

She Wears Her Mask Too Tight

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Have you ever been told that you should smile more because it would make you prettier? Almost every woman I know has been told that at least once in their lifetime, the men I know cannot say the same. It is no secret that women and men are treated differently in today's society. Unfortunately, this differential treatment finds a home in the medical community, as well as the autism community. Countless women with autism fall under professionals' radars. In "I was diagnosed with autism at 33. Here is why autism diagnostic tests leave females behind" from Chicago Tribune, Aspen Matis (2023) shares her story of late diagnosed autism and how she thinks it happened to her. Matis shares that masking, misdiagnosis, misinformation, and outdated testing methods were responsible for her and many other women falling under the radar of autism detection. She calls for assessment methods to compensate for gender-based differences in how autism appears. I want to take Matis' statement one step further and show that the way autism appears in women has a direct correlation to how society treats them. This treatment and its repercussions are rooted in the medical system, social norms, and biased diagnostic criteria. The combination of those three things makes it very easy for women to hide their autism, or not even know that it's there.

In Aspen Matis' (2023) article, "I was diagnosed with autism at 33. Here is why autism diagnostic tests leave females behind", she reminisces about her childhood. She states, "Throughout adolescence, I did my best to mirror the social behavior of my most 'normal' peers, copying the way they walked and flipped their hair. [...] On sidewalks, I practiced smiling at strangers, and they often smiled back. Still, I felt like an alien impersonating a human." What Matis described is called "masking". This is when people with autism learn how to hide their behavior and appear "normal". This is done to make it easier for autistic people to make friends

and survive in many different social contexts. Although masking is present in both sexes, it is more common in women, and begins at a young age. As a woman with autism myself, I am no stranger to masking. It is how my autism went undetected until I was nineteen. While I masked in social situations, I also masked when I was alone. I tried to suppress behaviors or thought processes I viewed as abnormal. The people in books and television didn't think or act the way I did, so I concluded that there was something wrong with me. As an adult, I can look back and remember situations where I masked, and it is very difficult to unlearn.

One reason masking has become so prominent in women is that it is widely acknowledged that boys are more rambunctious when they're children, and it is not so acceptable for girls to do the same. When young girls do display "boyish" behavior such as roughhousing, being loud, or being energetic, they are told that their behavior isn't ladylike or that they are odd. These comments can be detrimental to any girl, but to girls with autism who are trying to express their needs, this can be their cue to mask. People with autism naturally feel like they don't belong and are outcasts. So, when their sensory seeking behavior or different way of communicating is criticized, they learn to change it so they may appear more "normal". This is reinforced in many social structures throughout their teenage years, and even adulthood. While masking, people with autism quite literally suppress themselves and their needs, wants, or ways of communicating, which can cause them to lose their sense of self, and only intensifies the masking. In her article, "Masking and Mental Health in Women with Autism" Claire Jack (2021) writes, "Many women with autism become so skilled at masking they don't know they're doing it. One study showed that it may not be until later in life that women's social difficulties become too great for them to manage with their usual camouflaging strategies". So, when women do eventually seek diagnoses, they have become so good at masking, that it's hard for them to drop. This can lead to being turned away by medical professionals or misdiagnosis.

Additionally, women are much more likely to receive a medical misdiagnosis in any health regard than men. In “Gender bias in medical diagnosis” Jayne Leonard (2021), a counselor and psychotherapist, writes, “Even after controlling for higher rates of mental health conditions in women, women still receive a disproportionate number of mental illness diagnoses.” This may also be attributed to the fact that women who go to the doctor with physical ailments are more likely to be dismissed as sensitive or hysterical and be diagnosed with a mental illness instead of a physical one. Now, women with autism must enter the medical field on the platform of not being believed. Along with this, the bar for women with autism to be diagnosed is set much too high due to the gender bias behind the diagnostic criteria for autism. In a study on sex-based differences in autistic traits, it was discovered that “Overall, this pattern of findings suggests that the females who ultimately met criteria on gold-standard diagnostic measures were more severely affected in real-world settings than their male counterparts. This may be an indication that females required a stronger manifestation of autistic traits in order to meet criteria on gold-standard measures” (Ratto et al., 2018). To add the cherry on top, Matis states, “The majority of autism assessment tests and diagnostic criteria were derived from research studies involving the observation of boys, not girls” (2023). With the foundation of autism resting on boys, the different behaviors of autistic girls were already at risk of being overlooked. And when women with autism are dismissed because of these biases, they are usually given a different diagnosis or none at all. The most common ones include depression, anxiety, borderline personality disorder, and attention deficit/hyperactivity disorder. Despite this, women with autism are much more likely than men with autism to be diagnosed with depression and anxiety. These misdiagnoses are not harmless. They can lead to “inappropriate or ineffective treatment, even exacerbating some of autism’s most debilitating symptoms” (Matis, 2023).

In recent years, the rate of women with autism being diagnosed has gone up, which is a great start. In order to make diagnosis easier and more accessible for women with autism, we need to put gender bias to a stop and reconsider the diagnostic criteria for autism. Every person with autism is different, so we need to be sure that the autism assessment is inclusive of that. I am a woman with autism; I have multiple other diagnoses and I have been misunderstood since I was child. This resulted in a lifetime of me masking and asking what is wrong with myself. I have had to watch friends and family go through the grueling process of realizing that they were misdiagnosed and misunderstood by medical professionals, and the world, and it's heartbreaking. The process of discovering my autism has been long and difficult, as it has been for many other women. Personally, figuring out my brain, and why it works the way it does, was a relief, and hopefully other women feel the same. Finally feeling understood is a great way to put a smile on my face, so no need to ask me to smile, I got it.

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