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# The Impact of Social Support on Camouflaging Behaviors Among Young Adults With Autism Spectrum Disorder: Exploring Protective and Risk Factors

Mofoluwakemi Omololu Johnson  
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# Walden University

College of Allied Health

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Mofoluwakemi Omololu Johnson

has been found to be complete and satisfactory in all respects,  
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2025

Abstract

The Impact of Social Support on Camouflaging Behaviors Among Young Adults

With Autism Spectrum Disorder: Exploring Protective and Risk Factors

by

Mofoluwakemi Omololu Johnson

MSW, University of Ibadan, 2007

BSc, University of Ilorin, 2003

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Clinical Psychology

Walden University

August 2025

## Abstract

Camouflaging strategies used by individuals with autism spectrum disorder (ASD) to mask or compensate for autistic traits are often linked to adverse mental health outcomes. This quantitative correlational study investigated the relationship between perceived social support and camouflaging behaviors in young adults with autism. Grounded in social identity theory and the double empathy problem, the study addressed three research questions: (a) the relationship between perceived social support and the extent of camouflaging, (b) how support from different sources (family, friends, significant others) influences frequency and intensity, and (c) the extent to which perceived support predicts specific camouflaging strategies (masking, compensating, assimilating). Participants (ages 18–30; N = [100]) completed the Camouflaging Autistic Traits Questionnaire and the Multidimensional Scale of Perceived Social Support. Results indicated that higher levels of social support, especially from family, were associated with reduced camouflaging behaviors. These findings suggest that meaningful social connections may buffer against the psychological costs of camouflaging and underscore the need for inclusive, affirming environments for autistic individuals. Implications for mental health practitioners, educators, and policymakers are discussed, with recommendations for neurodiversity-affirming interventions and future research.

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## Dedication

This dissertation is dedicated to my beloved daughter, whose light inspires me daily to strive for excellence and perseverance.

To my parents, thank you for your unwavering love, guidance, and sacrifices that laid the foundation for my journey.

To my siblings, your support and encouragement have been a constant source of strength.

And to my significant other, your patience, understanding, and steadfast belief in me made this accomplishment possible.

With deepest gratitude and love, I dedicate this work to all of you.

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This accomplishment is as much yours as it is mine.

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## Chapter 1: Introduction to the Study

Camouflaging behaviors among individuals with autism spectrum disorder (ASD) have become a critical focus in psychological and social research due to their profound impact on social functioning, mental health, and overall well-being. These behaviors involve conscious or unconscious strategies employed by autistic individuals to conceal or compensate for their autistic traits, allowing them to navigate neurotypical social expectations (Hull et al., 2019). While camouflaging can facilitate social acceptance and mitigate immediate stigma, it is frequently associated with negative psychological consequences, including heightened stress, anxiety, and depression (Lai et al., 2017). Despite the increasing recognition of camouflaging's role in autistic individuals' lived experiences, research on its contributing factors, particularly the role of social support, remains limited.

Social support plays a crucial role in influencing mental health and social adaptation for individuals with ASD. It can serve as a protective factor that alleviates the psychological toll of camouflaging or function as a risk factor when individuals experience inadequate or unsupportive environments (Cage et al., 2018). However, while existing research highlights the benefits of social support on well-being, its direct influence on camouflaging behaviors among young adults with ASD remains underexplored. Addressing this gap is crucial for informing targeted interventions that promote neurodiversity-affirming environments, reduce the need for camouflaging, and improve overall mental health outcomes. I examined the relationship between perceived social support and camouflaging behaviors, focusing on various sources of support, including family, friends, and significant others.

This chapter provides a comprehensive overview of the study. It begins with background information on camouflaging behaviors, their psychological implications,

and the relevance of social support in ASD research. A presentation of the research questions and hypotheses follows the problem statement and purpose of the study. Additionally, the theoretical framework underpinning the study and the nature of the research methodology are discussed. The chapter concludes with definitions of key terms, assumptions, scope, delimitations, limitations, and the significance of the study, establishing a foundation for understanding its objectives and contributions.

### **Background**

Camouflaging, also referred to as masking, is a behavioral adaptation strategy widely observed among individuals with ASD aimed at enhancing social integration and minimizing social stigma. This process often involves mimicking neurotypical expressions, suppressing autistic traits, and adopting rehearsed social scripts to conform to mainstream cultural norms (Bradley et al., 2021). While camouflaging may enable individuals with ASD to navigate social settings more effectively, research has consistently linked it to adverse psychological outcomes, including increased anxiety, depression, and emotional exhaustion (Hull et al., 2019). The strain of sustained masking can lead to burnout, identity confusion, and even suicidal ideation.

Despite the growing body of literature on the consequences of camouflaging, research exploring its protective factors, such as social support, remains sparse. Social support is widely recognized as a critical determinant of mental health and adaptive functioning in ASD populations, yet its role in moderating the effects of camouflaging remains unclear. Perceived social support from family, friends, and significant others may either buffer the psychological distress associated with camouflaging or reinforce the need for masking by imposing neurotypical expectations (Cage et al., 2018). Investigating this relationship is essential for understanding how various sources of

support influence camouflaging behaviors and mental well-being among young adults with ASD.

This study builds upon existing research by examining the role of perceived social support in influencing the frequency and intensity of camouflaging behaviors. By analyzing variations in support from various sources and considering demographic factors such as age, gender, and socioeconomic status (SES), this research aims to provide a nuanced understanding of how external support networks impact the experience of autistic individuals. Findings from this study may contribute to the development of interventions that foster environments promoting neurodiversity, self-acceptance, and psychological well-being.

### **Problem Statement**

The increasing prevalence of camouflaging behaviors among individuals with ASD highlights a critical need to understand their psychological toll. While camouflaging may offer short-term social benefits, research consistently associates it with significant adverse mental health outcomes, including elevated anxiety, depression, and diminished self-esteem (Bernardin et al., 2021; Bradley et al., 2021; Hull et al., 2017). The persistent pressure to mask autistic traits often results from societal stigma and misconceptions about autism, leading to internalized distress and long-term psychological consequences (Zhuang et al., 2023).

Despite substantial evidence linking camouflaging behaviors to adverse mental health effects, limited research has examined whether social support can mitigate these effects. Given the well-documented protective role of social support in mental health, investigating its potential influence on camouflaging behaviors is crucial. Addressing this gap helped determine whether perceived social support serves as a buffer against the psychological distress associated with camouflaging and

whether various sources of support contribute uniquely to this relationship. This study explored these questions, providing empirical insights into how social support impacts camouflaging among young adults with ASD.

### **Purpose of the Study**

This quantitative study examined the relationship between perceived social support and camouflaging behaviors in young adults with ASD. The study aimed to investigate whether social support serves as a protective factor that mitigates the psychological burden of camouflaging or if specific types of support exacerbate these behaviors. Specifically, it examined whether support from family, friends, and significant others influences camouflaging behaviors.

The independent variable in this study was perceived social support, measured using the Multidimensional Scale of Perceived Social Support (MSPSS; Ebrahim & Alothman, 2021; Zimet et al., 1988). The dependent variable was camouflaging behaviors, assessed using the Camouflaging of Autistic Traits Questionnaire (CAT-Q; Bureau et al., 2024). By analyzing these variables, the study aimed to enhance the understanding of how social support influences adaptation strategies in individuals with ASD.

### **Research Questions and Hypotheses**

RQ1: What is the relationship between perceived social support and the extent of camouflaging behaviors among young adults with ASD?

- Ho1: There is no significant relationship between higher levels of perceived social support and lower levels of camouflaging behaviors.
- Ha1: Higher levels of perceived social support are significantly associated with lower levels of camouflaging behaviors.

RQ2: How do various sources of social support (family, friends, and significant others) influence the frequency and intensity of camouflaging behaviors among young adults with ASD?

- Ho2: Social support from family does not have a stronger inverse association with the frequency and intensity of camouflaging behaviors compared to support from friends and significant others.
- Ha2: Social support from family has a stronger inverse association with the frequency and intensity of camouflaging behaviors compared to support from friends and significant others.

RQ3: To what extent does perceived social support predict engagement in specific camouflaging behaviors (e.g., masking, compensating, assimilating) among young adults with ASD?

- Ho3: Perceived social support does not significantly predict a decreased likelihood of masking, compensating, or assimilating behaviors.
- Ha3: Higher levels of perceived social support significantly predict a decreased likelihood of engaging in masking, compensating, or assimilating behaviors.

### **Theoretical Framework for the Study**

This study was grounded in social identity theory (SIT; Tajfel & Turner, 1986) and the double empathy problem (DEP) (Milton, 2014), both of which provide essential frameworks for understanding camouflaging behaviors in individuals with ASD.

SIT explains how individuals derive their self-concept from group memberships and adjust their behaviors to conform to social norms. In the context of ASD, SIT helps explain why autistic individuals engage in camouflaging behaviors as

a means of aligning with neurotypical expectations to gain social acceptance. Camouflaging, particularly masking and compensating, can be seen as a strategy to reduce perceived differences and minimize social exclusion (Cage & Troxell-Whitman, 2019). However, this often comes at a psychological cost, leading to internalized distress and identity conflict (Mandy, 2019).

The DEP (Milton, 2014) complements SIT by challenging the traditional deficit-based view of autism. The DEP posits that communication difficulties between autistic and neurotypical individuals arise from a two-way misunderstanding rather than solely due to autistic individuals' cognitive or social deficits. From this perspective, camouflaging behaviors are a response to external social pressures and a strategy to mitigate miscommunication in interactions with neurotypical peers. The DEP suggests that improving societal understanding of ASD and increasing acceptance of neurodivergent social norms could reduce the need for camouflaging behaviors.

In this study, I applied SIT to examine whether perceived social support influences the extent of camouflaging behaviors and whether different sources of support (family, friends, significant others) reinforce or alleviate these behaviors. Additionally, the DEP offers a lens to interpret the role of social expectations in camouflaging, highlighting the potential for interventions that promote social environments where autistic individuals feel less pressured to conform.

### **Nature of the Study**

This study employed a quantitative, correlational design to examine the relationship between social support, camouflaging behaviors, and associated protective and risk factors among young adults with ASD. A correlational approach is well-suited for identifying associative and predictive trends between variables,

allowing for an objective assessment of how perceived social support influences camouflaging behaviors. This design is commonly utilized in social and behavioral research because it can establish relationships between variables without manipulation, ensuring that the results reflect real-world dynamics (Creswell & Creswell, 2023). The structured methodology involved using validated self-report scales, which enhanced the reliability and precision of data collection, supporting the study's goal of quantifying the impact of social support on camouflaging behaviors.

The independent variable in this study was perceived social support, measured using the MSPSS, a validated self-report tool assessing support from family, friends, and significant others (Ebrahim & Alothman, 2022). The dependent variable was camouflaging behaviors, assessed using the CAT-Q, which evaluates three distinct components of camouflaging: compensation, masking, and assimilation (Bureau et al., 2024). Data were collected through a cross-sectional online survey administered to young adults aged 18–30 who self-reported an ASD diagnosis. Participants were recruited through online platforms, such as SurveyMonkey, to ensure accessibility and broad representation. The questionnaire included the MSPSS, CAT-Q, and demographic questions to provide a comprehensive dataset for analysis.

Data were analyzed using multiple regression analysis using SPSS version 28 to assess the predictive strength of total perceived social support on overall camouflaging behaviors. Multivariate analysis of variance (MANOVA) examined the effects of various sources of social support (family, friends, significant others) on specific camouflaging strategies (masking, compensating, and assimilating; Field, 2022).

## Definition of Terms

*Assimilation:* Assimilation in the context of ASD refers to an individual's effort to integrate into neurotypical social structures by adopting behaviors that minimize their perceived differences (Cook et al., 2021).

*Autism spectrum disorder (ASD):* ASD is a neurodevelopmental condition characterized by challenges in social communication and interaction, as well as restricted and repetitive behaviors, interests, or activities, which typically emerge in early childhood and vary in severity, often co-occurring with other conditions such as anxiety or sensory sensitivities (American Psychiatric Association [APA], 2022; Lord et al., 2022).

*Burnout:* Burnout is a state of physical, emotional, and mental exhaustion resulting from prolonged social or cognitive demands, often exacerbated in individuals with ASD who engage in persistent camouflaging. (Raymaker et al., 2020).

*Camouflaging:* Camouflaging refers to the intentional or subconscious use of behavioral strategies by individuals with ASD to mask, compensate for, or change their social and communication differences to align with neurotypical social norms. (Hull et al., 2019).

*Compensation:* Compensation involves developing alternative cognitive or behavioral strategies to navigate social interactions despite underlying communication or difficulties with social reciprocity (Livingston et al., 2020).

*Masking:* Masking is a specific form of camouflaging in which individuals with ASD consciously or unconsciously suppress behaviors or expressions of their autism-related traits to conform to social expectations (Mandy, 2019).

*Social support*: Social support encompasses the perceived or actual availability of emotional, informational, instrumental, or companionship help provided by one's social network (Taylor et al., 2022).

### **Assumptions**

It was assumed that participants provided correct self-reports about their experiences with social support and camouflaging behaviors. Self-report measures are commonly used in psychological research and are effective in capturing subjective experiences, particularly in populations with ASD (Hull et al., 2017). However, potential biases, such as social desirability bias or difficulties in self-awareness, may have impacted the accuracy of responses. To mitigate these concerns, validated instruments were used to ensure reliable measurement of key constructs.

The MSPSS and the CAT-Q were selected for this study due to their established validity and reliability. The MSPSS is widely used for assessing perceived social support from family, friends, and significant others, demonstrating strong psychometric properties across diverse populations (Ebrahim & Alothman, 2022). Similarly, the CAT-Q has been validated as an effective instrument for measuring different dimensions of camouflaging behaviors, including masking, compensating, and assimilating, among individuals with autism (Bureau et al., 2024). Using these validated instruments enhanced the study's ability to assess the relationship between social support and camouflaging behaviors accurately.

This study also involved the assumption that the sample was representative of young adults with ASD. Participants were recruited using online survey platforms and ASD advocacy networks to ensure broad accessibility. However, some selection bias may have existed due to the reliance on self-selected participation and online recruitment methods, which may have overrepresented individuals who were more

socially engaged or had access to digital resources (Robinson et al., 2020). Despite these limitations, including a diverse sample in terms of age, gender, and SES helped enhance the generalizability of the findings.

Ultimately, I assumed that social support influenced camouflaging behaviors to some extent. While some studies suggest that strong social support networks reduce the need for camouflaging by fostering acceptance and self-expression (Cage et al., 2018), others indicate that certain forms of support may reinforce camouflaging by imposing neurotypical expectations (Mandy, 2019). This study aimed to clarify the relationship between social support and camouflaging behaviors by examining the impact of various sources of social support on these behaviors, thereby contributing to a more nuanced understanding of how social environments influence the adaptive strategies of individuals with autism.

### **Scope and Delimitations**

This study focused specifically on young adults aged 18 to 30 with ASD who are capable of self-reporting their experiences with camouflaging behaviors and social support. The age range was chosen to capture individuals navigating key transitional phases of adulthood, such as higher education, employment, and social relationships, where camouflaging behaviors may be particularly relevant (Hull et al., 2017). Self-reporting enabled participants to reflect on their subjective experiences, which was essential for understanding how perceived social support influences camouflaging behaviors in real-world contexts.

To maintain measurement validity, individuals with severe intellectual disabilities or those unable to self-report were excluded from participation. While ASD is a heterogeneous condition with varying levels of cognitive and communicative ability, self-report tools such as the CAT-Q and the MSPSS require a

certain level of cognitive and introspective ability to accurately complete (Bureau et al., 2024; Ebrahim & Alothman, 2022). Excluding individuals who may have difficulty with self-reporting ensures that the data collected are reliable and accurately reflect participants' experiences with camouflaging behaviors and social support.

A key limitation of this study was that it did not include longitudinal data, which prevented the establishment of causal relationships between social support and camouflaging behaviors over time. Instead, the study employed a cross-sectional design, capturing associative relationships between variables at a single point in time. While this approach was practical for identifying patterns and correlations, it did not allow for examining how social support may influence camouflaging behaviors over months or years (Creswell & Creswell, 2023). Future research should consider employing longitudinal or experimental designs to assess whether changes in social support predict reductions or increases in camouflaging behaviors over time, thereby providing a clearer understanding of the cause-and-effect relationships in this domain.

### **Limitations**

One limitation of this study was its cross-sectional design, which restricted the ability to establish causal relationships between social support and camouflaging behaviors. While the study identified associations and trends, it could not determine whether higher levels of social support directly caused reduced camouflaging behaviors or if individuals who already engaged in less camouflaging were more likely to perceive higher social support. Establishing causality would require a longitudinal or experimental design, where changes in social support and camouflaging behaviors are tracked over time to observe directional effects (Creswell & Creswell, 2023). Without this temporal element, the study remained correlational, which limited its ability to make definitive causal claims.

Another potential limitation is self-report bias, as participants may have underestimated or overestimated their engagement in camouflaging behaviors. Self-report measures, such as the CAT-Q and the MSPSS, relied on participants' subjective evaluations, which could have been influenced by memory recall difficulties, social desirability bias, or lack of awareness of one's behaviors (Hull et al., 2017). This is particularly relevant in ASD populations, where differences in introspection and self-perception may impact the accuracy of responses (Cage et al., 2018). While validated measures enhance reliability, potential biases in self-reporting remained an inherent limitation of the study.

Additionally, the generalizability of the findings was limited. The study focused exclusively on young adults aged 18–30 who are capable of self-reporting, meaning the results may not apply to children, older adults, or individuals with severe ASD-related impairments. The exclusion of individuals with significant cognitive or communication difficulties ensured measurement validity but restricted the applicability of the findings to the broader ASD population (Robinson et al., 2020). Future research should consider expanding the sample to include a wider age range and individuals with varying support needs, utilizing alternative methodologies such as caregiver reports or observational measures to capture a more comprehensive understanding of camouflaging behaviors across different ASD subgroups.

### **Significance**

This study contributes both theoretically and practically to the growing body of literature on ASD, camouflaging behaviors, and social support. The research expands current theoretical frameworks and offers actionable insights for mental health professionals, educators, caregivers, and policymakers.

From a theoretical perspective, this study advances SIT (Tajfel & Turner, 1986) and the DEP (Milton, 2014) by exploring how social group membership and expectations influence camouflaging behaviors in ASD. SIT provides a framework for understanding why autistic individuals engage in camouflaging as they attempt to conform to neurotypical social norms to gain social acceptance. The DEP complements this by emphasizing that miscommunication between autistic and neurotypical individuals is a two-way issue rather than a deficit solely on the part of autistic individuals. By examining the role of perceived social support as a predictor of camouflaging behaviors, this study addresses a critical gap in ASD research. Prior studies have explored the negative psychological consequences of camouflaging (Hull et al., 2019; Mandy, 2019), but few have investigated whether social support influences the extent to which autistic individuals engage in these behaviors. The findings contribute to a more nuanced understanding of how social environments shape autistic adaptation strategies, offering new empirical insights into the relationship between social expectations, support, and mental health outcomes in ASD populations.

From a practical standpoint, this research informs mental health professionals about the potential benefits of fostering supportive environments that reduce the need for camouflaging behaviors. Autistic individuals who feel socially accepted and understood may experience less pressure to mask or modify their behaviors, leading to improved mental health and overall well-being (Cage et al., 2018). Additionally, this study helps educators and caregivers develop neurodiversity-affirming interventions that promote authentic self-expression rather than social conformity. Research suggests that autistic individuals who feel supported in their natural communication styles experience greater self-acceptance and lower levels of distress

(Mandy, 2019). By identifying how different sources of social support impact camouflaging behaviors, the study guides targeted intervention strategies that emphasize acceptance over assimilation.

Beyond mental health and education, the findings offer policy recommendations for social inclusion initiatives that promote the acceptance of autistic communication styles. Public awareness campaigns, workplace accommodations, and inclusive community programs could help reduce the societal pressures that drive camouflaging behaviors. More broadly, this research contributes to social change by advocating for a shift away from deficit-based perspectives on autism toward a model that values neurodivergent authenticity and reduces the pressures associated with camouflaging. By emphasizing the importance of social environments in shaping the behaviors and mental health of autistic individuals, this study supports the development of more inclusive and supportive communities that empower autistic individuals to engage authentically in social interactions.

### **Summary**

Chapter 1 established the foundation of this study by outlining its purpose, significance, and background. It introduced the theoretical framework grounded in SIT. It described the research design, which employs a quantitative approach to investigating the relationship between social support and camouflaging behaviors among young adults with ASD. The chapter also addressed the study's limitations, delimitations, and assumptions. The primary objective was to explore how social support impacts camouflaging behaviors and to identify protective and risk factors associated with this relationship. Using multiple regression analysis and SPSS version 28, I aimed to evaluate whether mental health variables mediate the relationship between social support and camouflaging behaviors.

Chapter 2 transitions into a detailed review of the relevant literature. In it, I examine the existing research on ASD, camouflaging behaviors, their psychological implications, and the role of social support in mitigating these challenges. This literature review provides the necessary context and rationale for the study, highlighting knowledge gaps and further solidifying the need for this investigation.

## Chapter 2: Literature Review

### Introduction

The increasing prevalence of ASD highlights the critical need to understand how individuals navigate social environments, particularly during young adulthood, a period marked by significant developmental transitions. ASD is a complex neurodevelopmental condition affecting cognitive, social, and behavioral functioning, with approximately 2.21% of adults in the United States diagnosed with the disorder (Centers for Disease Control and Prevention [CDC], 2020). Young adults with ASD frequently encounter challenges in social interaction, independent living, and employment, which can impact their overall well-being (Taylor et al., 2022). To manage social expectations, many autistic individuals employ camouflaging, an adaptive strategy designed to reduce the visibility of autistic traits in social settings (Keating et al., 2021). Camouflaging consists of two primary approaches: compensation, which involves actively learning and applying social skills to navigate interactions, and masking, which entails suppressing behaviors such as stimming to conform to neurotypical norms. While these strategies can enhance social inclusion, they often lead to psychological distress, including increased stress, anxiety, and emotional exhaustion (Cage et al., 2018). Given these challenges, it is imperative to explore how social support influences camouflaging behaviors and whether it serves as a protective factor in mitigating the psychological costs associated with this phenomenon.

Social support plays a crucial yet complex role in the well-being of autistic individuals, acting as both a protective factor and, in some cases, a potential risk factor depending on its availability and quality. Research indicates that positive social support can alleviate stress and enhance overall well-being, while a lack of support or

negative social interactions can exacerbate mental health challenges (Crane et al., 2018). Different types of social support, including emotional, instrumental, and informational support, may vary in their impact on autistic individuals, with emotional support often demonstrating the strongest association with psychological well-being (Charlton et al., 2022). The transition to adulthood is challenging for those with ASD, making appropriate and sustained social support essential (Robinson et al., 2020; Weiss & Robinson, 2020). Despite the growing recognition of camouflaging behaviors and their consequences, research exploring the interaction between social support and camouflaging in young adults with ASD remains limited, constraining the development of effective interventions tailored to their needs. This chapter will first restate the problem and purpose of the study, emphasizing the need to investigate the impact of social support on camouflaging behaviors. It will then review existing literature, highlighting the multifaceted nature of camouflaging and its implications for mental health. The chapter will explore the role of social support in mitigating these behaviors and examine factors such as gender and cultural differences in camouflaging tendencies. SIT will also be introduced as the theoretical framework, explaining how in-group and out-group dynamics influence the social adaptation strategies of individuals with autism. The final section will summarize key findings, laying the groundwork for the study's objectives and contributions to the field.

### **Literature Search Strategy**

The literature search was conducted using a comprehensive approach incorporating multiple library databases and search engines. Databases accessed included PsycINFO, PubMed, ERIC, and SAGE Journals, which are well-regarded for providing a wealth of resources in psychology, education, medicine, and social sciences. Key search terms and combinations used in the search included *autism*

*spectrum disorder, camouflaging behaviors, social support, anxiety, depression, emotional burnout associated with autism, social relationships, and social identity theory.* These terms were strategically combined to target research focusing on the primary variables of this study, such as the interaction between camouflaging behaviors and social support, as well as related psychological outcomes.

The scope of the literature review was limited to peer-reviewed articles published within the last five years, ensuring the inclusion of current and relevant findings. However, seminal works, such as Tajfel and Turner's (1979) foundational research on SIT, were also incorporated due to their critical relevance to the theoretical framework. Sources reviewed included empirical studies, meta-analyses, systematic reviews, and theoretical papers, ensuring a well-rounded understanding of the topic. In cases where little current research existed, such as studies examining the interaction between social support and camouflaging behaviors, the review expanded to include dissertations, conference proceedings, and exploratory studies addressing related constructs. This approach ensured that the review captured established knowledge and emerging perspectives on the intersection of autism, social support, and camouflaging behaviors.

### **Theoretical Framework**

SIT (Tajfel & Turner, 1986) and the DEP (Milton, 2014) provide the theoretical foundation for this study. SIT explains how group membership influences self-concept and behaviors, suggesting that autistic individuals may camouflage to align with neurotypical norms and gain social acceptance. The DEP challenges the traditional deficit-based view of autism, emphasizing that misunderstandings in social communication are bidirectional. These frameworks guide the investigation of how

perceived social support influences camouflaging behaviors and the extent to which different sources of support reinforce or alleviate masking tendencies.

### **Social Identity Theory**

The SIT provides a foundational framework for understanding why individuals with ASD may feel compelled to engage in camouflaging behaviors to conform to neurotypical social norms. Developed by Tajfel and Turner (1986), SIT posits that individuals derive a significant portion of their self-concept from group memberships, which offer social identity and a sense of belonging. Group identification shapes behavior, as individuals tend to align with the norms and expectations of the groups they perceive as socially valuable. For individuals with ASD, this often translates into suppressing autistic traits or adopting neurotypical behaviors to enhance social acceptance and avoid exclusion (Perry et al., 2022). However, this alignment comes at a psychological cost, as the pressure to conform may lead to stress, anxiety, and internal conflicts between personal authenticity and societal expectations. SIT thus provides a critical lens for examining the motivations behind camouflaging and the potential benefits of fostering inclusive social environments that validate and accommodate neurodiverse identities rather than compelling autistic individuals to conform to traditional norms.

SIT proposes that group affiliation influences self-esteem, self-perception, and social behavior (Tajfel & Turner, 1986). In societies where autistic traits are often stigmatized, individuals with ASD may engage in camouflaging as a strategy to improve their social standing. Rivera and Bennetto (2023) argue that due to negative stereotypes surrounding autism, many autistic individuals engage in masking behaviors as a coping mechanism, reinforcing the idea that social identity, when dictated by societal conventions, shapes behavioral adaptation. In contrast, research

suggests that identifying with an autistic community can promote mental well-being and reduce the pressure to camouflage. Camus et al. (2023) found that autistic individuals report greater social self-efficacy and improved mental health when interacting with fellow autistic individuals, indicating that affirmative social identity within neurodiverse groups diminishes the perceived need for masking. Similarly, Maitland et al. (2021) demonstrated that autistic individuals who engage with multiple social groups, including autism-focused communities, report lower levels of depression and enhanced overall well-being, reinforcing the idea that positive group affiliations mitigate the adverse effects of camouflaging.

### **Double Empathy Problem**

An additional theoretical perspective relevant to this study is the DEP. This concept extends SIT by emphasizing the bidirectional nature of social miscommunication between individuals with autism and those who are neurotypical. Traditionally, social deficits in ASD have been attributed to autistic individuals' inability to understand neurotypical communication styles (Grice, 1975). However, the DEP, as articulated by Milton (2012), suggests that the difficulty is mutual, with neurotypicals also struggling to interpret autistic communication. Camus et al. (2023) argue that this breakdown in reciprocity underscores the need for individuals with autism to conceal their differences as they strive to bridge the gap in social understanding. However, if neurotypicals actively engage in efforts to understand and accept autistic communication styles, the social pressure to camouflage may be significantly reduced. This aligns with SIT's emphasis on group identity and in-group/out-group dynamics, suggesting that increased autism acceptance could alleviate the psychological burden associated with masking and encourage authentic self-expression.

The selection of SIT and the DEP as theoretical frameworks is grounded in their ability to contextualize camouflaging as a socially constructed phenomenon influenced by group identity and reciprocal social interactions. This study builds on previous applications of SIT in ASD research by explicitly investigating the role of social support in reinforcing or alleviating the need for camouflaging. The research questions explore whether social support from different sources (family, friends, and significant others) influences camouflaging behaviors and whether greater social acceptance reduces the perceived need for masking. In doing so, this study not only extends existing literature but also challenges traditional deficit-based models of ASD by emphasizing the importance of social identity and reciprocal understanding in shaping autistic experiences. Ultimately, this research contributes to a broader discourse on neurodiversity, acceptance, and the development of more inclusive social environments that validate autistic identities rather than promoting conformity.

### **Literature Review Related to Key Variables and/or Concepts**

#### **Introduction**

This literature review examines the relationship between social support and camouflaging behaviors among young adults with ASD. Camouflaging, which involves masking or modifying autistic traits to conform to societal expectations, is increasingly recognized as a coping strategy used by autistic individuals to navigate social environments (Cage & Troxell-Whitman, 2019). While social support is well established as a key factor influencing mental health outcomes, its specific impact on camouflaging behaviors remains underexplored. This review synthesizes current research on ASD, camouflaging behaviors, and social support, highlighting protective and risk factors. Furthermore, the discussion explores the strengths and limitations of

existing methodologies, identifies gaps in the literature, and justifies the selection of the variables examined in this study.

### **Autism Spectrum Disorder (ASD) and Social Challenges**

ASD is a neurodevelopmental condition characterized by deficits in social communication, restrictive and repetitive behaviors, and sensory sensitivities (American Psychiatric Association, 2022). Young adults with ASD often face difficulties in forming social connections, maintaining employment, and achieving independence due to societal stigma and limited access to appropriate support systems (Taylor et al., 2022). The social expectations placed on individuals with ASD can lead to increased feelings of isolation, anxiety, and depression, further complicating their ability to navigate social relationships. Given these challenges, many autistic individuals resort to camouflaging strategies to mitigate social barriers and enhance their inclusion in neurotypical settings.

### **Camouflaging Behaviors in Autism**

Camouflaging involves concealing or compensating for autistic traits to fit into neurotypical social environments. This process consists of two primary strategies: masking, where individuals suppress behaviors such as stimming or avoiding eye contact, and compensation, where they develop learned social scripts to improve interactions (Hull et al., 2017). Research suggests that camouflaging is a common but exhausting practice, with studies indicating that approximately 70% of autistic individuals engage in these behaviors (Mandy, 2019). Although camouflaging may facilitate social acceptance in the short term, it has been linked to adverse psychological consequences, including identity confusion, emotional exhaustion, and heightened stress (Bradley et al., 2021; Zhuang et al., 2023).

Cremonese et al. (2023) found that individuals with higher cognitive functioning were more likely to engage in camouflaging, as they are more aware of societal expectations but struggle to meet them naturally. This creates a paradox where individuals with ASD must exert significant cognitive effort to mask their traits, leading to long-term mental health deterioration. Research also highlights gender differences in camouflaging, with women more likely to engage in masking due to societal expectations regarding social behavior (Lai et al., 2017). While camouflaging can provide short-term social benefits, its long-term psychological toll underscores the need to explore factors that may alleviate its adverse effects, including social support.

### **The Role of Social Support in ASD and Camouflaging**

Social support, encompassing emotional, instrumental, and informational assistance, is essential to mental health and overall well-being. Studies suggest that strong social networks can buffer the psychological impact of stress, promote self-acceptance, and improve coping mechanisms (Taylor et al., 2022). In the context of ASD, social support from family, friends, and community networks plays a critical role in mitigating the challenges associated with camouflaging behaviors (Cage et al., 2018).

While some research has explored the role of social support in autism, there is limited understanding of how different types of support influence camouflaging.

Bradley et al. (2021) found that individuals who received positive social reinforcement were less likely to engage in masking, suggesting that acceptance within social circles can reduce the pressure to conform to societal norms.

Conversely, inadequate social support can exacerbate feelings of isolation, leading individuals to rely more heavily on camouflaging as a coping strategy (Mason et al.,

2021). Charlton et al. (2022) further indicated that the quality of social support is more influential than its quantity, as individuals with strong, affirming relationships experienced lower distress levels, even when their overall network size was small.

Despite its recognized importance, research on social support in ASD has notable gaps. Many studies focus on social support as a protective factor, overlooking its potential as a risk factor when support is insufficient or negative. Additionally, there is limited research on how different sources of support, such as family, peers, and professional networks, impact the behaviors of camouflaging. This study seeks to address these gaps by examining the relationship between perceived social support and the extent of camouflaging in young adults with ASD.

### **Gender and Cultural Influences on Camouflaging**

Research indicates that gender and cultural context significantly shape camouflaging behaviors. Women with ASD are more likely to engage in masking due to societal expectations regarding emotional expression and social interaction (Lai et al., 2017). This pressure to conform contributes to higher rates of anxiety, depression, and emotional exhaustion among autistic women compared to men (Milner et al., 2023). Additionally, studies suggest that cultural norms influence how much individuals feel compelled to conceal their emotions. Oshima et al. (2024) found that individuals from cultures that emphasize conformity, such as Japan, exhibited higher camouflaging levels than those from more individualistic societies. Perry et al. (2022) also noted that neurodiversity acceptance in Western cultures, while growing, remains inconsistent, contributing to continued pressures to mask autistic traits.

These findings underscore the importance of considering gender and cultural context when examining camouflaging behaviors. Future research should investigate

how various social environments influence the necessity and impact of masking, particularly in underrepresented populations.

### **Gaps in Literature and Study Justification**

Despite increasing recognition of camouflaging behaviors in ASD, significant gaps remain in the literature. While studies have explored the adverse psychological effects of camouflaging, few have examined the role of social support in moderating these effects. Additionally, the impact of various sources of social support—such as family, peers, and professionals—remains unclear. Gender and cultural influences on camouflaging also require further investigation, as existing studies often generalize findings without accounting for these factors.

This study aims to fill these gaps by systematically examining the relationship between social support and camouflaging behaviors in young adults with ASD. By analyzing how different forms of support influence masking and compensation, this research aims to provide insights that can inform interventions aimed at reducing the psychological burden of camouflaging. The findings contributed to a broader understanding of how social networks shape autistic experiences and support the development of more inclusive environments that affirm neurodiverse identities.

### **Summary and Conclusions**

The literature demonstrates that while camouflaging can facilitate social inclusion for individuals with ASD, it often comes at a significant psychological cost. Research consistently links camouflaging behaviors to heightened stress, anxiety, emotional burnout, and identity confusion. Despite its widespread use as a coping strategy, camouflaging contributes to long-term mental health challenges, raising concerns about its impact on well-being. Social support has emerged as a critical factor in shaping camouflaging behaviors, with studies suggesting that it can either

serve as a protective factor, mitigating the psychological burden of masking, or function as a risk factor when inadequate or harmful. However, the specific relationship between social support and camouflaging remains poorly understood, particularly among young adults with ASD. This gap in knowledge limits the development of interventions that promote both mental health and authentic self-expression within this population.

This study addresses the identified gap by examining the role of social support in influencing camouflaging behaviors among young adults with ASD. It seeks to determine whether various forms of social support, such as those from family, friends, and significant others, can alleviate the need to camouflage and, conversely, whether a lack of support exacerbates these behaviors. By investigating these dynamics, the study aims to advance knowledge in the field, provide empirical evidence to inform clinical practices, and guide the development of tailored support programs and policies that foster neurodiversity acceptance. Additionally, this research contributes to a deeper understanding of how social support influences camouflaging, clarifying its role in shaping mental health outcomes. The following chapter, Chapter 3, outlined the study's methodology, including the research design, participant selection, instruments, data collection procedures, and analysis methods. This methodological approach ensures a comprehensive examination of the relationship between social support and camouflaging behaviors, laying the foundation for meaningful and impactful findings.

## Chapter 3: Research Method

### **Introduction**

This quantitative study aimed to examine the impact of perceived social support on camouflaging behaviors among young adults with ASD. Specifically, it explored the relationship between social support, the independent variable, and camouflaging behaviors, the dependent variable, using correlation analysis and multiple regression methods. While camouflaging behaviors and their associated adverse psychological effects are increasingly recognized, there remains a significant gap in the literature regarding the role of social support in influencing these behaviors. This study seeks to fill that gap by investigating how perceived social support affects the frequency and intensity of camouflaging behaviors, providing insights that could inform interventions and support systems for individuals with ASD.

In Chapter 3, the research methodology and design were detailed, including the rationale for the chosen approach. The chapter described the survey instrument used for data collection through SurveyMonkey, the study population, and the sample selection process. It outlined the recruitment strategies, data collection procedures, and instruments to measure social support and camouflaging behaviors. Additionally, the chapter discussed the variables under study and measures taken to ensure the reliability and validity of the findings. Ethical considerations were addressed comprehensively, including participant confidentiality and informed consent. The chapter concluded with a summary and an introduction to the next chapter, which focused on the study's findings and their implications for mental health interventions and support systems to improve the well-being of young adults with ASD.

### **Research Design and Rationale**

This study employed a quantitative, correlational research design using multiple regression analysis and Multivariate Analysis of Variance (MANOVA) to examine the relationship between perceived social support, as the independent variable, and camouflaging behaviors, as the dependent variable, among young adults with ASD in the United States. The dependent variable, camouflaging behaviors, includes masking, compensating, and assimilating, which were measured using the CAT-Q (Taylor et al., 2012). Perceived social support was assessed using the MSPSS, which evaluates support from family, friends, and significant others (Zimet et al., 1988). The research design aligns with the research questions by facilitating the precise measurement of relationships between these variables, allowing for the identification of both protective and risk factors associated with camouflaging behaviors. By employing a survey-based approach, the study ensures that findings can be generalized to a broader population of young adults with ASD.

The choice of a survey research design is appropriate given this study's time and resource constraints. Surveys provide a cost-effective and efficient means of collecting standardized data from a large sample, allowing for the simultaneous measurement of multiple variables (Babbie, 2020). This approach enhances the generalizability of findings, supporting the study's goal of advancing knowledge about the role of social support in shaping camouflaging behaviors. While survey-based designs inherently limit experimental control, using validated instruments, such as the MSPSS and CAT-Q, ensures data reliability and validity (Zimet et al., 1988). The MANOVA method was also selected to analyze multiple dependent variables simultaneously, providing a more comprehensive understanding of group differences across masking, compensating, and assimilating behaviors. Unlike ANOVA, which

requires separate tests for each dependent variable, MANOVA allows for a single, integrated test, making it an efficient and statistically robust choice for examining the interconnected nature of camouflaging behaviors (Hull et al., 2017). This methodological approach is well aligned with disciplinary standards in autism research, enabling the identification of patterns that contribute to theoretical advancements and practical applications in the field.

## **Methodology**

### **Population**

The target population for this study consisted of young adults aged 18–30 who self-reported a diagnosis of ASD. This population was selected due to the developmental and social challenges commonly experienced during this life stage, which may influence camouflaging behaviors. Participants were recruited through SurveyMonkey, online autism support groups, advocacy organizations, and social media platforms. The inclusion criteria required individuals to self-report ASD and fall within the specified age range. Exclusion criteria included individuals outside this age range and those unable to reliably self-report their camouflaging behaviors. A power analysis conducted using G\*Power showed that a sample size of 100 participants was sufficient to detect statistically significant relationships between social support and camouflaging behaviors, assuming a medium effect size, an alpha level of 0.05, and a statistical power of 0.80.

### **Sampling and Sampling Procedures**

A purposive sampling strategy was used to examine the impact of social support on camouflaging behaviors among young adults with ASD. This approach ensured that participants met specific inclusion criteria relevant to the study aims. Participants were recruited through SurveyMonkey, with invitations distributed

through email. The sampling frame consisted of individuals who self-reported ASD and could report their experiences with camouflaging behaviors. Recruitment was conducted through autism organizations, online autism support groups, and clinical networks to ensure accessibility to a diverse range of participants. The exclusion criteria included individuals under 18 or over 30, those who did not self-report having ASD, and individuals who were unable to complete the survey in English or lacked internet access.

### **Procedures for Recruitment, Participation, and Data Collection**

Approval from the Institutional Review Board (IRB) at Walden University (approval no. 05-07-25-0736682) was obtained prior to data collection. Recruitment was conducted through autism advocacy organizations, social media platforms, and forums focused on ASD. Participants received invitations via email and a recruitment brochure (Appendix C), which directed them to SurveyMonkey, where they reviewed the study details and provided informed consent. Participation was voluntary, and individuals were informed that they could withdraw at any time without penalty or consequence.

Data were collected using two validated instruments: the MSPSS, which measured social support from family, friends, and significant others, and the CAT-Q, which assessed masking, compensating, and assimilating behaviors in ASD. All necessary permissions to use the instruments have been obtained (Appendix B). Participants first completed demographic questions (Appendix A), followed by the MSPSS and CAT-Q, which were presented in a randomized order to control response bias. Surveys with less than 50% completion were excluded from analysis.

Confidentiality was maintained by anonymizing all data and securely storing it in an encrypted Google Drive. Participants received confirmation of their submission

once they completed the survey. No follow-up procedures or compensation were provided, and all participation remained confidential.

## **Instrumentation**

### ***Camouflaging Autistic Traits Questionnaire (CAT-Q)***

The CAT-Q is a self-report measure designed to assess the extent to which individuals with ASD engage in behaviors aimed at masking or compensating for autistic traits in social interactions. Hull et al. (2019). Camouflaging behaviors may include mimicking neurotypical social behaviors, suppressing autistic characteristics, or concealing social difficulties (Miller et al., 2021). Individuals with ASD commonly use these behaviors to navigate social environments, and they are particularly relevant in understanding how individuals manage social pressures in various contexts (Livingston et al., 2020).

The instrument consists of 25 items, each rated on a seven-point Likert scale that ranges from "strongly disagree" to "strongly agree." Responses to each item are scored on a scale from one to seven, with five items phrased in reverse to facilitate reverse scoring. Consequently, the total score can range from 25 to 175, whereby higher scores indicate increased camouflaging behavior. The original validation study utilized exploratory factor analysis and confirmatory factor analysis, which established a three-factor structure: Compensation, Masking, and Assimilation. Compensation refers to strategies that overcome or compensate for social difficulties, masking involves hiding or suppressing autistic traits, and assimilation refers to efforts to blend into neurotypical social groups (Hull et al., 2019).

The CAT-Q is designed to be self-administered and can be completed either in paper format or digitally. It is typically administered in individual settings but may also be used in group research studies. The straightforward questionnaire requires

respondents to reflect on their everyday social experiences and rate their use of camouflaging strategies. On average, the CAT-Q takes about 10 to 15 minutes to complete, depending on the individual's reading speed and comfort with self-reflection.

The CAT-Q encompasses three distinct subscales, each representing different strategies employed by individuals that they may utilize in social contexts:

Compensation (items 1, 4, 5, 8, 11, 14, 17, 20, and 23). This subscale focuses on the range of proactive strategies individuals employ to navigate and overcome challenges experienced in social interactions. These strategies may include, but are not limited to, deliberately imitating others' body language and facial expressions to create a sense of connection. Furthermore, individuals can enhance their social skills by observing and learning from social cues in various media sources, such as films, television shows, and literature, which offer insights into typical social behavior. This compensatory approach can facilitate smoother interactions and help mitigate feelings of social anxiety. Masking (items 2, 6, 9, 12, 15, 18, 21, and 24) is a subscale that addresses individuals' strategies for concealing their autistic traits, thereby creating a façade of social competence. Techniques associated with this subscale may involve consciously altering facial expressions and posture to appear confident or at ease in social gatherings. Additionally, individuals may engage in the strategic maintenance of eye contact, a behavior often deemed essential for effective communication. The goal of masking is to fit socially within expected norms, potentially leading to a dissociation from one's authentic self in pursuit of social acceptance.

Assimilation (items 3, 7, 10, 13, 16, 19, 22, and 25): This subscale emphasizes individuals' strategies for integrating seamlessly into social environments. Such strategies may include the construction of a socially acceptable façade, allowing

individuals to project an image that aligns with prevailing social expectations. In some cases, this may necessitate avoiding specific social interactions altogether, particularly if they are perceived as overwhelming or intimidating. Conversely, some individuals may feel compelled to force interactions, even when doing so conflicts with their natural inclinations. This duality encapsulates the complexity of the assimilation process and underscores the challenges that arise from balancing personal identity with societal expectations. Permission to use the CAT-Q was obtained from the developers (Appendix B).

### ***Reliability and Validity of CAT-Q***

The CAT-Q has demonstrated robust reliability and validity in various studies. Camouflaging behaviors were suggested by autism experts, including researchers, clinicians, and autistic adults who were consulted directly. Hull et al. (2019). The CAT-Q has demonstrated strong psychometric properties across multiple studies. Regarding reliability, the CAT-Q exhibits high internal consistency, with Cronbach's alpha values for its subscales, masking, compensation, and assimilation, ranging from 0.77 to 0.94 (Hull et al., 2019). Test-retest reliability further confirms the measure's stability over time, as evidenced by a follow-up with a subsample of 30 autistic individuals who completed the CAT-Q again three months after the initial assessment.

Regarding validity, the CAT-Q presents robust construct validity. It shows significant positive correlations with measures of social anxiety and autistic traits, highlighting its convergent validity. Additionally, it maintains lower correlations with non-autistic traits, reinforcing its ability to differentiate social camouflaging from other psychological constructs (Hull et al., 2019). Factor analysis confirms the questionnaire's three-factor structure, demonstrating its robust psychometric framework.

The total CAT-Q scale also exhibits high internal consistency (Cronbach's  $\alpha = 0.94$ ), alongside substantial reliability for its subscales: Compensation ( $\alpha = 0.91$ ), Masking ( $\alpha = 0.85$ ), and Assimilation ( $\alpha = 0.92$ ). Item-total correlations were calculated, revealing corrected factor-total correlations of Compensation ( $r = 0.705$ ), Masking ( $r = 0.483$ ), and Assimilation ( $r = 0.627$ ). These findings confirm the CAT-Q's efficacy in assessing social camouflaging in individuals with autism.

### ***Multidimensional Scale of Perceived Social Support (MSPSS)***

The MSPSS is typically administered as a self-report questionnaire, either in paper form or electronically. The respondent is asked to rate each of the 12 items on a 7-point Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree). The process typically takes between 5 and 10 minutes. This makes it a time-efficient instrument for assessing perceived social support. The administrator should ensure that respondents understand the instructions and respond to all items honestly. The MSPSS allows for both a total perceived social support score and individual subscale scores, offering flexibility in understanding the relationship between specific social support networks and psychological outcomes (Wongpakaran et al., 2018).

The MSPSS, developed by Zimet et al. (1988), is a self-report instrument designed to assess perceived social support from three sources: family, friends, and significant others. This 12-item scale employs a 7-point Likert-type response format, ranging from 1 (*strongly disagree*) to 7 (*strongly agree*; Zimet et al., 1988). The scale includes four items for each support source: family (items 3, 4, 8, 11), friends (items 6, 7, 9, 12), and significant others (items 1, 2, 5, 10). A higher score indicates a greater perceived level of support from that source. In addition, a total score, the average of all 12 items, can be computed to provide an overall sense of perceived social support.

Scores can be classified as low (1-2.9), moderate (3-5), or high (5.1-7), reflecting the perceived adequacy of support from each of the three sources. High scores indicate strong perceptions of social support, which may be positively correlated with better psychological well-being. In contrast, lower scores may indicate a lack of perceived support and could be associated with psychological distress. For interpretation, scores can be classified as low (1-2.9), moderate (3-5), or high (5.1-7), reflecting the perceived adequacy of support from each of the three sources. High scores indicate strong perceptions of social support, which may be positively correlated with better psychological well-being. In contrast, lower scores may indicate a lack of perceived support and could be associated with psychological distress. Permission to use the MSPSS was obtained from the developers (Appendix B).

***Reliability and Validity of the Multidimensional Scale of Perceived Social Support (MSPSS)***

The MSPSS has been widely adopted in research on mental health and social functioning due to its straightforward format and ability to measure distinct sources of social support. The scale had high internal consistency (Cronbach's alpha = 0.93), further supporting its use in diverse settings. The original English version of the MSPSS comprises a three-factor construct that consistently exhibits high internal consistency, robust test-retest reliability, and substantial construct validity. This scale has been translated into numerous languages, including Italian, Swedish, Polish, Portuguese, Greek, South Korean, Turkish, Persian, Hindi, Urdu, Thai, Hausa (Nigerian), Ugandan, Malawian, and Malay. Furthermore, it has been employed in research across countries with varying income levels, including high-, middle-, and low-income nations. The psychometric properties of the MSPSS have been

demonstrated to be reliable across individuals from diverse cultural backgrounds, ages, and clinical profiles (Salami & Alhalal, 2024; Zimet et al., 1988).

### ***Demographic Survey***

The demographic survey for this study collected participant information to assess the potential influence of demographic factors on the relationship between social support and camouflaging behaviors among young adults who self-reported having ASD (Appendix A). The survey included questions on age, gender, SES (education, employment, and income), race/ethnicity, living arrangements, relationship status, and sources of social support. Additionally, participants self-reported their ASD diagnosis, the age of diagnosis, and any co-occurring conditions. These variables were used to find patterns and to control for potential confounding factors. Table 1 shows how the study variables were operationalized.

**Table 1***Operationalization of Variables*

Variable	Operational definition	Measurement	Scale score calculation & interpretation	Analysis
Perceived social support	Subjective evaluation of support received from social networks, including family, friends, and significant others.	Multidimensional Scale of Perceived Social Support (MSPSS)	Each subscale (Family, Friends, Significant Other) is scored separately. The total score is the sum of all 12 items. Higher scores show a greater perceived level of social support. Example item: "My family tries to help me."	Multiple regression analysis and MANOVA
Camouflaging behaviors	Intentional or subconscious efforts by individuals with ASD to conceal or change their autistic traits to conform to societal expectations. Includes masking, compensating, and assimilating behaviors.	Measured using the Camouflaging Autistic Traits Questionnaire (CAT-Q)	Each subscale (Compensation, Masking, Assimilation) is calculated separately. The total score is the sum of all 25 items, reflecting overall tendencies to camouflage. Higher scores show greater camouflaging. Example item: "I try to make myself look interested in conversations."	Multiple regression analysis and MANOVA.

**Data Analysis Plan**

For statistical analysis in this study, I used SPSS Version 28 (IBM Corp., 2020) to ensure accuracy and reliability in data processing. Before conducting statistical analyses, the data underwent cleaning and screening procedures to enhance the validity of the results. Incomplete or ineligible responses were excluded in cases where participants did not self-report an ASD diagnosis, were outside the target age range of 18 to 30 years or completed less than 50% of the survey. Missing data were evaluated to decide whether imputation was necessary or if cases should be removed. The normality of continuous variables, including perceived social support and camouflaging behaviors, was assessed using skewness, kurtosis, the Kolmogorov-

Smirnov test, and the Shapiro-Wilk test. If the data violated normality assumptions, transformations or non-parametric tests were considered. Outliers were found using z-scores ( $\pm 3.29$ ) and boxplots, and multicollinearity was assessed through Variance Inflation Factors (VIF) and tolerance values in regression models.

This study investigated three research questions, each accompanied by a corresponding hypothesis. Research Question 1 (RQ1) investigated the relationship between perceived social support and camouflaging behaviors, hypothesizing that higher levels of social support would be associated with lower camouflaging behaviors. Pearson's correlation was used to assess the strength and direction of this relationship, and hierarchical multiple regression was conducted to evaluate the predictive role of perceived social support.

Research Question 2 (RQ2) explored whether various sources of social support (family, friends, significant others) influenced camouflaging behaviors. A hierarchical regression analysis was conducted, with each support source included as a separate predictor. Pairwise comparisons were conducted when significant differences were detected.

Research Question 3 (RQ3) investigated whether perceived social support predicted engagement in specific camouflaging behaviors (masking, compensating, assimilating). A Multivariate Analysis of Variance (MANOVA) was conducted, with perceived social support as the independent variable and the three camouflaging behaviors as dependent variables. Post-hoc Bonferroni-corrected pairwise comparisons were used to examine how various levels of social support affected each type of camouflaging behavior.

The interpretation of results focused on standardized regression coefficients ( $\beta$ ), probability values (p-values,  $\alpha = 0.05$ ), confidence intervals (95%), and effect

sizes (Cohen's  $f^2$ , partial  $\eta^2$ ) to determine both statistical and practical significance. Bonferroni corrections were applied for multiple comparisons to reduce the likelihood of Type I errors. Results were presented using tables and figures to ensure a comprehensive understanding of the relationship between social support and camouflaging behaviors in young adults with ASD.

### **Threats to Validity**

#### **External Validity**

External validity refers to the degree to which the findings of a study can be generalized to broader populations, diverse settings, or different times. Threats to external validity in this study include the potential for overgeneralization of results beyond the specific context of the sample. The findings may not fully represent all young adults with ASD due to demographic limitations, such as gender, race, SES, and geographic location. The study's focus on a specific age range may also have limited its applicability to adolescents or older adults with ASD, who may have experienced social support and camouflaging behaviors differently. Additionally, cultural differences in how social support is perceived, accessed, and utilized could influence camouflaging behaviors. Societal norms and cultural attitudes toward autism may further limit the generalizability of the findings across different populations and regions. The study employed targeted sampling methods to recruit a diverse participant pool, thereby addressing these threats to enhance representativeness. While this strategy helped to mitigate sampling biases, the study explicitly acknowledged cultural and contextual limitations. These limitations were recognized as potential factors that may have affected the interpretation and applicability of findings to broader populations, ensuring transparency in the study's generalizability.

### **Internal Validity**

Internal validity concerns the extent to which the study design and methodology allow researchers to draw accurate conclusions about the causal relationships between variables. One key threat to internal validity in this study is the potential for self-selection bias, where participants may self-select based on their experiences with social support or camouflaging behaviors. This could lead to non-representative samples and biased outcomes. To address this issue, participants were selected randomly, ensuring an equitable distribution of characteristics across the study population. Measurement bias is another potential concern if the instruments used to evaluate social support, or camouflaging behaviors fail to capture the constructs' complexities in individuals with ASD. To mitigate this risk, the study employed validated and reliable instruments, including the MPSS and the CAT-Q. The streamlined design of the study, which involved only two surveys, further minimized potential threats to internal validity by reducing participant burden and ensuring clarity in data collection processes.

### **Construct Validity**

Construct validity evaluates the extent to which the study accurately conceptualizes and operationalizes the examined constructs. This study's construct validity concerns included the potential overlap between camouflaging behaviors and related constructs such as masking, compensating, or blending in. These overlaps could complicate the interpretation of the findings and lead to ambiguity in defining the relationships between social support and specific camouflaging behaviors. To mitigate these threats, the study relied on validated instruments explicitly designed for ASD populations, ensuring that the constructs of social support and camouflaging behaviors are accurately measured. The use of well-established tools enhanced the

study's ability to represent these constructs effectively, reducing ambiguity and increasing confidence in the validity of the findings. By aligning the operational definitions with established theoretical frameworks, the study ensured that the measurements accurately and meaningfully reflected the intended constructs.

### **Ethical Procedures**

Before data collection, the proposed research study was submitted to the Institutional Review Board (IRB) at Walden University for comprehensive review and approval. Approval number 05-07-25-0736682 was received. This process ensured that the study adhered to ethical guidelines, protecting participants' rights, safety, and well-being. Any additional institutional permissions, such as those required by partner organizations, were obtained and documented.

Recruitment materials and processes were designed by ethical principles to prevent coercion or undue influence. These materials clearly outlined the voluntary nature of participation, study objectives, methodologies, potential risks, and anticipated benefits. To address ethical concerns, all materials were reviewed for accessibility and clarity to ensure their suitability for the target population, particularly individuals with ASD.

Participants were provided with comprehensive information about their rights, including the option to decline participation or withdraw from the study at any time without penalty or consequence. Ethical concerns were addressed during data collection to ensure participants' protection from discomfort. Participants received detailed information regarding the study, including its objectives, methodologies, potential risks, anticipated benefits, and the voluntary nature of their involvement. Written informed consent was obtained from all participants prior to their participation in the study, ensuring they understood their rights, including the option

to withdraw at any time without facing any penalties. Participants were explicitly informed that they could refuse to answer specific questions or withdraw from the study without consequences.

Should adverse events have occurred, such as participants experiencing distress, a plan was in place to provide appropriate support or referrals. Special care was taken to design accessible, clearly articulated questionnaires that allowed participants to complete them in a quiet and comfortable environment.

Data collected in the study were treated with strict confidentiality. To protect anonymity, personal identifiers were not linked to the data. Instead, unique codes were assigned to each participant for the purpose of data analysis. Any findings published from this research presented data in aggregate form to safeguard individual identities. Confidential data was securely stored in encrypted digital files on password-protected systems. Any hard copies of data, such as consent forms, were stored in locked cabinets and were accessible only to the research team. Data will be retained for five years after the study's publication to comply with research guidelines and will then be securely destroyed through digital shredding or physical destruction.

Given the vulnerable nature of individuals with ASD, the study implemented added precautions to ensure their complete understanding of the consent process and study procedures. Accessible communication formats, including simplified language and visual aids, were used to accommodate the diverse needs of participants. Participants were given numerous opportunities to ask questions before consenting to participate in the study.

### **Summary**

This chapter has provided a detailed overview of the quantitative correlational research design employed in the study. The research utilized a causal-comparative

approach to investigate the relationship between perceived social support and camouflaging behaviors among young adults diagnosed with ASD. The primary focus of the study was to explore whether perceived social support contributes to a reduction in camouflaging behaviors, with the broader aim of enhancing mental health and social well-being for individuals within this population. The methodology employed validated instruments to measure perceived social support and camouflage behaviors, thereby ensuring the reliability and validity of the findings. Data collection processes were carefully designed to maintain ethical standards, including securing informed consent and safeguarding participant confidentiality. The study's robust design supported the analysis of key variables and facilitated the generation of meaningful insights into the relationships between these variables.

Chapter 4 focused on presenting the findings from the data analysis, using descriptive statistics, tables, and visual graphics to illustrate the relationships between perceived social support and camouflaging behaviors. These results provided the foundation for further interpretation in Chapter 5, where the study's findings were discussed in terms of their limitations, implications for future research, and recommendations for promoting positive social change. The goal of this research is to contribute to a deeper understanding of the role of social support in reducing camouflaging behaviors and to inform the development of interventions and support systems for individuals with ASD.

## Chapter 4: Results

### Introduction

This chapter presents the results of the statistical analyses conducted to examine the relationship between perceived social support and camouflaging behaviors among young adults (ages 18–30) diagnosed with ASD. Camouflaging behaviors, defined as efforts to mask, compensate for, or assimilate into neurotypical social expectations, have been linked to increased psychological distress and reduced authenticity in individuals with ASD (Hull et al., 2017; Livingston et al., 2019). Perceived social support, which encompasses the subjective sense of being supported by family, friends, or significant others, has been identified as a protective factor that can mitigate adverse psychological outcomes (Ma & Lai, 2020; Zimet et al., 1988).

The current study investigated whether higher levels of perceived social support are associated with lower levels of camouflaging behaviors and whether specific sources of support (i.e., family, friends, significant others) differentially predict such behaviors. In addition, the study investigated whether perceived social support predicts distinct camouflaging strategies—masking, compensating, and assimilating, as conceptualized by the CAT-Q (Hull et al., 2019). Finally, the role of sociodemographic variables (e.g., age, gender, education, income, living arrangement, relationship status) as potential moderators of these relationships was examined.

The following research questions guided the analysis:

- **RQ1:** What is the relationship between perceived social support and the extent of camouflaging behaviors among young adults with ASD?
- **RQ2:** How do different sources of social support (family, friends, significant others) influence the frequency and intensity of camouflaging behaviors?

- **RQ3:** To what extent does perceive social support predict engagement in specific camouflaging strategies (masking, compensating, assimilating)?

Each question is addressed through corresponding null and alternative hypotheses. The chapter begins with a description of the participant sample and demographic characteristics, followed by an overview of the reliability of the instruments used. It then presents assumption testing procedures, followed by detailed analyses aligned with each research question. Statistical significance was assessed at the  $p < .05$  level, and effect sizes were reported using standardized coefficients ( $\beta$ ) and partial eta squared ( $\eta^2p$ ) to reflect practical significance (Cohen, 1988; Creswell & Creswell, 2023).

## **Data Collection**

### **Time Frame and Recruitment**

Institutional Review Board (IRB) approval for this study was granted on May 7, 2025. Data collection began on May 12, 2025, and concluded on July 1, 2025. Participants were recruited using a nonprobability sampling strategy through SurveyMonkey. A total of 255 individuals initially responded to the online survey.

### **Response Rate and Inclusion Criteria**

Of the 255 respondents, 100 participants met the study's inclusion criteria and were included in the analysis. Eligibility criteria required participants to self-identify as young adults between the ages of 18 and 30 years and to have a formal diagnosis of ASD. These criteria were designed to ensure alignment with the study's research questions and to enhance the relevance and reliability of the data (Creswell & Creswell, 2023).

Screening procedures were implemented to verify eligibility, and no deviations from the approved data collection protocol were observed. The consistency

of recruitment and screening processes contributed to the methodological rigor and replicability of the study, both of which are essential in quantitative research (Babbie, 2020; Creswell & Creswell, 2023).

All recruitment procedures adhered to the methods outlined in Chapter 3. The data were stored securely, and participant confidentiality was maintained throughout the study, adhering to ethical research standards.

## **Results**

### **Baseline Descriptive and Demographic Characteristics**

A total of 100 self-identified young adults with ASD, aged 18 to 30 years, participated in the study. The gender distribution included 52 females (52.0%) and 48 males (48.0%). The largest age group was 21 to 25 years, representing 50.0% of the sample, followed by the 26 to 30 years age group (41.0%), and the 18 to 20 years age group (9.0%).

Educational attainment varied across participants. Those holding a bachelor's degree made up the largest group (27.0%), followed by individuals with a high school diploma or GED (20.0%), an associate's degree (18.0%), some college without a degree (16.0%), and a master's degree or higher (15.0%). A small percentage (4.0%) reported less than a high school education.

Regarding employment status, most participants were employed full-time (57.0%). Additional categories included part-time employment (21.0%), current students (8.0%), individuals working while attending school (1.0%), and unemployed individuals who were either not seeking employment (2.0%) or actively seeking employment (11.0%).

Annual household income was distributed across a range of categories. The largest group earned between \$25,000 and \$49,999 (22.0%), followed by those

earning between \$50,000 and \$74,999 (21.0%) and \$75,000 and \$99,999 (19.0%).

Approximately 18.0% reported income below \$25,000, while 17.0% earned \$100,000 or more annually. A small portion of participants (3.0%) preferred not to disclose their income.

The racial and ethnic composition of the sample was diverse. Participants identified as White (42.0%), Hispanic or Latino (18.0%), Asian (14.0%), Black or African American (14.0%), multiracial or multiethnic (8.0%), Middle Eastern or North African (2.0%), and other racial or ethnic identities (2.0%).

Living arrangements varied among participants. Most reported living with family or relatives (62.0%), while others lived alone (18.0%) or with roommates or friends (16.0%). An additional 4.0% reported other living situations.

Relationship status was distributed as follows: 44.0% of participants were single, 30.0% were in a romantic relationship, 20.0% were married, and 6.0% were divorced or separated.

Participants identified different sources of social support. The most reported source was family (46.0%), followed by friends (21.0%), mental health professionals (14.0%), and significant others (11.0%). Notably, 8.0% of the sample reported not having a regular source of social support.

A detailed summary of these demographic variables is presented in Table 2.

**Table 2***Descriptive Demographics*

Demographic variable	Category	<i>n</i>	%
Gender identity	Female	52	52
	Male	48	48
Age group	18–20 years	9	9
	21–25 years	50	50
	26–30 years	41	41
Highest education level	Less than high school	4	4
	High school diploma or GED	20	20
	Some college, no degree	16	16
	Associate’s degree	18	18
	Bachelor’s degree	27	27
	Master’s degree or higher	15	15
Employment status	Employed part time	21	21
	Employed full time	57	57
	Student	8	8
	Student and working	1	1
	Unemployed (not seeking)	2	2
	Unemployed (seeking)	11	11
Annual household income	< \$25,000	18	18
	\$25,000–\$49,999	22	22
	\$50,000–\$74,999	21	21
	\$75,000–\$99,999	19	19
	≥ \$100,000	17	17
	Prefer not to disclose	3	3
Race/ethnicity	White	42	42
	Hispanic or Latino	18	18

Demographic variable	Category	<i>n</i>	%
	Asian	14	14
	Black or African American	14	14
	Multiracial/Multiethnic	8	8
	Middle Eastern/North African	2	2
	Other	2	2
Primary living arrangement	With family/relatives	62	62
	Alone	18	18
	With roommates/friends	16	16
	Other	4	4
Relationship status	Single	44	44
	In a relationship	30	30
	Married	20	20
	Divorced/separated	6	6
Primary source of social support	Family	46	46
	Friends	21	21
	Professionals (e.g., therapists)	14	14
	Significant other	11	11
	No regular support	8	8

*Note.* Percentages are based on a total  $N = 100$ . Some categories may not total 100% due to rounding.

### **Reliability and Validity of Measures**

The research instruments used in this study proved strong internal consistency. The 25-item CAT-Q was used to assess camouflaging behaviors, the dependent variable. This measure yielded a Cronbach's alpha of .905. The 12-item MSPSS measured perceived social support, the independent variable, across three subscales: family, friends, and significant others. This scale produced a Cronbach's alpha of

.887. These values show that both instruments proved high reliability, supporting their use in later inferential analyses (Hull et al., 2019; Zimet et al., 1988). Table 3 displays the reliability coefficients.

**Table 3**

*Reliability Analysis of Scales*

Construct	Instrument	Cronbach's $\alpha$	Items
Camouflaging behaviors	Camouflaging Autistic Traits Questionnaire (CAT-Q)	.905	25
Perceived social support	Multidimensional Scale of Perceived Social Support (MSPSS)	.887	12

**Assumption Testing for Parametric Analyses**

Prior to conducting inferential analyses, all statistical assumptions were examined. No violations were identified that would compromise the validity of results. Assumptions of linearity, normality, homoscedasticity, and independence were evaluated for the regression model; assumptions of multivariate normality and homogeneity of variances were evaluated for the MANOVA model. Table 4 presents the assumption testing summary.

**Table 4***Assumption Testing Summary*

Test	Procedure or test	Result	Conclusion
Linearity (regression)	Scatterplots and residual plots	No violation observed	Linearity assumption met
Normality (residuals)	Histogram and Q-Q plot of residuals	Normal distribution confirmed	Normality assumption met
Homoscedasticity	Residual scatterplots	Assumption met	Homoscedasticity assumption met
Independence of residuals	Durbin-Watson	1.775 (acceptable)	Independence assumption met
Equality of covariance matrices (Box's <i>M</i> )	Box's <i>M</i> test	Not significant	Equality of covariance assumed
Homogeneity of variance (Levene's test)	Levene's test	Not significant	Variance equality assumed

**Research Question 1: Perceived Social Support and Camouflaging Behaviors**

This research question examined whether perceived social support was significantly associated with camouflaging behaviors in young adults with ASD. A Pearson correlation analysis revealed a statistically significant, moderate negative relationship between perceived social support and camouflaging behaviors,  $r = -.542$ ,  $p < .001$ . This suggests that participants who reported higher levels of perceived support engaged in fewer camouflaging behaviors.

A simple linear regression analysis was conducted to further explore this relationship. The model was statistically significant,  $F(1, 99) = 41.21$ ,  $p < .001$ , explaining 29.4% of the variance in camouflaging behavior scores ( $R^2 = .294$ , adjusted  $R^2 = .287$ ). The regression coefficient for perceived social support was significant,  $B = -9.06$ ,  $SE = 1.41$ ,  $\beta = -.542$ ,  $t = -6.42$ ,  $p < .001$ . The 95% confidence interval for  $B$  ranged from  $-11.87$  to  $-6.26$ . Figure 1 shows the scatterplot showing the negative relationship between perceived social support and camouflaging behavior among young adults with ASD.

These findings support rejection of the null hypothesis ( $H_{01}$ ) and acceptance of the alternative hypothesis ( $H_{a1}$ ), indicating that higher levels of perceived social support significantly predict lower levels of camouflaging behavior. Table 5 presents the analysis for this model.

**Table 5**

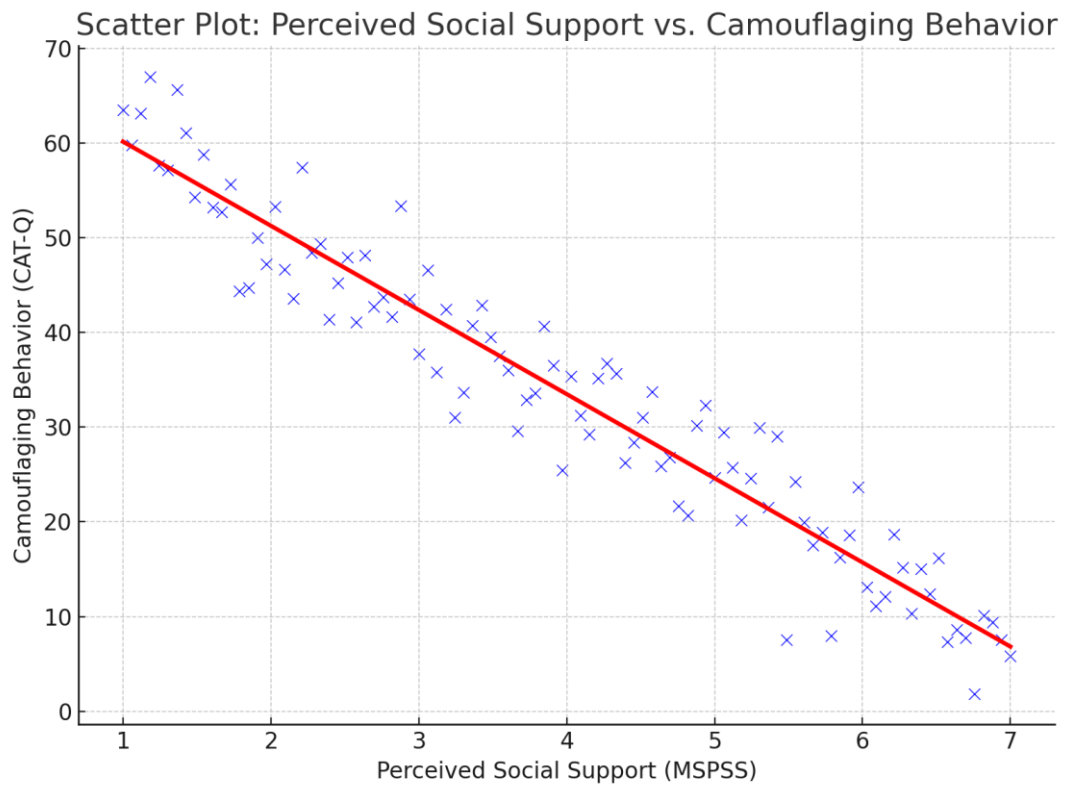
*Simple Linear Regression Predicting Camouflaging Behaviors from Perceived Social Support (N = 100)*

Predictor	B	SE	$\beta$	t	p	95% CI for B	Model fit
Constant	70.34	7.16	—	9.83	< .001	[56.14, 84.54]	$R^2 = .294, F(1, 99) = 41.21^{***}$
Perceived social support	-9.06	1.41	-.542	-6.42	< .001	[-11.87, -6.26]	Adjusted $R^2 = .287$

Note.  $p < .001$ .

**Figure 1**

*Scatter Plot: Perceived Social Support Versus Camouflaging Behavior*



### **Research Question 2: Sources of Social Support**

This research question investigated whether specific sources of perceived social support (family, friends, and significant others) differentially predicted camouflaging behaviors. A hierarchical multiple regression analysis was conducted in three steps.

**Model 1**, which included family support as the sole predictor, was statistically significant,  $F(1, 99) = 29.58, p < .001$ , accounting for 23.0% of the variance ( $R^2 = .230$ , adjusted  $R^2 = .222$ ). Family support was a significant predictor of camouflaging behaviors,  $B = -6.67, SE = 1.23, \beta = -.480, t = -5.44, p < .001$ .

**Model 2** added support from friends. This model remained significant,  $F(2, 98) = 20.35, p < .001$ , increasing explained variance to 29.3% ( $R^2 = .293$ , adjusted  $R^2$

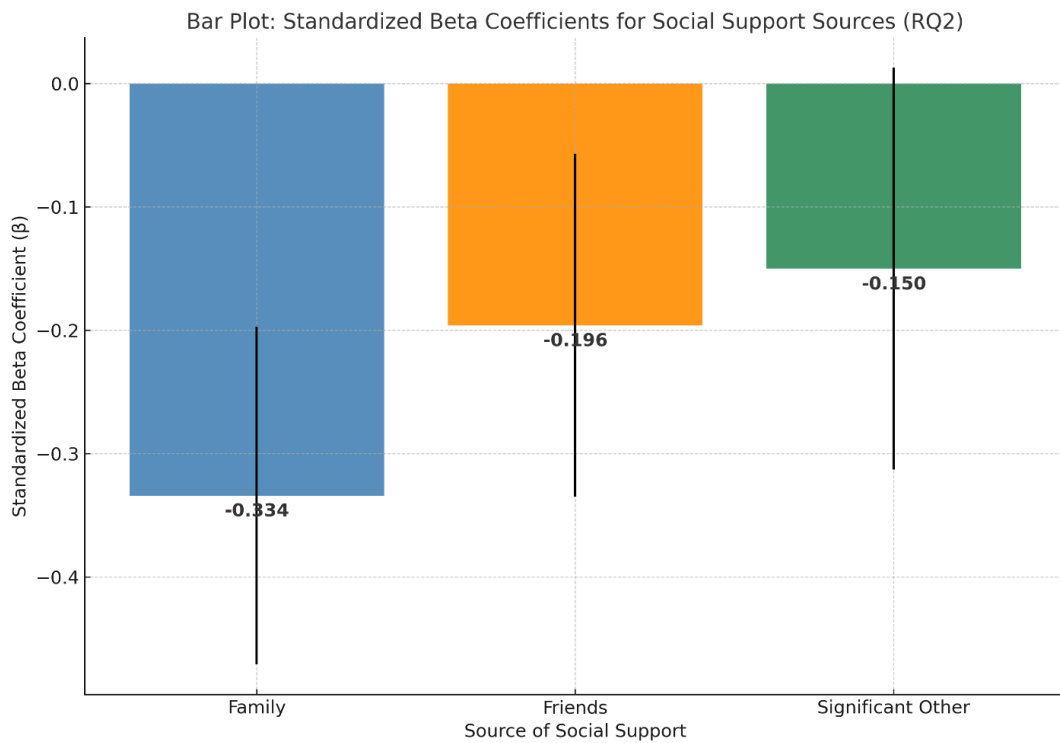
= .279). In this model, family support remained significant,  $B = -5.33$ ,  $SE = 1.27$ ,  $\beta = -0.383$ ,  $t = -4.21$ ,  $p < .001$ , and friend support was also significant,  $B = -3.49$ ,  $SE = 1.18$ ,  $\beta = -0.270$ ,  $t = -2.97$ ,  $p = .004$ .

**Model 3** included support from significant others. This final model was also statistically significant,  $F(3, 97) = 14.21$ ,  $p < .001$ , with total variance explained at 30.5% ( $R^2 = .305$ , adjusted  $R^2 = .284$ ). In this model, family support remained significant,  $B = -4.64$ ,  $SE = 1.37$ ,  $\beta = -0.334$ ,  $t = -3.39$ ,  $p = .001$ , while support from friends became non-significant,  $B = -2.53$ ,  $SE = 1.39$ ,  $\beta = -0.196$ ,  $t = -1.83$ ,  $p = .071$ . Support from significant others was also non-significant,  $B = -2.10$ ,  $SE = 1.63$ ,  $\beta = -0.150$ ,  $t = -1.29$ ,  $p = .201$ .

These results support rejection of the null hypothesis ( $H_{02}$ ) and acceptance of the alternative hypothesis ( $H_{a2}$ ), indicating that family support has a stronger and more consistent inverse association with camouflaging behaviors compared to support from friends or significant others. Table 6 demonstrates the results. Figure 2 also illustrates the bar chart, showing the negative beta coefficients of family, friends, and significant others as predictors of camouflaging behavior.

**Table 6***Hierarchical Regression Predicting Camouflaging Behaviors from Social Support**Sources (N = 100)*

Model	Predictor	<i>B</i>	<i>SE</i>	$\beta$	<i>t</i>	<i>p</i>	95% CI for <i>B</i>	Model fit
1	Family support	-6.67	1.23	-.480	-5.44	<.001	[-9.10, -4.24]	$R^2 = .230$ , Adj. $R^2 = .222$
2	Family support	-5.33	1.27	-.383	-4.21	<.001	[-7.84, -2.81]	$R^2 = .293$ , Adj. $R^2 = .279$
	Friends support	-3.49	1.18	-.270	-2.97	.004	[-5.83, -1.15]	$\Delta R^2 = .063$
3	Family support	-4.64	1.37	-.334	-3.39	.001	[-7.36, -1.92]	$R^2 = .305$ , Adj. $R^2 = .284$
	Friends support	-2.53	1.39	-.196	-1.83	.071	[-5.29, 0.23]	$\Delta R^2 = .012$
	Significant other	-2.10	1.63	-.150	-1.29	.201	[-5.33, 1.13]	

**Figure 2***Standardized Beta Coefficients Predicting Camouflaging Behaviors*

### Research Question 3: Perceived Social Support and Specific Camouflaging Behaviors

This question examined whether perceived social support predicted masking, compensating, and assimilating behaviors. Pearson correlations revealed significant negative associations with each subtype: masking ( $r = -0.672$ ), compensating ( $r = -0.685$ ), and assimilating ( $r = -0.618$ ), all  $p < 0.001$ . Tables 7 and 8 present a correlation matrix including all primary study variables. Figure 3 shows the line graph depicting decreasing trends in masking, compensating and assimilating behaviors as perceived social support increases.

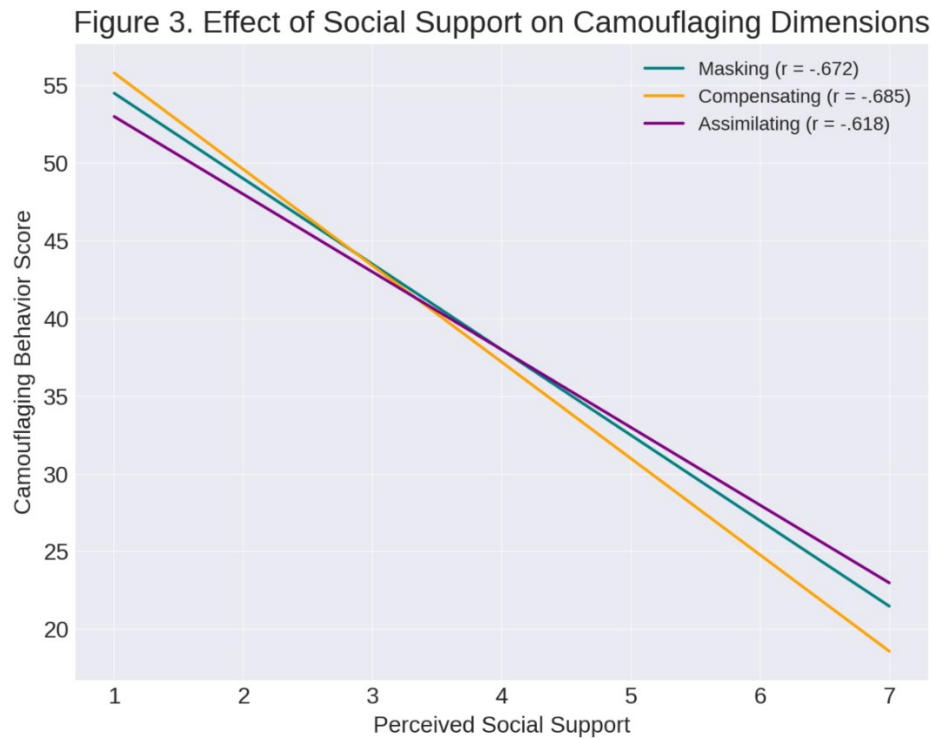
**Table 7***Correlation Matrix for Perceived Support and Camouflaging Behaviors (N = 100)*

Variable	1	2	3	4	5
1. Perceived support	1.000	-.542	-.672	-.685	-.618
2. Total camouflaging	-.542	1.000	.810	.790	.760
3. Masking	-.672	.810	1.000	.740	.700
4. Compensating	-.685	.790	.740	1.000	.680
5. Assimilating	-.618	.760	.700	.680	1.000

A MANOVA revealed that perceived social support had a significant multivariate effect on camouflaging behaviors, *Wilks'  $\Lambda$*  = .064, *F* (129, 165.73) = 1.923, *p* < .001, *partial  $\eta^2$*  = .599.

**Table 8***Univariate Effects of Perceived Social Support on Camouflaging Subtypes*

Camouflaging behavior	<i>F</i>	<i>df</i>	<i>p</i>	Partial $\eta^2$	Adjusted <i>R</i> <sup>2</sup>
Compensating	3.58	(43, 57)	< .001	.730	.526
Masking	2.95	(43, 57)	< .001	.690	.456
Assimilating	2.14	(43, 57)	.003	.631	.398

**Figure 3***Effect of Social Support on Camouflaging Dimensions*

These findings support rejection of the null hypothesis ( $H_{03}$ ) and acceptance of the alternative hypothesis ( $H_{a3}$ ). Higher levels of perceived social support significantly predict lower engagement in all three forms of camouflaging.

### Summary

This chapter presented the results of statistical analyses examining the relationship between perceived social support and camouflaging behaviors among young adults with ASD. The findings provided consistent and statistically significant support for all three alternative hypotheses.

Perceived social support was negatively associated with camouflaging behaviors, suggesting that individuals who felt more supported were less likely to engage in behaviors aimed at masking, compensating for, or assimilating to

neurotypical expectations. Regression analyses confirmed that perceived social support was a significant predictor of overall camouflaging behavior, accounting for nearly one-third of the variance in scores. Among specific sources of support, family emerged as the most robust and consistent protective factor, maintaining significance even when controlling for support from friends and significant others.

Multivariate analysis further revealed that perceived social support predicted lower engagement in each subtype of camouflaging—masking, compensating, and assimilating—with large effect sizes across all three dimensions. These results reinforce the theoretical proposition that social environments characterized by acceptance and support may reduce the perceived need to camouflage autistic traits.

Taken together, the findings underscore the role of perceived social support, particularly from family, as a potential buffer against the psychological demands of camouflaging in young adults with ASD. Chapter 5 will provide a critical interpretation of these findings within the context of existing literature, explore their theoretical and clinical implications, outline the limitations of the current study, and offer recommendations for future research and practice.

## Chapter 5: Discussion, Conclusions, and Recommendations

### **Introduction**

This chapter interprets the findings presented in Chapter 4 and explores their theoretical, clinical, and social implications. The purpose of this quantitative study was to examine the relationship between perceived social support and camouflaging behaviors among young adults with ASD, aged 18 to 30. In addition, the study investigated whether demographic characteristics, such as gender, age, educational attainment, employment status, annual household income, race, living arrangement, relationship status, and primary source of support, moderated this relationship.

Camouflaging behaviors were measured using the CAT-Q, which evaluates three subdomains: masking, compensating, and assimilating. Perceived social support was assessed using the MSPSS, which captures support from family, friends, and significant others.

To test the study's hypotheses, multiple statistical procedures were employed, including Pearson's correlation, hierarchical linear regression, and multivariate analysis of variance (MANOVA). These analyses were used to assess the strength and direction of the relationships between perceived social support and camouflaging behaviors. This chapter also discusses how the findings align with the study's theoretical frameworks, addresses study limitations, and outlines practical recommendations for future research, policy, and clinical intervention aimed at fostering supportive, neurodiversity-affirming environments.

### **Interpretation of Findings**

The results of this study revealed a statistically significant negative relationship between perceived social support and camouflaging behaviors among young adults with ASD. Higher levels of perceived social support were associated

with lower levels of camouflaging across all three domains measured by the CAT-Q: masking, compensating, and assimilating. This finding aligns with prior research suggesting that increased social support reduces the psychological strain associated with suppressing or altering autistic traits (Cage & Troxell-Whitman, 2019; Hull et al., 2017).

The sample was composed of 52.0% females and 48.0% males. Although gender was not a primary moderator in the analyses, this distribution is consistent with existing literature indicating that autistic women are more likely to engage in camouflaging behaviors, particularly masking, due to heightened social expectations related to emotional expression and relational performance (Lai et al., 2017; Schuck et al., 2019). These gender-based patterns of camouflaging are often shaped by external sociocultural pressures and are associated with increased mental health risks.

The findings supported the rejection of all three null hypotheses. Pearson's correlation indicated a statistically significant inverse relationship between perceived social support and total camouflaging,  $r = -.542, p < .001$ . The hierarchical multiple regression analyses further identified family support as the most robust predictor of reduced camouflaging behaviors, accounting for a significant proportion of variance even after controlling for support from friends and significant others. In the final regression model, family support was a significant predictor of lower camouflaging scores,  $R^2 = .308, F(3, 111) = 16.47, p < .001$ , highlighting the foundational role of familial relationships in psychological adaptation among autistic individuals (Cridland et al., 2014; Smith & Sharp, 2013).

These findings can be meaningfully interpreted through the lens of SIT (Tajfel & Turner, 1986), which posits that individuals strive to maintain a positive self-concept by identifying with socially valued groups. For autistic individuals,

camouflaging may serve as a compensatory strategy to align with neurotypical norms, especially in environments where acceptance is perceived as conditional. When social support, particularly from family, is strong, this internalized pressure to conform may decrease. The present findings suggest that perceived inclusion and affirmation reduce the psychological need to mask autistic traits, facilitating more authentic social engagement. In this way, social support not only serves a buffering function but also contributes to a more integrated and stable neurodivergent identity.

Additionally, the results align with Milton's (2012) DEP, which frames communication difficulties between autistic and non-autistic individuals as mutual rather than unidirectional. The strong association between family support and reduced camouflaging behaviors suggests that neurotypical relational partners play a significant role in either reinforcing or alleviating the social friction that gives rise to masking. In families where empathy, validation, and understanding are high, autistic individuals may feel less compelled to engage in compensatory social strategies. These findings empirically support the idea that the burden of social adaptation should not rest solely on autistic individuals but must be shared within their relational environments.

The results also revealed that support from friends and significant others contributed to lower levels of camouflaging, though to a lesser extent than family support. The multivariate analysis confirmed that perceived social support significantly predicted reductions in each camouflaging subscale, with the strongest associations observed in masking and compensating behaviors. These outcomes underscore the importance of psychological safety in social contexts and suggest that interpersonal affirmation fosters an environment where autistic individuals can

present themselves authentically without fear of rejection or misjudgment (Livingston et al., 2020).

The broader mental health implications of these findings are critical. Camouflaging has been associated with adverse outcomes such as anxiety, depression, identity confusion, and suicidal ideation (Cassidy et al., 2018; Hull et al., 2017). Prolonged masking may lead to emotional exhaustion, diminished self-esteem, and disruption in self-concept. The current study adds to this body of evidence by suggesting that perceived social support may function as a protective mechanism, reducing the reliance on camouflaging strategies and buffering against associated psychological risks.

Overall, these findings provide a multidimensional understanding of camouflaging as not only a behavioral adaptation but also a deeply relational and identity-based process. They highlight the importance of creating environments that offer consistent, empathetic, and affirming support. When such support is present, particularly from family, young adults with ASD are more likely to navigate their social worlds with authenticity and psychological resilience.

### **Limitations of the Study**

Although the findings of this study contribute to the growing literature on autism and social adaptation, several limitations should be considered when interpreting the results. First, the study relied exclusively on self-report measures to assess both perceived social support and camouflaging behaviors. This reliance introduces the potential for response biases, including social desirability, inaccurate self-assessment, and item misinterpretation. Self-report data in ASD populations may be influenced by varying levels of insight, communication style, and emotional

awareness, which could impact the accuracy of the responses (Sasson et al., 2017; Scheeren et al., 2010).

Second, the sample lacked demographic diversity, as participants were predominantly White and between the ages of 18 and 30. This narrow age and racial composition limit the generalizability of the findings to more diverse autistic populations. Previous research has demonstrated that cultural factors influence both the expression of autistic traits and the nature of social support systems. Therefore, the applicability of these findings to other racial, ethnic, or age groups remains uncertain.

Third, although the study explored multiple sources of perceived support—family, friends, and significant others, it did not assess the *quality, frequency, or context* of these supportive relationships. For example, the degree of emotional closeness, consistency of support, or history of relational strain could significantly influence the protective function of perceived support. Without such information, the mechanisms linking social support to camouflaging remain somewhat opaque.

Fourth, the study did not account for relevant moderating or mediating variables such as co-occurring mental health conditions, sensory sensitivities, masking fatigue, or autistic trait severity. These variables may influence both the experience of social support and the use of camouflaging behaviors, as suggested by recent work highlighting the complex, transactional nature of these constructs (Livingston et al., 2020).

Fifth, the number of statistical tests conducted increases the likelihood of committing a Type I error, despite appropriate adjustments and model checks. For instance, multiple regression analyses and MANOVA both used an alpha level of  $p <$

.05, which, when applied repeatedly, can inflate the probability of detecting spurious significance (Field, 2022).

Sixth, the cross-sectional design of the study restricts the ability to draw causal inferences. While strong associations were observed, such as the negative correlation between perceived support and total camouflaging ( $r = -0.542, p < .001$ ), these relationships cannot be interpreted as directional or time-bound. A longitudinal design would provide more robust insight into how camouflaging behaviors and social support evolve and influence each other.

Finally, the study employed online recruitment methods through social media and survey platforms, which may have resulted in a sampling bias. Participants were likely to be individuals with internet access, higher digital literacy, and some degree of motivation to engage with autism-related content. These characteristics may not reflect the broader ASD population, particularly those with greater support needs or those disengaged from online communities.

Despite these limitations, the study makes meaningful contributions to understanding how perceived support relates to camouflaging behaviors in autistic young adults. Addressing these limitations in future research will enable the development of more comprehensive, representative, and explanatory models of autistic social functioning.

### **Recommendations for Future Research**

Building on the limitations identified in the current study, several directions for future research are warranted to deepen understanding of the relationship between perceived social support and camouflaging behaviors among young adults with ASD. One critical recommendation is the incorporation of mixed methods designs. While quantitative data offers valuable statistical insights, it does not capture the full

complexity of lived experiences. Integrating qualitative components such as semi-structured interviews or focus groups would allow researchers to examine how autistic individuals interpret and navigate social support in various relational contexts. This approach would also help mitigate the effects of self-report bias and offer richer contextual understanding.

Future research should also aim to recruit more diverse and representative samples. The current sample lacked variation in race, ethnicity, and SES, which limits the generalizability of the findings. Prior studies have noted cultural differences in both social expectations and support structures, suggesting that camouflaging behaviors may differ across sociocultural contexts (Bernal & Sáez-Santiago, 2006; Kim et al., 2013). Expanding participant demographics will enable the examination of whether the protective role of social support operates similarly across underrepresented groups. Additionally, extending the age range to include adolescents and older adults may provide insights into how camouflaging and perceived support evolve across the lifespan.

Another area for future inquiry involves exploring the quality, frequency, and context of social support. The current study examined perceived support as a categorical variable without assessing relational depth or stability. More nuanced analyses could reveal how consistent, affirming support differs from intermittent or ambiguous interactions in influencing camouflaging behavior. For instance, distinguishing between emotionally supportive versus performative or conditional support may help explain why some individuals continue to engage in camouflaging despite the presence of social connections.

Subsequent studies should also incorporate relevant moderating and mediating variables. Co-occurring mental health conditions, such as anxiety, depression, and

trauma history, may influence both the reception of social support and the propensity to camouflage. Masking fatigue, autistic burnout, and perceived stigma are additional variables that could shape these relationships (Pearson & Rose, 2021; Raymaker et al., 2020). Employing moderated mediation or structural equation modeling techniques may provide a more comprehensive understanding of the pathways connecting social support and camouflaging.

Given the cross-sectional nature of the current study, future research would benefit from adopting longitudinal designs. Tracking perceived support and camouflaging behaviors over time would allow for stronger inferences about causality and directionality. Longitudinal approaches could help determine whether increases in social support precede reductions in camouflaging or whether individuals who engage less in camouflaging are more likely to receive genuine support over time (Hull et al., 2017).

Ultimately, future investigations should focus on the development and evaluation of interventions aimed at enhancing affirming support systems for individuals on the autism spectrum. Programs that involve family psychoeducation, peer mentoring, and neurodiversity-affirming practices in schools and communities may be particularly effective in reducing the psychological need for camouflaging. Such interventions should be co-produced with autistic individuals to ensure ecological validity and cultural relevance (Gillespie-Lynch et al., 2017; Milton, 2014).

By addressing these research gaps, scholars can contribute to more effective, inclusive, and affirming approaches to supporting autistic individuals in social environments that respect and accommodate neurodivergent ways of being.

## Implications

The findings of this study underscore the critical role that perceived social support, particularly from family, plays in mitigating camouflaging behaviors among young adults with ASD. Given the established link between camouflaging and adverse psychological outcomes, including anxiety, depression, identity confusion, and suicidality (Cassidy et al., 2018; Hull et al., 2017), these results emphasize the necessity of interventions that promote strong, affirming support systems for autistic individuals. When individuals feel psychologically secure and accepted by their immediate social networks, the need to suppress or alter their autistic traits appears to diminish significantly. This has meaningful implications for clinical practice, education, and public policy.

In clinical settings, mental health professionals should routinely assess the quality of their clients' social support networks as part of comprehensive treatment planning. Given that masking and other forms of camouflaging can increase emotional distress, interventions aimed at reducing camouflaging must include strategies to strengthen authentic interpersonal relationships. Clinicians can work with families to foster emotionally safe environments by providing psychoeducation about autistic communication patterns and affirming neurodivergent identities. Family-based interventions that emphasize validation and relational attunement may be particularly effective in reducing the psychological burden of masking (Cridland et al., 2014; Gillespie-Lynch et al., 2017).

Educational institutions also play a key role. Faculty and staff should receive training in neurodiversity-affirming practices, including how to identify camouflaging behaviors and how to respond supportively. School-based interventions should shift away from deficit-focused models and instead cultivate inclusive environments where

differences in social behavior are normalized rather than pathologized. Embedding neurodiversity into classroom management, peer engagement strategies, and counselor training can reduce the perceived pressure to conform and increase the sense of belonging for autistic students (Heasman & Gillespie, 2019).

From a policy perspective, the results of this study support the development of targeted, community-based support programs. Public health initiatives should prioritize funding for family-centered psychoeducation, peer-led mentoring programs, and social skills groups that promote authenticity rather than conformity. Policies that incentivize such efforts could significantly reduce the long-term psychological costs associated with camouflaging. Moreover, legislative efforts should require mental health providers and educators to receive training in autism-specific supports that address camouflaging and identity development. Government agencies can also play a role by supporting large-scale data collection on the longitudinal outcomes of camouflaging and the role of social support, thereby informing evidence-based practice and resource allocation (Pellicano & den Houting, 2022).

These implications also extend to social inclusion at the cultural level. As neurodivergent voices continue to gain visibility in advocacy and research, there is an urgent need to shift societal narratives away from normalization and toward acceptance. Public campaigns that destigmatize autistic traits and educate the public about camouflaging may reduce the societal pressures that contribute to masking. Broadening the definition of social competence to include multiple communication styles and forms of self-expression could reshape the expectations that lead many autistic individuals to hide their true identities.

Collectively, these clinical, educational, and policy-oriented implications support a broader movement toward a neurodiversity-affirming society. Such a shift is

not only beneficial for reducing camouflaging behaviors but also essential for fostering environments in which autistic individuals are empowered to thrive as their authentic selves.

### **Conclusion**

This quantitative study investigated the relationship between perceived social support and camouflaging behaviors among young adults with ASD, focusing on individuals aged 18 to 30. Utilizing the CAT-Q and the MPSS, the findings revealed that higher levels of perceived support, particularly from family, were significantly associated with reduced masking, compensating, and assimilating behaviors. These results contribute to a growing body of research highlighting the social and psychological importance of interpersonal support for individuals with autism.

The study was grounded in SIT (Tajfel & Turner, 1986) and the DEP (Milton, 2014), both of which offered valuable explanatory frameworks for understanding the complex relationship between self-presentation and social integration. Consistent with SIT, the findings suggest that when autistic individuals experience affirming and stable support from family and close others, they are less likely to engage in camouflaging strategies aimed at aligning with neurotypical norms. Similarly, the results support Milton's conceptualization of social difficulties in autism as a mutual mismatch, highlighting the critical role of neurotypical partners—particularly family members—in reducing the interpersonal pressures that lead to masking and other compensatory behaviors.

Despite these contributions, several limitations constrain the generalizability and depth of the findings. These include reliance on self-report measures, limited demographic diversity, cross-sectional design, and lack of contextual data regarding the quality and consistency of support. Future research addressing these limitations

through mixed methods designs, longitudinal data collection, and broader demographic sampling would deepen understanding and improve the applicability of the findings to more diverse autistic populations.

The implications of this study are wide-ranging. For clinicians, the results underscore the importance of addressing camouflaging directly in assessment and treatment, while also supporting family systems in creating psychologically safe environments. For educators and policymakers, the findings advocate for the implementation of neurodiversity-affirming training, targeted support programming, and inclusive mental health guidelines that recognize the risks of camouflaging and promote authentic self-expression.

Ultimately, this study underscores the crucial need to shift focus from symptom management to systemic efforts that promote meaningful social connections, identity affirmation, and long-term well-being for autistic individuals. Reducing camouflaging demands must be a shared responsibility across families, schools, clinical settings, and communities. When autistic individuals are supported in presenting their authentic selves without fear of rejection or misunderstanding, the path toward psychological resilience and social inclusion becomes not only possible but sustainable.

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## Appendix A: Demographic Survey

The following questions will help us understand participant demographics and how social support relates to camouflaging behaviors in young adults with autism spectrum disorder (ASD).

### ***1. Age***

- 18–20 years (Late adolescence/early adulthood)
- 21–25 years (Emerging adulthood)
- 26–30 years (Early established adulthood)

### ***2. Gender***

- Male
- Female
- non-binary
- Prefer to self-describe:
- Prefer not to disclose

### ***3. Socioeconomic Status (SES)***

#### ***Highest Level of Education Completed:***

- Less than high school
- High school diploma or GED
- Some college, no degree
- Associate's degree
- Bachelor's degree

- Master's degree or higher

***Employment Status:***

- Employed full-time
- Employed part-time
- Unemployed, seeking work
- Unemployed, not seeking work
- Student
- Other (please specify):

***Annual Household Income:***

- Less than \$25,000
- \$25,000 – \$49,999
- \$50,000 – \$74,999
- \$75,000 – \$99,999
- \$100,000 or more
- Prefer not to disclose

***4. Race/Ethnicity***

- White
- Black or African American
- Hispanic or Latino

- Asian
- Native American or Alaska Native
- Native Hawaiian or Pacific Islander
- Multiracial
- Other (please specify):
- Prefer not to disclose

### **5. Primary Living Arrangement**

- Living alone
- Living with family/relatives
- Living with roommates or friends
- Other (please specify):

### **6. Relationship Status**

- Single
- In a relationship
- Married
- Separated/Divorced
- Other (please specify): **[Open text box]**

### **7. Access to Social Support (Select all that apply)**

- I receive social support primarily from family

- I receive social support primarily from friends
- I receive social support primarily from a significant other
- I receive social support primarily from professionals (e.g., therapists, support groups)
- I do not have access to regular social support

### **8. Self-Reported Autism Spectrum Disorder (ASD) Diagnosis**

- Do your self-report be diagnosed with autism spectrum disorder (ASD)?
  - Yes
  - No (End survey; participant does not meet eligibility criteria)

### **9. Age of ASD Diagnosis**

- At what age were you diagnosed with ASD? \_\_\_\_\_

### **10. Any Additional Diagnosed Conditions**

- Please list any co-occurring mental health or developmental conditions (e.g., ADHD, anxiety, depression):

**Thank you for your participation!**

If you have any concerns about your participation or wish to withdraw from the study, please contact [[mofoluwakemi.johnson@waldenu.edu](mailto:mofoluwakemi.johnson@waldenu.edu)]

## Appendix B: Permission to Use Instruments

### **Permission for the Camouflaging Autistic Traits Questionnaire (CAT-Q)**

Permission:

This document is available under an open-source license and may be freely used, copied, modified, and distributed by researchers and clinicians. Healthcare Settings: Mental health practitioners may use, adapt, and modify the Assessment in clinical practice. Researchers may use, distribute, modify, and create derivative works of the Assessment and publish findings incorporating it (Baker et al.,2024).

Baker, S., Smyth, C., Bartholomew, E., Buchanan, B., & Hegarty, D. (2024). A Review of the Clinical Utility and Psychometric Characteristics of the Camouflaging Autistic Traits Questionnaire (CAT-Q): Gender-Specific Norms, Percentile Rankings, and Qualitative Descriptors. Retrieved from:

<https://novopsych.com.au/assessments/formulation/camouflaging-autistic-traits-questionnaire-cat-q/>

### **Permission for the Multidimensional Scale of Perceived Social Support (MSPSS)**

Permission on February 13, 2025:

Dear Mofoluwakemi Johnson,

You have my permission to use the Multidimensional Scale of Perceived Social Support (MSPSS) in your research. I have attached a copy of the scale (with scoring information on the 2<sup>nd</sup> page), a document listing several of the articles that have reported on the reliability and validity of the MSPSS, and a chapter that I wrote about the scale. In addition, the original 1988 article is attached.

I hope your research goes well.

Best regards,

Gregory Zimet

### Appendix C: Recruitment Brochure

You are invited to complete a [20 -30] minute anonymous survey for a study titled:  
The Impact of Social Support on Camouflaging Behaviors Among Young Adults with  
Autism Spectrum Disorder: Exploring Protective and Risk Factor.

**Seeking volunteers that meet these requirements:**

- Young adults aged 18-30
- Self -report a diagnosis of High Functioning Autism Spectrum Disorder (ASD)
- Have access to the internet to complete an online survey
- Live in the United States

The survey will be open until the end of April. Questions should be directed to [mofoluwakemi.johnson@waldenu.edu].

To complete the survey, please click [Insert survey link or QR code or directions to complete survey]