**Autistics Never Arrive: A Mixed Methods Content Analysis of Transgender and Autistic Autobiography**

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This article presents a mixed methods content analysis of autobiographies by transgender autistics (autistic-trans). It incorporates books, anthologies, poems, and prose, including self-published, grey, and professionally published texts up to June 2020. Seventy-one English-language texts in 15 separate books were identified. The first was published in 2003 and the majority have been published since 2013. The most common themes explored individuals' experience of autism diagnosis, community, coming out (as trans), and gender, with many speaking of being nonbinary, genderless, or using autism-specific genders (e.g., autigender). Notably, these themes, which exemplify those that are important to autistic-trans writers, contrast markedly with the topics of most academic work on autistic-trans lives. These experiences were explored in the context of the double empathy problem, the looping effect, gender performance, and trans healthcare access. These findings can be used to inform future research on the transgender-autistic community.

**KEYWORDS**  
transgender; autism; autistic-trans; self-advocacy; autobiography

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“To be neuroqueer is to strive toward the becoming of being neuroqueer. Autistics never arrive.” –Yergeau (2018, 93)

This mixed methods content analysis assesses the autobiographical texts of transgender autistic (autistic-trans) individuals and explores the way they form their own narratives on this experience. I borrow from Jake Pyne's (2021) term “autistic-trans”
here, as he used it to speak about the temporarily of trans-autistic autobiography. The autistic-trans community has not come to a consensus on a common descriptive identity for this experience and other terms such as neurodiverse, which also encompasses ADHD, are sometimes used (Egner 2019). Neuroqueer has also been proposed, though it is both not limited to LGBT+ identification and denotes an explicit “disident[ification] from both oppressive dominant and countercultural identities that perpetuate destructive medical model discourses of care” (Egner 2019, 123).

The medium of autobiography “offer[s] unique insights into how individuals perceive their social world and context, ... views into an author's subjectivity, ... and showcase[s] how one constructs culture and identity” (Mathias and Smith 2016, 205). This content analysis counters the almost complete absence of autistic-trans voices and perspectives in academic and research literature on this subjectivity (Davidson and Tamas 2016) and enables an alternative to conventional and often pathologizing researcher-mediated methods of data collection (e.g., interviews and focus groups).

The existing literature on the intersection of trans identity and autism is small but rapidly expanding and tends to focus on clinical environments and the etiology of autistic-trans co-occurrence (e.g., Glidden et al. 2016; Jack 2011; Saleh 2019; Turban and van Schalkwyk 2018). By contrast, as seen in this content analysis, autistic-trans people themselves most often cite experiences of autism diagnosis, of community, of coming out (as trans) and of gender itself as meaningful in their lives. I explore these experiences in relation to Ian Hacking’s (2009) looping effect, gender performance, access to transgender healthcare, and the double empathy problem.

The double empathy problem posits that “empathy is a bidirectional phenomenon... [and] that both autistic and nonautistic individuals may have difficulty understanding and feeling for one another because of their differing outlooks on with the world” (DeThorne 2020). It contrasts with the theory of mind model, which “attributes autism to ‘mindblindness’ [or] an inability to understand that other people know, want, feel, or believe things” (DeThorne 2020).

The current state of autistic-trans research, focusing as it does on the “pathology” of autism, dangerously undermines autistic-trans individual's bodily autonomy and allows this group to be used in socio-political debates as a cautionary tale—all without ever speaking or listening to an autistic-trans person (Gillespie-Lynch et al. 2017). Autistic-trans people's existence is also frequently deployed to undermine transgender healthcare (e.g., Hruz 2020; Suissa and Sullivan 2021). A UK clinic for trans youth recently reported that a quarter of their patients displayed autistic traits. This was subsequently weaponized to argue that all TGNB children's care should be brought under intense scrutiny, subjected to court approval, and severely restricted for autistics (Adams 2020; Hurst 2019).

The presumption in the existing literature is that autism alone may make an individual incapable of asserting their gender identity or, at the very least, be sufficient rationale for practitioners to exercise greater caution in the provision of transgender healthcare (Adams and Liang 2020; MacKinnon et al. 2020; Shumer et al. 2015; Strang et al. 2018a; Turban and van Schalkwyk 2018; Van der Miesen et al. 2016; Van der Miesen et al. 2018). Indeed, the idea of an autistic-trans person appears to be somewhat in-
comprehensible to the wider public, which tends to view autistic people as sufficiently lacking an interior life and goals as to render their identification as trans “ridiculous” or possibly coerced (Yergeau 2018). Regardless, the literature on autistic-trans people is equivocal on the etiology of autistic and transgender co-occurrence and has provided little evidence that their access to resources should be fundamentally different from neurotypical transgender individuals (Turban and van Schalkwyk 2018).

I assert that these presumptions could only be reached by relying on a body of literature that excludes and dismisses autistic-trans people’s voices. Indeed, foundational autism researcher Bernard Rimland (1994, 3) once asserted that well known autistic autobiographers like Temple Grandon and Donna Williams must have “recovered from their autism—because how could an autistic have an inner life, much less narrate one.” Other experts have suggested that autistic autobiographers are exceptional (and therefore that their experiences can be dismissed), under the logic that “what can be pointed to in their writing that deserves the label autistic?” (Yergeau 2018, 21; see also Happé 1991). These assertions assume that autistic subjectivity and interior life must orient to the neurotypical, cisgender, and clinical worlds to be comprehensible. Autistic autobiographers, on the other hand, assert that our lives and subjectivities need not make sense to neurotypicals and clinicians to have meaning and value.

METHODS
This study is a mixed-methods content analysis of autistic-trans autobiography published up to June 2020. Content analysis is “an analytic method... for the systematic reduction and interpretation of text or video data... by identifying codes and common themes... and then constructing underlying meanings (Frey 2018, 392; see also Mayring 2000). I have specifically used a conventional qualitative content analysis, which draws “codes and themes directly from the data... [when] existing knowledge around a phenomenon of interest is largely absent” (Frey 2018, 392). This approach allows me to provide an overview of current trends in the genre of autistic-trans autobiography.

I chose to conduct a comprehensive review, rather than a more in-depth analysis of a few representative texts, to provide a broad overview of this nascent genre and the concerns of its authors. As the area is rapidly growing, it is also the case that such a comprehensive analysis is currently possible, whereas it may soon become more difficult to capture all relevant texts. This content analysis was supplemented by a statistical overview of the autobiographies to provide some contextual information on the origin and trajectory of this medium.

Data collection and eligibility criteria
I searched for all autistic-trans autobiographical media up to the point where I began the analysis in June 2020. This genre is unique as it frequently takes place in the realm of grey and self-published literature. Accordingly, I included all self-published material, as well as material published by conventional publishers and using community created imprints, so long as it was “in print” (including in digital print) and named a publisher.

Blogs are a rich source of autistic-trans autobiography and, arguably, the self-publishing ethos may be an outgrowth of these texts. However, expanding the re-
view to include them would have quickly exceeded my resources and, in any case, these texts deserve to be fully explored on their own. Similarly, I could have included interviews with autistic-trans individuals (Adams and Liang 2020; Mendes and Maroney 2019) and research in collaboration with or created by them (Strang et al. 2018b). The former, however, follow questionnaires not created by the autistic-trans interviewees, while the latter do not have a strictly autobiographical goal. By contrast, the included autobiographical texts most closely follow the direction of the individual autistic-trans people reporting on their experiences as both autistic and trans. I identified a small selection of stand-alone texts that discussed an individual experience of being both transgender and autistic (e.g., Dale 2019; Lawson and Lawson 2017). However, most autistic-trans autobiography occurs in anthologies that focus on autistic, autistic-trans, or trans identity, in that order. I therefore included the individual entries in these texts (both poems and prose), as well.

Autistic-trans autobiographies were identified iteratively through the author’s personal and professional networks, Google searches, from publishers that commonly produce them (e.g., Jessica Kingsley Publishers [JKP]), and by reviewing the references of identified texts. Only English language texts were assessed. Keywords used in Google searches were “transgender autobio,” and “autistic autobio.” In searching for material from JKP, I reviewed their online catalogues (e.g., Jessica Kingsley Publishers 2018), as well as their website (Jessica Kingsley Publishers 2022) and that of their Canadian distributor (UBC Press 2022). I also identified texts by searching through the publications of autistic-trans authors that had published several autobiographies (e.g., Wenn Lawson and Maxfield Sparrow).

Candidate texts identified in this way were screened in for further review if they mentioned or otherwise indicated in their title or synopsis that they dealt with autobiographical/personal/self-narratives and either/both transgender identity and autism/Asperger’s. Texts were subsequently screened out if, after a closer review of the narrative, they didn’t relate the author’s personal experience of both autism and gender identity. Individual autobiographical texts that mentioned gender identity without the writer explicitly identifying as trans then, or in subsequent texts, were also screened out.

It is entirely possible to describe one’s experience in a manner that could be categorized as trans without ever mentioning that one is. I am, however, mindful of the need to respect the right to self-define and to not determine, based on my reading of

Both Wenn Lawson and Maxfield Sparrow transitioned over the course of multiple autobiographies and have publications under more than one name. In these cases, I have included all relevant texts that described a personal experience of both autism and gender identity (Jones 2013, 2016; Lawson 2004; Lawson and Lawson 2017; Sparrow 2020).

Hans Asperger, the namesake of this condition, was long considered to have saved disabled children during the Nazi regime. It recently came to light that he had supported the regime in sending several disabled children, labelled genetically inferior, to their deaths (Baron-Cohen 2018). The diagnosis has since been removed from the DSM. I include it here because some autistic-trans autobiographers used the term in writing about their experiences prior to this revelation and others continue to use it in place of autism today. In the context of this article, I refer to the spectrum as autism.
another’s narrative, whether they are trans. In any case, attempting to determine the point where a narrative becomes a trans one would be a highly arbitrary process. Accordingly, autobiographical texts were only included if their authors explicitly named themselves as trans in them. Note also that some anthologies included author biographies at the beginning or end of the book. They were added to the electronic document of individual narratives where this occurred. I did so because authors often used this space to explicitly identify and further articulate their experiences as trans.

The resultant autistic-trans autobiographies were downloaded and converted to word format. Doing so made it possible to use identical procedures to search these texts for relevant key words (“trans,” “gender,” “binary,” “autis,” and “asperg”), identify whether they dealt with a personal narrative of autistic-trans identity, and draw out themes from them. This process also allowed single narratives to be identified in anthologies.

**Data analysis**

The electronic texts of the 71 English-language individual autistic-trans autobiographies were loaded into NVivo 12 (QSR International 2018). I then submerged myself in these texts in order to identify similarities between them according to the frequency with which specific keywords were used (e.g., gender, trans, etc.). These initial codes allowed me to further identify short paragraphs and excerpts that spoke to specific experiences of autistic-trans individuals. As is consistent with a conventional content analysis, codes identified in the data were developed iteratively (Frey 2019, 393). These codes were subsequently organized into the four most common themes described in these short paragraphs and excerpts.

**RESULTS**

Seventy-one unique autistic-trans autobiographical narratives were identified in 15 distinct books (see Table 1). While it is possible, and even likely, that some authors may have identified as trans in other sources, it wasn't feasible to find or screen all texts written by them for this information and so I have limited myself to their identification in autobiographical texts in which they explicitly did so.

Publications were identified as self-published if the author paid for the services of a company created for this purpose (e.g., AuthorHouse) or published the book under the imprint of a publishing house they created and which had not published any other texts or, when publishing these texts, did so without any screening processes and/or charged for their publication. Publications were identified as grey if they came from publishers that were created by the authors for the purpose of publishing this or a prior book, had published books by other authors, and provided wrap around services (e.g., copyediting, printing, publicity) free of charge or by sharing payment through a cooperative. It was unclear, in some instances, to what extent these organizations shared payment or if they required authors to bear all costs. I identified them as grey when this was the case. This category also includes in-house publishing by organizations and community groups (e.g., DragonBee Press). Publications were identified professional if they were a company created for the publication of books, screened
### Table 1. Books Containing Autistic-Trans Narratives

<table>
<thead>
<tr>
<th>Year</th>
<th>Title</th>
<th>Author(s)/Editor(s)</th>
<th>Publisher</th>
<th>Publisher Type</th>
<th>Focus</th>
<th>Text Type</th>
<th>Number of Narratives</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>Women From Another Planet</td>
<td>Miller</td>
<td>AuthorHouse</td>
<td>Self</td>
<td>Autism</td>
<td>Anthology</td>
<td>1</td>
</tr>
<tr>
<td>2013</td>
<td>No You Don’t: Essays from an Unstrange Mind</td>
<td>Jones</td>
<td>Unstrange Publications</td>
<td>Self</td>
<td>Autism</td>
<td>Single</td>
<td>1</td>
</tr>
<tr>
<td>2016</td>
<td>The ABCs of Autism Acceptance</td>
<td>Jones</td>
<td>Autonomous Press</td>
<td>Grey</td>
<td>Autism</td>
<td>Single</td>
<td>1</td>
</tr>
<tr>
<td>2017</td>
<td>Spoon Knife 2</td>
<td>Ryskamp and Harvey</td>
<td>NeuroQueer Books</td>
<td>Grey</td>
<td>Autism</td>
<td>Anthology</td>
<td>7</td>
</tr>
<tr>
<td>2017</td>
<td>Transitioning Together: One Couple’s Journey of Gender and Identity Discovery</td>
<td>Lawson and Lawson</td>
<td>JKP</td>
<td>Professional</td>
<td>Trans / Autism</td>
<td>Single</td>
<td>1</td>
</tr>
<tr>
<td>2017</td>
<td>All the Weight of Our Dreams</td>
<td>Brown et al.</td>
<td>DragonBee Press</td>
<td>Grey</td>
<td>Autism</td>
<td>Anthology</td>
<td>6</td>
</tr>
<tr>
<td>2018</td>
<td>Spoon Knife 3</td>
<td>Walker and Reichart</td>
<td>NeuroQueer Books</td>
<td>Grey</td>
<td>Autism</td>
<td>Anthology</td>
<td>3</td>
</tr>
<tr>
<td>2019</td>
<td>Uncomfortable Labels</td>
<td>Dale</td>
<td>JKP</td>
<td>Professional</td>
<td>Trans / Autism</td>
<td>Single</td>
<td>1</td>
</tr>
<tr>
<td>2020</td>
<td>Non-Binary Lives</td>
<td>Twist et al.</td>
<td>JKP</td>
<td>Professional</td>
<td>Trans</td>
<td>Anthology</td>
<td>1</td>
</tr>
<tr>
<td>2020</td>
<td>Spectrums</td>
<td>Sparrow</td>
<td>JKP</td>
<td>Professional</td>
<td>Trans / Autism</td>
<td>Anthology</td>
<td>35</td>
</tr>
<tr>
<td>2020</td>
<td>Our Autistic Lives</td>
<td>Ratcliffe</td>
<td>JKP</td>
<td>Professional</td>
<td>Autism</td>
<td>Anthology</td>
<td>3</td>
</tr>
</tbody>
</table>
(5 books: 3 focused on autism and 2 on autistic-trans experience). The remaining 67% appeared in anthologies (66 individual narratives in 10 books: 7 focused on autism, 2 specifically on the non-binary experience, and 1 on the autistic-trans experience). A full 40% of all publications to date have been published by JKP. A node also forms around Maxfield Sparrow who, as either author or editor, is responsible for 4 books and 39 (55%) of all narratives. Autistic-trans autobiographies have increased steadily since the first text was published in 2003, with 2 published by 2004 and the remainder since 2013 (3 each, or 40% of the total, in 2017 and 2020).

Themes
These themes represent the four most common topics mentioned across these 71 individual autobiographical narratives. “Autism diagnosis” related to individual author’s experiences of diagnosis as both trans and autistic. “Community” deals with individual experiences of autistic-trans, trans, and autistic communities. “Coming out” (as trans) examines the authors experience of coming out as and being trans. Finally, “gender” highlights autistic-trans people’s unique experiences in this area.

Autism diagnosis
This theme dealt with authors’ experience of and feelings about autism diagnosis. It includes experiences of receiving a formal diagnosis as either an adult or child and of self-diagnosis. There was, in fact, often overlap between self- and adult diagnosis. Many individuals who sought an adult diagnosis, for instance, spoke about learning from their parents that autism had been queried and, in some cases, diagnosed when they were children. In these cases, parents often responded by refusing to acknowledge the diagnosis/potential for diagnosis and/or hiding it from their children. Many identified their parents and others, including trans healthcare specialists, as failing to support them in seeking a diagnosis of autism as an adult. This often resulted in autistic-trans people and their parents failing to acknowledge or address the areas in which resources were needed.

I started bugging my therapist at the gender clinic. He didn't “see it”; he didn't think autism spectrum disorder (ASD) was a “good diagnostic fit.” But I got him to administer some metrics. Lo and behold, I scored high on the Ritvo Autism Asperger Diagnostic Scale. He referred me to the Autism Society, whose doctors gave me an official diagnosis. Now my gender clinic screens all transgender and gender nonconforming patients for ASD. (Qwyrdo in Sparrow 2020, 79)

Several individuals described an autism diagnosis as allowing them to better understand themselves and to feel more comfortable interacting with the autism community.

I got my formal autism diagnosis a few days before my 20th birthday. I didn't really need the services or accommodations that came with it at that point. I had been living without them for so long. For me, a diagnosis was a pass to join the autistic community, make friends, and do advocacy work. I threw myself into the autistic community, happy at last submissions, and provided free wrap around publication services.
to have found people like myself. (Gaeke Franz in Sparrow 2020, 136–37)

**Community**

Community was another common theme in autistic-trans autobiographies. Many spoke about having trouble accessing the autistic community as a TGNB person or vice versa. In the latter case ableism was a barrier, while in the former transphobia was the key issue. A common response to this impasse was the creation of in person and online autistic-trans community spaces. Autistic-trans individuals spoke of these community spaces and groups as providing the exemplars of autistic-trans life that they wished were available to them when they were younger. These communities also appear to have fulfilled a desire to share things about their experience with others. On the other hand, it was noted that autistic-trans community spaces can be very ‘white’ and unwelcoming for people of color.

When I’m around other trans people or in queer spaces, they’re usually either all-white or extremely intolerant of my stimming, or both. ... I am sustained by people who can understand that I’m not really joking when I say that my gender is “fuck colonialism,” and provide me with a cultural or at least ideological anchor against which I can feel a little less bereft, a little less like white people have managed to take not only my homeland and cultures away from me but also any chance at a coherent gender identity. (//kiran foster in Brown et al. 2017, 233–35)

**Coming out (as trans)**

This was the most common theme. It captures the tendency of autistic-trans individuals to “try out” and exhaust all other possible identities before accepting themselves as trans and includes those who knew and accepted their trans identity without question. This theme is particularly observable in the autobiographical materials of individuals who published both before and after identifying as trans (Jones 2013, 2016; Lawson 2004; Lawson and Lawson 2017; Sparrow 2020).

In terms of my gender identity, I was also one of those people who “always knew.” I didn't know of the word “transgender” until much later, but I always knew that I was “really a boy.” Throughout my childhood, I had always resented being told that I was a girl, but I also knew I would get in trouble if I tried to explain to the adults in my life that I was really a boy. (Kerry Chin in Sparrow 2020, 201)

Many individuals received hostility from the larger (and often cisgender) LGBTQ community for affirming and expressing their trans identity.

At the time, I identified publicly as a stone soft butch. I had found drag king shows a socially acceptable way to pack and bind, to see if I was comfortable in my male skin. A lesbian in the LGBTQ community told me after a performance, “Don't be a man. You aren't a man, just a stone diesel dyke.” It hurt me deeply. It was the one community that had seemed to accept me as me, and suddenly I was met with discrimination again. It became the day I learned transphobia exists in all communities—the day I began to distance myself from that community. (Jordan in Sparrow 2020, 155)
Similarly, many autistic-trans people were told by trans healthcare professionals and their parents that they couldn't be both trans and autistic. One result of this suspicion is that autistic people are often made to wait longer and ‘jump through more hoops’ prior to receiving trans healthcare (Strang et al. 2018a; van Schalkwyk et al. 2015).

As noted, many autistic-trans individuals discussed wishing that they had known that being TGNB was a possibility and/or that they knew someone who was while they were growing up. Ultimately this didn’t stop them from coming to understand themselves as TGNB, but it did make the process more stressful and isolating. Many spoke of this eventual realization as an epiphany and in terms of divergent knowledge and ideas coalescing suddenly.

Nonbinary. That’s a word—a concept—I wish you had known when I was five and asking questions. Or genderqueer. Or gender nonconforming. I can hardly begin to imagine how my life would have unfolded had I simply known there were people who were neither boys nor girls, had I known there were people not defined by what’s between their legs. (Qwyrdo in Sparrow 2020, 78)

On the other hand, many autistic-trans autobiographers spoke about seeing gender roles and gender itself as inherently arbitrary and meaningless. Perhaps unsurprisingly a majority (38 out of 63 individuals) self-identified as nonbinary or genderless.

I never learned to see my body as a woman's body in the sense that a woman's body is an actor in socio-sexual relations. My body is the support structure for me, my intellect, my memories, my sensory experiences. If it has a gender, that gender lives on the outside, not in here where it would make a difference to how I feel or see the world (except in so far as I am shaped by how my gender causes the world to see and feel about me). (Meyerding in Miller 2003, 165–66)

Conversely, other individuals experienced gender and gender identity as “embodied” and all encompassing, such that their gender was intertwined with and inseparable from their experience of being autistic, and vice versa.

It goes like this: Somebody I have to work with to survive will respect at most two of the three things that are most central to who I am: my race, my gender, or my neurodivergence... I am the sum of my parts, and any and all care I’ve received has fallen short because it’s attempted to treat my parts separately if it considers them at all. (///kiran foster in Brown et al. 2017, 233)

**Gender**

The final theme captures the way in which autistic-trans people discussed their unique experiences and concepts of gender. As noted, most autistic-trans autobiographers identified explicitly as nonbinary. Others identified with uniquely autistic genders such as autigender, identified as metagender or gendervague, and/or spoke of feeling genderless—a phenomenon that has been noted to be quite common among autistics (Davidson and Tamas 2016). Jones (2016, 130), for instance, remarked that “there are many words for my gender, including metagender, bigender, genderqueer, genderfluid, gendervague... but the word that best captures my own gender is ‘epicene.’” Sparrow
elaborated on this in Brown and Burill (2018, 126), writing:

I cannot separate my gender identity from my autism. We Autistics have a word for that: gendervague. One definition of gendervague is “a gender identity that is highly influenced by being neurodivergent, and feels undefinable because of one’s neurodivergence.” Another definition is, “your gender is not definable with words because of one’s status as neurodivergent.”

Regarding not understanding gender, Alyssa Hillary notes that when they wrote “about the erasure of Queer Autistic people for Creptiques (Wood 2014) … Autistic people compared asking about their gender to asking how many miles per gallon an electric bike got... Some of us didn’t ‘get’ gender in the neurotypical way” (Brown and Burill 2018, 84). Likewise, ren koloni (in Sparrow 2020, 181) asserts that you do not have to know what your gender is. “Man” and “woman” don’t have to make sense to you. Even new words, the ones we made to make sense to more of us, like “demigirl” or “autigender” or “bigender” or “neutrois,” don’t have to make sense to you. You don’t have to know what you like to be called, or what you like to wear, or what you like your body to feel like. Gender is a journey, and you don’t have to know where you’re going to end up. If you’re lost, find yourself in the little things (like we autistics always do).

DISCUSSION

Since 2003 the English-language autistic-trans autobiographical medium has grown from 0 to 71 narratives published in 15 books (see Table 1). This genre is highly unique and tends to occur in anthologies that collect the writings of autistics, autistic-trans, and/or trans people. Only 5 publications used a conventional autobiographical format in which a single, or in one case a couple’s (Lawson and Lawson 2017), self-narrative is shared. Autistic-trans autobiography is also unique in its tendency to be grey market or self-published (60% of all texts). All other texts are under the imprint of JKP. Grey market and self-publication may present a relatively lower barrier to new, unique, and unconventional narratives like these.

Perhaps one of the most interesting aspects of autistic-trans autobiography is the discussion of experiences of gender that are unique to this group, such as autigender. Jordynn Jack (2012, 1) notes that “autistic individuals view gender as a copia, or tool for inventing multiple possibilities through available sex/gender discourses.” While it was not uncommon for autistic-trans autobiographers to identity with gender in a binary or unambiguous manner, as Davidson and Tamas (2016, 59) observe, many such individuals highlight the draining and relentless emotional labour that doing gender “typically” requires, and many on the spectrum respond by explicitly rejecting or simply neglecting its confounding demands, identifying with neither side of the m/f divide in attempts to give up the ghost of gender.

Until recently autistic-trans people have been thought to be a conceptual impos-
sibility or not competent to speak for ourselves (AlterHéros n.d.; Strang et al. 2018b). This may have contributed to professional publisher’s lack of interest in the narratives of autistic-trans individuals. Public awareness of individuals who are both trans and autistic has also been minimal, and research and academic literature have focused largely on the etiology and pathos of this overlap (Jack 2011; Yergeau 2018). Indeed, autistics are often characterized as “so rhetorically impaired that they remain unoriented toward all that is normative and proper, whether empathy or eros or gender (performance and concept unto itself)” (Yergeau 2018, 27).

Within this context, autistic-trans people have been rhetorically deployed to undermine the provision of trans healthcare on both an individual and societal level (Hruz 2020; (Adams 2018; Hurst 2019; Yergeau 2018). This argument posits that (a) the overlap of transgender identity and autism appears high; (b) autistic people may simply be “fixated” on or “obsessed” with gender; (c) many trans individuals may be eligible for a diagnosis of autism; and therefore (d) all trans people should be subjected to autism screening and increased gatekeeping in order “protect” vulnerable autistic people from transitioning (Strang et al. 2018b; Suissa and Sullivan, 2021; Turban and van Schalkwyk 2018).

Autistic-trans autobiographers often discuss attempts to suppress their gender identity or negotiate its replacement with a series of other, seemingly more socio-politically acceptable identities (e.g., gay, lesbian, drag king, butch, etc.). This may also reflect autistic-trans peoples’ willingness to experiment and “try out” different genders and gender expressions (Davidson and Tamas 2016). It has been observed that autistic people tend not to moderate their honesty and so coming out as trans may be connected to their inability and/or unwillingness to hide or suppress this aspect of their being (Walsh 2020; Walsh et al. 2018).

Some autobiographers spoke about the growing tendency of trans healthcare practitioners to screen all applicants for autism (Strang et al. 2018a). Qwyrdo (in Sparrow 2020, 79), for instance, explained that due to their self-advocating for an autism assessment, their gender clinic now “screen[s] all [transgender] and gender nonconforming patients for [autism spectrum disorder].” While healthcare access and quality may be improved by educating providers about all aspects of a person’s experience, many practitioners continue to feel “that for autistic people, trans identity is little more than an obsession or a compulsion... [and] that autistic people might “misinterpret” their autism-related social oddities and exclusions as genderqueer identity” (Yergeau 2018, 71).

Transgender healthcare professionals may exercise additional caution when faced with autistic-trans individuals who do not fit the expected transgender narrative (Dewey and Gesbeck 2016). Growing evidence suggests, however, that autistics may be less likely to recite the conventional transitional narrative (e.g., binary identity, presenting as “typically” gendered) due to a different experience of gender identity, or because they simply do not perceive or care about the need to make their healthcare providers comfortable in exchange for healthcare (Adams and Liang 2020). Walsh (2020, 3) offers a more parsimonious proposition... that autistic people are more likely to identify as trans due to differences in perception and cognition leading to a reduction in the likelihood that social conditioning will pre-
vent them from becoming aware of their gender identity when it differs from the gender assigned to them at birth.

Autistic people who do not perceive the need to give a conventional transitional narrative may, therefore, be at a marked disadvantage in accessing transgender healthcare simply because this process is not accessible.

Trans healthcare professionals’ tendency to exercise greater caution with autistic clients reflects the “double empathy” problem, whereby both autistic and neurotypical individuals lack insight into each other’s respective cultures and world views (Milton 2012). However, where the neurotypical perspective is seen as fundamentally normal, it is autistic people who must travel further in bridging this gap. Trans healthcare professionals can thus view their expectations of trans identity, as observed and measured among neurotypicals, as normal and autistic performances of this identity as fundamentally abnormal and “wrong” (Gillespie-Lynch et al. 2017). As a result, practitioners may withhold transgender healthcare until such a time as the autistic person’s performance of gender becomes (or appears to become) more neurotypical, resulting in longer and even perpetual waiting periods (Adams and Liang 2020).

Ian Hacking (2009), in speaking of a phenomenon that he calls the looping effect, argues that autobiography collectively creates the language to identify experiences that exist, but for which there are no or inadequate words. Subsequent autobiographies build on and evolve this language, creating something new, but no less real. Indeed, Hacking (1999, 119) is careful to note that autism and sexual identity are “both socially constructed and yet ‘real’.” We see this phenomenon in the iterative creation of names for uniquely autistic genders. Hacking (1996, 370) further opines that “to create new ways of classifying people is also to change how we can think of ourselves, to change our sense of self-worth, even how we remember our own past. This in turn generates a looping effect because people of the kind behave differently and so are different.” Judith Butler (1990, 2004) speaks of gender in similar terms, where it is both true that one becomes gendered by continuously performing a gender and that it is deeply felt, immutable, and real (see Finlay 2017). The looping effect impacts how both autistics and healthcare professionals come to see and define autism and, ultimately, the diagnostic requirements to which autistic-trans people are held. Trans people, for their part, are often required to give a common narrative of this experience to receive healthcare. This narrative, at best a linguistic oversimplification to make it possible to talk “about what was hitherto unknown,” subsequently becomes a measurement by which TGNB people are judged real and deserving of healthcare (Hacking 2009, 1467).

Autistic-trans autobiography creates the possibility of identifying and making real the unique experience of these individuals, allowing them to challenge those narratives that delay or prevent access to trans healthcare (Hacking 2007, 2009). The new narrative, however, may subsequently be repurposed to measure other autistic-trans individuals. The key issue seems to be that the healthcare field, at least with regards to diagnosis, has difficulty encompassing and allowing for a diverse and continuously evolving breadth of experience.

Limitations
The genre of autistic-trans autobiography is very new and rapidly evolving. While this content analysis presents an overview of the genre, it does not exhaustively record or
identify everything relevant about or important to autistic-trans people. For instance, this analysis does not include material from blogs, an area that future researchers will likely find fruitful. As indicated by the looping effect, we can expect autistic-trans autobiography to evolve rapidly as more people publish their experiences. Accordingly, all analyses of this field must account for the heterogeneity of this group and their experiences, goals, and needs regarding gender identity and healthcare. Nevertheless, this analysis provides context for future research, especially that which utilizes a broader sample or conducts an in-depth analysis of select texts.

CONCLUSION
As seen in this mixed methods content analysis of autistic-trans autobiography, autistic-trans individuals most often cite their experiences of autism diagnosis, community, coming out as trans, and gender as meaningful in their lives. This contrasts significantly with the existing and increasingly voluminous research and academic literature on this co-occurrence. The latter tends to fixate on the etiology of the coincidence of transgender identity and autism and its subsequent implications for access to transitional healthcare. This focus has the result of pathologizing autistic-trans individuals, undermining their bodily autonomy, and allowing them to be weaponized against other transgender individuals. What is more, it does nothing to challenge the difficulty that the wider public has with comprehending that transgender people can also be autistic.

It is useful to examine these challenges within the context of the double empathy problem (Milton 2012), the looping effect (Hacking 2009), gender performance, and access to transgender healthcare. In all respects, however, an accurate understanding of autistic-trans experience must include the voices of these individuals themselves. The autobiographical texts examined in this article demonstrate that autistic-trans people are, like all transgender people, a heterogeneous community with a multiplicity of goals and needs.

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