

Transition-related Stress, Anxiety and Depression among Adolescents with Autism Spectrum Disorders: A Qualitative Inquiry

S. Bibi¹, N. U. Sahar*²

¹ Fatima Jinnah Women University, Pakistan

² School of Psychology, Queen's University Belfast, UK.

Abstract. The present study aimed to explore Transition-related Stress, anxiety, and depression among adolescents with autism spectrum disorders. Data about study variables was taken from mental health professionals having expertise in the field of autism. Narrative approach was used in the current study. Mental health professionals reported that ASD adolescents experience intense anxiety as a reaction to transitional fear and uncertainty attached to the transitional process. Some mental health professionals also reported that ASD adolescents may suffer from OCD-like symptoms. They may be involved in stimming and self-injurious behaviors. Some mental health professionals also reported that ASD adolescents suffer from selective mutism and eating disorders in their transitional phase. Aggression and hyperactivity have been also commonly seen in ASD adolescents while they are in their transitional phase. Additionally, Mental health professionals reported that ASD adolescents suffer from poor emotional management, sadness, hopelessness, helplessness, low self-esteem, dependency and poor decision-making. So based on the findings of the current study it is recommended that special needs schools and administrators to make mental health support programs to overcome transition related stress, anxiety and depression among ASD adolescents. Small sample size and data collection from only 1 stakeholder (Mental health professionals) are the limitations of the current study. Next level studies can be done on larger sample and can include the experiences of other stakeholders including special need teacher and parents.

Key words: Stress, Anxiety, Depression, Transition, Autism, Pakistani Adolescents

1 Background of Study

The present study intends to explore the behavioral and emotional responses of autistic adolescents towards their transition. Transitional issues can have a significant impact on the academic performance and social adjustment of students with ASD. Semon et al. (2020), conducted a qualitative study exploring the experiences of students with ASD during the transition to post-secondary education. Their findings indicated that students who received appropriate support and accommodations reported better academic outcomes and improved social interactions. However, students who lacked such support faced greater challenges, which negatively

*Corresponding author.

Email: najam.sahar@gmail.com

affected their academic success and social integration. According to [Jones et al. \(2021\)](#), students with ASD often struggle with changes in routine and environment, leading to increased anxiety during transitions. Moreover, these students may have difficulty in understanding and adapting to the expectations and social dynamics of new educational settings ([Brown et al., 2020](#)).

[Andrews et al. \(1993\)](#), conducted a qualitative inquiry into the experiences of students with ASD during the transition from primary to secondary school. Their findings revealed that many students encountered difficulties in adapting to the increased academic and social demands of secondary school settings. These challenges were attributed to factors such as changes in routine, increased social complexity, and limited understanding and support from educators and peers.

Another qualitative study by [Santos and Amâncio \(2019\)](#), emphasized the importance of individualized transition plans tailored to the specific needs of students with ASD. Additionally, [Jones et al. \(2017\)](#), highlighted the role of collaboration between parents, educators, and special education professionals in facilitating successful transitions.

Similarly, a study shows that parents, educators, and students themselves were interviewed to understand their perceptions of the effectiveness of transition programs. The qualitative data suggested that individualized transition plans, clear communication between stakeholders, and the provision of social skills training were instrumental in helping students with ASD navigate transitions successfully. Transition is a complex process for all, but it is more difficult for autistic children. In Pakistan, very little work has been done previously on transitional issues, so current study is conducted to fill the gap and serve as a gateway in the field of transition and autism. By understanding the transitional issues and by overcoming the transitional barriers, we can promote inclusion. Inclusion is the right of everyone despite of his/her disability or race.

Transition brings a lot of anxiety for autistic adolescents ([Carrington et al., 2020](#)). Among all psychological issues associated with transition, anxiety is most common and almost 80% autistic individuals experience anxiety during transition ([Grondhuis and Aman, 2012](#)). Due to unique characteristics and special needs of autistic children, they need customized supports during the process of transitions ([Neal and Frederickson, 2016](#)). There is also evidence that anxiety does not impact their overall wellbeing but it also affect emotional, physical and social functioning of autistic persons ([Adams et al., 2019](#)).

Most of the ASD students experience intense stress regarding the academic transition. They fear the most about the issues related to the new school physical environment ([Makin et al., 2017](#)). Other factors related to academic transition which make them more anxious and nervous include forming new friends [Neal and Frederickson \(2016\)](#), adjustment to new environment [Jindal-Snape et al. \(2006\)](#), and increased sense of responsibility at new educational institutes ([Makin et al., 2017](#)).

There are numerous theories which can explain the stress related to transitional issues among autistic people. Stress and Coping Theory [Lazarus and Folkman \(1985\)](#), provides best explanation why autistic adolescents suffer from stress, anxiety and depression during their transitional period. According to the Stress and Coping Theory [Lazarus and Folkman \(1985\)](#), stress occur as the outcome of high environmental demands and low coping skills. We all know that coping skills of autistic adolescents are poor so this make them more prone to experience stress, anxiety and depression in their transitional period. Autistic adolescents are habituated of their fixed routine, [Lazarus and Folkman \(1985\)](#), any change in their routines disturb them mentally and physically. Even the symptoms of autism (poor social skills, speech and language issues and sensory issues) make their coping skills poor and eventually they experience stress, anxiety and depression during their transitional period.

The current study has many clinical and community implications. Our study addresses the highly significant issue. Transitional issues are very common in autistic adolescents and these issues create hindrance in their learning and development. Due to the lack of indigenous literature on the transitional issues, nothing practically is being done in our special needs schools and rehabilitation centers. So, this study will bring this important area into the notice of all stakeholders and will open the door of further investigations.

2 Method Section

2.1 Objectives

- To explore the transitional issues among autistic individuals.
- To explore transition related behavioral and emotional responses among autistic adolescents.
- To find out barriers in successful transition.

Utilizing a thematic analysis, the information obtained from the semi structured interviews was examined. This method was used to gather data, interpret it, and then arrange and analyze it in accordance with emerging themes (Engel and Schutt, 2016).

A narrative approach was used in the current study. In narrative method, people talk about their experiences, in the current study mental health professional shared their experiences with autistic adolescents' transitional issues.

2.2 Sample

Purposive sampling was the method employed by the researcher to select the participant sample. This type of sampling is mostly strategic, meaning that it is necessary to make an effort to ensure that the research objectives and the sampling are well aligned (Bryman, 2011).

11 mental health professionals with extensive experience in autism were individually interviewed until the saturation reached out. This carefully selected sample provided the foundation for an in-depth investigation of their real-world experiences, successes, and setbacks in this complex profession.

2.3 Instrument

Following instruments were used in the current study.

2.3.1 Consent Form

Mental health professionals were requested to sign inform consent form which ensured that participants were aware of the goals, methods, possible hazards, and advantages of the study. Mental health Professionals who sign the consent form, agree voluntarily to their dedication to the study while maintaining confidentiality, ethical standards, and respect for individual rights.

2.3.2 Demographic Sheet

Demographic data sheet was designed to gather the basic information about the mental health professionals including age, gender and years of experience etc.

2.3.3 Interview Guide

Interview guideline was developed to gather qualitative data from the mental health professionals. Literature was consulted for developing interview protocol. Interview protocol was made psychometrically sound by evaluating its face validity, content validity and inter-rater reliability.

2.4 Inclusion Criteria

- Mental health professionals, notably psychologists, having first-hand experience working with children with autism spectrum disorders, in Rawalpindi-Islamabad were included in the current study.
- Mental health professionals with the minimum experience of 5 years were included in the current study

2.5 Exclusion Criteria

- Professionals who were not psychologists (such as social workers and teachers) were not included in the current study.
- Mental health professionals with less than 5 years of experience were not included in the current study.

2.6 Data Collection Procedure

Data was collected from mental health professionals who had minimum 5 years of experience in the field of autism were approached. The ethical foundation, which ensured the participants' dignity and autonomy, was a critical feature of this process. The time slots for the semi structured interviews were agreed upon in advance, taking into account the participants' schedules and preferences, assuring their comfort and convenience. These interviews were carefully planned to be fluid and exploratory in nature, allowing for natural discourse while focusing on essential themes linked to the professionals' lived experiences.

Each interview lasted 45 to 60 minutes, allowing for a thorough examination of their experiences, problems, and gratifications. All interviews were audio recorded to accurately capture the core of these talks, ensuring the preservation of delicate information and facilitating a full analysis during the succeeding phases of the research (Babbie, 2020).

2.7 Data Analysis Procedure

Thematic analysis was used in the data analysis process, and there are certain procedures that help the researcher make sense of the data set (Creswell, 2014). Terry-McElrath et al. (2019), tedefine thematic analysis as a data analysis technique that identifies the key themes in a qualitative data collection. The thematic analysis was carried out by the researchers using Braun and Clarke (2006) six-phased analytic process (Terry-McElrath et al., 2019). As shown in Table I, these processes involved interacting and familiarizing with the data, generating first codes, looking for and reviewing initial themes, defining and naming themes, and lastly producing the

report (Braun and Clarke, 2006). Theme generation entailed a process of grouping or compressing themes, which is a critical step in the analysis since the themes must provide a coherent story about the data (Terry-McElrath et al., 2019).

Table 2.1: Phases of Thematic Analyses adapted from Braun and Clarke (2006)

Phases	Description
Phase 1 Familiarization data	Transcribing data, reading and re-reading the data, noting down early ideas. Notes were taken during the process.
Phase 2 Generating initial ideas	Coding noteworthy data features in a systematic way over the full data set, compiling data related to each code.
Phase 3 Searching for themes	Coding into potential themes and collecting all data related to each potential theme.
Phase 4 Reviewing themes	Testing the themes' applicability to the coded extracts (Level 1) and the complete data set (Level 2). Creating an analytical themed map.
Phase 5 Naming and Defining themes	Continuing analysis in order to refine the details of each theme and the broader tale informed by the data; developing explicit definitions and names for each subject.
Phase 6 Producing the report	The final level of analysis. The final analysis of selected extracts, linked to the examination of the research topic and literature, creating a scholarly/academic summary of the analysis.

The identified themes were then examined and defined to verify that they were applicable across the whole data set (Braun and Clarke, 2006; Terry-McElrath et al., 2019).

In addition, in a qualitative study, the researcher established the study's trustworthiness through confirmability, credibility, transferability, and dependability, as well as genuine admission of later emerging shortcomings.

3 Results

3.1 General Transitional Issues

General transitional issues include all problems that ASD adolescents face while they are in any sort of transition. ASD adolescents suffer from multiple transitions e.g., moving into a new

home, city, or country, college enrollment, moving from one class to another, and most importantly their physical and psychological transitions. Transition from childhood to adolescence is very tough even for typically growing children due to psychological changes associated with physical transition.

Previous research studies have also identified general transitional issues including social and physical adjustments in new environment (Koegel et al., 2012). Transition always brings a lot of issues/problems whether its academic transition or developmental transition (Howlin et al., 2004).

Mental health professionals reported many general transitional issues which ASD adolescents face in any type of transition. These general transitional issues include social challenges, communication issues, sensory issues, emotional regulation, adjustment issues, sexual concerns and work-related issues. These common issues will be discussed one by one.

3.2 Social Challenges

Adolescents with autism spectrum disorders face a lot of social challenges throughout their lives. Their social skills are not up to the mark. They suffer from social anxiety due to huge social expectations during transitional periods of their lives. Their relationships with other persons, including peers, teachers and family are also not satisfactory.

As the result of the transition autistic adolescents face social anxiety. Their poor social skills further exaggerate the situation. Social skills are required at new places to make new relationships (Participant 1)

Mental health professionals reported that these social challenges including social anxiety and poor relationships, are the outcome of transitional difficulties faced by ASD adolescents.

3.3 Communication Issues

Communication is considered as most important way of being expressive for human beings. It's also the medium of socialization, sustaining attention and expressing feelings. We humans do behavioral manipulation of other through communication (Jürgens et al., 2020). Social and academic success is also linked with communication (Douglas and Gerde, 2019). Individuals with autism spectrum disorders have poor communication (Paul, 2008).

During transition due to poor language development and lack of social skills ASD adolescents face a lot of communication barriers. They face difficulty in expressing their feelings and emotions to others. Most of the ASD adolescents are non-verbal so this serves as a huge communication barrier in their lives.

Mental health professionals reported that the communication skills of ASD adolescents are poor, so this makes their transition most difficult. They are not able to verbally communicate their feelings associated with their transitional level.

Their inability to communicate verbally and non-verbally can make the situation worse. They cant communicate at new place their feeling and this turn into anxiety and nervousness (Participant 9).

3.4 Sensory Issues

Sensory issues are multicomponent behavioral reactions to the sensory environment. Sensory issues are of three types including sensory seeking, hypo responsiveness, and hyper re-

sponsiveness (Miller and Besser, 2003). Sensory seeking behaviors including repetitive touching to different objects having different textures or prolonged visual examination of objects. Hyporesponsive behaviors are those behaviors which are classified as underreactions to the objects in sensory environments. Hyperresponsiveness are considered as overreactions to the objects in sensory environments. Mental health professionals reported that due to transition adolescents face a lot of sensory issues. Research also supports that ASD adolescents have many sensory issues because their senses are either hypo or hyper (Allen et al., 2021).

Mental health professionals reported that the most common sensory issues faced by ASD adolescents during their transition are Repetitive behaviors, producing meaningless sounds, irrelevant touch, and increased hyperactivity.

Mental health professionals also reported that these sensory issues faced by ASD adolescents in their transition are basically due to their transition-related anxiety.

3.5 Transition-Related Emotional and Behavioral Symptoms

Adolescents with autism spectrum disorders experience a variety of emotional and behavioral symptoms in their transitional phases.

3.6 Anxiety

Anxiety is the most common symptom experienced by ASD adolescents. Mental health professionals reported that ASD adolescents experience intense anxiety as a reaction to transitional fear and uncertainty attached to the transitional process. Some mental health professionals also reported that ASD adolescents may suffer from OCD-like symptoms. They may be involved in stimming and self-injurious behaviors.

Some mental health professionals also reported that ASD adolescents suffer from selective mutism and eating disorders in their transitional phase. Aggression and hyperactivity have been also commonly seen in ASD adolescents while they are in their transitional phase.

Anxiety is considered a normal way of development but it has also been seen that autistic children experience more anxiety during their transitional phases as compared to mainstream children. White et al. (2009). in their study found that 84% of persons with autism meet the diagnostic criteria of anxiety disorders.

They suffer from severe anxiety symptoms and this anxiety further complicates their transition. Behavioral and emotional symptoms commonly associated with transitions for individuals with ASD include heightened anxiety, meltdowns, withdrawal, sensory sensitivities, and difficulties in communication and social interaction. These symptoms often arise due to the stress and uncertainty associated with change, as well as difficulties in understanding and coping with new situations (Participant 11).

3.7 Social Withdrawal

Barzeva et al. (2019), defined social withdrawal as a voluntary self-isolation from known or unknown situations or persons by consistently showing introverted behaviors. As ASD children suffer more from negative social behaviors including stigma and bullying so they are more prone to social withdrawal during their transitional phases (Coplan et al., 2021). Reduced social motivation is another factor for autistic children for their limited social interests.

It has also been seen that as a reaction to stress, ASD adolescents suffer from social withdrawal. Their social life is already lacking behind and transition makes it more complicated (Cmar, 2015).

Mental health professionals reported that ASD adolescents suffer from isolation and poor communication in their transitional phase. Due to their speech and language problems, they are unable to communicate their feelings of insecurity and uncertainty with others.

Mental health professionals reported that ASD adolescents face difficulty in making new friends at new places so they show rigid and inflexible behavior at new places.

3.8 Depression and Meltdowns

Depression and meltdowns are most commonly seen in ASD adolescents while they are in their transitional phase. Autistic children have inability to understand the emotions and feelings of others and even themselves (Dann, 2011).

Mental health professionals reported that ASD adolescents suffer from poor emotional management, sadness, hopelessness, helplessness, low self-esteem, dependency, and poor decision-making.

3.9 Barriers in Successful Transition

There are a lot of barriers in successful transition of autistic children. Mental health professionals have identified the followings:

3.9.1 Lack of Support Services

The support service system is inadequate to meet the special need of autistic children. Due to lack of awareness in the society and poor financial system in our country, autistic children are not having proper support service delivery.

Mental health professionals recognize lack of support service as a one of the most significant barriers in successful transition. According to mental health professionals, ASD adolescents have limited access to support services. In our country, little focus is paid on the special need children and their special needs are highly ignored.

Additionally mental health professionals also identified that the shortage of transitional programs for ASD adolescent to facilitate their transition.

Across the globe vocational trainings are available but we don't have such training. Stigma plays a huge role here. High-functioning autism may have some space but no facilities for low level. 99% of autistic adolescents are aimless and their parents too (Participant 7).

There is a scarcity of trained professionals including special education teachers for ASD adolescents. This bitter reality makes transition of ASD adolescent more difficult.

Lastly, according to mental health professionals lack of support from peers, educators and community also contribute as a significant barrier in successful transition.

3.9.2 Misunderstanding and Stigma

Autistic children experience stigma due to a lack of awareness in society and their unique characteristics. Stigma with autism refers to the negative stereotypes, attitudes and misconceptions for autistic persons. This stigma negatively affects not only autistic person but also their families.

Adolescents diagnosed with autism spectrum disorders also face stigma and negative stereotypes. They are discriminated and not provided equal opportunities for growth and success.

They also face lack of acceptance and negative attitude from the society and this fact make their transition more difficult.

4 Discussion

The present study was conducted to explore the transitional issues among students with autism spectrum disorders. Qualitative data was collected from mental health professionals. Purposive sampling was utilized to gather the desired sample. 11 mental health professionals having experience of at least 5 years were included in the study. The sample was selected by using a structured interview guide. The sample of the current study was selected by using purposive sampling technique which is a non-probability technique.

Transition refers to the change, shifting from one environment to another. Throughout the normal span of life, multiple transition is happening at multiple domains of life. Shifting from one house to another, moving from one class to another in schools, marrying, having children, entering into new age cycles, formation of new interest and hobbies, transitions occur everywhere. These changes bring a lot of modifications for all people including higher studies completion, job opportunities, housing considerations and much more. These massive transitions are specially very challenging for autistic persons. Discussion chapter will explore some barriers in successful transition and will present some very insightful suggestions/recommendations to overcome these barriers and make transitional process comfortable and peaceful for autistic persons.

Stress and Coping Theory [Lazarus and Folkman \(1985\)](#), suggests that people experience stress when they can't meet the high demands of their surroundings and they view their coping skills incompatible with their needs. During their transitional phases, autistic people experience a lot of stress due to their poor coping skills and sensory issues. Furthermore, poor social communication skills and their fixed routines further exaggerates their stress level ([Lazarus and Folkman, 1985](#)). So their Ineffective coping strategies may lead to increased anxiety and depression.

The discussion section of the qualitative study is structured according to themes; general transition issues, academic transitional issues, transition related emotional and behavioral symptoms, barriers in successful transition and community role in successful transition.

4.1 General Transition Issues

Mental health professionals reported that there are some general issues which all of the ASD adolescents face during their academic transition. These general transitional issues were categorized into 8 subthemes: social issues, communication issues, sensory issues, emotional regulation, sexual development, adjustment issues and work related issues.

Previous research studies have also found out that ASD adolescents face a lot of general transitional issues during their academic transition ([Jindal-Snape et al., 2006](#); [Makin et al., 2017](#)). Some authors also found the same general transitional issues including poor emotional regulation, sensory issues, and adjustment issues ([Buschbacher and Fox, 2003](#)). If these general transitional issues are not handled by proper evidence-based intervention, they increase in severity and intensity ([Murphy et al., 2005](#)). Some simple strategies including pre-planned sound stimuli have been found very effective for overcoming general transitional issues among typically growing children but research has recommended some individualized and more substantial in-

interventions for overcoming the general transitional issues among autistic adolescents (Register and Humpal, 2007).

Andrews et al. (2017), conducted a qualitative inquiry into the experiences of students with ASD during the transition from primary to secondary school. Their findings revealed that many students encountered difficulties in adapting to the increased academic and social demands of secondary school settings. These challenges were attributed to factors such as changes in routine, increased social complexity, and limited understanding and support from educators and peers.

Mental health professionals also suggested that transitional stress disturb emotional regulation among autistic adolescents. Emotional regulation is the ability to regulate emotions even in stressful situation when emotional regulation is poor it results in anxiety, aggression and frustration. Previous research studies has also suggested that poor emotional regulation have negative impacts on learning and well-being of the autistic children (McGinnity, 2005). citet-braet2014 found a positive relationship between poor emotion regulation and different forms of psychopathology including depression and anxiety. Additionally poor emotional regulation is also linked with peer rejection, behavioral problems and anxiety (Carthy et al., 2010; Kim and Cicchetti, 2010; Zeman et al., 2002).

According to mental health professionals, due to poor social skills and communication deficits among autistic adolescents, they face a lot of issues in their transition. Mental health professionals also suggested that ASD adolescents experience social anxiety, poor relationship quality, poor verbal and non-verbal communication capabilities during their transitional phases and transitional stress even enhances these social and communication issues. Previous research studies found out that ASD adolescent show difficulty in social skills, lack of interpersonal skills and lack of participation in social participation (O'Hagan and Hebron, 2017). ASD adolescents also suffer from social anxiety and social isolation during transition because at new place they a lot of challenges in communicating with new people and places (Tobin et al., 2014). Social anxiety and social isolation make their transition more difficult because adjustment to new place require a lot of social efforts and social interactions. So, transition readiness programs or transition planning should emphasize on social skills training.

4.2 Transition-Related Emotional and Behavioral Symptoms

Mental health professionals also reported that autistic adolescents suffer from a lot of emotional and behavioral issues during transitional phases of their lives. These emotional and behavioral issues include anxiety, social withdrawal and depression.

Transition regardless of its type is usually considered as a key milestone in everybody life. This transition can add positive things in our lives as by providing us new opportunities to grow and develop, at the same time it can have negative impact in our lives by making us more prone to stress and anxiety. Previous research studies has highlighted emotional, social, and organizational challenges associated with the transitional phases (Hughes et al., 2013; West, 2019).

In support of the subtheme (anxiety) there is a huge literature available Dykens (2000); Hughes et al. (2013); Ofiesh (2007), these research studies found out that transition make autistic children more prone to stress and anxiety. Interpersonal skills, social skills and many other external factors may be accounted for this vulnerability (Mumford and Birchwood, 2021).

During transition, physical changes in the surroundings can cause a lot of emotional issues including anxiety among autistic children. For example during academic transition, ASD stu-

dent have to move from school to college environment, from smaller to larger space and this change in physical environment is not a simple cup of tea for autistic adolescents (Anderson, 2000). Previous research studies have also reported that these environmental changes make autistic adolescents more prone to absentees (Karagiannopoulou, 1999). Anderson (2000) also suggested that pedagogical changes also have negative impacts on adjustments skills of autistic adolescents.

Mental health professional also reported that autistic adolescents suffer from social withdrawal during their transition. Previous research studies has also yield similar findings by suggesting that transition also have severe negative effects on social life of autistic people (Porayska-Pomsta et al., 2015). Autistic persons face already a lot of issues in social skills and transitional stress make their social skills more worse. During transition autistic adolescents suffer from fear of losing old friends and making new friends and bullying (Gough Kenyon et al., 2020). It has also seen that as compare to typically growing children, autistic children experienced more bullying at new places during their transition David et al. (2010) and this bullying act as a barrier in their successful transition to new places and as a predictor of high dropout from schools (Beckman et al., 2020).

Negative effects of transition are more prevalent on autistic adolescents as compared to their typically growing peers. Previous research studies has also indicated that children with autism are 4.5 times more likely to suffer from mental health issues and generalized anxiety issues as compared to typically growing children during transition (Kerns, 2020; Schreck and Richdale, 2020). Social anxiety disorder has also very commonly seen in autistic youth and during transition autistic adolescent cant meet the huge social demands of new situations and this in turn make them more prone to social withdrawal and poor peer relationships (Locke et al., 2010).

4.3 Barriers in Successful Transition

Mental health professional also identified some barriers in successful transition. These barriers include lack of support service, lack of awareness and misunderstanding or stigma.

Successful transition requires a lot of support from the society and infrastructure. Mental health professionals said that many autistic children in our country have no access to rehabilitation centers or special need schools as these centers and schools are only in cities and autistic children in villages don't have access to them. Even rehabilitation centers or special needs schools don't have any tailored transitional program to facilitate transitional process of special need children. interventions targeting the transitional issues have been used worldwide but unfortunately in our country, we are far behind in implementing and designing transition-specific interventions for our autistic children. Mental health professional also suggested that our teachers working in special need schools are not trained enough to meet the special needs of their students. Untrained teachers make transition more difficult. Even in regular schools teachers are not trained to welcome inclusion. In regular schools the special need children suffer from bullying, aggression and other negative behaviors of teachers and peers.

Mental health professionals further added that in Pakistan there are very less employment opportunities for autistic children. we don't have proper vocational training centers. Although few organizations encourage inclusion but special need persons there are placed at a very low level jobs with highly less salary. Not only in Pakistan rather there are very few employment opportunities for autistic people throughout the world (Hedley et al., 2018; Hendricks, 2010). Shattuck et al. (2012), in their study also found that there poor educational and employment outcomes for autistic persons. Levy and Perry (2011) revealed in his study that school dropout

rate for autistic children is 50% and less than 40% entered post-secondary education and very few among these 40% complete their education. Those who complete their degrees, among these less than half can secure jobs (Roux et al., 2015). These poor educational and employment outcomes for autistic people are highly discouraging for their families and society. Previous research studies also indicate that even in those cases where jobs have been secured, autistic employees are paid less and their employment retention is also very low (Shattuck et al., 2012).

Mental health professionals also reported that autistic children face a lack of support from their peers, educators and communities and lack of support from these main areas act as a barrier in successful transition. Teachers in regular schools seems to support inclusion Zagona (2017), but practically using inclusion seems difficult for them because they lack knowledge and practical skills for this successful transition (Humphrey and Symes, 2013). Teachers in regular schools are not fully equipped with the techniques to deal with the emotional, social and behavioral challenges of autistic students (Lindsay et al., 2013). Similarly the peers are less not trained enough to understand and deal with the unique needs of autistic children.

Mental health professionals also reported that stigma attached with the autism act as a strong barrier in successful transition. In our country autistic children face a lot of negative stereotypes, discrimination and misconceptions. The attitude of the entire society is highly aggressive and negative towards them. Previous research studies has found out that as physical appearance of the autistic individuals is normal so people don't understand that a child with normal appearance has autism and they will judge that child by his/her behaviors and people pass negative comments on the behaviors of autistic children (Huws and Jones, 2010). Chambres et al. (2008), reported in their study that autistic individuals and their families face a lot of negative stereotypes and discrimination due to their behavioral, social and communication issues.

Limited self-awareness was another subtheme under the major theme of barriers in successful transition identified by mental health professionals. Autistic people don't know about their hidden talents. Our society including service delivery system always focus on their weakness but no one pay any attention to their special abilities. Mental health professionals reported that starting is very common for individuals affected by autism. People usually stare them and give no respect and understanding to the needs of autistic individuals. Previous research studies has highlighted the importance of early interventions for autistic children (Hartley et al., 2019; Moreno Méndez et al., 2020), but here in Pakistan families do not give importance to the early interventions and they found autistic symptoms just as normal developmental delays.

Schools can also play a very positive role in transition planning. According to mental health professionals, schools should prepare students for transition. Schools should provide proper accommodations and support for effective transition. Smith et al., (2022) conducted interviews with special education teachers, counselors, and transition coordinators. Qualitative findings emphasized the importance of collaboration, individualized planning, and ongoing training for professionals to effectively support students with ASD through transitional periods.

5 Conclusion

5.1 Implications of the Study

This study can help to develop a practical support and intervention strategies for successful transition among autistic individuals. Understanding the unique challenges faced by students with ASD during transitions can assist professionals, educators, and policymakers in creating

inclusive environments and implementing effective support systems to facilitate successful transitions for these students. This can lead to improved outcomes in educational, vocational, and social domains for individuals with ASD. The findings inform the development of more effective, evidence-based intervention strategies for children with ASD. By understanding specific transitional difficulties, therapists, educators, and caregivers can tailor support techniques, such as visual schedules or social stories, to individual needs, improving children's adaptability and coping mechanisms.

5.2 Limitations & Future Recommendations

Small sample size (n=11) is the limitation of the current study. Current explored only transitional issues and ignored other main issues faced by autistic students is also one of its limitation. The current study captured perspectives of mental health professionals only. Data was collected from Rawalpindi and Islamabad so results cant be generalized on entire Pakistan. Qualitative nature of the current study is also the limitation of the current study as qualitative designs are considered as weak research designs.

In future, next level studies can be conducted with larger sample size and take include the perspective of parents and educators too. Cross cultural analysis can be performed by future researchers to identify the cultural limitations and hindrances in successful transitions.

5.3 Conflict of Interest

There is no conflict of interest between authors.

References

- Adams, D., Clark, M., and Keen, D. (2019). Using self-report to explore the relationship between anxiety and quality of life in children on the autism spectrum. *Autism Research*, 12(10):1505–1515.
- Allen, K.-A., Slaten, C. D., Arslan, G., Roffey, S., Craig, H., and Vella-Brodrick, D. A. (2021). School belonging: The importance of student and teacher relationships. In *The Palgrave handbook of positive education*, pages 525–550. Springer International Publishing Cham.
- Anderson, J. R. (2000). *Learning and memory: An integrated approach*. John Wiley & Sons Inc.
- Andrews, J., Bachor, D. G., and Lupart, J. L. (1993). *The inclusive classroom: Educating exceptional children*. Nelson Canada.
- Andrews, S. V., Ellis, S. E., Bakulski, K. M., Sheppard, B., Croen, L. A., Hertz-Picciotto, I., Newschaffer, C. J., Feinberg, A. P., Arking, D. E., Ladd-Acosta, C., et al. (2017). Cross-tissue integration of genetic and epigenetic data offers insight into autism spectrum disorder. *Nature communications*, 8(1):1011.
- Babbie, E. R. (2020). *The practice of social research*. Cengage Au.
- Barzeva, S. A., Meeus, W. H., and Oldehinkel, A. J. (2019). Social withdrawal in adolescence and early adulthood: Measurement issues, normative development, and distinct trajectories. *Journal of abnormal child psychology*, 47(5):865–879.
- Beckman, L., Hellström, L., and von Kobyletzki, L. (2020). Cyber bullying among children with neurodevelopmental disorders: A systematic review. *Scandinavian journal of psychology*, 61(1):54–67.
- Braun, V. and Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2):77–101.
- Brown, J., McDonald, M., Besse, C., Manson, P., McDonald, R., Rohatinsky, N., and Singh, M. (2020).

- Anxiety, mental illness, learning disabilities, and learning accommodation use: A cross-sectional study. *Journal of Professional Nursing*, 36(6):579–586.
- Bryman, A. (2011). Research methods in the study of leadership.
- Buschbacher, P. W. and Fox, L. (2003). Understanding and intervening with the challenging behavior of young children with autism spectrum disorder. *Language, Speech, and Hearing Services in Schools*, 34(3):217–227.
- Carrington, S., Sappers, B., Webster, A., Harper-Hill, K., and Nickerson, J. (2020). What universal design for learning principles, guidelines, and checkpoints are evident in educators' descriptions of their practice when supporting students on the autism spectrum? *International Journal of Educational Research*, 102:101583.
- Carthy, T., Horesh, N., Apter, A., Edge, M. D., and Gross, J. J. (2010). Emotional reactivity and cognitive regulation in anxious children. *Behaviour research and therapy*, 48(5):384–393.
- Chambres, P., Auxiette, C., Vansingle, C., and Gil, S. (2008). Adult attitudes toward behaviors of a six-year-old boy with autism. *Journal of autism and developmental disorders*, 38(7):1320–1327.
- Cmar, J. L. (2015). Orientation and mobility skills and outcome expectations as predictors of employment for young adults with visual impairments. *Journal of Visual Impairment & Blindness*, 109(2):95–106.
- Coplan, R. J., Bowker, J. C., and Nelson, L. J. (2021). *The handbook of solitude: Psychological perspectives on social isolation, social withdrawal, and being alone*. John Wiley & Sons.
- Dann, R. (2011). Secondary transition experiences for pupils with autistic spectrum conditions (asc). *Educational Psychology in Practice*, 27(3):293–312.
- David, N., Rose, M., Schneider, T. R., Vogetley, K., and Engel, A. K. (2010). Brief report: altered horizontal binding of single dots to coherent motion in autism. *Journal of autism and developmental disorders*, 40(12):1549–1551.
- Douglas, S. N. and Gerde, H. K. (2019). A strategy to support the communication of students with autism spectrum disorder. *Intervention in School and Clinic*, 55(1):32–38.
- Dykens, E. M. (2000). Annotation: Psychopathology in children with intellectual disability. *The Journal of Child Psychology and Psychiatry and Allied Disciplines*, 41(4):407–417.
- Engel, R. J. and Schutt, R. K. (2016). *The practice of research in social work*. Sage Publications.
- Gough Kenyon, S. M., Lucas, R. M., and Palikara, O. (2020). Expectations of the transition to secondary school in children with developmental language disorder and low language ability. *British Journal of Educational Psychology*, 90(2):249–265.
- Grondhuis, S. N. and Aman, M. G. (2012). Assessment of anxiety in children and adolescents with autism spectrum disorders. *Research in Autism Spectrum Disorders*, 6(4):1345–1365.
- Hartley, C., Trainer, A., and Allen, M. L. (2019). Investigating the relationship between language and picture understanding in children with autism spectrum disorder. *Autism*, 23(1):187–198.
- Hedley, D., Uljarević, M., Foley, K.-R., Richdale, A., and Trollor, J. (2018). Risk and protective factors underlying depression and suicidal ideation in autism spectrum disorder. *Depression and anxiety*, 35(7):648–657.
- Hendricks, D. (2010). Employment and adults with autism spectrum disorders: Challenges and strategies for success. *Journal of vocational rehabilitation*, 32(2):125–134.
- Howlin, P., Goode, S., Hutton, J., and Rutter, M. (2004). Adult outcome for children with autism. *Journal of child psychology and psychiatry*, 45(2):212–229.
- Hughes, C., Harvey, M., Cosgriff, J., Reilly, C., Heilingoetter, J., Brigham, N., Kaplan, L., and Bernstein, R. (2013). A peer-delivered social interaction intervention for high school students with autism. *Research and Practice for Persons with Severe Disabilities*, 38(1):1–16.

- Humphrey, N. and Symes, W. (2013). Inclusive education for pupils with autistic spectrum disorders in secondary mainstream schools: teacher attitudes, experience and knowledge. *International Journal of Inclusive Education*, 17(1):32–46.
- Huws, J. C. and Jones, R. (2010). ‘they just seem to live their lives in their own little world’: Lay perceptions of autism. *Disability & Society*, 25(3):331–344.
- Jindal-Snape, D., Douglas, W., Topping, K., Kerr, C., and Smith, E. (2006). Autistic spectrum disorders and primary-secondary transition. *International Journal of Special Education*, 21(2):18–31.
- Jones, R. A., Downing, K., Rinehart, N. J., Barnett, L. M., May, T., McGillivray, J. A., Papadopoulos, N. V., Skouteris, H., Timperio, A., and Hinkley, T. (2017). Physical activity, sedentary behavior and their correlates in children with autism spectrum disorder: A systematic review. *PLoS one*, 12(2):e0172482.
- Jones, W. M., Caratachea, M., Schad, M., and Cohen, J. D. (2021). Examining k–12 teacher learning in a makerspace through the activity–identity–community framework. *Journal of Research on Technology in Education*, 53(3):317–332.
- Jürgens, P., Stark, B., and Magin, M. (2020). Two half-truths make a whole? on bias in self-reports and tracking data. *Social Science Computer Review*, 38(5):600–615.
- Karagiannopoulou, E. (1999). Stress on transfer from primary to secondary school: The contributions of a-trait, life events and family functioning. *Psychology of Education Review*, 23:27–32.
- Kerns, J. G. (2020). Cluster a personality disorders.
- Kim, J. and Cicchetti, D. (2010). Longitudinal pathways linking child maltreatment, emotion regulation, peer relations, and psychopathology. *Journal of Child Psychology and Psychiatry*, 51(6):706–716.
- Koegel, L., Matos-Freden, R., Lang, R., and Koegel, R. (2012). Interventions for children with autism spectrum disorders in inclusive school settings. *Cognitive and Behavioral Practice*, 19(3):401–412.
- Lazarus, R. and Folkman, S. (1985). Stress and coping. *New York*, 18(31):34–42.
- Levy, A. and Perry, A. (2011). Outcomes in adolescents and adults with autism: A review of the literature. *Research in Autism Spectrum Disorders*, 5(4):1271–1282.
- Lindsay, S., Proulx, M., Thomson, N., and Scott, H. (2013). Educators’ challenges of including children with autism spectrum disorder in mainstream classrooms. *International Journal of Disability, Development and Education*, 60(4):347–362.
- Locke, J., Ishijima, E. H., Kasari, C., and London, N. (2010). Loneliness, friendship quality and the social networks of adolescents with high-functioning autism in an inclusive school setting. *Journal of Research in Special Educational Needs*, 10(2):74–81.
- Makin, C., Hill, V., and Pellicano, E. (2017). The primary-to-secondary school transition for children on the autism spectrum: A multi-informant mixed-methods study. *Autism & Developmental Language Impairments*, 2:2396941516684834.
- McGinnity, K. (2005). *Walk Awhile in My Autism: A Manual of Sensitivity Presentations to Promote Understanding of People on the Autism Spectrum*. Cambridge Book Review Press.
- Miller, J. and Besser, T. M. (2003). 2007. *Strategic Networking among Small Businesses in Small US Communities*.
- Moreno Méndez, J. H., Giraldo Jiménez, C. S., and Avendaño Prieto, B. L. (2020). Psychological inflexibility and adherence to the therapy among parents of autistic children. *Avances en Psicología Latinoamericana*, 38(2):146–158.
- Mumford, J. and Birchwood, J. (2021). Transition: A systematic review of literature exploring the experiences of pupils moving from primary to secondary school in the UK. *Pastoral Care in Education*, 39(4):377–400.
- Murphy, G. H., Beadle-Brown, J., Wing, L., Gould, J., Shah, A., and Holmes, N. (2005). Chronicity of challenging behaviours in people with severe intellectual disabilities and/or autism: A total population sample. *Journal of Autism and Developmental Disorders*, 35(4):405–418.

- Neal, S. and Frederickson, N. (2016). Asd transition to mainstream secondary: a positive experience? *Educational Psychology in Practice*, 32(4):355–373.
- Ofiesh, N. S. (2007). Math, science, and foreign language: Evidence-based accommodation decision making at the postsecondary level. *Learning Disabilities Research & Practice*, 22(4):237–245.
- O'Hagan, S. and Hebron, J. (2017). Perceptions of friendship among adolescents with autism spectrum conditions in a mainstream high school resource provision. *European Journal of Special Needs Education*, 32(3):314–328.
- Paul, R. (2008). Interventions to improve communication in autism. *Child and adolescent psychiatric clinics of North America*, 17(4):835–856.
- Porayska-Pomsta, K., Frauenberger, C., Pain, H., Rajendran, G., Smith, T. J., Menzies, R., Foster, M. E., Alcorn, A., Wass, S., Bernardini, S., et al. (2015). Erratum to: Developing technology for autism: an interdisciplinary approach. *Pers. Ubiquitous Comput.*, 19(5-6):983.
- Register, D. and Humpal, M. (2007). Using musical transitions in early childhood classrooms: Three case examples. *Music Therapy Perspectives*, 25(1):25–31.
- Roux, A. M., Shattuck, P. T., Rast, J. E., Rava, J. A., Edwards, A. D., Wei, X., McCracken, M., and Yu, J. W. (2015). Characteristics of two-year college students on the autism spectrum and their support services experiences. *Autism research and treatment*, 2015(1):391693.
- Santos, M. H. and Amâncio, L. (2019). Gender dynamics in elementary school teaching: The advantages of men. *European Journal of Women's Studies*, 26(2):195–210.
- Schreck, K. A. and Richdale, A. L. (2020). Sleep problems, behavior, and psychopathology in autism: inter-relationships across the lifespan. *Current opinion in psychology*, 34:105–111.
- Semon, S., Lane, D., Jones, P., and Smith, S. M. (2020). Job-embedded professional development: implementing co-teaching practices in general education classrooms. *International Journal of Inclusive Education*, pages 1–16.
- Shattuck, P. T., Roux, A. M., Hudson, L. E., Taylor, J. L., Maenner, M. J., and Trani, J.-F. (2012). Services for adults with an autism spectrum disorder. *The Canadian Journal of Psychiatry*, 57(5):284–291.
- Terry-McElrath, Y. M., O'Malley, P. M., Johnston, L. D., and Schulenberg, J. E. (2019). Young adult longitudinal patterns of marijuana use among us national samples of 12th grade frequent marijuana users: A repeated-measures latent class analysis. *Addiction*, 114(6):1035–1048.
- Tobin, M. C., Drager, K. D., and Richardson, L. F. (2014). A systematic review of social participation for adults with autism spectrum disorders: Support, social functioning, and quality of life. *Research in Autism Spectrum Disorders*, 8(3):214–229.
- West, K. L. (2019). Infant motor development in autism spectrum disorder: A synthesis and meta-analysis. *Child development*, 90(6):2053–2070.
- White, S. W., Oswald, D., Ollendick, T., and Scahill, L. (2009). Anxiety in children and adolescents with autism spectrum disorders. *Clinical psychology review*, 29(3):216–229.
- Zagona, A. (2017). *Supporting Students with Significant Disabilities To Access the General Education Curriculum Within Inclusive Classrooms*. The University of Arizona.
- Zeman, J., Shipman, K., and Suveg, C. (2002). Anger and sadness regulation: Predictions to internalizing and externalizing symptoms in children. *Journal of clinical child and adolescent psychology*, 31(3):393–398.