

Autism and Depression

What Can It Look Like?

Depression is good at making you not feel like ‘you’ anymore and can show up in a lot of different ways.

That is why it is important to know what feels normal to you. It may be helpful to try to notice and record changes from your ‘normal’ (your everyday self) rather than checking all the boxes on a symptom checklist.

See this tool kit to help “Know Your Normal”
<https://www.ambitiousaboutautism.org.uk/what-we-do/connecting-young-people/youth-led-toolkits/know-your-normal>

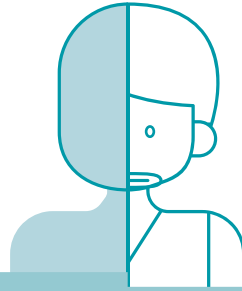
For some autistic youth, depressive symptoms may feel like they have become your normal.

That’s why it’s important to stop and ask:
“Am I happy with my normal? Is this the most healthy version of myself? Have other people noticed changes?”

Keep in mind that autistic people can experience things differently than non-autistic people. Something that may not seem like a big deal to someone else may hold different meaning and bring about depressive symptoms in an autistic person.

Depressive symptoms also don’t always look the same in autistic people as they do in non-autistic people. Symptoms can change from day to day. You can use this tipsheet to help you, friends, family, and care providers better understand autism and depression.

What to look for:



Little interest or pleasure in doing things:

Things that used to feel fun and that you liked to do no longer interest you (*e.g., you're less enthusiastic about your hobbies or passions*)

Feeling apathetic

Feeling down, depressed or hopeless:

You may also feel numb, sad or lonely

Trouble falling asleep or staying asleep, or sleeping too much:

Sleeping more or less than feels normal or healthy for you

Changes in eating patterns or habits:

Poor appetite or overeating

Eating significantly more or less than feels normal or healthy for you

Feeling guilty and you may not understand why:

Feeling bad about yourself, that you're a failure, worthless, or feeling like you're no longer important enough to be cared for by yourself or the people around you

Changes in energy:

Feeling tired, having little energy, overwhelmed

Changes in your usual energy levels but this may be different from day to day

Feeling restless and you cannot stick to one thing at a time (*e.g., you keep switching activities or interests*)

Moving or speaking so slowly that others notice, or restlessness and moving around a lot

**Changes to “thinking speed”
and thinking processes:**

Having a harder time processing information and thinking about things as quickly as you did before
(e.g., brain fog)

Thinking faster than you can process your thoughts
(e.g., everything feels like it is being sped up)

Trouble concentrating on things like watching TV, reading, following a conversation, your usual hobbies or passions

**Thoughts about hurting yourself,
death, and/or ending your life:**

All consuming focus or fascination on death

Feeling passively suicidal *(e.g., wishing you did not exist rather than wanting to kill yourself)*

Feeling like it would be easier for other people if you were gone

A lack of motivation to stay alive

Physical pain:

Experiencing more pain than usual *(e.g., cramping, stomach aches, joint pain, headaches, fatigue, etc.)*

Having a higher pain threshold than usual
(e.g., underreporting pain)

**Other experiences of depression
reported by autistic youth:**

Sounds, textures, and smells are more bothersome than they used to be

The same noises that used to be “annoying” or “uncomfortable” are now “intolerable”

Feeling burnt out and having lots of meltdowns
Getting frustrated or angry more quickly, yelling

Masking



What is it?

“Masking to me is putting on a show to better fit in with other people’s social behavior”.



Depression can make it difficult to “mask” autistic characteristics. Depression can make it harder to hide stimming or copy what other people are saying or doing to fit in.

Masking often requires a lot of emotional energy and can be exhausting, especially when dealing with depression.



My daughter is autistic and lives with depression. Like many parts of her life, her emotions are felt, and expressed, in extremes. Her joy is pure bliss, but her sadness feels catastrophic and unsafe. This can be challenging for caregivers/parents who fear for their child’s safety. We spent many years questioning whether or not she was at risk of harming herself. We needed to learn that she didn’t have the words or the ability to differentiate between elated, happy, fine, ok, sad, grief-stricken or unsafe. This knowledge helped guide us during crises.

