

Fall 2018

Hablando del Autismo: Autism Coverage in South America

Silvia Luengo

Rollins College, slueno@rollins.edu

Follow this and additional works at: <https://scholarship.rollins.edu/honors>

 Part of the [Disability Studies Commons](#), [Health Communication Commons](#), [Journalism Studies Commons](#), [Mass Communication Commons](#), and the [Sociology Commons](#)

Recommended Citation

Luengo, Silvia, "Hablando del Autismo: Autism Coverage in South America" (2018). *Honors Program Theses*. 73.
<https://scholarship.rollins.edu/honors/73>

This Open Access is brought to you for free and open access by Rollins Scholarship Online. It has been accepted for inclusion in Honors Program Theses by an authorized administrator of Rollins Scholarship Online. For more information, please contact rwalton@rollins.edu.

HABLANDO DEL AUTISMO:
AUTISM COVERAGE IN SOUTH AMERICA

Silvia V. Luengo

A Senior Honors Project Submitted in Partial Fulfillment of Requirements of
the Honors Degree Program

December 2018

Faculty Sponsor: David Lynn Painter

Rollins College

Winter Park, Florida

Dedication

Mis padres, Magda & Carlos y mis hermanos, Carlitos & Thomas, porque son la mejor familia que pude haber pedido y sin ellos no sería quien soy ahora.

Mi querido abuelo Tarquino, y mi adorada nonna Graciela, porque aunque ya no están, siempre los tengo presentes en mi corazón.

Mis estimados profesores Dr. Stone, Dr. Painter, & Dr. Armenia, quienes creyeron en mí cuando ni yo misma creía en mi potencial.

Por mi bellísima Italia, la cual se convirtió en mi segundo hogar inesperadamente, y mi amada Venezuela, la cual espero ver libre de nuevo algún día.

Table of Contents

Dedication.....	2
Abstract.....	4
Introduction.....	5
Literature Review.....	7
Method.....	19
Results.....	22
Discussion.....	26
References.....	39
Appendices.....	46

Hablando del Autismo:
Autism Coverage in South America

Abstract

Based on media framing theory, this exploratory and comparative investigation quantitatively analyzes autism coverage in the top two newspapers from Venezuela and Argentina between the years of 2010 and 2017 in their native language, Spanish. The results indicate there are significant differences between the countries' coverage of autism in their description of issues, discourse types, sources, images, roles and stigmatizing cues. These differences notwithstanding, science and public relations are the main top two issues reported in both countries. Additionally, a scientific discourse type is more common in Venezuelan articles than in Argentina which focuses on human-interest stories. Individuals with autism are quoted in less than 5% of stories from each country. However, people with this condition are visually represented less frequently in Venezuela than in Argentina. In addition, people with autism have a leading role in the newspaper articles in about half of the articles from both countries, with more supporting roles in Argentina and more incidental references in Venezuela. Finally, these results explain why both countries perpetuate stigmatizing cues regarding labeling, psychological symptoms, social skills and physical appearance.

Hablando del Autismo:

Autism Coverage in Latin America

The definition of autism and the criteria used to diagnose this developmental disorder has undergone a dramatic evolution over the past five decades. Prior to the 1970s, the spectrum of conditions included in contemporary descriptions of autism were largely listed as symptoms of broader developmental, psychiatric, and neurological disorders. In 1975 and 1980, however, the World Health Organization's ICD-9 (International Classification of Diseases) and the American Psychiatric Association's DSM-III (Diagnostic and Statistical Manual for Mental Disorders), respectively, officially designated "infantile autism" as a condition distinct from childhood schizophrenia (Volkmar & McPartland, 2014, p. 199). With this new designation, autism was included in a class of conditions labeled pervasive developmental disorders (PDDs) (American Psychiatric Association, 1980).

Seven years later, "infantile autism" was replaced with "autism disorder," and the revised version of the DSM-III included a diagnostic protocol listing 16 items in three distinct lists and requiring presentation of at least eight impairments (two from social, one from communication, and one from behavioral) for an autism diagnosis (American Psychiatric Association, 1987). Since many patients presented conditions and behaviors associated with autism, but not across all three areas, the ICD-10 in 1993 and the DSM-IV published in 1994 and revised in 2000, expanded the previous diagnostic criteria to account for many types of PDDs (Volkmar & McPartland, 2014). This new broader conceptualization of Autism Spectrum Disorder eliminated the need to diagnose separate, frequently less severe conditions such as Asperger's Syndrome, which was often presented among higher-functioning patients with "delays or abnormal functioning in (1) social interaction, (2) language as used in social communication, or (3)

symbolic or imaginative play” (American Psychiatric Association, 1994, p. 75). Finally, after studies indicated the DSM-IV’s classification of autism cases into discrete subtypes demonstrated limited reliability (Regier, Kuhl, & Kupfer, 2013), the DSM-5 (American Psychiatric Association, 2013) folded Asperger’s Syndrome and other subcategories of autism into one diagnosis defined by two presentations: “(1) impaired social communication and/or interaction, and (2) restricted and/or repetitive behaviors presented in early childhood, or approximately age 8 and younger that limit and impair everyday functioning and requiring one of three levels of support to function” (American Psychiatric Association, 2013, p. 84).

Although previous studies have analyzed autism spectrum disorder (ASD) coverage in the United States (Kang, 2012), China (Bie, & Tang, 2015), Canada (Lanovaz, Dufour, & Shah, 2015), Australia (Jones, & Harwood, 2009; Ren, Peters, Allgaier, & Lo, 2014), and the U.K. (Huws & Jones, 2011), no research describing how autism is covered by journalists in countries like Venezuela and Argentina could be located in the literature. Even though some studies can be found on the prevalence of autism in Brazil (Paula, Fombonne, Gadia, Tuchman, & Rosanoff, 2011) and Colombia (Talero-Gutierrez, et al., 2012), their results are extremely limited and questionable due to their methodologies. This situation verifies the lack of information about autism spectrum disorder coverage in developing countries, specifically in South America. Additionally, studies that compare and contrast results between cultures and countries are very scarce (for an exception to this, see Clarke, 2008); and no studies comparing autism coverage between Latin American countries could be located. Therefore, by conducting a quantitative content analysis of Venezuelan and Argentine autism news coverage, this gap in the literature could be filled. More explicitly, this study analyzes media coverage of autism between 2010 and 2017 in the top two leading newspapers (by circulation) in Venezuela and Argentina to describe

and compare the representation of this condition in two South American countries with different cultural, social, political, and economic systems. Ultimately, the results of this comparative study may hold compelling theoretical and practical implications and serve as a basis for inferring cultural attitudes and influences that may shape and be shaped by autism coverage.

Literature Review

Increasing Autism Diagnoses: Developed vs. Developing World

Over the past 50-years, the numbers of children diagnosed with autism has increased steadily and rapidly. Specifically, in the 1970s, only 1 in 5,000 children had autism spectrum disorder in the U.S. and other developed countries, which made this condition a very uncommon disorder (Silberman, 2015). Then, the DSM-III was published in 1987 and included a new diagnostic protocol, which caused the number of cases to climb to 1 in 2,000 children (Rice et al., 2012). Later, in 1991, the United States formally described and labeled autism spectrum disorder in the “special education” category. Since that time, the number of diagnoses rose even further. For instance, in 2001 autism rates rose to 1 in every 150 children, but by 2008 there was an increase to 1 in every 88 children diagnosed with this disorder (Newshaffer, Falb, & Gurney, 2005; CDC, 2009; Hertz-Picciotto, & Delwiche, 2009; CDC, 2016). Finally, in 2017, the Centers for Disease Control (CDC) estimated 1 in every 68 children are affected by autism spectrum disorder in the United States (CDC, 2016).

Though these numbers are from the U.S., this situation of increasing numbers of autism diagnoses has been documented in other developed countries. For instance, some countries, such as Canada and Denmark, have statistically equivalent estimates of people with autism spectrum disorder as the U.S. Other developed countries such as Japan, the U.K. and Sweden, however, report even higher numbers of individuals with autism spectrum disorder (CDC, 2016). While

developed countries facing higher rates of autism diagnosis are spending a great deal of resources on research and interventions, the developing countries' abilities to provide for people with autism spectrum disorder are limited. Thus, information on rates of people with autism in Latin America is not only limited, but the rates also indicate there are fewer cases than in developed countries. Particularly, research performed in Colombia (Talero-Gutierrez, et al., 2012), Venezuela (Montiel-Nava, & Pena, 2008), and Brazil (Paula, Fombonne, Gadia, Tuchman, & Rosanoff, 2011), reports that the prevalence of this condition in the developed world is greater than in the developing world. Nevertheless, these studies' results are highly questionable due to multiple factors, including their unreliable methods. Specifically, researchers who have studied autism in Latin America have acknowledged that the small sample sizes, the inconsistent and sometimes inaccurate issue of the diagnostic protocol, and the reluctance of parents to bring their children for examination, have limited the value of these studies (Elsabbagh et al., 2012).

One big factor that puts these studies in Latin America into doubt is the enormous deficit of awareness of autism spectrum disorder and what it implies. As Ratazzi and colleagues (2016) concluded, “[autism spectrum disorder] ASD knowledge, services, and infrastructure in Latin America are limited and unevenly distributed” (para. 4). In developing countries like most of the Latin American world, research on treatment options, signs, causes, challenges as well as simply general information about the condition is not only insufficient and inferior to developed countries, but almost unheard of. This lack of urgency for knowledge of autism spectrum disorder as well as support services for those with this condition has become a big and hidden problem in developing countries like Venezuela and Argentina that currently have other priorities. As Montiel-Nava states in Wright's (2017) article, “when you have to fight for food,

walk for water or look after your own safety, having a child that doesn't talk may not be as big a deal as other problems" (para. 1). Indeed, among the 70% of the world's population that lives on less than \$10/day, the scarce research on autism in addition to the concern parents face when they notice a child's delayed or atypical development, seems insignificant compared to the suffering some people endure due to the absence of basic necessities like water, food, and shelter (Pew, 2015).

When deciding which South American countries to select for analysis in this project, Venezuela and Argentina were selected for very specific reasons. First, Argentina is the largest Spanish speaking country in South America that had not been already analyzed. Similarly, Venezuelan coverage had not been previously analyzed, but particularly, Venezuela was chosen due to the researcher's connection to the country. Finally, Venezuela and Argentina are the two countries facing the worst inflation in Latin America in 2017 (see appendix A), so the amount of resources spent to treat and research autism spectrum disorder is limited and low (Trading Economics, 2018). These two countries are not highly motivated to deal with this disorder likely because their priorities are more focused on dealing with poverty and instability issues. Though it might seem like an unimportant subject compared to the economic challenges Venezuela and Argentina are facing right now, we contend that this is exactly the reason we should study it and provide a description of current news coverage of autism spectrum disorder.

Another important reason for the lack of autism spectrum disorder awareness in South America is cultural. In the Latin American culture, there is a stigma associated with – not only this disorder – but all developmental conditions (Dyches, et al., 2004; Lopez-Duran, 2008). In fact, people with autism spectrum disorder are rarely visible or mentioned because they are seen as a source of shame. In Latin American culture in particular, having a child with autism

spectrum disorder, Down syndrome, attention-deficit/hyperactivity, and other developmental conditions translates into a punishment given to the parents for their mistakes, and for more religious people, for their sins (Skinner et al., 2001). This blaming of the parents tends to be more strictly believed by older generations, but it is still profoundly embedded in the Latin American culture. Since autism is defined by impaired social communication and/or interaction and/or repetitive behaviors presented in early childhood that limit and impair everyday functioning, the communication and behavioral norms in each culture must be considered in both the diagnostic and the therapeutic stages. Since research suggests that political, economic, and cultural norms influence news values within a country, the similarities and differences in these aspects of Venezuelan and Argentine society must be examined (Hanusch, 2015).

Venezuelan and Argentine Political, Economic, and Cultural Norms

Analyzing the Venezuelan and Argentine culture by exploring their core values and principles can provide an overview of the cultural norms for communication and how they relate to the appropriate behavior and actions in both countries. Although a common misconception is that all Latin American countries' cultures are homogenous, in reality they are quite distinct. Therefore, it is important to analyze each country separately. Based on social psychologist Geert Hofstede's (Martin & Nakayama, 2013) six dimensions of value orientations, a national model where various cultural values influence behavior in various countries, Venezuela is a high-power distance culture and a collectivistic society with a high level of uncertainty avoidance. However, Argentina is considered a low-power distance culture and a collectivistic society with a high uncertainty avoidance (see appendix B). Specifically, Venezuela scored 81 (out of a 100) on the power distance scale, while Argentina scored 49. According to Martin and Nakayama (2013), "power distance refers to the extent to which less powerful members of institutions and

organizations within a country expect and accept the unequal distribution of power” (p. 109). This finding means that Venezuelans commonly accept power and status inequalities among people as an inevitable and normal part of life, while Argentinians do not. This cultural trait makes it hard – sometimes even impossible – for Venezuelans to challenge the status quo.

Additionally, Venezuela scored a 12 for individualism, while Argentina scored 46. Even though Argentina is technically considered a collectivistic culture just like Venezuela, “Argentina is, by far, the most individualist of all Latin countries” (Hofstede Insights, para. 6). Venezuela, on the other hand, “lies amongst the most collectivistic cultures in the world” (Hofstede Insights, para. 5). This collectivism score means that Venezuelans are more likely to describe themselves in terms of “we” and focus on the needs of the group, while Argentinians are more likely to use the singular first-person “I” and focus on individual goals. Finally, both countries present high levels of uncertainty avoidance (Venezuela scored 76 and Argentina scored 86). As Martin and Nakayama (2013) state, “uncertainty avoidance concerns the degree to which people who feel threatened by ambiguous situations respond by avoiding them or trying to establish more structure to compensate for the uncertainty” (p. 109). The way Venezuelans and Argentinians deal with the fact that the future cannot be known is by trying to control it as much as they can instead of just feeling anxious about the unknown. This result suggests the people in these two countries do not like taking risks, but feel more comfortable having a very clear-cut set of rules and an elaborate legal system to obey and structure their lives. The extent to which these cultural norms influence the framing of autism coverage in Venezuela and Argentina, however, has yet to be tested.

It is important to note that while Venezuela and Argentina have important cultural differences, from the political and economic point of view, they also have important similarities.

Venezuela and Argentina suffered under military dictatorships for almost all of the twentieth century, which were subsequently followed by periods of democracy. These two countries have been governed by socialist and populist leaders (the “Kirchner family in Argentina and the political movement called “Chavismo” in Venezuela), who, for over 15 years, dominated their respective countries. These populist leaders have applied excessive controls and limitations to the economy, which in combination with high levels of corruption, reduced the amount of resources produced in the country to meet the human rights obligations and necessities of these countries (Central Intelligence Agency, 2016). Moreover, these two countries are highly dependent on exports of natural resources, which results in struggles with worldwide commodity price fluctuations. Therefore, both Argentina and Venezuela suffer from constant economic crises, persistent fiscal deficits, high inflation, growing external debt and capital flight (Central Intelligence Agency, 2016).

Venezuela’s and Argentina’s political and economic situations translate into reduced and scarce resources available to meet the basic needs of its citizens. As a consequence, important social and welfare crises have arisen, especially in Venezuela, which currently faces a humanitarian crisis of enormous proportions. This situation causes Venezuelans to have a hard time not only finding hygiene products and specific medications, but also food. Likewise, Argentina has recently faced serious exchange rate problems and that has resulted in inflation, which has generated a new political crisis in the country (Cohen, 2018). The high inflation and the economic hardships these two countries have experienced over the past decade explain why the priorities of Venezuela and Argentina do not align with autism research and treatment and why efforts are focused elsewhere.

Media Framing of Autism

The media are important sources of information about mental health issues and other medical matters. The accuracy and type of information as well as the portrayal of individuals with autism spectrum disorder are important influences on people's perceptions of autism, those exhibiting the symptoms, and their families (Osteen, 2008). After the discredited Wakefield study in 1998 falsely linked vaccinations to autism, research on autism coverage mostly focused on its connection (or lack thereof) with the MMR vaccine (Clarke, 2008, 2012; Offit & Coffin, 2003; Smith, Ellenberg, Bell, & Rubin, 2008; Speers & Lewis, 2005). Although this research is informative, broader analyses of the media's coverage of autism are needed to determine whether there are more systemic issues related to its content and discourse. Analysis of media coverage in Canada, the U.K. and the U.S. between 1994 and 2004 determined that news and journalistic values (i.e., prominence, timeliness, controversy, proximity, novelty) and oversimplification resulted in selective reporting that failed to reflect contemporary research funding and reporting (Singh, Hallmayer, & Illes, 2007). Indeed, there is a considerable body of research that suggests that the way an issue is portrayed by the media, especially an issue to which they have no personal connections, is a major influence on how people understand and behave in regards to that particular issue (Entman, 1993; Scheufele, 1999). Therefore, the way the media frames autism spectrum disorder can influence and determine the way the public recognizes, responds to and interacts with people who have been diagnosed with this condition. (Osteen, 2008).

The different cultural norms based on power distance, individualism, and uncertainty avoidance levels, on top of the lack of research and information on autism in Latin American countries, may have a major influence on that country's news norms and how autism spectrum disorder is chosen to be portrayed. As Singh, Hallmayer, and Illes (2007) explain in their

analysis, the culture of a country tends to influence new values in that country, which in turn, influence the content in media coverage of autism. This finding means that not only will the media shape people's perceptions and ideas of a particular issue, but also the coverage is framed to provide people with information they want to read. This framing can determine and influence not only the content of autism coverage, but also, the understanding and attitudes of people towards the condition (Dixon & Clarke, 2012). Therefore, the media both reflects popular opinion and influences it. Indeed, the expectation that socio-cultural forces influence news values, which, in turn, influence the framing of autism coverage, is the theoretical framework guiding this exploratory, comparative study. Consequently, the first research question asked in this exploratory and comparative study probe for differences in the issues of autism or the people affected by this disorder in Venezuela and Argentina. Specifically, I ask:

RQ1: What are the main issues discussed in Venezuelan and Argentine autism coverage?

In addition to issues, framing analyses of health coverage, developmental disorders, and autism may also examine the type of discourses used in the coverage (Clarke, 2012).

Specifically, the coverage may use either a scientific or a human-interest discourse. On one hand, a story could discuss autism in neutral and objective way where it appeals to the readers and viewers' rationality with medical information and research involving members, figures, and statistics. This type of article is known to use a scientific discourse. On the other hand, a story may discuss autism in a way that appeals to the readers' emotions and elicits the viewers' sympathy. For example, these human-interest stories could narrate or describe the experiences of individuals who have autism, or their parents or siblings. According to Reich (2016), stories "are often more compelling to parents than are statistics or national studies that are often presented in support" of an issue (p. 187).

The discourse used to frame autism coverage is also important because research suggests that human-interest stories may lead to positive responses by eliciting empathy from readers, which could stimulate their desire to help promote research and support services for the future (Hong, 2013). However, in their analysis of the Australian print media's representations of autism, Jones and Harwood (2009) conclude that very few individuals with autism were portrayed positively and only a very limited amount of helpful information was provided about educational resources. Moreover, they argue that human-interest discourses of coverage resulted in missed opportunities to "provide readers with information that could increase their understanding of the multi-dimensionality of life" for people with autism or "on the negative effects that diagnosis has on the hopes of parents and careers" (p. 15).

Scientific discourse, on the other hand, may also provide useful information about autism to create more and better awareness of the disorder, but, as with human-interest stories, it could also have negative effects. As Kang (2012) concludes in his research, U.S. television news coverage of autism tends to frame disorder mostly as a personal issue more than a public and collective matter that concerns everyone due to our community obligations. Moreover, episodic reports of research findings without any contextual information connecting individual research projects to broader knowledge about autism spectrum disorder may cause confusion about the various results (McKeever, 2012). While there is a considerable body of research on discourse type in the developed world, no previous research on South American coverage of health issues could be located in the literature. Thus, the second research question asks:

RQ2: To what extent are human-interest and scientific discourses used in Venezuelan and Argentine autism coverage?

While discourse type is an important part of the framing of autism coverage, many other researchers have explained that source and image frames are also fruitful lenses through which to analyze coverage of health issues (Bie, & Tang, 2015; Clarke, 2008; Huws & Jones, 2011, Jones, & Harwood, 2009; Ren, Peters, Allgaier, & Lo, 2014). This line of research contends that it is critical to analyze the voices and faces of the people included in the stories to better understand what perspectives, experiences, and information is included in the coverage. Specifically, Kang's (2012) study of U.S. television coverage suggests that people with autism are quoted less frequently than doctors or their family members. Additionally, Huws and Jones' (2011) research on autism coverage in British newspapers concludes that individuals with the disorder are seldom interviewed, and adults with autism are largely ignored. Once again, however, no content analyses of the sources quoted in the autism stories of newspapers from developing countries could be located in the literature.

While previous research focused almost exclusively on the verbal content of autism coverage in the developed world, there is no quantitative research on the images presented in these new stories. That said, Sarrett (2011) conducted a critical analysis of the images of and articles about children with autism between 1960 and the early 2000s to highlight the persistent visual themes of "fragmentation" and "imprisonment of normal children" (p. 145). Further, Sarrett also critically explored the verbal content in popular print media autism coverage in terms of its evolution from a focus on psychology to genetics and biology. Although the verbal content of the articles Sarrett analyzed reflected the paradigmatic shift in research from psychology to biology and genetics, she argues that the images presented in autism coverage continue to popularize negative tropes of individuals with autism as broken or fragmented individuals who could be restored to normality with proper treatment. More broadly, however, the images shown

in autism coverage may also frame the reports by providing visual cues about the importance and interpretation of particular issues or sources included in the story. Indeed, Rodriguez and Dimitrova (2011) argue that visuals “are powerful framing tools because they are less intrusive than words and as such require less cognitive load,” triggering peripheral, rather than central processing, so that viewers may accept the visual frame (p. 50). Since this current exploratory study analyzes images in terms of their presence (or absence) and the person(s) depicted therein, this visual framing analysis occurs at the denotative level, answering the question “who or what is being depicted here?” (p. 54). Therefore, the third, fourth and fifth research questions ask:

RQ3: What are the major sources quoted in Venezuelan and Argentine coverage of autism?

RQ4: How is autism visually represented in Venezuelan and Argentine autism coverage?

RQ5: What is the role of people with autism in Venezuelan and Argentine coverage?

The mass media are particularly effective channels for providing information about health, development disorders, and other issues related to children and people living with chronic conditions (Happer & Philo, 2013). However, media coverage and portrayals of people with autism are often misleading, inaccurate, and/or stereotypical (Holton, 2013). For instance, the movie *Rain Man* may have increased public awareness of autism, but the portrayal of the character exhibiting autistic behavior became a misleading stereotype or common misconception that most autistic individuals were actually idiot savants (Treffert, 2009). Early research on the media’s depictions of individuals with autism spectrum disorder indicated some fictional presentations may inform the public about autism, but that they may also perpetuate the stigma and stereotypes associated with it (Draaisma, 2009). While there is a large body of research on the stigmatization of public health issues, research on mental illness coverage in the United States found that it largely focused on blame, treatment, recovery, and calls to action (Corrigan,

et al., 2005). Further, researchers analyzing coverage of mental health, autism, and developmental disorders have repeatedly noted the media's deficiencies in failing to provide accurate, useful information that reflects contemporary scientific consensus and for publishing sensational stories that are unrealistically positive or using negative language that reinforces stereotypes (Clarke, 2008; Huws and Jones, 2011; Thornicroft, Goulden, & Shefer, 2013; Whitley & Wang, 2017).

Another example of media coverage framing autism in an erroneous and stereotypical way is explored by Jones and Harwood's (2009) research on the Australian media representation of this condition. These scholars conclude that the portrayal of autism in Australia's media is doubly stereotypical, "either uncontrollable, aggressive, and even violent, individuals who cause great stress to their families and careers or unhappy and often unloved and poorly treated (both by the system and by their own families" (Jones & Harwood, 2009, p. 15). Additionally, Huws and Jones' (2011) analysis of British newspapers' autism coverage further demonstrated how it tends to portray people with this disorder as an unfortunate problem for both society and their parents. Similarly, Coverdale, Nairn, and Classen (2002) found that New Zealand's newspapers largely used negativity and generic labeling in their reporting on mental illnesses.

According to Goffman (1963) social stigma is the disapproval of a person based on characteristics that distinguish them from other members of society. Further, Goffman explains that these social stigmas are frequently related to culture and health. Thus, the media's use of stereotypes and stigmatizing cues of people with health issues such as autism spectrum disorder may promote different expectations between how people with this condition really are and how society supposes and predicts they will act or be. It is not enough to just provide authentic and factual information; it is also necessary to present it in a neutral way that does not lead to

misconceptions about autism. The most basic need in any culture may be for accurate, useful information that increases understanding, decreases misconceptions, and reduces or eliminates the stigma associated with the disorder. Thus, the sixth and last research question asks:

RQ6: How does the Venezuelan and Argentine coverage stigmatize autism?

Method

Sample

To answer the research questions, a quantitative content analysis of autism coverage in the two leading by circulation newspapers in Venezuela (*El Universal* and *El Nacional*) and Argentina (*La Nación* and *La Clarín*) between the years of 2010 to 2017 was conducted. Since no Venezuelan nor Argentine newspapers with images could be located in indexed databases, the *El Universal* and *El Nacional* newspaper websites for Venezuela and the *La Nación* and *La Clarín* newspaper websites for Argentina were used to acquire the articles. All stories were read and analyzed in their original Spanish versions. “Autism” was the query term used to conduct the search. For newspapers in both countries, only stories in which the word “autism” appeared in more than just the article’s headline were included, in order to remove as many unrelated articles that only had incidental references to autism as possible. As shown in Table 1, 480 articles were gathered in total (240 Venezuelan and 240 Argentine), and a random sample of 15 articles per publication per year was selected for analysis. Thus, 55% of the total universe of articles identified was analyzed, averaging between 40% and 70% of each newspapers’ articles about autism each year.

Table 1: Autism coverage and sample

	<i>El Universal</i>	<i>El Nacional</i>	<i>La Clarín</i>	<i>La Nación</i>
2010	29	16	15	17
2011	41	24	18	16
2012	39	21	21	19
2013	42	22	19	20
2014	44	19	22	24
2015	31	20	35	31
2016	37	26	28	44
2017	36	23	41	38
Total	299	171	199	209
Sample	120	120	120	120

Units of Analysis and Categories

Each article was considered one unit of analysis and was coded for issues, discourse type, sources, images, role played, and stigma cues. Special attention was paid to headlines, nut graphs, column inches, and wording to make determinations about dominant discourse types and main topics. Based on previous research (Bie & Tang, 2015; Kang, 2012), a list was drawn of the main issues discussed in each article. Two trained coders determined in each individual article whether the main issue or theme discussed was research (science, treatment, causes, diagnosis, risks); public relations (announcements/ads for company/product/event, charity through fund-raising/donation, celebrity stories, art/cultural activities like films/art/plays/books/TV shows about autism or autism-related events); family story (parents, siblings, or other family members of individuals with autism); infrastructure (availability of educational/intervention resources for autistic people); vaccines (MMR controversy, link between vaccines and autism, measles outbreak); political issues (government funding, politicians, legislation); social cases (people with autism portrayed as crime victims or perpetrators/bullying); or misuse of the word autism/other (inappropriate/inaccurate labeling or use of autism without valid diagnosis, when a

person is merely introverted or unsocial instead of having autism, articles mainly discussing any other topic).

Second, each article was also coded for the dominant discourse based on Bie and Tang's (2015) research: either scientific (studies/statistics/medical and technical language) or human-interest (discusses personal and sensitive stories of people with autism or families with emotional appeals). Third, the coders determined the main sources quoted based on a list from previous research (Bie & Tang, 2015; McKeever, 2012), including individuals with autism; family members (mothers, fathers, grandparents, siblings, etc.); health professionals/researchers (doctors, nurses, health care providers); government official; supporters (charity, nonprofits, community members); journalists/other; no sources. Similarly, each article was also coded for the images including individuals with autism; family members (mothers, fathers, grandparents, siblings, etc.); health professionals/researchers (doctors, nurses, health care providers); government official; celebrity; other; no image. Fifth, each article was coded for whether the role played by the person with autism in the story was leading (autism itself or a person with autism was the focus of the story); supporting (parents, siblings, healthcare professionals, volunteers, etc. were the main focus of the story); incidental (if the story's main focus was not on autism issues, but autism was mentioned briefly).

Finally, based on Corrigan et al, (2005), Goffman (1963), and Holton (2013), each article was also coded for the presence or absence of four types of stigmatizing cues in autism coverage. These cues included: (1) labeling (identifying an individual through nouns and adjectives describing abnormal trait(s) such as loner, violent, dismal, abnormal, different from others, shy, destructive, etc.); (2) psychiatric symptoms (describing an individual through responses to external stimuli and cognitive limitations like rocking in a corner, speaking softly, yelling

outburst, etc.); (3) social skill deficits (identifying an individual through social skill deficits such as impaired social interactions or other verbal and/or nonverbal communication issues like delayed language development, trouble making friends, inappropriate body language, difficulty learning basic skills, etc.); and (4) physical appearance and symptom cues (describing an individual through their physical appearance and symptom cues by referencing physical development, impairments, or abnormalities like shaky limbs, mismatched clothing, disheveled hair, trembling).

Reliability

Two trained coders double-coded 10% of the total sample. Intercoder reliability was determined using Krippendorff's alpha and Cronbach's alpha. The reliabilities ranged from 0.82 to 1.0, with an average alpha score of .90, confirming the reliability of the results.

Results

The first research question asked about the differences in main issues between Venezuelan and Argentine autism coverage. As shown in Table 2, the results of a cross-tabulation with Pearson's chi-square coefficient indicated there were significant differences in the main issues discussed between the two countries, $X^2(7, N = 480) = 39.91, p < .01, V = .29$. Specifically, in Venezuela, research (38%) was the most frequently discussed topic, with public relations the second most frequent (27%). In contrast, Argentina's stories discussed public relations topics (41%) most frequently, followed by research (25%). In addition, family stories were more frequent in Argentina (14%) than in Venezuela (4%), while infrastructure stories were more frequently discussed in Venezuela (11%) than in Argentina (5%).

*Table 2: Autism Coverage Main Issues by Country (Percentages)**

Main Topics	Venezuela (n = 240)	Argentina (n = 240)
Research	38.2%	24.6%
Public Relations	26.9%	41.3%
Family Story	4.2%	14.2%
Infrastructure	10.9%	5.0%
Vaccines	2.9%	2.5%
Political Issues	3.4%	0.8%
Social Cases	1.7%	3.8%
Misuse/Other	11.8%	7.9%

**Differences in main issues between countries significant, $p < .01$*

The second research question asked about the extent to which scientific and human-interest discourses are used in Venezuelan and Argentine autism coverage. As shown in Table 3, the results of a cross-tabulation with Pearson's chi-square coefficient indicated there were significant differences in the discourses between the two countries, $X^2(1, N = 480) = 10.63, p < .01, V = .16$. Specifically, in Venezuela, the newspaper stories were nearly evenly distributed with 47% using a scientific discourse and 53% using a human-interest discourse. Conversely, Argentine coverage focused more on human-interest discourses (69%) than on scientific discourses (31%).

*Table 3: Autism Coverage Dominant Discourse Type by Country (Percentages)**

Discourse Type	Venezuela (n = 240)	Argentina (n = 240)
Scientific	46.6%	31.3%
Human-interest	53.4%	68.8%

**Differences in dominant discourse between countries significant, $p < .01$*

The third research question asked about the main sources quoted in Venezuelan and Argentine autism coverage. As shown in Table 4, the results of a cross-tabulation with Pearson's chi-square coefficient indicated there were significant differences between the two countries, $X^2(6, N = 480) = 42.46, p < .01, V = .37$. In particular, doctors were the main source quoted in both Venezuelan (60%) and Argentine (30%) coverage. Additionally, Argentina's second most

frequent main source was family members (28%) while Venezuela's was supporters (12%). Venezuela's autism coverage only quoted family members in 5% of the stories. Finally, both countries quoted individuals with autism in less than 5% of their stories; Venezuela only did so in 2% and Argentina in 3% of their stories.

Table 4: Autism Coverage Main Sources Quoted by Country (Percentages)

Sources Quoted*	Venezuela (n = 240)	Argentina (n = 240)
Individual with Autism	2.2%	3.4%
Family Member	5.1%	28.4%
Doctor	60.3%	29.5%
Government Official	4.4%	5.1%
Supporters	11.8%	10.2%
Journalists/Other	5.1%	9.1%
No Sources	11.0%	14.2%

**Differences in main sources between countries significant, $p < .01$*

The fourth research question asked about the visual representation of autism in Venezuelan and Argentine coverage in terms of the images included in the articles. To answer this question, the presence or absence of an image as well as six categories of individuals appearing in newspaper stories about autism was coded. As shown in Table 5, the results of multiple cross-tabulations with Pearson's chi-square coefficient indicated there were significant differences between the two countries. Overall, autism coverage in Venezuela included fewer images than in Argentina, $\chi^2 (1, N = 480) = 20.56, p < .01, V = .21$. Specifically, 61% of Venezuelan coverage contained no visual representation of autism at all, while only 40% of Argentine coverage did not include images. Alternately, Argentine coverage contained more images of people with autism than Venezuelan coverage, $\chi^2 (1, N = 480) = 33.47, p < .01, V = .26$. In particular, individuals with autism were visually represented in 26% of Argentina's stories, while only 7% of Venezuela's articles contained a picture of people with this condition.

Finally, pictures of family members were also more prevalent in Argentina's autism coverage than in Venezuela's, $X^2(1, N = 480) = 5.31, p < .01, V = .11$. Similar to the previous result, 13% of Argentina's coverage contained an image of a family member, while only 7% of Venezuela's stories did so.

Table 5: Autism Coverage Images by Country (Percentages)

Images	Venezuela (<i>n</i> = 240)	Argentina (<i>n</i> = 240)
Individual with Autism*	6.7%	26.3%
Family Member*	6.7%	12.9%
Doctor**	2.1%	5.4%
Government Official	2.5%	3.3%
Celebrity*	2.9%	8.8%
Other	27.9%	21.3%
No Image*	60.8%	40.0%

*Differences in images between countries significant, $p < .01$

**Differences in images between countries significant, $p < .05$

The fifth research question explored the differences in the role of autism in Venezuelan and Argentine coverage. As shown in Table 6, the results of a cross-tabulation with Pearson's chi-square coefficient indicated there were significant differences in the roles between the two countries, $X^2(2, N = 480) = 15.14, p < .01, V = .18$. In particular, autism played a leading role in about half of the stories from both countries, but Venezuelan (41%) coverage had more incidental references to autism than Argentine (27%) coverage. Additionally, autism played a supporting role in nearly twice as much Argentine (23%) coverage than in Venezuelan (13%) coverage.

*Table 6: Role of Autism in Coverage by Country (Percentages)**

Different Roles	Venezuela (<i>n</i> = 240)	Argentina (<i>n</i> = 240)
Leading role	46.3%	50.0%
Supporting role	12.5%	23.1%
Incidental role	41.3%	26.9%

*Differences in role of autism in coverage between countries significant, $p < .01$

The sixth and last research question asked about the stigmatizing cues in Venezuelan and Argentine autism coverage. The results of the analysis indicated the differences between countries in the use of psychological symptoms and physical appearance cues were not significant, $p > .05$. However, as shown in Table 7, the results of a cross-tabulation with Pearson's chi-square coefficient indicated there were significant differences between the two countries in two stigmatizing cues: labeling and social skills. Argentine autism coverage used significantly more stigmatizing labels to refer to people who have this disorder than did Venezuelan coverage, $\chi^2 (1, N = 480) = 11.02, p < .01, V = .16$. Specifically, 34% of Argentine coverage compared to only 20% of Venezuelan stories used stereotypical labels when talking about people with autism. Similarly, coverage in Argentina contained more stigmatizing descriptions of the autistic individual's social skill deficits than did stories in Venezuela, $\chi^2 (1, N = 480) = 7.97, p < .01, V = .14$. In particular, 40% of Argentine coverage referred to autistic individuals' lack of social skills, while only 27% of Venezuela's articles did so.

*Table 7: Autism Coverage Stigmatizing Cues by Country (Percentages)**

Stigmatizing Cues	Venezuela ($n = 240$)	Argentina ($n = 240$)
Labeling*	19.7%	34.2%
Psychological Symptoms	24.1%	28.7%
Social Skills*	27.4%	40.4%
Physical Appearance	5.8%	6.7%

* *Differences in stigmatizing cues between countries significant, $p < .01$*

Discussion

This investigation compared autism coverage in two South American countries, Venezuela and Argentina. The study analyzed 480 stories in the top two newspapers from Argentina (La Nación and La Clarín) and Venezuela (El Nacional and El Universal) between the years of 2010 and 2017 in their native language, Spanish. This research is important because it is the first study to describe and compare autism coverage in two developing countries located in

South America. Since research on this topic is so rare, and a quantitative content analysis on the differences of autism coverage in the media between Venezuela and Argentina had not been conducted yet, this study fills a gap in the literature. In order to systematically and effectively analyze the coverage of autism in these two countries' newspapers, the differences in main issues, discourse type, sources, images, roles, and stigmatizing cues used in the stories were analyzed. Overall, the results suggest that there are significant differences between Venezuela and Argentina's coverage of autism.

The first research question asked: What are the main issues discussed in Venezuelan and Argentine autism coverage? The results of the analysis show research and public relations were the most frequently discussed issues in both countries. In Venezuela, research (38%) was the most recurrent topic followed by public relations (27%); while in Argentina, public relations (41%) was the most common topic followed by research (25%). These findings support Venezuela's and Argentina's cultural norms based on Hofstede's (Martin & Nakayama, 2013) cultural model. The fact that the media in Venezuela and Argentina place such a big emphasis on research provides evidence that both countries rate as high uncertainty avoidance cultures. Scientific stories discuss treatment options, possible causes and cures, which tend to be based facts, figures, and statistics. A possible explanation for the frequency of articles related to science and research in these two countries is that scientific data and information allow for less uncertainty. Since Argentinians and Venezuelans want to feel as though they are in control of their future, objective and scientific stories that provide facts, figures, and statistics help them to deal with the unknown and have clear-cut answers about a very complicated issue.

In addition to research and public relations stories, there were also differences in the other topics in Argentine and Venezuelan autism coverage. For instance, Argentine (14%)

coverage included more family stories than Venezuelan (4%) coverage. Additionally, infrastructure plays a bigger role in Venezuela's (11%) newspaper stories than in Argentina's (5%) coverage. The fact that infrastructure issues, which involve educational and intervention resources for people with autism spectrum disorder and their families, make up 11% of Venezuelan coverage and even less in Argentine is worrisome because it reveals how little useful information is provided for those who need it the most. Indeed, this analysis indicates that stories about a company or individual using autism to promote their products and services for financial gain received more press coverage than did organizations that support and provide resources for people with autism. Further, the finding that public relations events promoting, for example, a book release, a movie opening, or a soccer game receive much more coverage than stories about autism spectrum disorder support services and resources suggests that the news values in these countries are biased toward publicity events over infrastructure stories. Moreover, this result is in line with Ratazzi and colleagues' (2016) research suggesting that autism coverage provides very little useful information about autism spectrum disorder, which makes it challenging for people to learn more about options for support services and resources.

The second research question asked about the extent to which human-interest and scientific discourses are used in Venezuelan and Argentine autism coverage. The results of the analysis indicate that Argentine coverage more frequently uses human-interest discourses (69%) than does Venezuelan coverage (53%), which uses scientific discourses (47%) more often in their stories than Argentina (31%). As mentioned previously, these findings are aligned with Hofstede's (Martin & Nakayama, 2013) cultural model. It makes sense that Venezuela uses scientific discourses more frequently than Argentina because of their differing individualism cultural norms. Since Venezuela is considered more of a collectivistic society than Argentina,

Venezuelans are more likely to express themselves in terms of “we” and are encouraged to think of the similarities of the group more than the differences. This notion further supports the result of Venezuelan coverage using more articles with a scientific discourse than Argentine coverage because Venezuelans feel more comfortable reading stories where all individuals described are put into the same category. This finding implies Venezuelans have their own community where medical professionals are looking for cures or treatments to make them look and act the same as others and the cultural norm.

Argentine coverage, on the other hand, uses human-interest discourses much more frequently than scientific discourses as found in Venezuelan coverage. Family stories, which was a more commonly seen issue in Argentina’s than in Venezuelan’s articles, use human-interest discourses, which aim to increase understanding and compassion while provoking a genuine desire to learn more and help. This result can be explained by the fact that Argentinians are considered more individualistic than Venezuelans because they do not focus as much on the similarities of people surrounding them. Rather, Argentinians like feeling that they are unique, complex and irreplaceable as they pursue individual goals. Argentinians enjoy and can handle hearing more individual and personal stories than Venezuelans because Argentinians do not believe in the one-size for all or fits the mold idea. The Argentine culture embraces the fact that we are all different and encourages such speech even in the newspapers and stories they read. Tying this result back to Kang’s (2012) conclusion, in Venezuela, instead of taking advantage of the fact that it is such a collectivistic society and giving useful information about members of their communities having autism, people with this condition are kept a secret in order to maintain that topic as a private matter. Instead of using media’s coverage of autism in Venezuela as a collective effort to create support and awareness about the reality of some of their nation’s

members, it is being used as a façade to hide them and keep promoting the cultural belief of everybody being the same.

The third research question inquired about the major sources quoted in Venezuelan and Argentine coverage of autism. While doctors were the main source quoted in more than half of the coverage of autism in Venezuela (60%), the most frequent sources quoted in Argentina were almost evenly distributed between doctors (30%) and family members (28%). These findings further support Venezuela's and Argentina's cultural norms based on Hofstede's (Martin & Nakayama, 2013) cultural model. The fact that Venezuela is considered a high-power distance culture explains why it values medical professionals' opinions and statements the most. Venezuelans have a hard time challenging and questioning the status quo and authority figures, which are represented by doctors and medical professionals. Therefore, Venezuelans rely on doctors' opinions and follow their advice blindly and without any doubts. Venezuelans will not believe anybody else's expertise or words more than doctors because they hold deep respect for them, which is illustrated by the fact that they are the sources most frequently quoted in autism coverage. The opposite is true for Argentina, which is considered a low-power distance culture. In Argentina, a bigger priority is given to what family members have to say than in Venezuela because Argentinians do not easily accept unequal distributions of power. Instead of paying more attention to people that technically hold more power in society, such as government officials and researchers or medical professionals, Argentinians want to hear from "normal" people in the stories they read about autism spectrum disorder. Generally, Argentinians do not think of doctors and medical professionals' opinions as superior to anybody else's, and if anything, family members' perspectives are valued just as much, which cannot be said of Venezuela's autism coverage.

Additionally, as Kang's (2012) analysis of U.S. television coverage and Huws and Jones' (2011) research on British print coverage of autism, respectively, explained, individuals with autism spectrum disorder are interviewed and quoted much less frequently than their family members or medical professionals. Moreover, people with autism were included and quoted the least of any other category in both countries' coverage, with quotes from family members, doctors, government officials, supporters, and journalists far surpassing those from individuals with autism. Even articles with no sources were more frequent than those quoting people with autism. The fact that stories quoting people with autism is the category with least representation in autism coverage further demonstrates how their experiences and opinions are simply not included in the conversation. It seems that the voices of the protagonists in these stories are not heard simply because they are not deemed as valuable as other people's expertise in both countries, Venezuela and Argentina.

The fourth research question asked how autism was visually represented in Venezuelan and Argentina autism coverage. The results of the analysis suggest not only family members, but also individuals with autism spectrum disorder, are visually represented more frequently in Argentine than in Venezuelan coverage. Similar to the conclusions regarding the sources, the inclusion of more images of people with autism and their family members in Argentine than Venezuelan coverage could be explained by Hofstede's (Martin & Nakayama, 2013) cultural norms. These findings correlate with the previous conclusion that Argentina is a low-power distance culture, which makes it more open and likely to share an equal amount of images of different sources, no matter their authority or status. Because Argentine culture does not give a greater weight to what medical professionals or researchers have to say over a mother or a father's expertise, it makes sense that the same applies to visual representation as well. In

Venezuela, the real experts are considered to be the doctors, so they do not share or even ask what family members or individuals with autism experience or know about their own disorder. Therefore, in Venezuela the people with the least power or the least authority are not only the ones not being heard, but also the ones not seen.

In Argentina the roles of the mother, father, siblings and other family members are just as important as the roles of government officials, doctors, and other authority figures, which explains why they are not only quoted, but also visually represented more frequently in Argentine than in Venezuelan coverage. Argentine coverage teaches its readers to better understand that individuals with autism are the real protagonists of the stories the audience is reading, which encourages them to include quotes from and images of people who have this condition and their families. Venezuelan coverage, on the other hand, appears to take that protagonist role away from individuals with autism and give it to authority figures out of respect for their status and expertise. Thus, in Venezuelan coverage, all the attention regarding the sources and the images included in the articles is not focused on individuals who have autism spectrum disorder and their families because of its high-power distance culture.

In addition to including more images of individuals with autism and their families, Argentine coverage also included more images (60%) overall than did Venezuelan coverage (40%). There could be multiple reasons for this finding, but it is difficult to come up with a single rationale that satisfies all the possibilities unexplored in this current investigation. For instance, one of the reasons for the absence of images in Venezuelan articles could be lack of money to cover photographers to take these pictures for the newspaper stories. This possibility is further supported by Pew's (2015) explanation of groups of people in developing countries such as Venezuela living on a tight budget to cover basic human needs. Another possible explanation

for lack of images in Venezuelan autism coverage could be that Venezuelans are reluctant to allow their pictures to be published and shared with the population due to their sense of shame and fear of stigma. Tying this explanation back to research conducted by Dyches, et al., (2004) and Lopez-Duran (2008), it seems that many people in Latin American countries still associate developmental disorders such as autism spectrum disorder with a punishment to the parents because of their mistakes. In Venezuelan culture, many people may want to keep this condition hidden from the public view. Therefore, they do not want their faces to be associated with it because it would let the world know that they did something bad enough to deserve a child with this disorder. At this point, however, it is premature to assume that there are fewer images in Venezuelan autism coverage than in Argentine autism coverage based solely on Venezuelans' reluctance to appear in stories about this condition that is still considered deeply shameful in their culture.

The fifth research question asked about the roles played by people who have autism in Venezuelan and Argentine autism coverage. A remarkable similarity was found in the answer to this question. In both countries, autism spectrum disorder played a leading role in almost half of the stories. However, Venezuelan and Argentine newspapers differed in the other possible roles people with autism spectrum disorder played in their coverage. Specifically, in Argentina, autism played a supporting role in 23% of the other coverage and an incidental role in about half of the other Argentine coverage (27%), but in Venezuela, autism played an incidental role in most of the other half of the coverage (41%). While Argentine coverage seemed more balanced, having some incidental references as well as some supporting roles, in Venezuela it seemed like it was one extreme or the other. Either people with autism were the main focus of the stories in the Venezuelan newspapers or they were barely mentioned at all. On the other hand, in Argentina,

the other half of the articles focused on either autism as a supporting role, where the experiences of their family members, doctors or therapists was the main point of attention, or where autism was only briefly discussed in an incidental reference. This result could be explained by the fact that some Latin American families feel ashamed of having a child suffering from a developmental disorder such as autism spectrum disorder because in their culture, it is associated with a mistake the parents committed and now are being punished for (Skinner, et al., 2001). This result also aligns with the notion that it could be “embarrassing” for the Latin American family to share their story with the media and have others learn about their “sin.” It is easier to just hide people who have autism instead of having newspapers stories go into detail about their lives and struggles. Since developmental disorders are still considered a taboo topic in much of the Latin American culture, the readers may not want to see these individuals, which explains why half of the articles do not focus on people with autism.

Additionally, as Montiel-Nava within Jessica Wright (2016) explained, individuals with developmental disorders such as autism in Venezuela are referred to as the “nonexistent people” because they are never added to the population records due to their lack of attendance at school. The fact that half of the stories in both countries ignore the experiences of individuals with this developmental disorder further shows the lack of information provided to the readers of the newspapers about autism spectrum disorder. Relating it back to the conclusion reached by Singh, Hallmayer, and Illes (2007), this result further supports the idea that the cultures of Venezuela and Argentina influence their news values. Venezuelans and Argentinians’ perspectives on this matter are also shaped by the media’s framing of the issue. It is a vicious circle where these two countries’ cultures label individuals with autism as “nonexistent people,” but at the same time their populations have a hard time changing their viewpoints. The media keeps repeating the

identical message Venezuelans and Argentinians have been taught forever, thinking that their audience will be drawn to reading and hearing information based on their culture values.

The sixth and last research question explored the ways in which the Venezuelan and Argentina coverage stigmatized autism. Even though no significant differences were found in the use of psychological symptoms and physical appearance cues between the two countries, the results of the analysis indicated the differences between countries in the use of labeling and social skills descriptions were significant. The fact that Argentine autism coverage used significantly more stigmatizing social skills cues (40%) as well as labels (34%) to refer to people with autism than did Venezuelan stories could be explained by its larger percentage of human-interest discourses. That is, Argentine coverage provided more family stories and quotes from family members than Venezuelan coverage. Even though focusing on the family's point of view might be beneficial for the reader because they get to learn about other people's perspectives and experiences, it could also be counterproductive. Since many of the Argentine articles are not focusing on something factual and unbiased, but rather on subjective and personal experiences and thoughts, these stories are also more prone to fostering and promoting stereotypes and misconceptions about autism.

Family members, especially mothers, complaining about how challenging it is to raise a child with autism could have a negative effect on the readers and create labelling and social skill misconceptions. Indeed, Jones and Harwood's (2009) description of autistic individuals portrayed in the Australian media suggests that most stories indicate individuals with autism spectrum disorder cause their family members a great deal of stress. Another example of a study giving credence to this analysis is Huws and Jones' (2011) investigation of the representation of people with autism in the British newspapers that concluded they are generally shown as a

source of problems for their families and society overall. These are a few examples of the ways that these stigmatized representations of autism in Argentina set the tone for the different and unreachable expectations society puts on people with autism and the way they are supposed to behave. It is crucial to be careful with the way the media frames autism because their stories could, instead of increasing awareness of the condition, cause harm by facilitating inaccurate and erroneous information. Family stories used by Argentinian newspapers could be a double-edged sword because as much as they can be a resource and call-to-action for readers, they could also be using labeling and social skill descriptions that lead to stereotypes and stigma.

When considering the implications of these results more broadly, it appears that the cultural values have a strong impact on autism coverage in Argentina and Venezuela. Both countries' newspapers publish articles that satisfy the reader's need to avoid uncertainty. They both focus more on scientific topics because it allows them to give the audience the feeling of control and knowledge, but which also results in little coverage of infrastructure, services, and resources for people with autism. Given that Venezuela is a more collectivistic culture than Argentina, the Venezuelan newspaper stories focus on grouping people together instead of highlighting individual differences. This is the reason that Venezuela uses scientific discourses more often in their stories than Argentina. Finally, news sources cater to Venezuela's need for high-power distance and Argentina's for low-power distance. Venezuelan newspapers tend to use more quotes from doctors and medical professionals, while Argentine coverage emphasizes the opinions of the everyday individuals. Journalists in both countries might not be aware that the stories they are publishing are not particularly helpful to individuals with autism and the general public. Suggestions on how Venezuelan and Argentine newspapers could improve on their coverage include providing more coverage for infrastructure and support services or programs as

well as telling stories from the point of view of the person with the disorder. Journalists could tell people with autism' stories instead of talking for them. Finally, another recommendation for journalists on how to improve their coverage is to stop portraying people with autism in a way that perpetuates stereotypes and stigmas. It is important for journalists to consciously think about the most useful story for readers instead of the one that is most convenient.

Overall, this exploratory investigation into autism coverage in two South American countries begins to fill a gap in the research which is largely focused on health communication practices in developed, western countries. Although much of this study's results were in line with the cultural values and news norms in Argentina and Venezuela, more broadly, the findings from both countries are also similar to the results of framing analyses of Australian, British, Canadian, and U.S. autism coverage. Indeed, the universality of news norms such as timeliness, significance, prominence, proximity, and human interest are likely a limiting factor in comparative cross-national investigations of differences in media coverage across countries. Thus, the broader findings or the commonalities in coverage among countries are frequently the most compelling findings. In terms of autism coverage specifically, it appears that autism coverage from a wide variety of countries fails to include quotes from or images of individuals with autism; public relations and research are generally the most frequent and dominant topics; and stigmatizing cues persist in autism coverage in both developed and developing countries.

In addition to the common news values that may limit potential differences in autism coverage between countries, this study also had some other limitations that must be acknowledged. First, the lack of an academic database that archives newspapers from South America made it challenging to gather stories from the newspapers *La Nación* and *La Clarín* for Argentina, and *El Universal* and *El Nacional* for Venezuela. This lack of a database archiving

these newspapers meant searches for autism stories required querying the individual newspaper's websites, which was not the most uniform or efficient research sampling method. Additionally, and as with any research that analyzes a sample instead of the entire universe of content, there are reliability and generalizability limitations. That said, 55% of all autism stories from both countries were analyzed, far exceeding any requirements for reasonable reliability, especially since some newspapers only published fifteen to seventeen stories in a given year. Another limitation of this study was the scarcity of previous research on autism coverage in Latin America, specifically Argentina and Venezuela.

Future research possibilities may include more studies of how autism is portrayed in print media in Latin America, as well as comparing the media representation of autism in Latin America to other parts of the world. This research does not have to be focused only on print; it can be also on television news coverage of autism. Another future research option is analyzing the different effects that more accurate and accessible information about infrastructure for those with autism can have on viewers' or readers' responses when such coverage may violate social and cultural norms. Additionally, experimental research could be performed to test the effects of stigmatizing cues on readers' perceptions of individuals who have autism. Finally, interviews with journalists could be conducted to determine how to improve autism coverage. If more research like this is conducted, individuals with autism may cease to be "nonexistent people," and could be fully integrated into society and valued for their uniqueness.

References

- American Psychiatric Association. (1980). *Diagnostic and statistical manual of mental disorders* (3rd ed.). Arlington, VA: American Psychiatric Publishing.
- American Psychiatric Association. (1987). *Diagnostic and statistical manual of mental disorders* (3rd ed., rev.). Arlington, VA: American Psychiatric Publishing.
- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed. rev.). Arlington, VA: American Psychiatric Publishing.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders* (5th ed. rev.). Arlington, VA: American Psychiatric Publishing.
- Bie, B., & Tang, L. (2015). Representation of autism in leading newspapers in China: A content analysis. *Health Communication, 30*(9), 884-893.
- Centers for Disease Control and Prevention (2009). Prevalence of autism spectrum disorders – Autism and developmental disabilities monitoring network, United States, 2006. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/20023608>
- Centers for Disease Control and Prevention (2016). Autism Spectrum Disorder (ASD). Data & statistics. Identified prevalence of autism spectrum disorder. ADDM network 2000-2012. Combining data from all sites. Retrieved from <https://www.cdc.gov/ncbddd/autism/data.html>
- Central Intelligence Agency. (2016). Argentina. *The world factbook*. Retrieved from <https://www.cia.gov/library/publications/the-world-factbook/geos/ar.html>
- Central Intelligence Agency. (2016). Venezuela. *The world factbook*. Retrieved from <https://www.cia.gov/library/publications/the-world-factbook/geos/ve.html>
- Clarke, C.E. (2008). A question of balance: The autism-vaccine controversy in the British and

- American elite press. *Science Communication*, 30(1), 77-107.
- Clarke, J. N. (2012). Representations of autism in US magazines for women in comparison to the general audience. *Journal of Children and Media*, 6, 182–197.
doi:10.1080/09687590802535345
- Cohen, L. (2018, August 28). Argentina’s economic crisis explained in five charts. Retrieved from <https://www.reuters.com/article/us-argentina-economy/argentinas-economic-crisis-explained-in-five-charts-idUSKCN1LD1S7>
- Corrigan, P. W., Watson, A. C., Gracia, G., Slopen, N., Rasinski, K., & Hall, L. L. (2005). Newspaper stories as measures of structural stigma. *Psychiatric Services*, 56(5), 551–556.
- Coverdale, J., Nairn, R., & Classen, D. (2002). Depictions of mental illness in print media: A prospective national sample. *Australian and New Zealand Journal of Psychiatry*, 36(5), 697–700.
- Dixon, G.N., & Clarke, C.E. (2012). Heightening uncertainty around certain science: Media coverage, false balance, and the autism-vaccine controversy. *Science Communication*, 20(10), 1-25.
- Draaisma, D. (2009). Stereotypes of autism. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 364, 1475–1480.
- Dyches, T.T., Wilder, L.K., Sudweeks, R.R., Obiakor, F.E., & Algozzine, B. (2004). Multicultural issues in autism. *Journal of Autism and Developmental Disorders*, 34(2), 211-222.
- Elsabbagh, M., Divan, G., Koh, Y.J., Kim, Y.S., Kauchali, S., Mercin, C., Montiel-Nava, C.,

- Patel, V., Paula, C.S., Wang, C., Yasamy, M.T., & Fombonne, E. (2012). Global Prevalence of Autism and Other Pervasive Developmental Disorders. *Autism Research Journal*, (5), 160-179.
- Entman, R.M. (1993). Toward clarification of a fractured paradigm. *Journal of Communication*, 43(4), 51-58.
- Goffman, E. (1963). *Stigma: Notes of the management of spoiled identity*. Englewood Cliffs, NJ: Prentice-Hall.
- Hanusch, F. (2015). Cultural Forces in Journalism. *Journalism Studies*, 16(2), 191-206
- Happer, C., & Philo, G. (2013). The role of the media in the construction of public belief and social change. *Journal of Social and Political Psychology*, 1(1), 321-336.
- Hertz-Picciotto, I., & Delwiche, L. (2009). The rise in autism and the role of age at diagnosis. *Epidemiology*, 20, 2009; 84–89.
- Hofstede Insights. (2018). Venezuela and Argentina. Retrieved from <https://www.hofstede-insights.com/country/argentina/>
- Holton, A.E. (2013). What’s wrong with Max? Parenthood and the portrayal of autism spectrum disorders. *Journal of Communication Inquiry*, 37(1), 45-63.
- Hong, H. (2013). The effects of human interest framing in television coverage of medical advances. *Health Communication*, 28(5), 452-460.
- Huws, J. C., & Jones, R. S. P. (2011). Missing voices: Representations of autism in British newspapers, 1999–2008. *British Journal of Learning Disabilities*, 39, 98–104.
- Jones, S.C., & Harwood, V. (2009). Representations of autism in Australian print media. *Disability & Society*, 18(5), 18-24.
- Kang, S. (2012). Coverage of autism spectrum disorder in the US television news: an analysis of framing. *Disability & Society*, 28(2), 245-259.

- Lanovaz, M. J., Dufour, M.-M., & Shah, S. (2015). Newspaper Coverage of Autism Treatment in Canada: 10-Year Trends (2004–2013). *Canadian Journal of Psychiatry. Revue Canadienne de Psychiatrie*, 60(7), 329–333.
- Lopez-Duran, N. (2008, March 14). Autism in South America: How does it compare? *Child Psych: Child development, parenting, and child psychology*. Retrieved from <http://www.child-psych.org/2008/03/autism-in-south-america-how-does-it-compare.html>
- McKeever, B. W. (2012). News framing of autism: Understanding media advocacy and combating autism act. *Science Communication*, 35(2), 213-240.
- Martin, J., & Nakayama, T. (2013). *Intercultural Communication in Contexts*. McGraw-Hill (6th Ed.). New York, NY: Print.
- Montiel-Nava, C., & Peña, J. (2008). Epidemiological findings of pervasive developmental disorders in a Venezuelan Study. *Autism*, 12, 191-202.
- Newschaffer, C.J., Falb, M.D., & Gurney, J.G. (2005, March). National autism prevalence trends from United States special education data. *Pediatrics*, 115(3), 277-282.
- Offit, P.A., & Coffin, S.E. (2003). Communicating science to the public: MMR vaccine and autism. *Vaccine*, 22(1), 1-6.
- Osteen, M. (Ed.) (2008) *Autism and representation*. NY: Routledge.
- Paula, S.C., Fombonne, E., Gadia, C., Tuchman, R., & Rosanoff, M. (2011). Autism in Brazil: perspectives from science and society. *Revista da Associação Médica Brasileira*, 57(1), 2-5. <https://dx.doi.org/10.1590/S0104-42302011000100002>
- Pew Research Center. (2015, September 23). Seven-in-ten people globally live on \$10 or less per day. Retrieved from <http://www.pewresearch.org/fact-tank/2015/09/23/seven-in-ten-people-globally-live-on-10-or-less-per-day/>

- Ratazzi, A., Paula, C.S., Garcia, R.A., Garrido, G., Montiel-Nava, D., Rosoli, A., Cukier, S.H., Rodrigues da Cunha, G., Irarrazaval, M., Rodriguez, M., & Besio, V. (2016). Implementation of the Latin American autism spectrum network caregiver needs survey. International Society for Autism Research. Retrieved from <https://imfar.confex.com/imfar/2016/webprogram/Paper20939.html>
- Regier, D. A., Kuhl, E. A., & Kupfer, D. J. (2013). The DSM-5: Classification and criteria changes. *World Psychiatry, 12*(2), 92–98.
- Reich, J. (2016). *Calling the Shots: Why parents reject vaccines*. New York University Press. New York: NY: Print.
- Ren, J., Peters, H. P., Allgaier, J., & Lo, Y.-Y. (2014). Similar challenges but different responses: Media coverage of measles vaccination in the UK and China. *Public Understanding of Science (Bristol, England), 23*(4), 366–375.
- Rice, C. E., Rosanoff, M., Dawson, G., Durkin, M. S., Croen, L. A., Singer, A., & Yeargin-Allsopp, M. (2012). Evaluating Changes in the Prevalence of the Autism Spectrum Disorders (ASDs). *Public Health Reviews, 34*(2), 1–22.
- Rodriguez, L., & Dimitrova, D.V. (2011). *The levels of visual framing. Journal of Visual Literacy, 30*(1), 48-65.
- Sarrett, J. C. (2011). Trapped Children: Popular Images of Children with Autism in the 1960s and 2000s. *Journal of Medical Humanities* 2011, 32 (2), 141-153.
- Scheufele, D. A. (1999). Framing as a theory of media effects. *Journal of Communication, 49*(1), 103–122.
- Silberman, S. (2015). *Neurotribes: The legacy of autism and the future of neurodiversity*. NY: Avery.

- Singh, J., Hallmayer, J., & Illes, J. (2007). Interacting and paradoxical forces in neuroscience and society. *National Review of Neuroscience*, 8, 153-60
- Skinner, D. G., Correa V., Skinner M., Bailey D.B. (2001). Role of religion in the lives of Latino families of young children with developmental delays. *American Journal of Mental Retardation*, 106, 297–313.
- Smith, M.J., Ellenberg, S.S., Bell, L.M., & Rubin, D.M. (2008). Media coverage of the Measles-Mumps-Rubella vaccine and autism controversy and its relationship to MMR immunization rates in the United States. *Pediatrics*, 121(4), 836-843.
- Speers, T., & Lewis, J. (2005). Journalists and jabs: Media coverage of the MMR vaccine. *Communication & Media*, 1(2), 171-181.
- Talero-Gutiérrez, C., Rodríguez, M., De La Rosa, D., Morales, G., & Vélaz-Van-Meerbeke, A. (2012). Profile of children and adolescents with autism spectrum disorders in an institution in Bogota, Colombia. *Neurología*, 27, 90-96.
- Thornicroft, A., Goulden, R., & Shefer, G. (2013). Newspaper coverage of mental illness in England 2008-2011. *British Journal of Psychiatry*, 202(Suppl 55), S64-S69.
- Trading Economics. (2018, Aug 18). Inflation rate/America. Retrieved from: <https://tradingeconomics.com/country-list/inflation-rate>
- Treffert, D. A. (2009). The savant syndrome: an extraordinary condition. A synopsis: past, present, future. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 364(1522):1351-1357.
- Volkmar, F.R., & McPartland, J.S. (2014, March). *Annual Review of Clinical Psychology*, 10, 193-212.
- Whitley, R., & Wang, J. (2017). Good news? A longitudinal analysis of newspaper portrayals of

mental illness in Canada 2005-2015. *Canadian Journal of Psychiatry*, 62(4), 278-285.

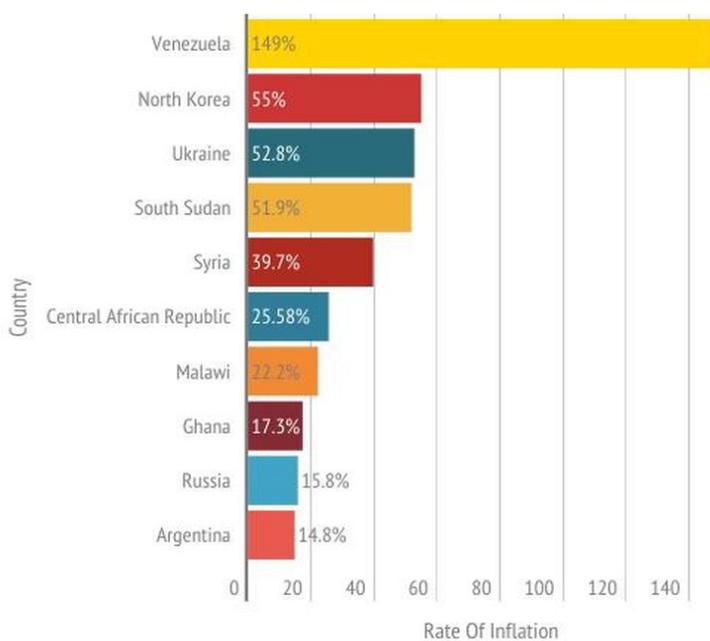
Wright, J. (2017). Venezuelan scientist offers reality check for autism research. Retrieved from:

<https://spectrumnews.org/news/venezuelan-scientist-offers-reality-check-for-autism-research/>

Appendix A:

Inflation Graph and Table

The World's Worst Economies In Terms Of Inflation



Source: Trading Economics

Country	Last	Previous	Highest	Lowest		
<u>Venezuela</u>	200000.00	Aug/18	82766	200000	3.22	% Monthly
<u>South Sudan</u>	122.90	Jul/18	88.5	836	-14	% Monthly
<u>Sudan</u>	63.90	Jun/18	60.9	182	-1	% Monthly
<u>North Korea</u>	55.00	Jul/13	70	4376	30	% Monthly
<u>Central African Republic</u>	38.04	Feb/16	38.04	51.73	-10.67	% Monthly
<u>Argentina</u>	31.20	Jul/18	29.5	20263	-7	% Monthly

*Data figure and table retrieved from *Trading Economics*

Appendix B:

Venezuelan and Argentine Cultural Norms Graph



*Data figure retrieved from (Hofstede Insights)

Teal: Argentina

Purple: Venezuela

Appendix C:

Codebook: Autism Coverage in Latin America

Q1 Indicate Coder's Initials:

SL (1)

DP (2)

Q2 In which newspaper did this article appear?

El Universal-Venezuela (1)

El Nacional-Venezuela (2)

La Clarin-Argentina (3)

La Nacion-Argentina (4)

Q3 What is the date of this article?

Q4 What year is this article?

2017 (1)

2016 (2)

2015 (3)

2014 (4)

2013 (5)

2012 (6)

2011 (7)

2010 (8)

Q5 Is there an image published with this article?

Yes (1)

No (2)

Q6 If there is an image published with this article, who is shown? Check all that apply.

No image published with article (1)

Individual with Autism (2)

Mother (3)

Father (4)

Grandparent(s) (5)

Other Family Member (6)

Medical Professional (doctor, nurse) (7)

Celebrity (relative, friend, sponsor, appearance at a benefit, school, or other event) (8)

Government Official(s) (9)

Academics (psychologists, neurologists, researchers) (10)

Other, specify: (11) _____

Q7 Does this story address the following topics? Check all that apply.

- Infrastructure (availability of educational/intervention resources for autistic people) (1)
 - Charity (fund-raising, donation, events for autistic people) (2)
 - Science (research, treatment, causes, diagnosis, risks) (3)
 - Art and cultural activities (films, art, fiction about autism or cultural achievements of autistic people) (4)
 - Family Story (parents, siblings, or other family members experiences/stories) (5)
 - Announcements or Ads for company, product, event (PR/Publicity) (6)
 - Social Cases (autistic people as crime victims or perpetrators/bullying) (7)
 - Celebrity Story (celebrity of family member with autism or appearance at a benefit, school, or other event) (8)
 - MMR Vaccine and Autism controversy (link between vaccine and autism) (9)
 - Misuse of word autism (when person is not autistic, merely introverted or unsocial) (10)
 - Political issues related to autism or autism treatment (11)
 - Other, specify: (12) _____
-

- Infrastructure (availability of educational/intervention resources for autistic people) (1)
 - Charity (fund-raising, donation, events for autistic people) (2)
 - Science (research, treatment, causes, diagnosis, risks) (3)
 - Art and cultural activities (films, art, fiction about autism or cultural achievements of autistic people) (4)
 - Family Story (parents, siblings, or other family members experiences/stories) (5)
 - Announcements or Ads for company, product, event (PR/Publicity) (6)
 - Social Cases (autistic people as crime victims or perpetrators/bullying) (7)
 - Celebrity Story (celebrity of family member with autism or an autism benefit attended or sponsored by celebrity) (8)
 - MMR Vaccine and Autism controversy (link between vaccine and autism) (9)
 - Misuse of word autism (when person is not autistic, merely introverted or unsocial) (10)
 - Political issues related to autism or autism treatment (11)
 - Other, specify: (12) _____
-

Q8 What was the tone of the article: neutral/objective/factual, negative/sad/problem-oriented, or positive/hopeful/solution-oriented? Check all that apply (if an article contains more than one tone, check each below):

- Neutral/Objective/Factual (1)
- Positive/Hopeful/Solution-Oriented (2)
- Negative/Sad/Problem-Oriented/Crime or Bullying/Lack of resources (3)
- Other, specify: (4) _____

Q9 Was this article **dominantly** neutral/objective/factual, negative/sad/problem-oriented, or positive/hopeful/solution-oriented? **Pay particular attention to the headline and first paragraph for objective/factual, positive, or negative words. For instance, if a headline and first paragraph are negative, but some positive information is mentioned at the end of the article, it is dominantly negative (and vice-versa).**

- Neutral/Objective/Factual (1)
 - Positive/Hopeful/Solution-Oriented (2)
 - Negative/Sad/Problem-Oriented/Crime or Bullying/Lack of Resources (3)
 - Other, specify: (4) _____
-

Q11 What was the role of the autistic individual in the story?

- Leading role (autism itself or a person with autism was the focus of this story) (1)
- Supporting role (parents, siblings, healthcare professionals, volunteers were main focus of story) (2)
- Incidental reference (if story's main focus was not on autism issues, but autism was briefly mentioned) (3)

Q12 IF AUTISM WAS NOT INCIDENTAL IN THE STORY,

Did the article use gain or loss frames? Gain frames emphasize the health benefits or rewards associated with taking or avoiding certain actions, while loss frames focus on the risks or disadvantages of avoiding or partaking in health actions. Loss frames typically assign causes for health risks, inactions, or societal responses to others, generating fear that can lead to positive behavioral changes or can explain negative ones. **Check all that apply (if the article could uses both frames, check both boxes).**

Gain frame (1)

- Loss frame (2)
- Neither frame (3)

Q13 IF AUTISM WAS NOT INCIDENTAL IN THE STORY,

What was the **dominant** frame of the article?

- Gain (1)
- Loss (2)
- Neither/Other (3)

Q14 IF AUTISM WAS NOT INCIDENTAL IN THE STORY,

What sources were cited (who was quoted) in this story? Check all that apply.

- There are no quotes in this story (1)
- Individual(s) diagnosed with autism (2)
- Mother of autistic person (3)
- Father of autistic person (4)
- Grandparents of autistic person (5)
- Other family members (6)
- Academics (psychologists, neurologists) (7)
- Government officials (8)
- Health professionals (doctors, nurses, health care providers) (9)
- Community Supporters (nonprofits, donors, volunteers, or sponsors) (10)
- Journalists (11)

- Other sources (12)

Q15 IF AUTISM WAS NOT INCIDENTAL IN THE STORY,

What was the MAIN source (who was quoted) in the story?

- There are no quotes in this story (12)
- Individuals diagnosed with autism (1)
- Mother of autistic person (2)
- Father of autistic person (3)
- Grandparents of autistic person (4)
- Other family members (5)
- Academics (psychologists, neurologists) (6)
- Government officials (7)
- Health professionals (doctors, nurses, health care providers) (8)
- Community Supporters (nonprofits, donors, volunteers, or sponsors) (9)
- Journalists (10)
- Other sources (11)

Q16 IF AUTISM WAS NOT INCIDENTAL IN THE STORY, what was the social class of the autistic individual, family member, health care professional, or other source cited or quoted:

- Upper class (privileged, private, expensive treatment/therapy) (1)

- Lower class (poverty, charity, government program) (2)
- Not mentioned (3)
- Other (4) _____

Q17 Did the article mention any of these 5 causes of autism?

- Genetics/Other Medical Issues (1)
- Individual behaviors (unsafe drugs during pregnancy) (2)
- Environment (pollution) (3)
- Vaccines (MMR) (4)
- Unclear/Complex (Unknown) (5)
- No cause referenced in article (6)

Q18 If the article mentions vaccines as a cause of autism, how did it do so?

- It disputed that vaccines cause autism (1)
- It verified that vaccines cause autism (2)
- Article does not mention vaccines (3)
- Other (4) _____

Q19 Did the article mention any of these solutions/treatments to autism? **Check all that apply.**

- Institutional Care (rehab centers or special schools) (1)

- Alternative interventions (exs. dolphin therapy or music therapy) (2)
- Family-based intervention (at-home training by parents) (3)
- Medical treatment (using medications or alternative therapies) (4)
- Prevention (avoiding alcohol and chemicals during pregnancy) (5)
- No solutions/treatments referenced in article (6)

Q20 Did the article use these types of discourses? **Check all that apply.**

- Scientific (scientific language/studies and statistics) (1)
- Human interest (discusses personal stories of autistic people or families) (2)
- Other (3) _____

Q21 What was the dominant discourse type used in this story?

- Scientific (scientific language/studies and statistics) (1)
- Human interest (discusses personal stories of autistic people or families) (2)
- Both (3)
- Other (4) _____

Q22 Did the article use labeling by identifying an individual based on a diagnosis, with or without negative associations, through nouns and adjectives describing abnormal trait(s) such as loner, violent, dismal, abnormal, different from others, shy, destructive, or other words?

- Yes (1)

No (2)

Q23 Did the article describe psychiatric symptoms through medicalized observations about an individual's emotions, responses to external stimuli, cognitive limitations, or other symptoms that might impede one's quality of life (i.e., rocking in a corner, speaking softly, yelling outbursts)?

Yes (1)

No (2)

Q24 Did the article describe social skill deficits such as impaired social interactions or other verbal and/or nonverbal communication issues (i.e., delayed language development, inappropriate body language, trouble making friends, difficulty learning basic life skills)?

Yes (1)

No (2)

Q25 Did the article mention an autistic individual's physical appearance and symptom cues by referencing physical development, impairments, or abnormalities (i.e., shaky limbs, mismatched clothing, disheveled hair, trembling)?

Yes (1)

No (2)