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The Clinical Science of Treatment of Challenging Behaviours in High Functioning Women with Autism Spectrum Disorder

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Background: Autism in women is often poorly recognised. Awareness for this diagnosis is on the raise and more and more women with affective disorders, diagnosed as borderline personality disorders, OCD or substance abusers are acknowledged to have an underlying diagnosis of ASD. Diagnosing `autism in women is more than merely labelling them with a classification.

Results: The multilayer diagnostic process helps to understand the behavioural problems in relation with the interaction with the (clinical) environment (van Wijngaarden-Cremers 2014). Autism in women represents a new challenging puzzle for health care professionals. Females with ASD may display severe challenging behaviour: aggression, rage and self-harm. These behaviours serve a different goal than in males. In males want to gain objects whereas females want caregivers attention. The disruptive dynamics within a clinical group of females with ASD are due to the deviant communicative style and complex interaction problems. Structure and other strategies, which are useful in early childhood, are no longer appropriate in adulthood. Parents and caregivers are permissive because they think their patient/child should not be held accountable for its behavioural outburst: 'they cannot help it'. This will be illustrated by systematic case studies from our department

<u>Conclusions:</u> The treatment of women with Autism requires the development of new diagnostic, strategic and clinical management skills and competencies in clinical workers.

reference: P.J.M. van Wijngaarden-Cremers, P. van Deurzen, I. Oosterling, W. Groen, M. Langen, A.L. Lagro-Janssen,R.J. van der Gaag. Een veranderende kijk op psychiatrische stoornissen (changing views on psychopathology). Tijdschr Psychiatr. 2014 in press.