulation, offers an evidence-based approach to enhancing our curriculum and individualized student support. This, in turn, can lead to improvements in parent QoL. Additionally, our sample contributes to a growing international body of research exploring transcultural differences in QoL in autistic individuals.

P3.11.13 - Play Perceptions and Practices of Emirati Parents of Autistic Children

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Trigger warning: No Trigger Warning

Practical impact: The primary objective of this development project is to explore the play perceptions and practices of Emirati parents of autistic children within the MRC-NECC school community. This project assists service providers in developing culturally sensitive and affirming play training programs. By incorporating Emirati cultural values within the neurodiversity affirming (NDA) framework, the project enhances intervention effectiveness and support systems, promoting improved communication, socialization, and play skills at MRC-NECC. The project directly addresses concerns raised by community partners regarding the limited understanding of Emirati cultural practices in supporting autistic children's play skills. Additionally, the project empowers (1) Emirati parents and children within the school's community by equipping them with tools for cultural integration through play practices, and (2) autistic individuals by using NDA language instead of deficit-focused language. These goals also present opportunities for future research and exploration, serving as potential areas for advancing culturally responsive practices and NDA approaches in autism supports

Abstract body: This development project explores the play perceptions and practices of Emirati parents of autistic and neurotypical children within the Mohammed Bin Rashid Center for Special Education (MRC-NECC) community in Abu Dhabi, UAE. Despite extensive research on the role of play in child development, limited attention has been given to the cultural influences on parentchild play in the Arab Gulf region, particularly for parents of autistic children. Using a qualitative, exploratory multiple-case study design, the project aims to provide culturally informed insights into these dynamics. Three Emirati mothers participated in individual interviews guided by an ethnographic framework, focusing on their play beliefs and practices with their children aged 3-6 years. Thematic analyses revealed key themes that emphasizes the benefits of play, parental engagement challenges, and cultural influences on play practices. Findings highlight the importance of considering cultural influences to better support parent-child interactions and enhance communication, socialization, and play for autistic children. These insights aim to inform the development of targeted training programs for parents and service providers, fostering empowerment and integration within the community. This study contributes to bridging gaps in understanding the cultural context of play and underscores its potential for promoting inclusive practices in autism intervention.

Plain English version: This development project explores how Emirati parents view and engage in play with their autistic and neurotypical children at the Mohammed Bin Rashid Center for Special Education (MRC-NECC) in Abu Dhabi, UAE. While play is widely recognized as important for child development, little research has focused on how cultural factors shape play, particularly for





parents of autistic children in the Arab Gulf region. Through interviews with three Emirati mothers, the study examines their beliefs about play and the ways they interact with their children, aged 3–6 years, during playtime. The findings reveal themes that addresses the benefits of play, challenges parents face, and the influence of culture on their practices. These insights emphasize the need for culturally tailored approaches to support parent-child interactions and help autistic children develop communication, social, and play skills. The project aims to guide the creation of training programs that equip parents and educators with practical strategies, while also promoting understanding and inclusion within the community. By highlighting the importance of considering cultural perspectives, this study contributes to more inclusive and effective approaches to supporting autistic children and their families.

P3.11.14 - Reading Between the Lines: Online inference generation and autism

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Trigger warning: No Trigger Warning

Practical impact: One area where we may be able to offer concrete tips, concerns best practice for clarity and inclusivity of communication. For example, should inferences be avoided in texts for those with autism? Are there specific types of inference that are particularly challenging for autistic readers? On the basis of our findings, we might establish that while autistic readers do, fully, comprehend texts, they engage in more re-reading than non-autistic readers to achieve this. This would suggest that allowing autistic readers additional time (e.g., in assessments) would be beneficial where inference generation is required.

We look forward to being able to offer clarity on these topics, and provide additional practical insights at the conference when we have completed our analyses.

Abstract body: INTRODUCTION/QUESTION

The ability to read is important for social inclusion and learning across the lifespan. Autistic readers often experience comprehension challenges when texts require inference generation; when certain information is not explicitly provided, readers must *read between the lines* for full comprehension. Current understanding of how inference generation during reading occurs for autistic people is limited, therefore, we investigated the cognitive processes that underpin inference generation during reading in 40 autistic and 40 non-autistic adults.

METHODS/APPROACH

Eye-movements were tracked while participants read texts that required either pronoun coreference inference (e.g., associating 'he' with 'barman' rather than 'barmaid') or instrument inference (e.g., inferring that a broom was likely used to 'sweep the steps'). Participants answered comprehension questions related to the texts. Reading ability, expressive language, working memory and IQ were also assessed.

OUTCOME

Data collection is on-going at time of submission. Multi-level modelling will be applied to eye movement measures to identify the time-course and nature of inferential processing for autistic and non-autistic readers.

DISCUSSION/IMPLICATIONS

Findings will be interpreted based on theories of reading comprehension and autistic cognition. We aim to identify and specify mechanistic processing differences that may underpin inference generation challenges in autism. Out results will inform and develop current theoretical understanding of autistic cognition and offer potential translational routes such as best practice for clarity and inclusivity of text communication and the development of tailored and supportive literacy education.

We will be able to offer concrete conclusions on these topics once the analysis is completed.





Plain English version: Introduction

Reading is a critical skill in modern society. Many autistic people have difficulty understanding texts that require 'inference generation'; that is, when certain information is missing from the text, the reader has to figure out what is meant (sometimes referred to as *reading between the lines*). To better understand how autistic people form inferences, we ran an experiment with 40 autistic and 40 non-autistic adults.

Methods

We measured participants' eye-movements while they read texts that required inference generation. The texts included inferences related to pronouns (e.g., associating 'he' with 'barman' rather than 'barmaid') or instruments (e.g., inferring that a broom was likely used to 'sweep the steps'). Participants answered questions about the texts, so we could see if they had understood them. We also measured their memory, reading ability, language, and IQ.

Outcome

We are still running the experiment. When we have all the data, we will analyse the eyemovements to understand when and how inferences are generated for autistic and non-autistic readers.

Implications

We will look to see if there are differences in the eye-movement patterns of autistic and non-autistic readers. Such differences will provide us with insights into when, how and why autistic readers sometimes struggle to understand texts requiring inferences. Our research will develop understanding of how autistic people process text and will be useful for improving communication and for developing more effective literacy teaching for autistic people. We will give more specific conclusions once we have analysed the data.

P3.11.15 - Exploring autistic young adults understanding and experience of social skills

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Trigger warning: No Trigger Warning

Practical impact: The study advocates for a shift toward empowering autistic people to engage in self-advocacy, potentially leading to increased confidence in expressing their needs and boundaries. These findings could guide practitioners in creating more flexible, choice-driven interventions, improving the quality of life for autistic people by fostering self-empowerment and social autonomy. The findings of this research also emphasises the importance of tailored social skills training (SST) that respects individual needs, preferences. By promoting a personalised approach to SST, autistic people can receive more relevant and effective support, enhancing their social confidence and ability to navigate interactions in ways that feel authentic to them.

The lead researcher is autisitc.

Abstract body: *Purpose*: Navigating social interactions and developing effective communication strategies can pose unique hurdles for autistic people, impacting their overall well-being. This article presents a qualitative study of autistic young adults' understanding of social skills. Social skills training (SST) will also be explored.

Methods: The primary researcher conducted five semi-structured focus groups with 18 participants in total, aged 18-30 (11 men, 7 women). Our analyses adopts an across-method qualitative pluralistic approach, utilising thematic analyses and content analysis.

Results: Through inductive thematic analysis we defined four key themes: (1) Conscious Efforts in Social Interaction, (2) Embracing Individual Needs, (3) Adverse social experiences, and (4) Social





divide between neurotypes. Through our content analysis, social skills were described as four distinct categories: effective communication, implicit norms, initiation, and understanding interpersonal dynamics. Participants emphasised the importance of choice and an individualised approach regarding SST. While expressing a desire to develop various social skills, many participants embraced their identity and desired to improve self-advocacy.

Conclusion: There is a need for tailored and individualised approaches in SST, acknowledging the diverse experiences of autistic people. Additionally, choice and autonomy are important, aligning with the desire for self-advocacy.

P3.11.16 - Emotion Recognition and Eye Tracking of Social Scenes in Neurotypical and Autistic Adults

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Trigger warning: No Trigger Warning

Practical impact: There is a widely accepted belief based on Theory of Mind that people with autism lack the ability to perceive others in social exchanges. This study is a pilot study aimed at challenging assumptions about empathic ability, especially in those with autism with communication limitations, and how these assumptions perpetuate barriers.

Abstract body: One consistency across the autism spectrum is a deficit in social communication skills, postulated to be related to emotional recognition. Previous studies are mixed when comparing emotional recognition in neurotypical and neurodivergent individuals, and eye tracking has shown disparate gaze yet similar emotional recognition of social videos. Empathic abilities in autism spectrum disorder are tone of voice, underexplored length of social exchange, oxytocin hormone levels, so we focused on these variables. Thus, we recruited both neurodiverse and neurotypical adults to recognize emotions in film clips. Using an AI-X eye-tracker and iMotions software, participants completed the Reading the Mind in Films Task (Golan et al., 2006), where sound and length of the film clips were edited to produce two main variables (sound vs. mute; brief vs. long clips). Additionally, participants took the Social Responsiveness Scale (SRS-2) and provided saliva which was analyzed for oxytocin. Statistics were run in SPSS, and 2x2x2 (autism x mute x clip duration) mixed-factorial ANOVAs were run on each of the following dependent variables: emotional recognition accuracy and eye fixations on clip characters. Additionally, correlations were run between the above dependent variables and both SRS-2 scores and oxytocin levels. We expect that autistic participants will have similar oxytocin levels and emotional recognition across all conditions. We also expect that autistic participants have a more holistic pattern of tracking clips by looking more at background images and obscure details related to SRS scores. This research will provide a clearer understanding of the empathic abilities of autistic adults.

P3.11.17 - Autistic social communication: deficit or difference? An examination and comparison of structural features of conversation in Autistic and non-autistic people through a neurodiversity lens.

R. Cullen1

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Trigger warning: No Trigger Warning





Practical impact: This research challenges the traditional view of autistic individuals as having social communication deficits, suggesting instead that their communication differences are simply distinct styles, not deficits. By comparing structural communication differences between autistic and non-autistic individuals, the study aims to show that these differences do not necessarily hinder effective communication, especially in same-neurotype interactions. This research offer a shift in perspective, re-framing communication challenges as joint issues between neurotypes, rather than solely the result of Autistic deficits. Ultimately, this work promotes a more inclusive understanding of communication, emphasizing cognitive diversity and the validity of different conversational styles.

Abstract body: This PhD research challenges the view Autistic individuals have social communication deficits (Tager-Flusberg, 2007) by investigating their structural communication differences from non-autistic individuals in semi-structured conversations. It examines whether and how such differences affect communication in same- and mixed-neurotype dyads.

Recent shifts towards conceptualising Autistic individuals as neurodivergent highlight cognitive diversity (Kapp et al., 2013; Pellicano & den Houting, 2022), with Milton (2012) reframing communication breakdowns as a joint issue, where both neurotypes share responsibility for communicative success. This study builds on previous research (Cullen, 2023) showing different usage patterns (e.g., in tense, articles) between Autistic and non-autistic individuals, suggesting Autistic individuals may process linguistic phenomena differently. The current research asks whether these differences are different manifestations of effective communication, rather than reflecting a deficit in Autistic people.

Three experiments explore objective (e.g., turn duration, turn-taking, repair, and backchanneling) and subjective aspects of conversation. In Experiment 1, 20 dyads (10 per neurotype) engage in semi-structured conversations, split into three 10-minute sections with different topics. Participants complete a questionnaire on conversational effectiveness (Grice, 1989). It is hypothesized that Autistic participants will exhibit structural communication differences from non-autistic participants, but that these differences will not negatively affect communication in same-neurotype dyads.

Experiment 2 features two 15-minute conversations: one with a same-neurotype partner and one with a different neurotype partner. In mixed-neurotype dyads, structural differences are hypothesised to negatively impact communication.

This research provides new insights into communicative challenges, reframing them as arising from distinct conversational styles rather than an inherent Autistic disorder.

Plain English version: This PhD research challenges the common belief that Autistic individuals have social communication deficits. Instead, it examines how Autistic people communicate differently from non-autistic individuals in semi-structured conversations, and whether these differences impact communication in conversations with both same- and mixed-neurotype partners. Recent views in autism research emphasize cognitive diversity, suggesting that communication breakdowns may be a shared responsibility between neurotypes, rather than solely due to autistic communication deficits.

Building on earlier work that showed Autistic and non-autistic individuals responded to language differently, this study asks whether these differences represent effective communication rather than a deficit. Three experiments were conducted to explore both objective measures (how long each person talks, turn-taking, repair and backchanneling) and subjective experiences of communication. In the first experiment, 20 pairs of participants (10 Autistic and 10 non-autistic) had conversations on three different topics. They were then asked to rate how effective they felt the conversation was. It was expected that Autistic participants would show differences in communication style, but these differences would not negatively affect communication in sameneurotype pairs.

The second experiment involves conversations with both same- and mixed-neurotype partners. It was hypothesized that communication differences might create challenges in mixed-neurotype interactions.

This research offers new insights into communication, suggesting that Autistic individuals' unique





communication styles should be understood as different but valid, rather than as a disorder or deficit.

P3.11.18 - Exploring Social Learning Pathways for Autistic Adolescents

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Trigger warning: No Trigger Warning

Practical impact: This research can offer further understanding of autism and how autistic adolescents prefer to learn social skills, which can better inform educational systems, supports and/or accommodations, and policy development to improve their learning experiences.

Abstract body: Over the past decade, autism research has shifted significantly from the medical model of disability to the neurodiversity paradigm. However, while the neurodiversity paradigm is gaining popularity, the application of this approach in research regarding how autistic adolescents perceive social learning strategies is still underexplored. Therefore, this study aims to explore the perspectives of autistic adolescents (aged 14-22) on the most effective social learning strategies that respect their agency and autonomy. Semi-structured interviews were conducted with 10 adolescent Australians, employing a phenomenological approach to explore the strategies they perceive as most effective, based on their lived experiences. An inductive reflexive thematic analysis was adopted to honour their diversified perspectives, while utilising reflexive practices to acknowledge researcher subjectivity and its potential influence on the data. Analysis through a social constructivist, neurodiversity lens, yielded the construction of three primary themes: (1) 'social performance,' (2) 'social context of school,' and (3) 'personal context.' These themes, and their subsequent subthemes, highlighted the nuanced experiences of autistic adolescents when performing social skills, particularly in the context of educational environments, while also considering personal factors that may influence an autistic individuals' ability to socialise within largely neurotypical contexts. These results further the current understanding of autism and preferences for social learning, under a neurodiversity lens, contributing to the inclusive educational reform for autistic students. However, given the small sample size and lack of diversity among participants, future research with a larger, more diverse sample could offer significant insiahts.

P3.11.19 - Autistic Communication in the Workplace and in Relationships

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Trigger warning: No Trigger Warning

Practical impact: Hearing from another autistic person some of the strategies that worked for me in navigating relationships and workplace culture and politics, such as learning about and using different communication styles (high context v. low context, explicit v. implicit, etc.), when it's best to use in-person/verbal communication or to use written communication in various contexts, learning why and how to use small talk to establish commonality and build rapport, recognizing and honoring your own communication needs, navigating different work contexts such as holiday parties, meetings, working remotely, etc., building workplace peer relationships, managing up and across, and many more.





Abstract body: 85% of autistic people with a college degree are unemployed/underemployed (Autism Society, 2025). Multiple studies show that autistic adults report lower life satisfaction rates than non-autistic adults (Graham Holmes, L. et.al., 2020; Mason, D., et.al., 2018; Ayres, M. et.al., 2017).

Differences in communication needs play a huge role in these statistics. I noticed this as I was navigating my own employment and relationships, before I knew I was autistic. Workplaces felt like alien planets where people communicated with each other in strange ways.

My husband became an instrumental resource for me as I began my career – helping me read between the lines of my coworker's interactions, guiding me through seemingly simple decisions that could have big impacts, such as: when to call a coworker versus when to write an email; tips for making "small talk" easier and being ready for impromptu updates with supervisors in the break room, and so on.

I looked for more resources to help me continue growing professionally, especially after my diagnosis, but could find nothing that spoke to me as an autistic communicator. So my husband and I wrote our own resource. Thousands of people have read our book, which blows my mind, and many have shared how much it helped them understand themselves, their loved ones with autism, and how to communicate better, whether they were autistic or not.

We're in the process of writing another book, focusing on how we work together as a neurodiverse couple and as parents of neurodivergent children.

P3.11.20 - ☐ Using the BOSA as part of Autism identification in Child and Adolescent Mental Health Services

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Trigger warning: Mental illness

Practical impact: Standardised tools are often used in autism identification by professionals. They are often designed not with the autistic experience in mind. This study looks as the use of remote observation using the Brief observation of Symptoms of Autism (BOSA) to provide a more neuroaffirming experience for adolescents attending mental health services and exploring autistic identity.

Abstract body: In best practice guidelines for formal autism identification, it is recommended that standardised tools be used to help professionals form clinical judgement. The Brief Observation of Symptoms of Autism (BOSA) was developed as a remote option, and offers flexibility in delivery to suit the autistic person's preferences. This pilot research explores the usefulness of this tool in autism identification in Child and Adolescent Mental Health Services. The method shows significant levels of agreement with the more traditionally used ADOS tool. An autoethnographic exploration of clinician experience of this tool in a changing, more neuroaffirmative landscape will also be presented.

Plain English version: Clinicians who support individuals with identifying formally as autistic are encouraged to use certain tools with a lot of research support. A new tool called the BOSA was developed which can be used remotely. The flexibility of this tool opens the possibility of making the identification process more neuroaffirmative. Research in Child and Adolescent Mental Health Service (CAMHS) suggests that it is equally good at identifying autism as other more established tools. This research will be presented and clinician experiences.





P3.11.21 - Associations between Danish parents' intrinsic use of evidence-based support strategies, and developmental characteristics of their recently diagnosed autistic child

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Trigger warning: No Trigger Warning

Practical impact: Having a clear understanding of both the social communication and behavioual strengths and difficulties of a newly diagnosed autistic child, and their parent's abilities to support these, before they enter into a parent-mediated intervention, are vital before evaluating the intervention's efficacy and possible modification opportunities that could best meet a family's needs.

Abstract body: AIMS: To identify Danish parents' intrinsic use of NDBI strategies, characteristics of their newly diagnosed autistic child, and how these may be associated before entry into a randomised clinical trial of a parent-mediated intervention.

METHODS: 280 2-6 year-old Danish children with a new diagnosis of autism spectrum disorder and their parent were included. This cross-sectional study assessed parental NDBI strategy use as measured by the five subdomain and individual strategy item scores of the Measure of Naturalistic Developmental Behavioral Intervention Strategy Implementation - Caregiver Change (MONSI-CC); the child's baseline autism symptom severity, as measured by the Autism Diagnostic Observation Schedule, 2nd Edition, Calibrated Severity Score (ADOS-2 CSS); child expressive language, play skills, and ability to engage with others in play in a familiar interaction, as measured by the three MONSI-CC basis items, Language Level, Play Level, and Dyadic Engagement. Possible relationships between parent and child characteristics will be assessed using two-tailed Pearson correlation coefficients. If significant associations between a subdomain score and a child characteristic are present, associations between that domain's individual strategies and that characteristic will be tested.

OUTCOME: Baseline data analysis for this study is still ongoing. Relationships between MONSI-CC subdomain scores and children's ADOS-2 CSS and MONSI-CC basis items language level, play level, and dyadic engagement scores will be presented.

DISCUSSION: A clear understanding of an autistic child's social communication development and their parent's intrinsic skills is vital before the efficacy of a parent-mediated intervention designed to improve these areas can be evaluated.

Plain English version: This study focuses on understanding Danish parents use of evidence-based support strategies and characteristics of their young autistic child (aged 2–6) before starting a clinical trial of a parent-implemented intervention. 280 children with a new diagnosis of autism and their parent were included. Parents' natural use of strategies shown to support children's social communication development, and their child's autism symptoms, language and play levels, and ability to engage with others in play will be measured. Data analysis is ongoing, and results will explore relationships between parents' strategy use and their child's developmental characteristics. Understanding these possible relationships is critical before evaluating the effectiveness of parent-implemented intervention, whose aim is to improve autistic children's social communication skills and development.





P3.11.22 - Understanding conversational reticence and verbosity in autistic children: are there specific relationships with other characteristics associated with autism?

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Trigger warning: No Trigger Warning

Practical impact: The findings have potential practical impact in UK schools. The ability to manage a conversational topic is specified in the English primary-school curriculum but without teacher guidance on how to scaffold this skill for either neurotypical or autistic children. The research establishes at least two different types of conversational styles (reticence and verbosity) and the characteristics related to them. Children will potentially benefit from increased understanding by adults about how these styles manifest themselves and what factors affect them (e.g. difficulties in speech and grammar might affect reticence differently from verbosity). There is also potential for positive impact for individuals whose social goals include having social contacts and friends, and who wish to gain support with their conversation style from a conversation partner.

Abstract body: Conversational difficulties are an important part of the diagnostic criteria for autism. However, conversational behaviours amongst autistic children are highly variable. Some can be 'conversationally reticent', i.e. passive (or sometimes not responding at all). Another conversational behaviour seen in certain autistic individuals is verbosity. These conversational tendencies might reflect personality traits or the same individual might veer between reticence and verbosity depending on contextual factors, such as topic interest or difficulties managing routine change (Preference for Sameness). Both communication styles have social consequences but to date have received little attention. We investigated the following with parents of 109 six to twelve-year-olds with a

confirmed autism diagnosis. Half attended special schools.

- 1. Do conversational styles in autistic children fall into two types, namely reticent versus verbose?
- 2. What other characteristics of autism influence these styles?

Factor analysis found that a model in which reticence and verbosity are treated as distinct factors gave an excellent account of the data. We also found that greater ADHD traits were consistently related to higher levels of reticence and verbosity. Preference for Sameness was consistently found not to be a significant predictor in either. Greater speech and grammatical difficulties were consistently found to predict higher levels of reticence – but were not related to verbosity. For children's interests, findings depended on the measure used. Interest Intensity was not a significant predictor but Circumscribed Interests was a strong predictor of both verbosity and reticence. We discuss implications for supporting autistic children to achieve their social goals.

P3.11.23 - Partnered Perspectives: Investigating Interpersonal Communication Dynamics in Autistic and Non-Autistic Dyads

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Trigger warning: No Trigger Warning

Practical impact: This work provides valuable insights into how different dyad pairings—autistic-autistic, non-autistic-non-autistic, and mixed neurotype pairs (one autistic and one non-autistic)—influence social experiences and rapport. The findings highlight the critical role of language-based behaviours in shaping positive interactions across these pairings and offer practical strategies to foster inclusive communication. Mixed neurotype pairs benefit from fostering understanding and rapport through clear verbal engagement signals, such as timely acknowledgements (e.g., "mhm," "uh-huh"), and ensuring both individuals have sufficient speaking turns. These behaviours can bridge communication differences and create more equitable opportunities for engagement.

In matched neurotype pairs, the findings suggest different patterns. Autistic-autistic pairs benefit significantly from longer speaking turns and frequent verbal acknowledgements, which are particularly effective in improving rapport. Non-autistic pairs also benefit from active listening behaviours, but the effects are less pronounced, indicating the importance of tailoring communication strategies to each pairing type. These findings are relevant for educators, employers, and community leaders aiming to create neurotype-inclusive environments where open discussions about individual preferences and neurotypes are encouraged. For example, matched neurotype interactions can provide comfortable, affirming settings for autistic individuals, while mixed neurotype interactions can be improved through training in active listening, awareness of conversational styles, and promoting understanding of different communication preferences.

Families, peers, and caregivers can also use these insights to foster more positive social experiences for autistic individuals by encouraging behaviours that facilitate engagement, such as clear verbal signals of attentiveness and the flexibility to accommodate varying conversational styles. Transparent discussions about neurotype, as highlighted in this research, can help create environments where individuals feel safe expressing their identities, fostering mutual understanding and inclusivity. By focusing on how dyad pairings influence communication and rapport, this work underscores the importance of recognising and adapting to neurotype-specific communication needs. These findings provide a foundation for improving inclusivity and connection in social, educational, and professional contexts.

Abstract body: Interactions can vary depending on the neurotype of the speakers (autistic or non-autistic) and whether partners share the same or different neurotype. We aimed to identify which aspects of communication—language use, behaviour, or movements—drive differences in feelings of rapport in mixed and matched neurotype pairs during a brief, unfamiliar interaction. Pairs (20 autistic pairs, 17 non-autistic pairs, and 17 mixed autistic-non-autistic pairs) engaged in a five-minute, video-recorded conversation. A neurodivergent team conducted the research, and autistic experiences informed our hypotheses. A preregistered analysis examined how behaviours in the interaction (e.g., length of speech, verbal backchannels) influenced rapport. Autistic participants reported lower rapport than non-autistic participants ($M_{diff} = 63.32$, d = .99, 0-500 scale). However, rapport for autistic individuals increased when they had longer speaking turns and when they knew their partner was also autistic. Additionally, more frequent verbal acknowledgements boosted rapport for all participant pairs, with the strongest gains in autisticautistic pairs. Notably, only linguistic features (e.g., speaking turns) were associated with rapport, while movements and other behavioural cues did not significantly predict it. Subtle languagebased differences—longer turns and timely acknowledgements—can enhance rapport. For autistic individuals, clear verbal signals of engagement and transparency regarding neurotype may promote more positive social experiences. Educators, employers, and families can apply these insights by encouraging attentive listening, providing meaningful feedback, and creating environments where individuals feel comfortable discussing their identities. These steps can foster more inclusive, supportive communities where autistic individuals experience improved rapport and understanding.

Plain English version: People communicate differently depending on whether they are autistic or non-autistic, and the way two individuals are paired—whether both are autistic, both are non-autistic, or one of each—affects how they feel about the interaction. This study explored which aspects of communication, such as language use, verbal responses, or movements, influence feelings of connection (rapport) in these pairings. Fifty-four pairs of people (20 autistic pairs, 17 non-autistic pairs, and 17 mixed pairs of one autistic and one non-autistic person) had a five-





minute conversation that was video-recorded. The study was led by a neurodivergent research team, with autistic experiences shaping the research questions and analysis. The results showed that autistic participants generally reported lower feelings of rapport compared to non-autistic participants. However, rapport improved for autistic participants when they had longer speaking turns and when they knew their conversation partner was also autistic. Across all pairs, frequent verbal acknowledgements, such as "mhm" or "uh-huh," helped build rapport, with the strongest effects seen in autistic-autistic pairs. Notably, language-related behaviours, like speaking turns and verbal acknowledgements, were the key predictors of rapport, while physical movements or other behavioural cues did not have a strong impact. These findings highlight that subtle changes in communication, like allowing more speaking time and giving clear verbal signals of engagement, can improve social interactions. For autistic individuals, being open about neurotypes and using clear verbal signals can lead to more positive social experiences. These insights can help create more inclusive environments in schools, workplaces, and communities.

P3.11.24 - A review of training and confidence in managing those with ASD and behavioural emergencies in autistic people in ambulance personnel

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Trigger warning: No Trigger Warning

Practical impact: May improve interaction with first responders

Abstract body: I am a GP with a special interest in ASD. I also have a personal interest as my 18 year old step son has non verbal ASD with an intellectual disabilty. I wanted to look into the pitfalls of him accessing emergency services and see if training was given to first responders or even wanted. I did my thesis as part of a Masters in Immediate Care Medicine in 2022. I sent a questionnaire to a number of local ambulance personnel. These questions included asking if they had had any official training as part of their current job, if they had any experience/training in a previous job and did they have any personal experience of looking after someone with ASD. I also asked if they felt confident managing patients with ASD in an emergency situation. In the results 100% of respondants had less than 10 hours of training, most had none and 100% would welcome further training.

While this was initally a reasearch project, I have given lectures based on a made up scenario involving my step son to discuss what ASD is, how broad a presentation it has and how to be more prepared in managing an emergency if you have little to no experience in caring for an autistic person. I feel this topic could be either a research abstract or a personal account that could help highlight the issue oflack of experience in the majority of health care workers.

P3.11.25 - Describing, understanding, and supporting the communication of autistic people during experiences of distress

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Trigger warning: No Trigger Warning

Practical impact: This oral presentation involves presenting the results of a scoping review to better understand experiences of autistic people and to support communication during experiences of distress. The scoping review has the practical impact of shedding light on how the academic literature discusses communication for autistic people in periods of distress, and what strategies can be supportive. I also plan to focus on practical strategies such as universal access to augmentative and alternative communication, and how principles of trauma and violence-informed





care can help support autistic people. The focus of the oral presentation is applicable to autistic people themselves to discuss what can support their communication when things feel challenging/distressing. The oral presentation is also highly applicable to service providers and will hopefully provide them valuable information on how to better understand and support autistic people during experiences of distress.

Abstract body: Introduction/research question: Many factors, including unsupportive environments, experiences of trauma, sensory overload, burnout, inertia, meltdown & shutdown (BIMS), and co-occurring diagnoses (e.g., anxiety), contribute to experiences of distress for autistic people. The academic literature provides limited evidence on how communication is impacted during experiences of distress, and what behaviours by others can be supportive for autistic people.

Methods/approach/outcome: We will present the results of our team's scoping review exploring how the communication of autistic people during experiences of distress is described in the literature. Our team was comprised of a speech-language pathologist (SLP), occupational therapist (OT), psychologist, and two SLP students. We will share how the 19 included studies described the communication of autistic people during experiences of distress, the presence/absence of autistic perspectives in the literature, and what strategies were cited as helpful.

Discussion/implications: We will then expand our discussion to communication strategies autistic people can use to self-advocate and get the support they need. We will also tie in literature on trauma and violence-informed care as universal design principles to support everyone, including autistic people. This scoping review sheds light on how the academic literature describes communication for autistic people in periods of distress, and what strategies can be supportive, presented by a speech-language pathologist on behalf of the interdisciplinary research team.

P3.11.26 - Communication mode preferences in the autistic community

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Trigger warning: No Trigger Warning

Practical impact: To date, there has been little work on the communication mode preferences of autistic people, and this has mainly been based on parent or carer report on behalf of children rather than asking autistic adults themselves. As autistic adults are the ones largely co-ordinating their own lives via the various communication options available, understanding which are most and least accessible, and why, forms an important evidence base for asking services to ensure they offer equitable access. Our research showed that phone calls, which many providers rely or even insist on (e.g. phone calls to make or change healthcare appointments), are the least preferred option for autistic adults in almost every scenario. Being able to show that this is the case, and the reasoning for it, means that autistic people now have empirical evidence behind requests for reasonable adjustments to alternative communication options being available.

Abstract body: Background: The communication skills and styles of autistic people have been the focus of much research, but little work has explored the communication preferences of autistic adults themselves. This means that we do not know how to support effective communication for autistic adults in a range of contexts, such as employment, education, research, and service engagement, as well as in their relationships. This study was the first to examine how autistic adults prefer to communicate in multiple scenarios.

Methods: Two hundred and forty-five autistic adults completed a novel questionnaire that required six communication modes to be ranked in order of preference across seven different scenarios. Participants also provided qualitative responses to further explain their rankings, and completed the Autism Quotient, the Generalised Anxiety Disorder scale and the Camouflaging Autistic Traits Questionnaire.

Results: Quantitative data indicated that email ranked highly when accessing services, seeking customer support and communicating about research. When communicating with family, friends,





in employment and in education, both face-to-face and written modes (email or text message) were preferred. In the qualitative data, four main themes were identified: *Not the Phone, Written Communication, Masking versus Autistic Communication* and *Avoiding Communication*. **Conclusions**: There is a clear message that mode of communication can be either enabling or disabling for autistic people. A reliance on phone calls can create barriers to access, yet the option to adopt written forms of communication can improve accessibility. For known connections, the preference for face-to-face communication is dependent upon how close and accepting the relationship is.

Plain English version: There has been a lot of research into things like how autistic people's communication styles are different to those of non-autistic people, especially among children. This has tended to focus on parent reports and experiments, rather than asking autistic people about their own experiences and preferences regarding communication. This means that we are lacking sigificant insight into what autistic adults actually think and do in their everyday lives in terms of managing their communication needs. This study was the first to ask autistic adults how they prefer to communicate in different scenarios (e.g. at work, in education, when accessing services, taking part in research, with family, and with friends). We asked whether they preferred to use a range of methods, such email, phone calls, letters and live messaging, getting them to rank the options from most to least preferred. We then asked people to explain their rankings, so that we could understand what it was which was good or bad about different options for them. When contacting unknown people or organisations, we found that generally email was preferred, and phone calls were very unpopular. However, for friends, family and people they felt comfortable with, they preferred both face-to-face and written forms of communication (e.g. email and text message). The findings suggest that services should move away from a reliance on phone calls. They should make sure that access to support is not dependent on the phone, and instead offer written options which are more accessible.





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Presentations where the author is the presenter are highlighted in bold font.

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