



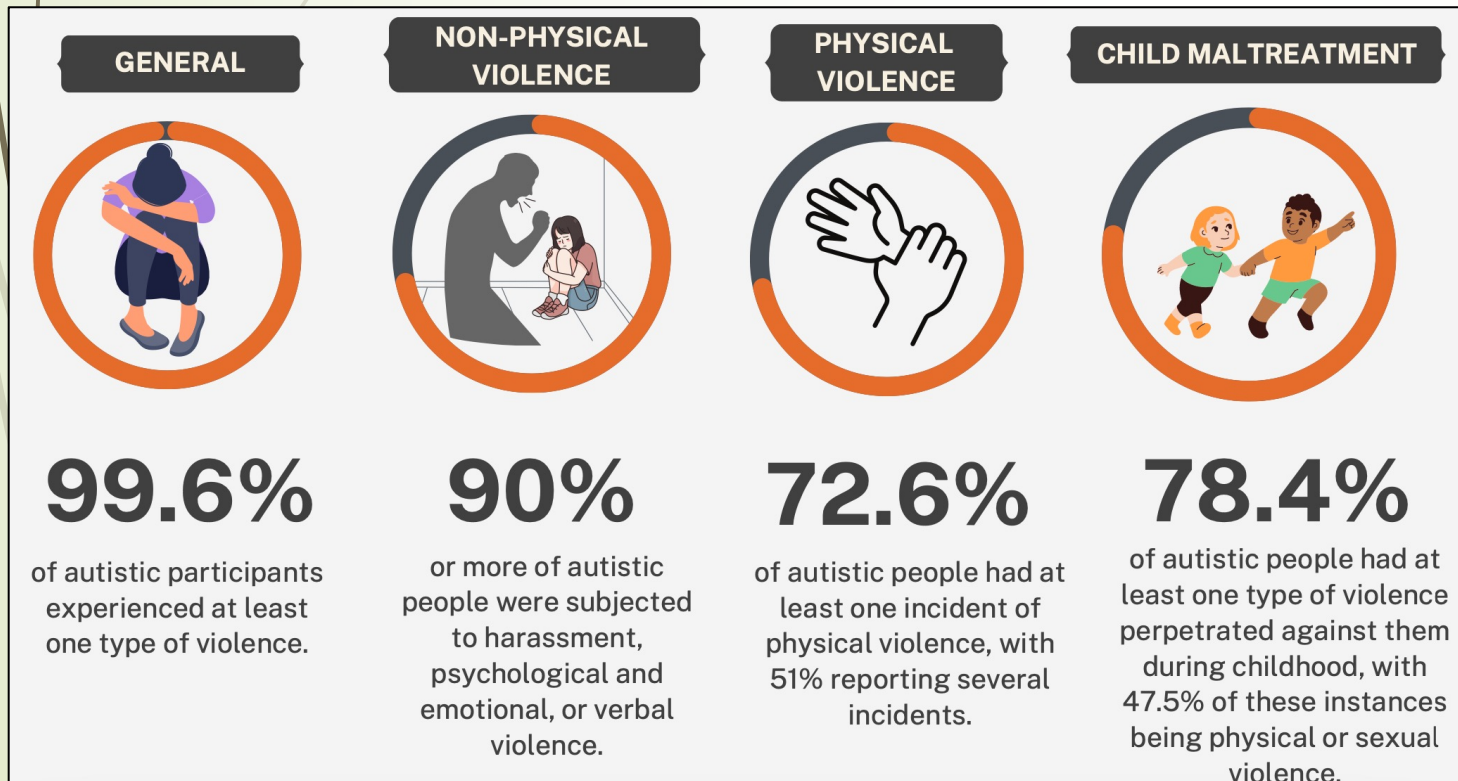
Katrine Callander
PhD Social Policy, University of Kent
k.callander@kent.ac.uk

Supervisors:
Professor Chrissie Rogers
Dr. Damian Milton

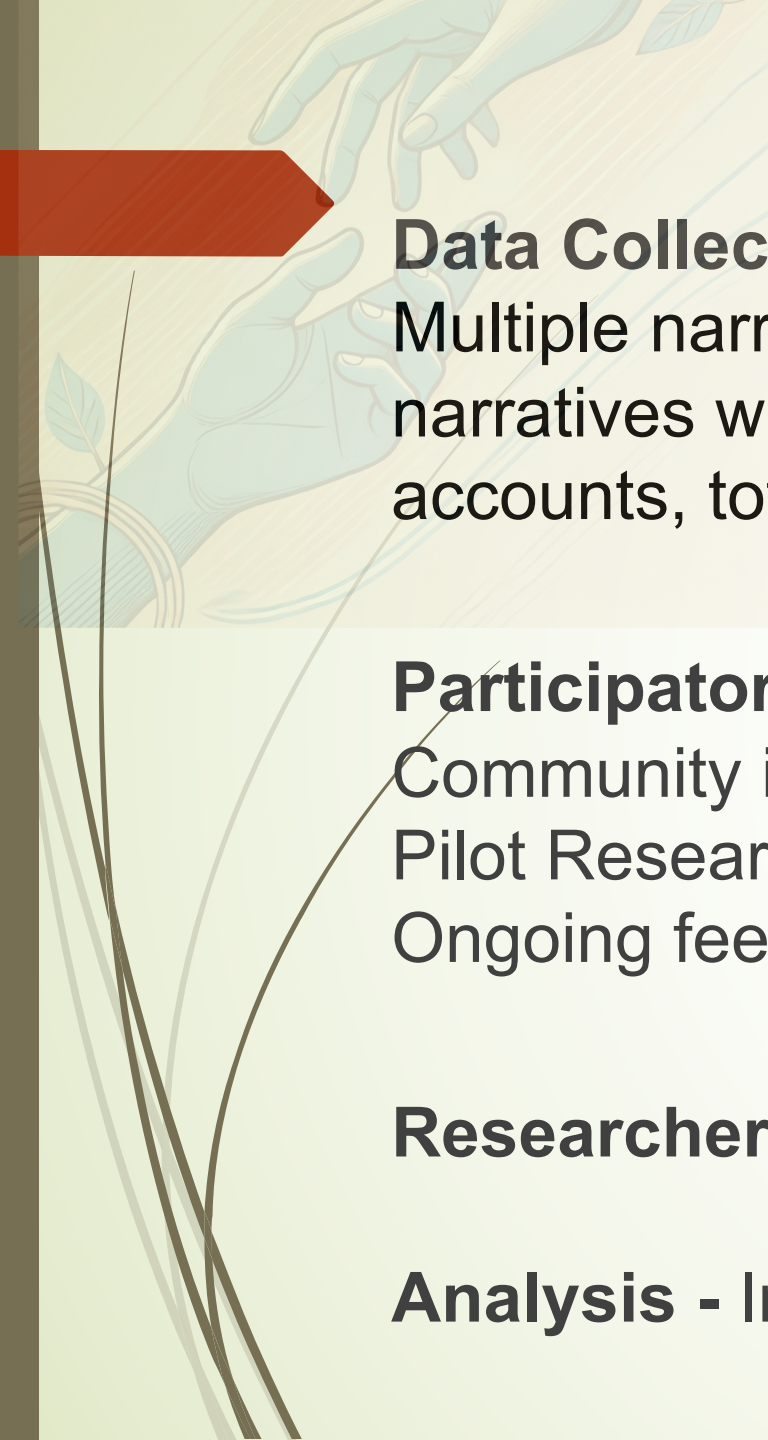
Navigating Complexity: Autistic Women's Lived Experiences of Trauma and Reclaiming Agency

'The Why' – Trauma rationale

“9 out of 10 autistic women report having experienced sexual assault”
(Cazalis *et al.*, 2022)



(EUCAP, 2023)



PhD Methodology

Data Collection:

Multiple narrative life story interviews, audio recordings and written narratives with 62 participants. It included 126 interviews and written accounts, totalling over 1 million words of data.

Participatory Research Approach

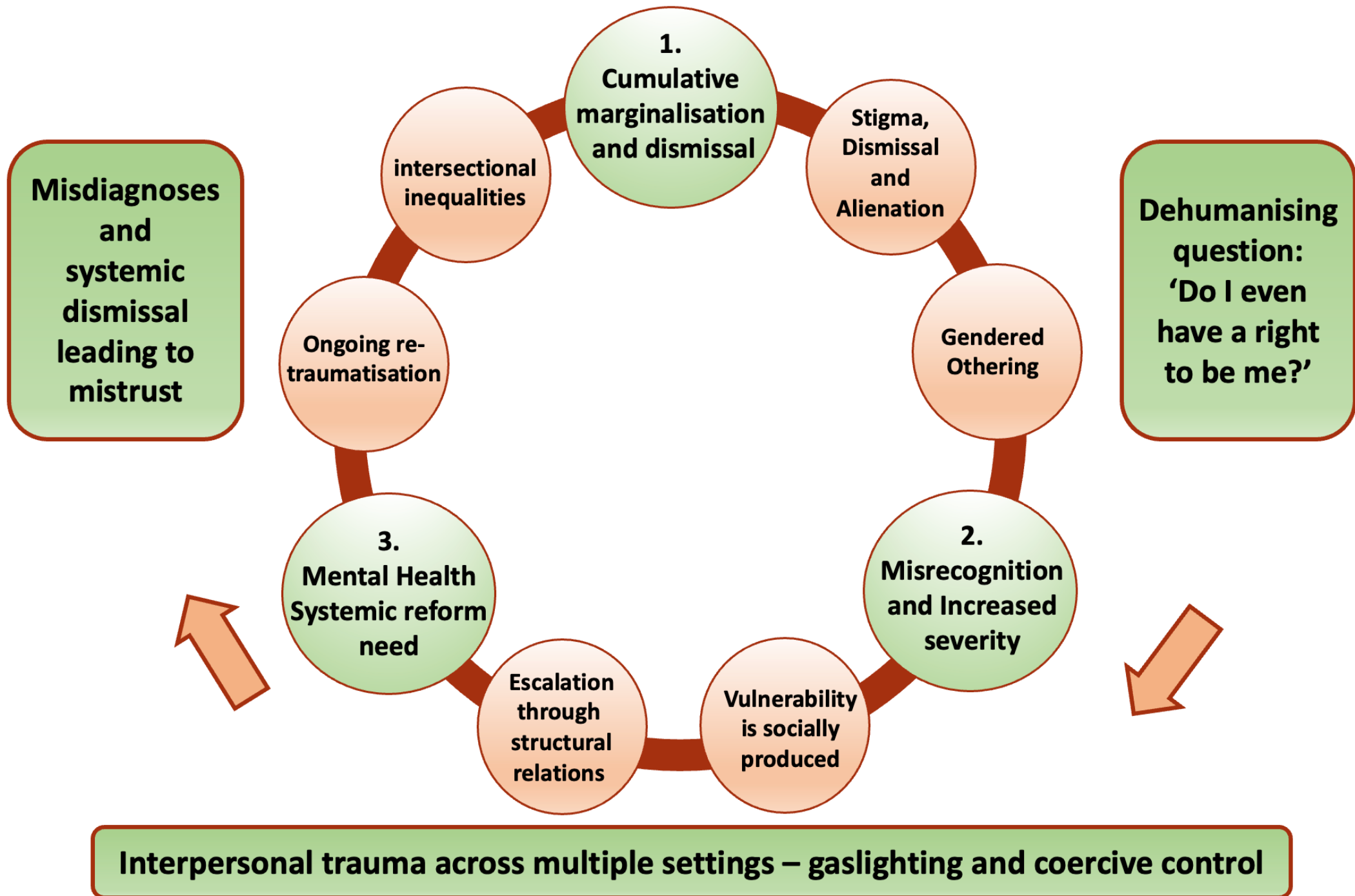
Community involvement in proposal and research questions.

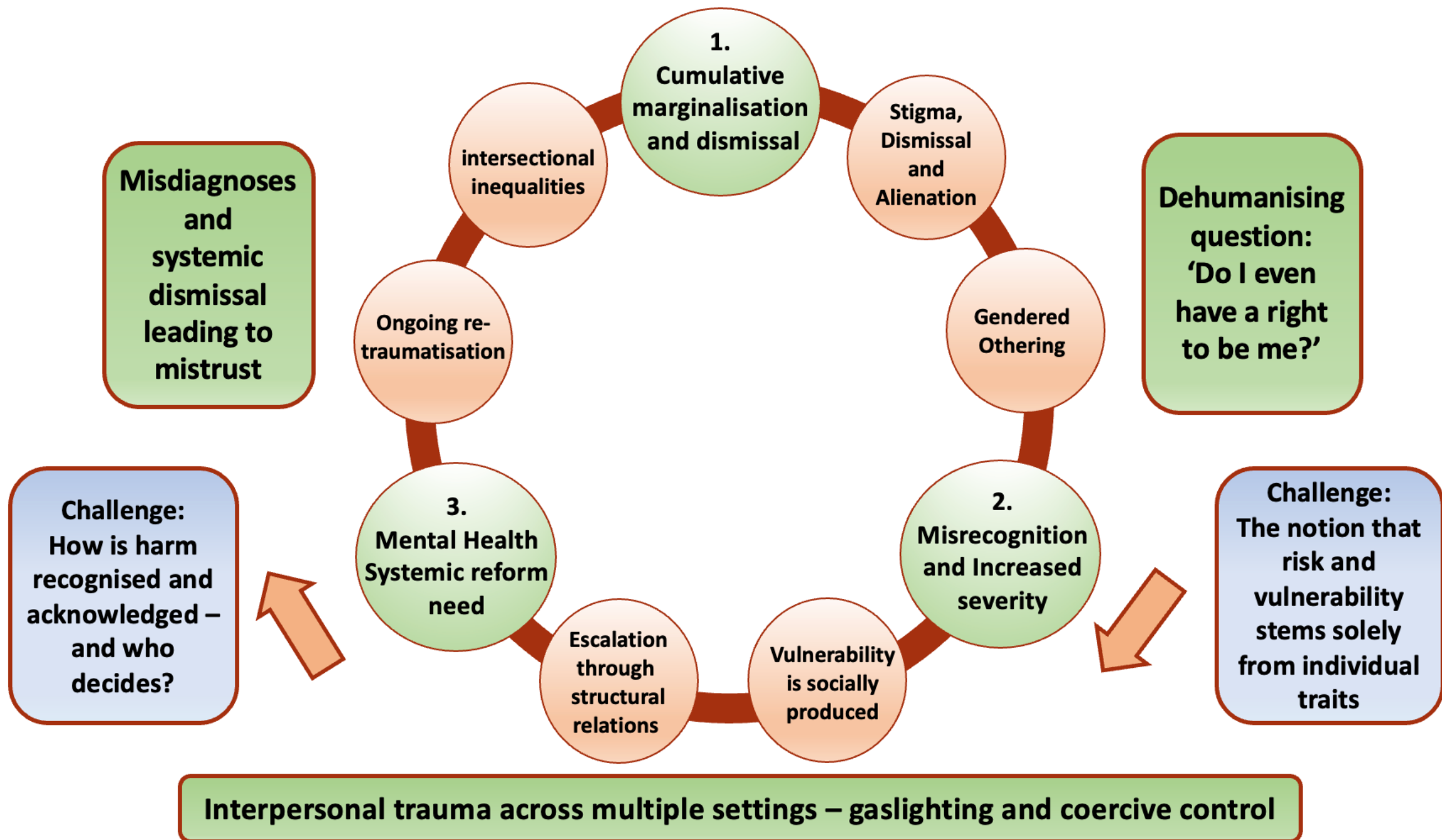
Pilot Research Stage for initial themes and Autscope focus group.

Ongoing feedback to assess resonance of themes.

Researcher Reflexivity - Positionality, bias, trust and credibility

Analysis - Inductive Thematic analysis





**1.
CUMULATIVE
MARGINALISATION
AND DISMISSAL**

“I was completely disconnected from my true feelings and bodily sensations” – Kiara

‘No right to be me’

- Early and repeated harms fragment identity and boundaries.
- Stigma, dismissal, and alienation foster isolation and self-blame.
- Gendered norms and masking reinforce marginalisation, making traits socially “unacceptable.”
- Trauma is cumulative, compounding over time and shaping later vulnerability.

“I had no right to be me” – Stella
“All my sensitivities were seen as abnormal” – Juniper

Interpersonal trauma across settings

2. INTERPERSONAL MISRECOGNITION AND SEVERITY

- Trauma is often misunderstood or reframed as personal deficit.
- Relational misrecognition compounds harm, eroding trust in self and others.
- Asymmetric power and systemic prejudice silence survivors and deny credibility.
- Cycles of toxic shame and silencing deepen trauma severity.

“A lot of us just end up accepting abuse because we learn that's just how the world is” - Diana
“I find it hard to understand and assert my own boundaries, or even trust myself” - Clara



3. MENTAL HEALTH SYSTEMIC REFORM

‘Feeling separate from humanity’ - Mental health and mistrust

- Professional dismissal, misdiagnosis and gaslighting perpetuate mistrust.
- Medicalised framings and lack of recognition obscure social power dynamics and reinforce harm.
- Systems often act as social control, retraumatising rather than supporting survivors.
- Regaining “authority over my own life” through narrative re-authoring can validate experience, but support for this process is extremely limited.

“They treated me as an untouchable” – Maya

“Most of the people I asked for support only added to the horror” - Mary



Recommendations:

1. Reframing Trauma as Systemic

Address systemic misrecognition: Trauma is too often dismissed or reframed as personal deficit. Policy and practice must shift toward recognising trauma as relational and systemic, not intrinsic vulnerability.

Reclaiming agency and identity: Trauma erodes autonomy. Support should centre boundary-setting, unmasking and narrative re-authoring, enabling women to reconstruct coherent and empowered identities.

Linking trauma to health outcomes: Trauma-related depression, PTSD, suicidality and misdiagnoses are public health issues. Policies and practice must integrate trauma-informed, neurodivergent-affirming approaches across health and social care systems.



Recommendations 2

– Amplifying Autistic Voices in Policy and Practice

Create safe spaces for narrative work: Survivors need ethical, supportive environments where memory and identity can be explored without retraumatisation, reframing harm as systemic failure rather than personal inadequacy.

Prioritise autistic-led approaches: Autistic voices and collective memory must guide advocacy and support, challenging stigma and building inclusive communities.

Commit to participatory methodologies: Ensure autistic women are active partners in research, policy and service design, transforming recognition and accountability within systems that have historically silenced them.



k.callander@kent.ac.uk

www.KatrineCallander.com

Bluesky: katrine1302.bsky.social

Thank you!

