Title: The Effect of Knowledge and Diagnostic Labels on Stigma towards Autism

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Introduction: Recent work demonstrates that adults with autism are evaluated more favorably by neurotypical (NT) peers when their diagnosis is provided. However, these evaluations also depend upon the attitudes of the NT adult evaluating the person with autism. Those with higher levels of stigma towards autism actually provide less favorable ratings of autistic adults when they are aware of their diagnosis (Morrison et al., under review), while higher autism knowledge results in more favorable evaluations (Sasson & Morrison, 2017). The current study examined NT attitudes and perceptions about autism to examine if there are differences in perceived stigma, level of functioning and lifetime prognosis, intelligence, and understanding of autism depending upon how an autism diagnosis is presented.

Method: Neurotypical college students (n=266) (mean age = 21.55; SD = 4.61) completed six surveys answering questions in regard to one of eight labels, four referring to autism (Autistic, Autism, Autism Spectrum Disorder, Asperger’s), and four control labels (schizophrenia, schizophrenic, clinical disorder, clinical diagnosis) so that relative stigma could be parsed. The Social Distance Scale (SDS; Gillespie-Lynch et al., 2015) measured the raters’ willingness to interact with individuals with each label, and the Prejudice scale (Hori et al., 2011) measured the raters’ stigma. The Attributes and Reactions Scale (AAR; Angermeyer & Matschinger, 2003) measured stigmatizing responses to labels by evaluating the perceived negative attributes (danger, dependency on others) and emotional reactions (fear, pity, anger) ascribed to different labels. The General Knowledge Questionnaire (Jensen et al., 2016) was used to assess raters’ beliefs about the prognosis and level of intelligence of people with each label, while the Autism Awareness Survey (AAS; Gillespie-Lynch et al., 2015) assessed autism knowledge. Finally, participants completed the Specific Levels of Functioning (SLOF; Schneider & Struening, 1983) to determine perception of independent functioning in the domains of relationships, acceptability, activities, and work.

Results: One-ways ANOVAs were run for each measure with post-hoc Tukey tests to follow up differences between labels. For the stigma measures, levels of social distance and endorsements of fear and pity towards labels differed depending on the label used (ps<.01). Follow up tests showed that the schizophrenic label evoked more fear than autistic, autism, and clinical diagnosis labels (ps<.01), but none of the specific comparisons for social distance (ps>.052) and pity (ps>.09) survived the correction (ps>.052). Scores did not differ depending on levels of prejudice (p=.22), perceived dependency, or anger towards people with diagnostic labels (p=.07).

For knowledge of autism, increased knowledge of autism across the four autism-related labels was associated with significantly less evoked fear (R² = -.273; p = .001), as well as decreased perceptions of danger (R² = -.401, p < .001) and dependency on others (R² = -.288, p = .001) towards individuals with autism. Raters with a better understanding of autism also endorsed more positive prognosis (R² = .401, p < .001) and increased functioning within relationships (R² = .218, p = .01) for individuals with autism. Finally, autism knowledge correlated moderately with social distance (R² = .207, p = .015), with raters with increased knowledge of autism more willing to interact with autistic individuals.

In terms of perceived functioning, there were no differences across all the SLOF domains (ps>.33), but ratings of intelligence and prognosis did differ (ps<.004). The label Asperger’s was associated with more intelligence than the schizophrenia, schizophrenic, and generic clinical disorder labels (ps<.04), and raters endorsed more positive life outcomes for individuals with autism and Asperger’s compared to the generic clinical diagnosis label.

Discussion: Results show little impact of autism diagnostic label on attitudes and perceptions of autism. There were no significant results of specific comparisons of autism labels for stigma, suggesting no label evokes better or worse stigma. However, the label Asperger’s conveyed higher ratings of intelligence, and both autism and Asperger’s were rated as better prognoses, suggesting that these labels may be associated with perceptions of higher functioning. Additionally, increased knowledge of autism was associated with better perceptions and decreased stigma towards individuals with autism. Comparisons to the control groups also suggest that autism is perceived more favorably compared to other conditions such as schizophrenia and general clinical diagnoses. These results suggest that although autism may be viewed favorably relative to some other conditions, efforts to increase autism awareness may further reduce stigma and prejudice towards these individuals.

References/Citations: