



# “It’s all theatre and my mask unintentionally broke”: Conscious camouflaging in Spanish autistic women and non-binary individuals with late detection

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## ABSTRACT

The Autism Spectrum Condition (ASC), from the paradigm of neurodiversity, is a lifelong condition that shapes a unique perception of the world. Within this development of characteristics, individuals often adopt strategies and behaviours to navigate the neurotypical social world, effectively camouflaging their differences and challenges. However, the extent to which autistic individuals are aware of their own camouflaging is underexplored. This study aims to amplify the voices of autistic women and gender-dissident individuals to explore a) the stability of camouflaging strategies across the lifespan, b) how late detection affects these strategies, and c) the awareness and motivations behind camouflaging behaviours. A group of 34 Spanish women and non-binary individuals, aged 18 to 56, with late detection, were interviewed—fourteen participants in interviews and the remaining twenty through a written format. Following the Reflexive Thematic Analysis model, three main themes were constructed: (1) “From the Oppressive Mask to Well-being: The Importance of Detection”, (2) “Pretending My Best Normal” and (3) “Understanding: Releasing Guilt, Embracing My Identity”. Most participants tried to fit in by imitating behaviours, structuring conversations, and adopting neurotypical behaviours, often more than intended. These efforts, driven by a need to belong, avoid conflict, or perform well, negatively impacted their health. The impact varied with the participant’s self-awareness of these strategies.

### Plain language summary.

Camouflaging, or masking, is a complex aspect of socialization and identity for autistic individuals. It involves adopting behaviours and strategies to fit into neurotypical social expectations, often at the cost of one’s well-being. Understanding this phenomenon requires exploring the motivations behind it, its impact, and whether individuals are aware of their masking behaviours. Lack of awareness can negatively affect the mental and physical health of autistic people.

This study focused on late-detection autistic women and non-binary individuals to examine the stability of camouflaging strategies throughout their lives, how a late detection influences these strategies, and the level of awareness and motivations behind them. Thirty-four participants, aged 18 to 56, shared their experiences through interviews in their preferred communication format.

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The study revealed that camouflaging, while often a coping mechanism to meet societal demands, can lead to exhaustion and health issues, particularly when there is no clear understanding of one's autistic identity or when societal standards push individuals to mask. Many participants reported being aware of their camouflaging behaviours even before their detection, using these strategies to navigate social situations. The study also highlighted that camouflaging is not exclusive to women but affects gender-dissident individuals as well, which can complicate the detection process for them.

These findings emphasize the importance of viewing camouflaging through a neurodiversity lens to reduce stigmatization and the harmful effects of masking. The research also shows how camouflaging practices evolve after a late detection and underlines the significance of self-awareness in managing these behaviours. While the study's scope was limited by a lack of diverse gender identities, it offers valuable insights into the experiences of late-detection autistic individuals. The findings can inform future research and support strategies for improving understanding and care for the autistic community.

## 1. Background

In many countries, if not the majority, certain systems—such as healthcare, legal, and educational—address disability through a medical model. Although some proponents of neurodiversity also recognize that certain impairments may exist independently of societal context (Dwyer, 2022), disabilities are often better understood through a social model, as they frequently stem from social exclusion and oppression, as is the case with the Autism Spectrum Condition (ASC) (Price, 2024). For this reason, in this research, we approach autism from the paradigm of neurodiversity, considering it a life condition linked to atypical neurodevelopment. This unique form of development, present from birth, leads to a distinct and singular way of perceiving the world (Reaño, 2023). In general, autistic people tend to have a greater capacity for detailed thinking, pattern recognition, and organizing information around their areas of deep interest. They also often exhibit distinctive ways of acquiring and understanding social information, regardless of their intellectual abilities or verbal communication skills (Murray et al., 2017).

Within this development of characteristics to understand social aspects, the use of strategies and behaviours stands out. In some specific cases, to relate to the neurotypical social world (Petrolini et al., 2023), as well as adapt and function in everyday social life, camouflaging their differences and difficulties (Baldwin & Costley, 2016) until they no longer appear autistic (Petrolini et al., 2023). These cognitive, sensory, and behavioural masking experiences are called camouflage (Evans et al., 2024).

Camouflaging strategies consist of various interrelated components, as camouflaging involves blending all these elements together. In other words, strategies are implemented to interact and navigate social contexts while concealing autistic traits (Petrolini et al., 2023). Recognizing this is essential to understanding the impact of these strategies on individuals' lives. According to Hull et al. (2019), the components of camouflaging include: (a) assimilation, understood as the need to act due to not finding social interaction to feel natural—either avoiding it or requiring support; (b) compensation, which involves adopting neurotypical social behaviours by observing and learning from others in social settings, as well as from media (e.g., characters) to mimic traits, create conversational scripts, and/or study interaction rules to adapt them to different contexts; and (c) masking,<sup>5</sup> which entails concealing and controlling autism-related characteristics (e.g., hiding stimming behaviours or forcing eye contact) while reflecting on the impressions one believes they are creating in others.

Therefore, camouflage is a construct that encompasses different dimensions such as objectives (Hull et al., 2017), degree of success (Lai et al., 2021), contexts (Cage & Troxell-Whitman, 2019), the strategies (Lai et al., 2021), and the degrees of awareness and effort involved (Pearson & Rose, 2021). However, the extent to which these dimensions are influenced over time by psychosocial or temporal factors remains unknown (Rui et al., 2023). Some known consequences include a reduced sense of authenticity and identity, as well as difficulty in identifying with the autistic condition (Hull et al., 2021).

Being aware of implementing these camouflaging strategies (Leedham et al., 2019) involves a constant review process to find an explanation for past experiences. This process begins when they receive the diagnosis<sup>6</sup> (Hickey et al., 2018; Hull et al., 2017), since the development of camouflage is inherently linked to the reflective process of personal assessment (Pearson & Rose, 2021). Nevertheless, adopting an autistic identity does not instantly undo the mechanisms that have been relied on for years and have now become automatic (Price, 2024). From the neurodiversity paradigm, for camouflaging to occur, a person must view being autistic as an integral part of their identity (Radulski, 2022). Additionally, they must be aware of how others perceive them and, accordingly, suppress aspects of their identity.

Little is known about the mechanisms that enable these camouflaging skills or the process through which they develop (Beck et al., 2020). However, research has shown (e.g., Lai et al., 2021; Hull et al., 2017, 2021; Pearson & Rose, 2021) that, in some cases, autistic people indicate that these strategies are used more extensively than intended, becoming second nature. As a result, camouflaging can become difficult to stop, because it acquires an unconscious functioning (Bradley et al., 2021). This can generate in them a loss of identity, which could be avoided with early detection and the consequent acquisition of identity, relieving the pressure to conform to neurotypical social standards through the use of camouflage (Cage & Troxell-Whitman, 2019). Therefore, a detection in adulthood—and thus a late detection—may be potentially related to the camouflage of autistic traits (Hull et al., 2017). Inequities in

<sup>5</sup> The authors use the term 'camouflage' consistently throughout for the sake of conceptual clarity; however, when quoting or referring to certain participants, we have chosen not to modify their original language and have retained the term 'masking'.

<sup>6</sup> The term 'diagnosis' will be used when referring to a medical term, whereas 'detection' is framed within the paradigm of neurodiversity and is not understood as a 'label'—and is the preferred term of the autistic community. Detection means "the act and effect of discovering something that was not evident." It conveys a meaning roughly equivalent to that of "diagnosis," although with certain nuanced differences (Reaño, 2024).

detection often mean that girls and women, as well as gender-dissident individuals, go undetected (Cage et al., 2024). This may be due to screening tools that primarily account for male presentations of the condition, overlooking research and detection possibilities across all genders and age groups (D'Mello et al., 2022), as these processes are typically associated with early childhood (Lewis, 2017).

Thus, it is important to understand the motivations that produce the need to carry it out, such as fitting in, obtaining acceptance, avoiding exclusion or stigma (Cage & Troxell-Whitman, 2019); namely, it is related to social expectations (Turbío-Fungueirino et al., 2021). Higher levels of perceived stigma are associated with more intensive camouflaging and greater use of strategies, which correlates negatively with mental well-being (Perry et al., 2022). This can lead to mental health problems such as profound anxiety and depression (Reaño, 2023), given the physical and psychological exhaustion they entail (Bargiela et al., 2016).

Motivations for engaging in camouflaging strategies differ across studies (e.g., Cook et al., 2022; Petrolini et al., 2023; Perry et al., 2022). Generally, most findings indicate that individuals camouflage to avoid appearing autistic to others, while others emphasize the need for social interaction as a driving factor. Additionally, differences are observed between individuals who camouflage across various settings and those who adjust their level of camouflaging depending on the context (Petrolini et al., 2023). Thus, camouflaging may serve as an attempt to manage the disconnect between an autistic person's way of being and the non-autistic social environment (Cook et al., 2022). Therefore, these motivations highlight that autistic people not only camouflage themselves by the desire for social participation, but also by being aware and accommodating during the social demands of the environment. This is compounded by the negative repercussions of standing out (Milton, 2012) and internalizing the stigmatizing attitudes of how they are perceived (Perry et al., 2022). Thus, greater internalization of social stigma generates greater concealment—camouflage—throughout one's life (Rui et al., 2023). Additionally, it is important to note that, like other social phenomena, camouflaging is not solely an individual construct but is inherently tied to social interactions within a broader social context (Jaswal & Akhtar, 2019).

The role that sex and gender play in camouflage is increasingly debated (Pearson and Rose, 2021). According to Lawson (2020), both autistic men and women would be aware of wanting to fit in socially. However, there are no studies with significant results that relate gender and camouflage (Hull et al., 2021). Despite not being exclusive to autistic women, it seems to be especially common in them (Hull et al., 2020) with several qualitative studies that have explored the camouflage experiences of autistic women throughout the life cycle (Tierney et al., 2016)—considering that autistic women are also voluntary participants, motivated by a desire to share their experiences. This is why camouflage is often discussed in relation to sex and female gender and offered as a partial explanation for late or missed detection in autistic women. Autistic women may have a stronger camouflage intention because they experience greater socialization pressure from an early age due to gender stereotypes (Krahn & Fenton, 2012). Therefore, they show higher levels of compensatory camouflage (Wood-Downie et al., 2021), aligning with the idea of managing a stigmatized identity through camouflage (Pearson & Rose, 2021).

Despite the large amount of information regarding camouflaging strategies in recent years, there is a need for more autistic women and other dissident gender identities to narrate their first-person experiences with camouflage throughout their lives. This study is novel due to its unique perspective, focusing on Spanish women and gender-dissident individuals—a population historically conditioned by cultural norms to camouflage their true selves, conforming to expectations of modesty, passivity, and submission—with late detection of autism—a trend that reflects all the difficulties Spanish women and gender-dissident individuals face in accessing a diagnosis. This study aims to analyse and understand whether camouflaging strategies remain stable throughout the life cycle or, alternatively, whether a late autism detection—and the subsequent acquisition of an autistic identity—alters these strategies. In addition, it seeks to establish a continuum regarding awareness of the use of camouflaging strategies, as well as the motivations behind both their implementation and the decision to discontinue them.

## 2. Method

### 2.1. Participants

A total of 34 Spanish—Caucasian—participants (32 women and 2 non-binary) aged between 18 and 56 years ( $M = 31.2$ ,  $SD = 9.35$ ) with late detection of autism, participated and met the following criteria: a) have a formal diagnosis in the autistic condition, b) with late detection, c) are over 18 years of age and d) speak in Spanish. The age of diagnosis ranged between 18 and 56 years ( $M = 26.3$ ), and they had their diagnosis for 2 or less years. As an important fact, the identification of the autistic condition sometimes arises motivated by suspicion or as a result of the detection of one of their children ( $N = 6$ ). See García-Molina and Cortés-Calvo (2025). Participants' social status ranged from low to medium-high, based on direct questions regarding their social status, as well as details about their living situation, family dynamics, employment status, and the type of job they held.

To achieve group homogeneity, participants were excluded if they had: a) any type of diagnosis related to early ASC, b) a severe concurrent intellectual disability, or c) they had any serious communication limitation. The researchers found that the two excluded individuals had received an early ASC diagnosis and also met criteria b) and c). A third party provided written responses on their behalf, making it impossible to confirm whether these women agreed with the responses given.

### 2.2. Materials

The research group “Autistic Women and Gender-Dissident Identities”—comprising mostly autistic members, students, professionals, researchers, and collaborators—developed and reviewed a semi-structured interview. The collaboration of autistic women and experts on gender identity from the Universitat Jaume I contributed to the suitability and formulation of some of the questions. Therefore, themes reflected the research objectives, previous research, clinical knowledge, and the priorities of members of the autism

community (Gowen et al., 2019).

The interview has several clusters of questions, addressing more specific categories such as demographic data (age, sensoriality, sexual orientation, cohabitation and employment situation); a) detection/diagnosis (e.g., How do you think your life has changed after the detection/diagnosis?); b) relationships (family, couple, friendship, work, educational) from a developmental perspective (e.g., Do you think the way you manage or establish your relationships today has changed?), and asking specific questions or information about camouflage (e.g., During this stage, did you use camouflaging strategies?); and c) motherhood (e.g., During your upbringing, did/do you have a network that supports you?).

After each block, the participants were asked if they believed it was necessary to provide any type of information that they considered relevant, and about which they had not been asked in that section. Furthermore, before continuing to ask questions, we anticipated what the next block was and whether they felt comfortable at that moment to talk about it.

All responses were open, and the participants were able to explain their experiences without time or word limits and even at the end of the interview, the participants were offered the possibility of obtaining a transcribed copy of the interview in case they wanted to modify any of the answers or in case they thought it appropriate to eliminate any part of the interview or the entire interview.

### 2.3. Procedure

Ethical approval for this research was granted by the Ethics Commission of the Universitat Jaume I.

The participants were contacted by sending emails to associations or foundations, as well as entities that serve autistic women and gender dissident identities, all of them from the province of Valencian Community, as well as by direct contact by people from this research.

In total, 34 participants were contacted via email and form, and included in the study, of which fourteen participants were interviewed: in person ( $N = 4$ ) and via video call ( $N = 10$ ). The interviews lasted approximately 2 h. Another twenty participants responded the questions in writing: synchronously, via WhatsApp ( $N = 1$ ) that lasted 4 h, and asynchronously, by answering the questions via e-mail ( $N = 1$ ) and form ( $N = 18$ ) that lasted from 35 to 65 min in duration. These options for conducting the interview/questions were provided so that the study was as inclusive as possible.

The face-to-face interviews were carried out in a safe environment, without distractions, in which they could be comfortable and carry it out as they were most comfortable—since they could carry out the interview sitting or standing, configure the space according to their sensoriality, eat during the interviews, use the necessary fidgets, stop as many times as needed, etc. Furthermore, to anticipate the location of the event, photographs of the space where it was going to be held were sent to the interviewees, in the same conditions in which they would find it on the day of the interview.

A main researcher carried out the interview with the support of another through the video call chat, who indicated if information was missing and made notes on key aspects of what caught her attention the most during the interview or the sensations that they provoked—all those aspects were captured in a document for each participant called “Serendipity”. It is important to note that all interviews were recorded with a tape recorder for subsequent transcription and analysis. Only one participant requested the written transcription, but she did not modify her story.

### 2.4. Participatory Methods

This research was conducted using a participatory approach, in which the autistic community played a central role—both as active members of the research team “Autistic Women and Gender-Dissident Identities” (coordinated by the second author of this manuscript) and through the direct involvement of autistic individuals at various stages of the process. The research topic and interview questions were shaped by the perspectives of the autistic collaborators, including autistic students, researchers, participants, and a translator. In addition to publishing our findings in academic manuscripts, we regularly share results with the broader public through workshops, videos, and community meetings.

### 2.5. Data analysis

The data analysis was carried out through the reflective Thematic Analysis process of Braun & y Clarke (2006, 2023) to develop thematic patterns through the data collected that address the interests of this research, through the use of the transcription of the interviews.

In this case, a critical realist framework was chosen to make sense of the data. Therefore, the narratives used in this research were considered as truths for the participants, taking into account the characteristics of the social context without seeking a decontextualized truth (Cook et al., 2021; Houston, 2001; Terry et al., 2017). The data analysis was not a linear process, as the familiarization with the data, coding, and theme development required revisiting and starting over multiple times, until the themes were fully developed and subsequently reviewed. The analysis focused on identifying both semantic (staying close to participants' own understandings of their experiences) and latent meanings in the data (interpreting what lay beneath the surface of participants' accounts), following an inductive approach (Braun & Clarke, 2013). The six phases of Braun & Clarke's (2006, 2023) reflexive thematic analysis were used. The analysis was led by A.R.-Z but followed a collaborative approach with regular input at all stages from stages from I.G.-M.: (i) data familiarisation and writing of familiarisation notes; (ii) systematic data coding (in this study, we deliberately chose not to use software tools, instead favouring a manual process of note-taking and coding to promote deep immersion in the data and contextualised interpretation); (iii) generating initial themes from coded and collated data (the interview transcripts were read

repeatedly to develop the codes, which were then reviewed, using notes, colours, and diagrams); (iv) developing and reviewing themes (codes were grouped to form candidate themes, which were corrected and developed after extensive revision, to ensure they accurately reflected participants' lived realities); (v) refining, defining and naming themes (participants' quotes were used in the subthemes to maintain a close link between the themes and the data); (vi) writing the report. A collective idea within the research team was to visually represent the themes and subthemes through a figure that schematically illustrates both the thematic structure and the main outcomes. Thus, in the reflexive approach we adopted, the core value lies in critical reflexivity, collaborative discussion, and the interpretative sensitivity of the research team.

Participants are identified under the number in which they participated in the research to guarantee confidentiality.

### 3. Results

From the data analysis, three themes were constructed: (1) 'From the Oppressive Mask to Well-Being: The Importance of Detection', (2) 'Pretending My Best Normality', and (3) 'Understanding: Releasing Guilt, Embracing My Identity'. Within these, various subthemes were composed and presented alongside quotes from participants. See Fig. 1.

It is important to note, for accurate understanding, that the themes presented are not entirely separate entities, as there is clear overlap and interaction between each theme. Only by considering how they interact can we assess the impact and significance of each. In some cases, this interconnectedness should be understood as a continuum that evolves along with the individual throughout their life cycle, most notably in Theme 1. In other cases, Themes 2 and 3 establish a continuum regarding the awareness of camouflaging strategies, as well as the motivations behind both their implementation and the decision to discontinue them. Fig. 1 represents a visual image that captures these continuums—such as the shift from camouflaging strategies to their discontinuation, and from external social motivation to internal self-care.

#### 3.1. Theme 1. "From the oppressive mask to well-being: the importance of detection"

This theme refers to the process of gaining awareness about the implementation of camouflaging strategies throughout the life cycle. It is important to note that this awareness is a gradual process; although most interviewees only discovered their condition in adulthood, many reported an awareness of their differences from an early age.

The narratives reveal how participants felt overwhelmed when their surroundings expressed dissatisfaction with them. Experiencing disapproval was so painful that they were willing to do whatever it took to please others. Therefore, during the process of reframing their experiences following their diagnosis, they recognized the need to learn strategies to tolerate this distress and to build self-confidence in advocating for their rights.

##### 3.1.1. Subtheme 1.1 "When you feel like you don't have a personality"

In some cases, participants noted that their use of camouflaging strategies stemmed from a perceived lack of personality, as many

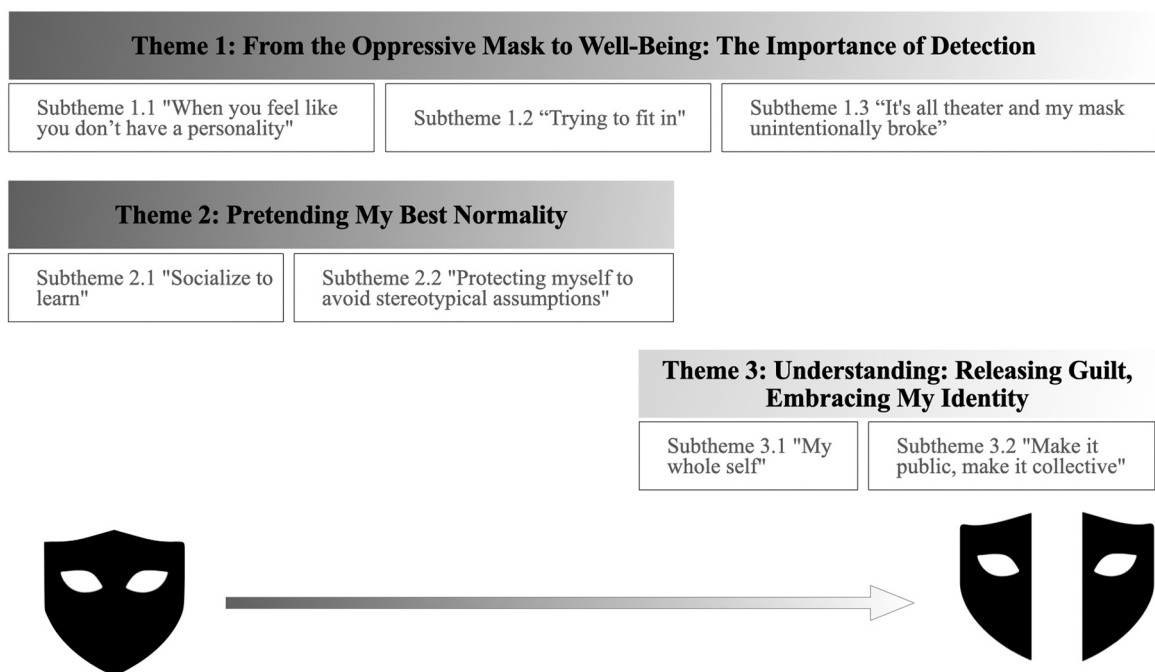


Fig. 1. Themes and subthemes are displayed in a colour gradient, from camouflage to breaking the mask.

recalled similar experiences from their childhood. Across all narratives, they described efforts to meet the expectations placed upon them, showing interest in social relationships simply because it was expected. They all referenced a 'good girl' archetype—quiet, unobtrusive, and pleasing to adults—which their environment often perceived as shyness.

This desire to please reflected their need to fit in and be part of peer groups, as well as to make themselves and their differences less noticeable.

*"The level of awareness you gain as an adult, you don't have it [as a child], but you do notice it—or at least, that's how I felt—you think you don't have a personality" (P4).*

*"I met all the expectations a daughter in the '90s was supposed to: obedient, quiet, and with good grades" (P26).*

### 3.1.2. Subtheme 1.2 "Trying to fit in"

During adolescence, there is a heightened awareness of the differences they perceive between themselves and their peers, leading them to adopt more elaborate strategies to reduce the visibility of these differences and to appear more similar to others. However, despite being accepted within their social groups, they continued to feel different. They often felt that, by implementing these strategies, they were betraying themselves, as they never felt fully comfortable; their inability to establish deep connections resulted from presenting a false personality, preventing them from expressing their true identity.

By late adolescence and early adulthood, this persistent feeling led them to somewhat relieve the pressure in social interactions by structuring conversations in advance through conversational scripts and analysing them afterward. Despite this structuring, feelings of frustration emerged, as even when they were clear about what they wanted to say, they often could not communicate it as intended. Additionally, overanalysing conversations sometimes prevented them from participating as they had initially planned when creating these scripts.

*"Everything is very clear in my mind, but it gets tangled up when it comes out of my mouth" (P15).*

*"Sometimes I feel silly because I think I've come into the conversation too late" (P4).*

*"(On the playground) I never knew how to manage the group dynamics. I didn't know how to join their conversations, so I'd sit in a corner. I didn't contribute anything; I could have been there or anywhere else" (P5).*

However, efforts to minimize perceived differences go beyond creating conversational scripts or masks; they extend to crafting entire personas to fulfil the role they believe society expects of them. These personas, often with certain adjustments, accompany them throughout their lives, allowing them to adapt to the various social contexts they encounter.

*"I had to build a shell for myself. I would take on characteristics from different characters and try them out. I created a persona in adolescence that, in some ways, I still carry with me" (P3).*

### 3.1.3. Subtheme 1.3 "It's all theatre and my mask unintentionally broke"

The point at which awareness becomes most significant is after diagnosis, as, throughout the process of reframing, which involves reflection and the development of a new autistic identity, they decide to stop camouflaging their differences through validation. As a result, they experience a relative inability to implement these strategies. Adopting a new identity does not sharply sever the use of these strategies, as having practiced them for long periods of time, they become internalized and, consequently, automatic. In some cases, it is difficult to distinguish who they truly are from who the mask or persona is.

*"I wouldn't be able to clearly differentiate which traits are my own, the mask, and which ones are from autism" (P25).*

Furthermore, when they become aware of their condition, they begin to question whether it is fair to live concealing their true selves, even apologizing for who they are, in a context that neither understands nor accepts them.

*"(After the detection) many of my facades and efforts fell away spontaneously. Now I try less, although I understand less, but I'm much more relaxed" (P19).*

*"Since the diagnosis, it's much harder for me to hide my autism" (P26).*

At this point, their self-confidence and the ability to accept themselves as they are enables them to handle the rejections and losses that may come with living as their true selves, without the need to please others. In some cases, their social life undergoes a shift, as they seek the solidarity of fellow autistic women, forming new connections and, consequently, expanding their support network.

*"I stopped masking at home because I was tired of it; I needed a safe space. And without realizing it, my mask broke, and now, I can't mask anymore. I try to do it, as a strategy in some contexts, but it's very hard for me" (P3).*

*"(At home) is where I feel comfortable, where I don't have to mask anything, where nothing I say or do makes me anxious" (P4).*

## 3.2. Theme 2. "Pretending my best normality"

The efforts to fit in are influenced by the misunderstanding of their attempts at interaction and the subsequent frustration. When



interactions led to the belief that they were broken or defective, it created feelings of invalidation, and therefore the need to improve the implementation of strategies to better assimilate with their peers in the future.

The women and gender-dissident identities who participated had various motivations for hiding their true identity, including the attempt to form relationships. For others, the goal was to blend in and not appear different. In this sense, we found that camouflaging serves a dual purpose: on one hand, to feel accepted in different contexts, and on the other, to feel secure in various environments.

### 3.2.1. Subtheme 2.1 “Socialize to learn”

All of them describe camouflaging as their primary strategy to hide their differences and, above all, to become like their peers, due to “I’ve always felt like I speak in another language” (P19), “I’ve always felt different” (P20). They even mention that their social relationships were based, not without effort, on learning behavioural patterns to generalize them to other relationships or contexts they found themselves in. In other words, they engage in a meticulous process of studying their peers to achieve social imitation. These skills they learned became internalized, allowing them to generate their own behavioural patterns according to the context.

*“With my friend, basically, she spoke, and I analysed everything she said to learn how to be normal” (P8).*

*“As a child, I made a lot of effort to be like the other girls” (P25).*

### 3.2.2. Subtheme 2.2 “Protecting myself to avoid stereotypical assumptions”

In adulthood, to cope with work situations, they choose to create patterns at work to protect themselves during social interactions, managing to emotionally distance themselves. Additionally, they believe that by carrying out these strategies, they could avoid situations of rejection or harassment after openly sharing their condition.

*“I have to interact with many people every day because I work in customer service. What I really do is like an actress. I create a character... (Other people) tell me, you have a stable job, you’ve been working at the same place for years, and I say (that) I know, but I’ve created a pattern at my job” (P2).*

## 3.3. Theme 3: “Understanding: releasing guilt, embracing my identity”

The detection and understanding of the possibility of a new, now complete self, offered many of the women and gender-dissident identities the opportunity to let go of guilt. Recognizing that there was nothing wrong with them, that it was okay to be who they were, rather than the image they had tried to project to the world, was liberating. This is the first step toward regaining control and self-understanding. At times, this is associated with unmasking, as it is understood as a way to overcome internalized stigma, allowing them to fully live their identity.

### 3.3.1. Subtheme 3.1 “My whole self”

The diagnosis provides them with a new perspective, through which they can reexamine aspects of their past that previously lacked explanation. Experiences throughout their life (e.g., bullying, academic struggles, difficulties in social relationships, etc.) begin to be understood from the standpoint of a new identity. Autism allows them to offer a plausible explanation for why they felt a certain way when interacting (e.g., frustration, fatigue, pain) while dealing with these feelings daily. They started to realize that the comparisons they had been making for so many years, along with their efforts to assimilate that way of relating, had led to feelings of frustration and guilt, as they were judging an incomplete sense of self. After the detection, the shift in how they evaluated themselves allowed them to release that guilt.

Before the detection, the focus was on making deliberate efforts to interact, despite the toll it took on their physical, psychological, and emotional health. With the detection, they shifted the focus onto themselves to make belonging to groups possible through their whole self, respecting themselves in order to stop diminishing their quality of life.

*“Now (after the detection) I have learned that I don’t have to be with everyone if I don’t want to. I just don’t feel like it. Now I know how to say no, although it’s hard for me. That’s why I feel this way now, trying to find myself. I want to find my true self, my real face; I want to take off the mask” (P2).*

*“My quirks now I know that they are not a necessity” (P16)*

### 3.3.2. Subtheme 3.2 “Make it public, make it collective”

Most participants were in a reflective period due to their recent detection, however, they try to raise awareness about the autistic community, aiming to engage society in the need for a shift toward accepting neurodiversity, so that they no longer have to implement camouflaging strategies. In some cases, they even go on to create associations or self-managed support groups.

*“It’s necessary to create groups to help raise awareness and stop the condition from being a social taboo” (P21).*

*“It’s political to be autistic in a world that’s not adapted for me. Making it public is about claiming spaces, it’s like making it collective” (P6).*

The reflections gathered throughout these themes may indicate the complexity of camouflage and the interaction between the

subthemes discussed. Despite all that has been presented, camouflage goes beyond what has been covered here, as it is inherently tied to the individual's experience and dependent on each person's process of re-signification based on their acceptance of their autistic identity, a process in which the participants are still immersed.

#### 4. Discussion

This study gives voice to a group of Spanish autistic women and gender-dissident individuals through qualitative interviews, from which various patterns were generated to better understand their experiences with camouflage. Their narratives offer insight into the evolution of camouflaging strategies both before and after detection/diagnosis, eventually leading to identity acquisition through self-reflection and personal assessment.

Despite the recent increase in research on camouflage, little is still known about how decisions to employ and adapt these strategies evolve and change. Nonetheless, the interviewees in this study, consistent with previous research (e.g., Griffiths et al., 2019), report a shift from apparent mimicry—imitating expressions—to a more elaborate form of camouflage, in which they come to understand the meaning of social interactions (Schneid & Raz, 2020). Gradually, this leads to a breakdown in the need for these strategies.

Awareness of the use of camouflaging strategies appears across all life stages for most participants. Some individuals perceive that, although they began camouflaging in childhood, it may have gone unnoticed—either because it was less sophisticated at the time, because they attributed less significance to it, or simply because it had become a lifelong, habitual behavior. Others explain that full awareness of camouflage did not emerge until late adolescence or adulthood. However, these findings do not align with the current scientific literature, which suggests that awareness of camouflage is tied to both detection and the subsequent acquisition of identity (Radulski, 2022). According to existing research, awareness involves an analytical process of past experiences following the detection of autism (Hickey et al., 2018) and personal reflection (Pearson & Rose, 2021). Thus, further research is needed to determine whether pre-detection awareness of camouflage exists, as observed in these cases.

What is clearly observed in the narratives is that both the detection and process of reframing their experiences represent a profound shift for participants, often leading to a gradual reduction—either partially or entirely—in their use of camouflaging strategies. This act of ‘dropping the mask’ contrasts with the narratives of other autistic participants who reported not knowing how to do so (Reframing Autism, n.d.). Initially, they seek safe spaces (e.g., the home) where they can stop using these strategies, eventually extending this openness to other settings. This process fosters the development of a positive autistic identity, enabling them to present themselves as they truly are (Rui et al., 2023).

The motivations driving the use of camouflaging strategies are geared toward adapting to predominantly neurotypical environments. Narratives reveal that seeking social acceptance, belonging to groups, or avoiding rejection—relational reasons—are more common motivations in childhood and early adolescence (Loo et al., 2023). In contrast, conventional motivations—focused on functional purposes—are more prevalent in late adolescence and adulthood. Additionally, it is important to note that the camouflaging strategies implemented are individualistic, serving as a coping mechanism against stigma and discrimination through the learning of culturally accepted behaviors—as plausible forms of self-protection (Silvermint, 2018). In doing so, individuals can better handle the social pressures of neurotypical settings (Lawson, 2020), adopting the identity of a non-stigmatized group. Thus, we must not overlook the modulatory role of society in shaping these strategies, as it may perpetuate, teach, or reinforce such behaviors—whether explicitly or implicitly (Evans et al., 2024).

Furthermore, the way society reacts when the condition is disclosed is a crucial factor. Upon revealing their autistic identity, ableist reactions from those around them often underscore a lack of understanding, particularly among family members (García-Molina, 2024). For years, families had witnessed their efforts to conform to societal expectations, sometimes even requesting that they continue these efforts, doubting or dismissing their autistic identity. Consequently, many autistic women and gender-dissident individuals expressed a strong need to seek solidarity and support from autistic friends and peers.

It is important to note that, despite the belief that belonging to a socially accepted group would lessen psychological distress, the need to camouflage learned traits can actually contribute to increased physical, mental, and emotional health issues. This may lead to what is known as autistic burnout, along with a diminished sense of personal authenticity (Arnold et al., 2023). In this regard, some individuals report a loss or lack of identity, as they are still in the process of re-signifying their self-concept following a recent detection. Others, however, embrace their autistic identity as a political act, advocating for the rights of neurodivergent individuals in society, demanding recognition, and creating spaces for inclusion and participation.

In a novel approach, this study highlights the importance of understanding the development of camouflaging strategies across the lifespan, the impact of detection and diagnosis on these strategies, and the motivations for change. Additionally, it aims to make a tentative contribution—given the limited research in this area—regarding the awareness of using camouflaging strategies beyond that which is gained through detection, as suggested in current scientific literature.

This study has its limitations. In particular, it is important to note the limited representation of diverse gender identities among participants. Future studies should, therefore, expand gender representation to more thoroughly evaluate whether camouflaging is expressed or perceived in ways that are distinctive to different gender identities. In addition, it would be valuable to explore how other factors, such as the intersection of gender with variables like culture, sexual orientation, and age, might influence the experience and awareness of camouflage and autistic identity. In this line, for instance, simply being aware of one's difference may, in itself, be a reason to engage in camouflaging as a self-protective response to an environment that does not embrace difference, and which is intensified by experiences of rejection (Sánchez, 2024; Silvermint, 2018).



## 5. Conclusion

To conclude, the narratives reveal that late detection aligns with the understanding of it, as all individuals were in a process of re-signification. During and after the detection process, they have all been immersed in a profound analysis of their past experiences, realizing that those feelings—feeling broken, strange, or different—were simply characteristics of their autistic identity, as they had turned their lives into a forced performance, leading to depersonalization, driven by a society influenced by ableism (Reaño, 2023). This is why studies like this can raise awareness in the scientific community to work alongside them in this process, helping them understand that autism is intrinsic to their identity. Furthermore, promoting a neurodiversity approach can empower them to feel proud of their autistic neurotype while embracing their uniqueness. Therefore, it is crucial to design new therapy methods and educational programs that respect neurodiversity and do not promote camouflaging, in contrast to traditional approaches (e.g. Applied Behavior Analysis; ABA) which aim to “normalize” behavior rather than valuing and supporting neurocognitive differences (Loo et al., 2023).

This study, therefore, aims to advance the understanding of autism from a gender perspective, as diagnosis should not be seen as an unattainable goal, making it possible for cases like those presented here to be diagnosed at an early age (García-Molina, 2024). In this regard, it is important for the scientific community to give voice to women and gender-diverse identities through qualitative research, as without them, it is impossible to understand their reality.

## CRedit authorship contribution statement

**Irene Garcia-Molina:** Writing – original draft, Validation, Supervision, Investigation, Conceptualization. **Ainhoa Rodríguez-Zafra:** Writing – original draft, Methodology, Investigation, Funding acquisition, Formal analysis, Data curation, Conceptualization.

## Ethical approval and informed consent statement

This study was approved by the Universitat Jaume I Ethics Committee (approval no. CD/08/2022) on August, 2022.

The authors have obtained informed consent from each participant, which includes details about the research group’s ideology and the objectives they aim to achieve through the interviews in which the participants took part.

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## Declaration of Competing Interest

The authors declare that they have no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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## Data Availability

Data will be made available on request.

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