

Background

- Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder that can impair social and communication skills (CDC, 2022).
- Research has estimated that between 63-70% of people with ASD suffer from depression while 50-58% experience anxiety (Matson & Williams, 2013).
- Self-compassion is the concept of being caring towards oneself (Muir et al., 2015) and has been found to be positively associated with well-being (Zessin et al., 2015).
- Anxiety and depression are negatively correlated with self-compassion for ASD and typically developing (TD) children (Muris et al., 2015, Howes et al., 2020).
- Ineffective coping strategies have been found to intensify depression particularly for boys with ASD (Pouw et al., 2013).
- Hypothesis:**
 - Compared to TD participants, ASD individuals will experience a stronger negative correlation between self-compassionate coping scores and both anxiety and depression.
 - The positive relationship between self-punitive coping scores and both anxiety and depression will be stronger for ASD participants.

Methods

Participants

- Data from 61 (ASD =24) children ranging from 13 to 18 years of age who participated in the longitudinal ACE2 study, a five-site NIH-funded study on gender differences in autism were included in the present analysis.

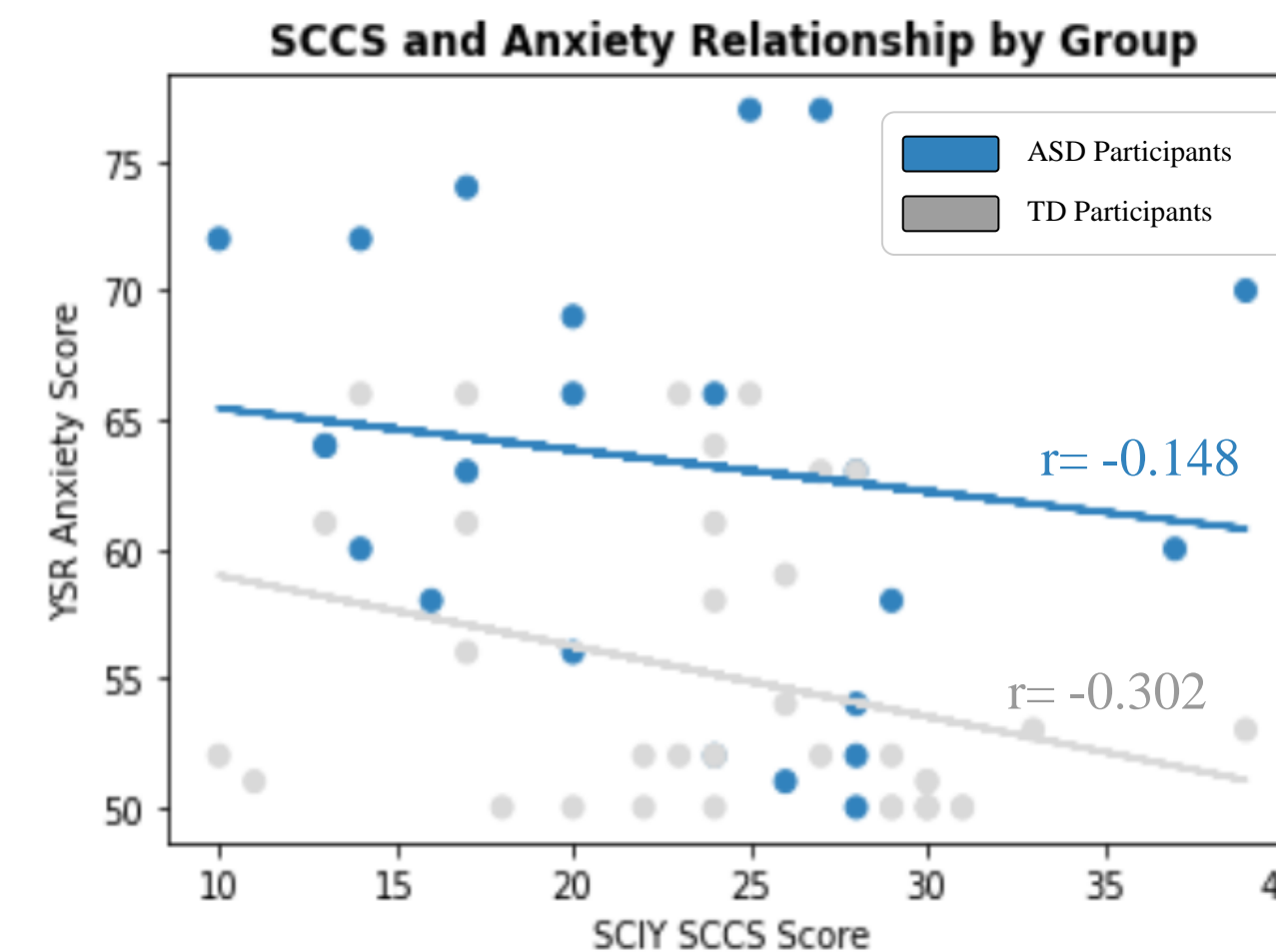
	N	Age	Gender
ASD	24	M = 16.1 SD = 0.99 Range = 14.3 - 17.6	F = 8 M = 16
TD	37	M = 15.8 SD = 1.53 Range = 13.25 - 18	F = 23 M = 14
Total	61	M = 15.9 SD = 1.34 Range = 13.25-18	F = 31 M = 30

Measures

Measure	General Information	Applicable Scales
Self-Compassion Inventory for Youth (SCIY) (Crowley & Nicholls, 2015)	A self-report tool comprised of 16 statements aimed at understanding how the responder relates to themselves. Participants were asked to rate their level of agreement with each item on a Likert scale ranging from 1-5: never- always.	Self-compassionate coping scale (SCCS). Items on this scale were stated such as: "I try to be kind to myself no matter how I am feeling." Self-punitive coping scale (SPCS). Items on this scale were stated such as: "When I realize I have done things badly or wrong, I treat myself badly."
Youth Self Report (YSR) (Achenbach, & Rescorla, 2001)	A 112 item, self-questionnaire assessing a range of emotional and behavioral problems. Participants are asked to rate their level of agreement to each statement on a Likert Scale ranging from 0-2: absent- occurs often.	Anxiety. A DSM-oriented scale where a higher score indicates greater impairments. Depressive. A DSM-oriented scale a where higher score indicates greater impairments.

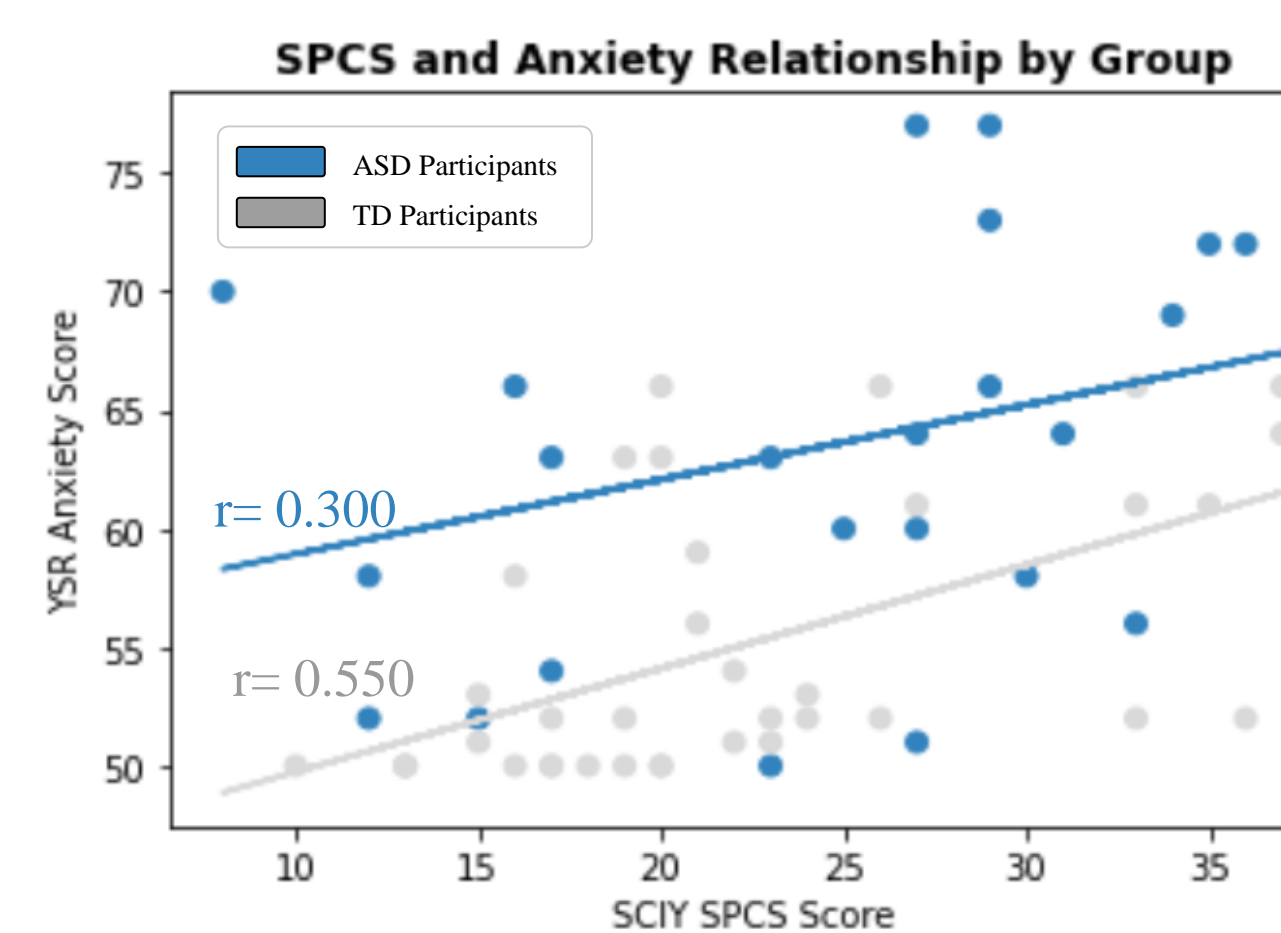
Results

1. Comparison of the Relationships Between Anxiety and SCCS for ASD and TD Participants

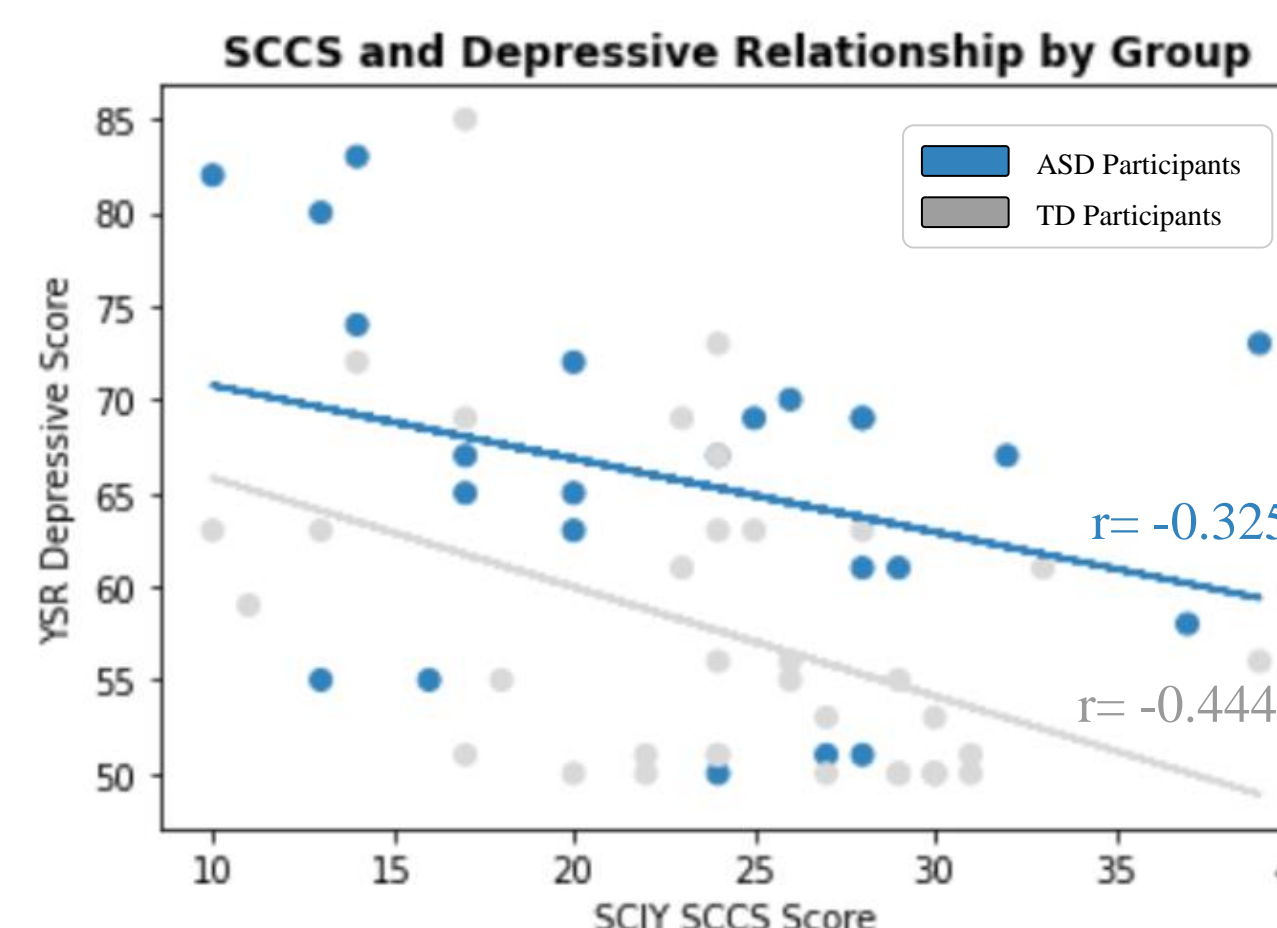


1a. There was no significant difference in the correlations between anxiety and SCCS score when comparing TD ($r(37) = -0.302, p > 0.05$) to ASD ($r(24) = -0.148, p > 0.05$) participants ($z(59) = 0.570, p > 0.05$).

1b. TD participants had a marginally (but not significant) stronger positive correlation between anxiety and SPCS score ($r(37) = 0.550, p < 0.01$) compared to ASD participants ($r(24) = .300, p > 0.05$), ($z(59) = 1.10, p = 0.125$).

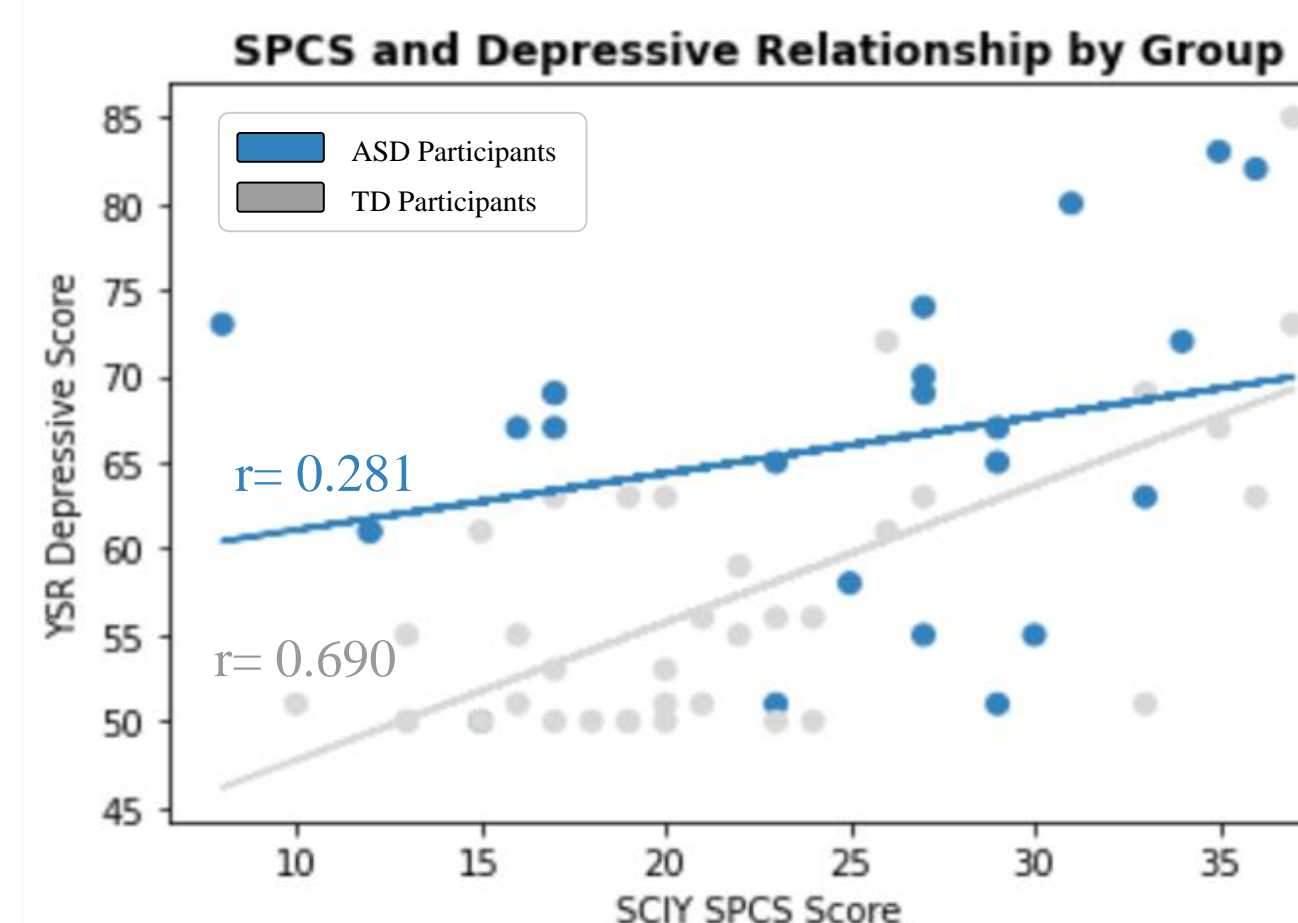


2. Comparison of the Relationships Between Depression and Self-Compassion for ASD and TD Participants

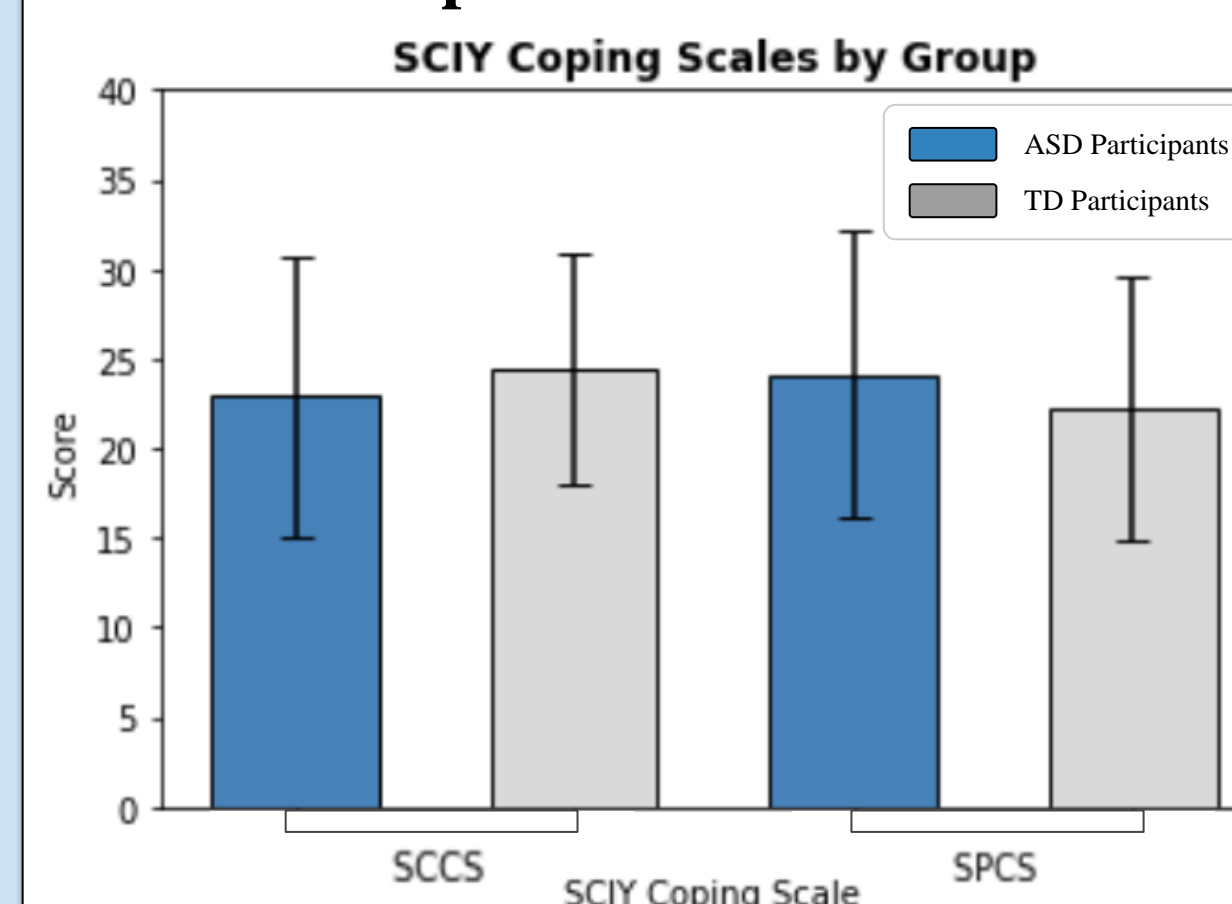


2a. The correlations between depression and SCCS score for TD ($r(36) = -0.444, p < 0.01$) and ASD ($r(24) = -0.325, p > 0.05$) participants were not significantly different ($z(59) = 0.466, p > 0.05$).

2b. TD participants had a significantly stronger positive correlation between depression and SPCS score ($r(36) = 0.690, p < 0.01$) compared to ASD participants ($r(24) = .281, p > 0.05$), ($z(59) = 2.02, p = 0.020$).



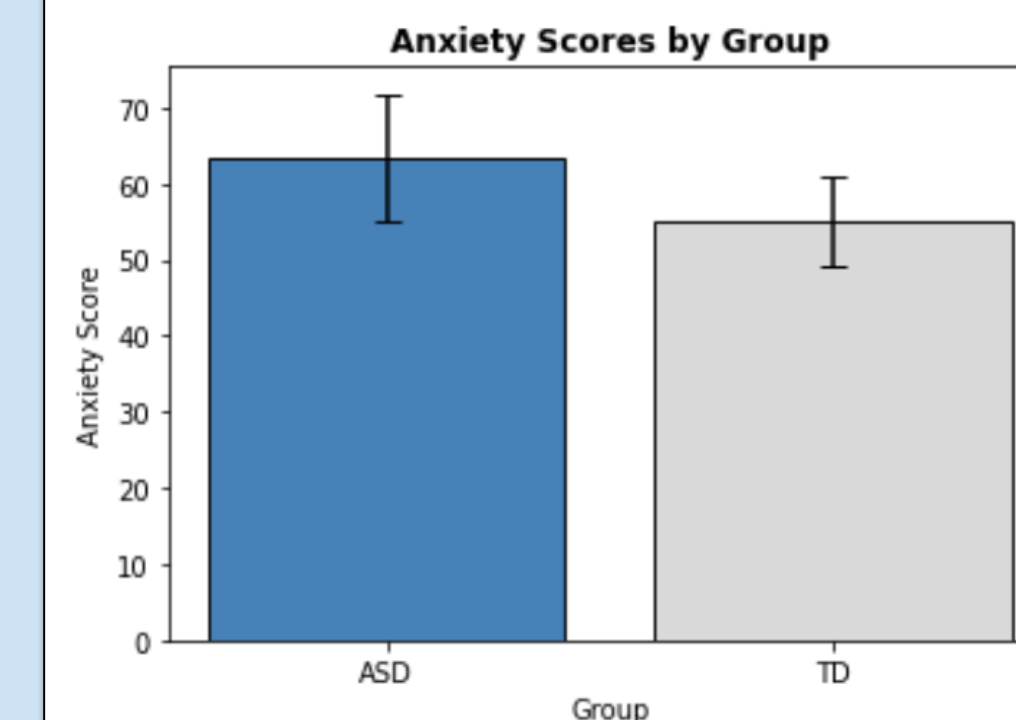
3. Self-Compassion Subscale Scores for ASD and TD Participants



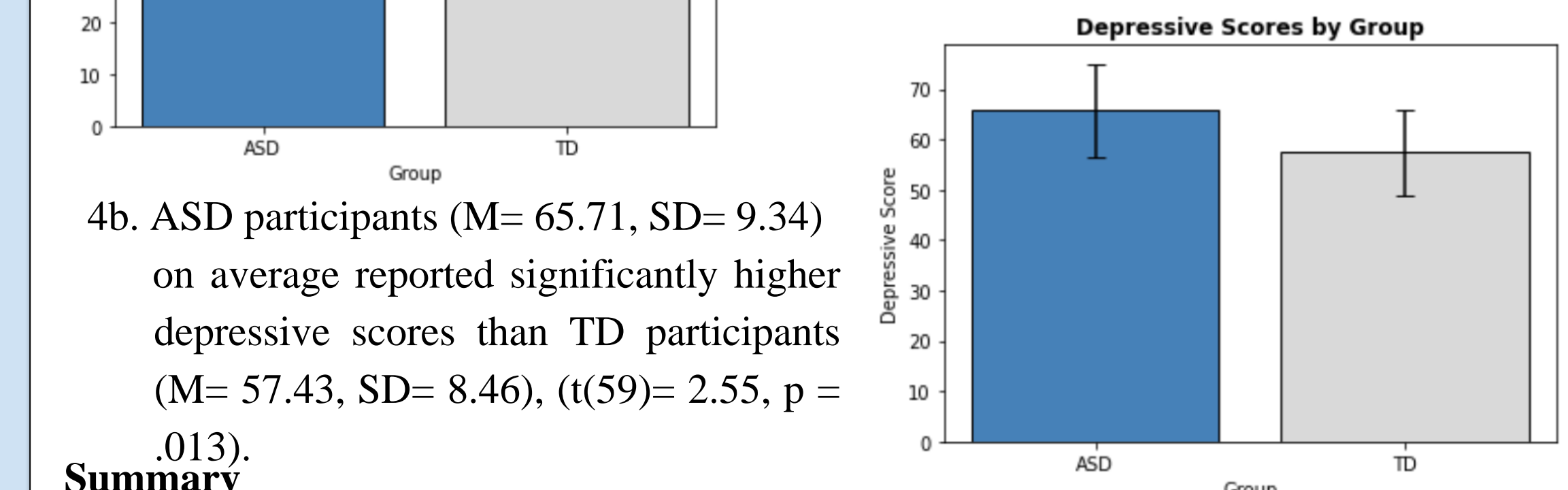
3a. There was no significant difference between the mean score of ASD participants ($M = 22.88, SD = 7.74$) and TD participants ($M = 24.35, SD = 6.44$) ($t(59) = -0.57, p > 0.05$) on the SCCS. Additionally, there was no significant difference in mean score on the SPCS between ASD participants ($M = 24.13, SD = 8.02$) and TD participants ($M = 22.16, SD = 7.34$), ($t(59) = 0.70, p > 0.05$).

Results Continued

4. Anxiety and Depressive Scores for ASD and TD Participants



4a. ASD participants ($M = 63.38, SD = 8.42$) on average reported significantly higher anxiety scores than TD participants ($M = 55.05, SD = 5.83$), ($t(59) = 3.25, p = .002$).



4b. ASD participants ($M = 65.71, SD = 9.34$) on average reported significantly higher depressive scores than TD participants ($M = 57.43, SD = 8.46$), ($t(59) = 2.55, p = .013$).

Summary

- There was no significant difference in the correlation between Self-Compassionate Coping Scale and both anxiety and depression between ASD and TD participants.
- Between ASD and TD participants, the correlation between between Self-Punitive Coping Scale and anxiety was not significantly different. However, the correlation between between Self-Compassionate Coping Scale and depression was significantly stronger for TD participants.
- Among ASD participants, there were higher rates of anxiety and depression compared to TD participants. There was no significant difference in SCCS and SPCS scores between groups.

Discussion

- The data did not support either hypothesis: ASD participants had a similar relation between anxiety or depression and self-compassion as found in the TD participants.
- These results may suggest that self-compassion is equally as effective for ASD children as it is for TD children in reducing experiences of anxiety or depression. Perhaps there are coping mechanism other than self-compassion that are more worthwhile to research for children with ASD.
- As the present analysis was purely correlational. Future research could explore the direction of causality between self-compassion and anxiety and depression.
- The data suggests that anxiety and depression are more prevalent within autistic youth. Future research could benefit from more deeply assessing which (if any) aspects of self compassion (i.e., self-kindness, common humanity, mindfulness) reduce experiences with anxiety and depression. Further, more studies could be conducted to compare the relative effectiveness of various coping strategies on anxiety and depression for children with ASD.

Limitations

- The sample size, in particular the size of the ASD group, was small and may have affected the results and subsequent conclusions.

References

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