



Masking in autistic children and young people

Masking in autistic people is mostly subconscious and an involuntary trauma response. It happens because environments can often be out of sync with the different needs of autistic people. Masking is a survival mechanism and can be camouflaging, self censoring, suppressing internal distress caused by things such as sensory overload, people pleasing and hiding their authentic self, identity, interests and stims.

According to research autistic masking is “concealing or portraying a surface presentation of their true self, to secure social acceptance and to avoid stereotyping, prejudice and discrimination” Julia Cook, Laura Crane et al (2023) ‘Dropping the mask: it takes two’

An autistic child or young person in school (whether they have a diagnosis or not) may present as:

Fine

Compliant

Hard working

Quiet or talkative

Joining in with conversations/giving eye contact

May have a friend or be on the periphery of a group of friends

They may talk, engage, smile, answer questions

Or they may be very quiet, withdrawn (and this may be seen as just shyness)

Children may also mask their executive functioning challenges at school, not able to express their challenges with being organised and flexible, remembering everything expected of them, remember lists of verbal instructions, challenges with regulating their emotions, tolerating stress and too many changes of focus.

Social environments (such as school) can be very noisy, busy and unpredictable, with a lot of neuro-normative social demands and expectations, that lead to what we call social hangovers. Masking uses up a lot of psychological, emotional and physical energy, meaning they have less and less capacity. It can mean that when they get home from school they experience meltdowns and shutdowns.

Prolonged masking can also lead to burnout, which can be very serious, leading to significant mental health challenges.



Masking is described by Keiran Rose and Amy Pearson in their book “Autistic masking- Understanding identity management and the role of stigma” (2022) as ‘identity management and adaptive morphing. It erodes away the autistic person’s ability to live authentically and leads to mental health struggles and exhaustion’.

In society, autistic people represent a minority group (Botha and Frost 2020) who face stigma, discrimination and negative stereotypes. These factors can contribute to autistic people’s received stress and lead to masking or camouflaging behaviours (Han et al 2021, Pearson and Rose 2021) ‘Measuring and validating autistic burnout’ (J Mantzalas et al 2024).