

Introduction

- High rates of co-occurring psychiatric conditions in autistic individuals (Ghaziuddin et al., 2002).
- Depression is one of the most common co-occurrences in autistic youth (Mazefsky et al., 2012).
- Depression is associated with lower social motivation and adaptive functioning, and increased risk for suicidality and self-injurious behaviours (Pezzimenti et al., 2019).
- Social communication difficulties – a core characteristic of ASD – including reduced initiation and understanding of social interactions, can decrease peer inclusion and the formation of friendship and increase rates of loneliness (Bauminger & Kasari, 2000; Lasgaard et al., 2010).

Current Study

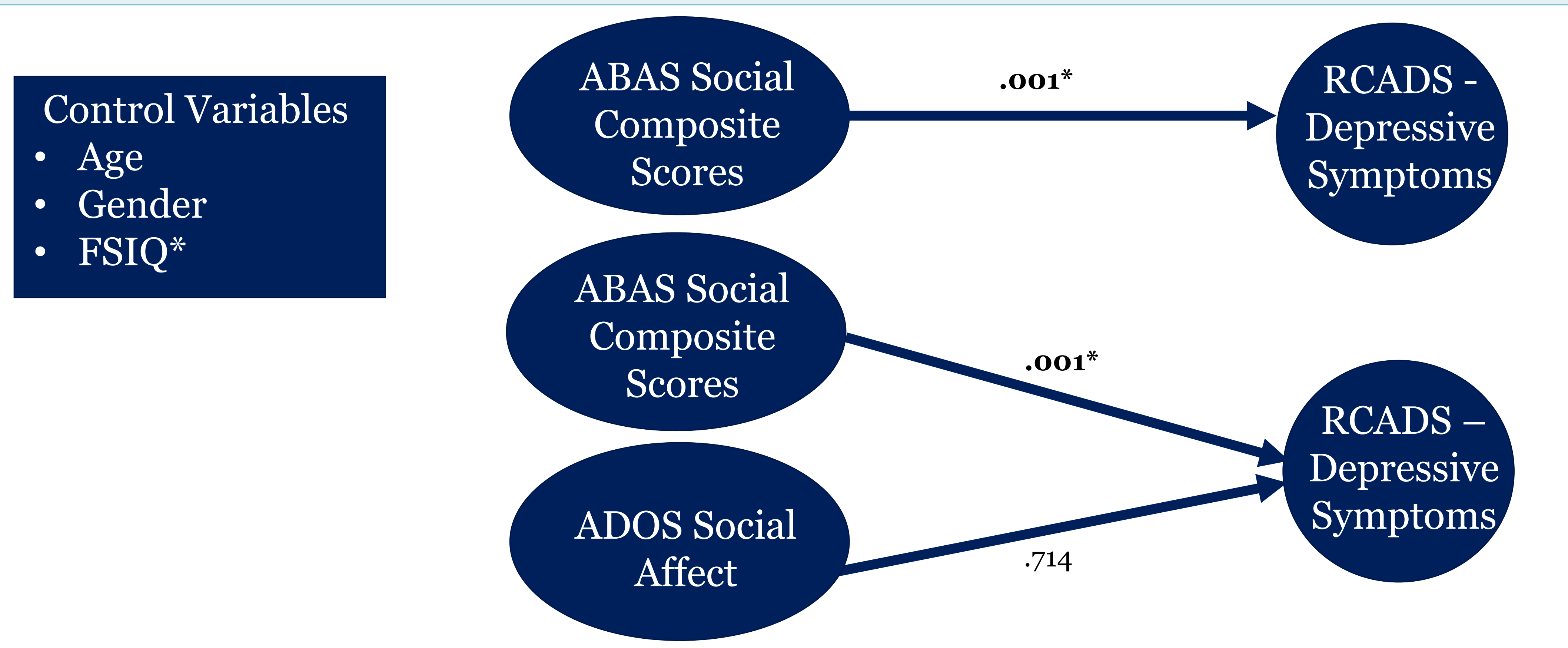
Research Goal: Develop an understanding surrounding the association between social functioning and depressive symptoms in autistic youth.

Hypothesis: (1) Greater social communication difficulties would be associated with *increased* depressive symptoms. (2) Exploratory analysis on the inverse relationship. (3) Lower social skills would be associated with *higher* depressive symptoms. (4) Higher depressive symptoms would be associated with *poorer* social skills.

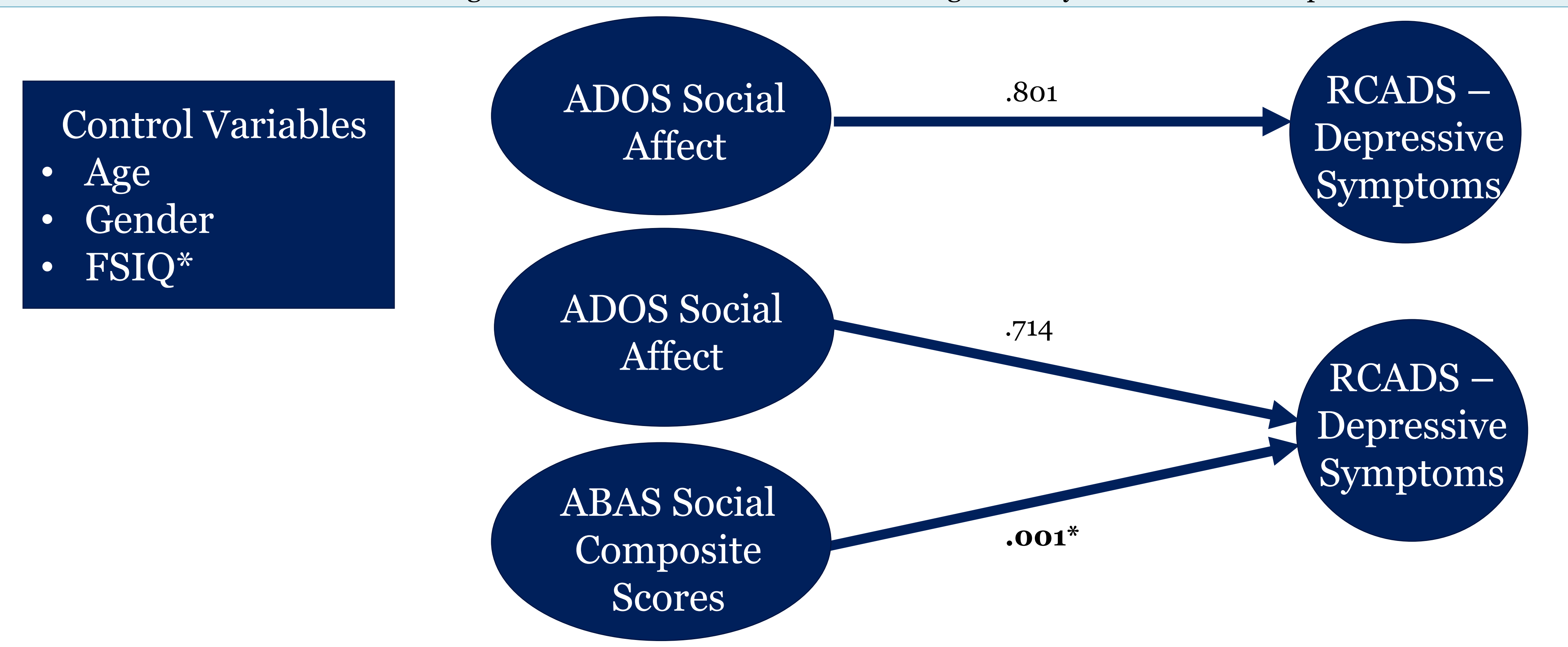
Methods

Participants: 473 autistic youth 8-18 years (M=11.92, SD = 4.32; 102 females & 371 males) recruited from POND

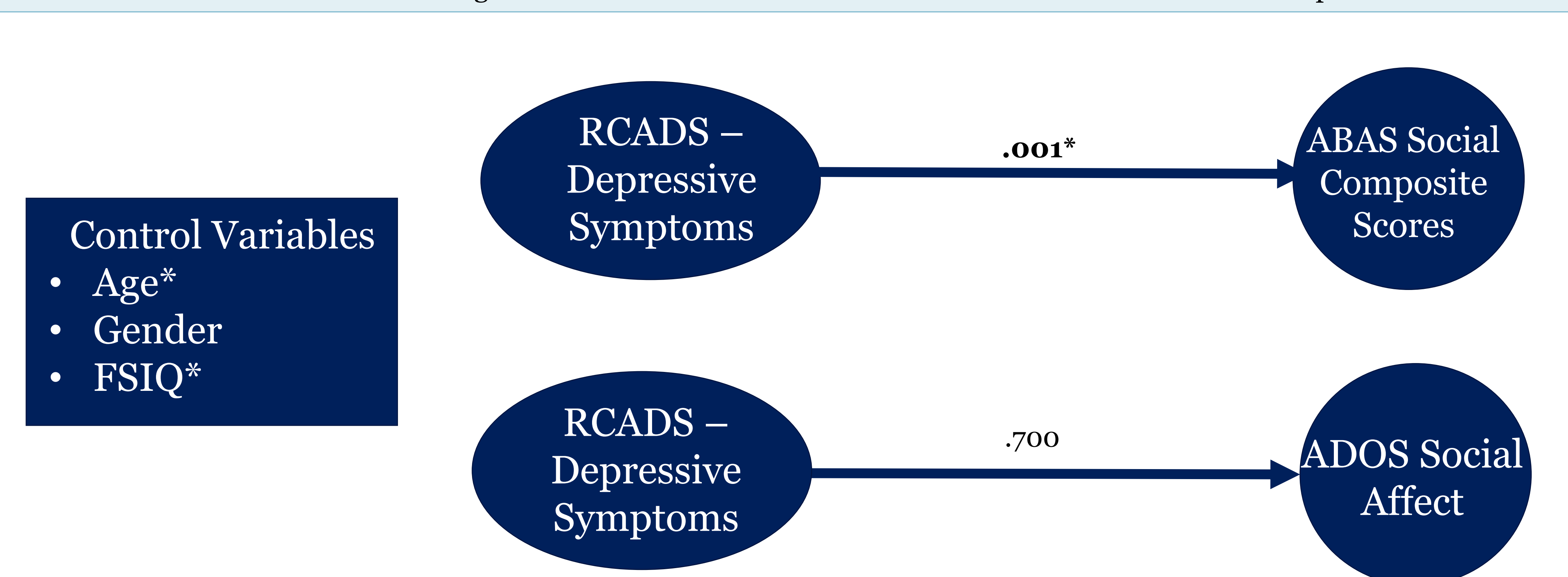
- ADOS or ADOS-2 & ADI-R
- WISC-4 or WISC-5 or WASI or WASI-2
- RCADS-P & ABAS



Model 1. Results from a hierarchical regression indicate that social skills are significantly associated with depression scores.



Model 2. Results from a hierarchical regression indicate that social communication is not associated with depression scores.



Model 3. Hierarchical regression with depression significantly associated with social skills (top) but not social communication differences (bottom).

Results

- Social skills were significantly associated with depression scores, but social communication skills were not after controlling for age, gender and IQ such that lower social skills.
- Flipping the model - depressive symptoms were significantly associated with social skills but were not significantly associated with social communication differences after controlling for age, gender and IQ.
- 394 participants met the threshold for clinical depression - however this did not significantly influence scores on social communication or social skills.

Discussion

- Current results highlight the conflicting results found in the literature and direct necessary subsequent studies.
- There are notable content and rater differences between the ADOS and ABAS-II which may explain are contradictory findings.
- Camouflaging behaviours may influence the perception of symptoms being assessed.
- Self-reports may provide insight into experiences of social and social communication skills and depressive symptoms.
- Results emphasize the importance of social skills programs & support.

References

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Contact Information
Laura de la Roche
14LDLR@QUEENSU.CA

