Paving the Way for Women with Asperger Syndrome

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Abstract

More information is becoming available about Asperger Syndrome (AS), especially regarding the educational needs of children. There is a lack of available information, however, regarding adults with AS, particularly women. Five women with AS participated in this qualitative research study over a two-year period. The purpose was to investigate and describe their perceptions of their experiences about being a woman on the autistic spectrum. Methods included conducting initial and follow-up interviews via telephone and email. It was determined that the women with AS perceived their interests when growing up as being atypical, struggled with the diagnosis process and with relationships with males, and experienced difficulty with employment. Recommendations to parents and professionals involved in working with girls/women with AS are provided.

While more and more information is becoming available regarding Asperger Syndrome (AS) in general, and specifically regarding children with AS, there is not enough information available regarding adults with AS. Information about women with AS is even less scarce, although a few books have been written by these women to help parents, teachers, and professionals learn more about them (Grandin, 1986; Grandin, 1995; Grandin & Duffy, 2004; Holliday Willey, 1999; Miller, 2003; Williams, 1992). These authors are well-known in the autism community and are typically considered to be “successful” women. One of the best ways to learn more about the lives of women with AS, especially those who may not be considered “successful” by others (i.e., who have not published books or other written material), is to talk to these women and allow them the opportunity to share their stories and perceptions of their own lives. The purpose of this preliminary study was to provide an opportunity for women with AS to share their perceptions of their life experiences of being a woman with Asperger Syndrome.

Procedures

In this study, five women with AS were interviewed over a two-year period and their comments were analyzed and coded using qualitative research methods. The researcher had previously met the first participant at a national conference on autism and the other
four women were contacted using a networking, or snowballing, approach by word-of-
mouth through known individuals with AS, as well as through AS chat support groups.
Interested women were asked to contact the researcher. Participants were selected by
self-disclosure of an official diagnosis of Asperger Syndrome by a licensed professional,
and by their willingness to participate via phone conversations and email contacts. All
five participants were informed of their right to terminate participation in the study at any
time.

Initial interviews were conducted over the phone for the purposes of getting to know each
other, obtaining background information, and allowing time for questions pertaining to
the study. After these initial visits, the actual interviews began. Two follow-up interviews
were conducted via phone and email with all five participants for the purpose of asking
questions, clarifying previous information, and obtaining additional information
regarding their perceptions of, and experiences with, being a woman with AS. Generally,
one to three questions were asked during each session.

During the initial and each of the subsequent interviews, the five participants were asked
the same specific question or set of questions (see Appendix A for samples of the
interview questions). Each phone interview was audiotaped while handwritten notes were
taken. After each interview session, the researcher reviewed the recorded information,
transcribed the sessions, and made anecdotal notes regarding the conversations and email
responses. The responses and notes were read after each session and recurring ideas were
documented. Emerging patterns were noted by the researcher. Two times throughout the
data analysis process, the researcher utilized a peer audit with an outside party who was
familiar with qualitative research methodology, as a way to ensure reliability and validity
of the data.

Data were analyzed using an open coding procedure. At the beginning of the coding
procedure, coding was done by paragraph and/or main idea. Throughout this process, a
word or phrase that identified the main idea of the paragraph was written down by the
researcher. Patterns and codes were identified by isolating concepts and counting the
number of times they occurred in the data. Examples of identified codes include:
communication, social expectations, academics, ridicule, employment, divorce,
diagnosis, friends, and personal safety.

Two times throughout the coding process, a peer of the researcher made randomly
selected checks of the data by coding sample paragraphs. This did result in a high
percentage of agreement (87% and 91%). After all the data were coded, the next step
involved identifying concepts. The researcher grouped the concepts together and then
collapsed them into categories or themes (e.g., family, social and behavioral expectations,
diagnosis, and employment).

Twice during the coding process, the researcher utilized member checks as a way to
ensure validity, once halfway through and once at the end of the process. This strategy
involved taking the analysis of the data and the conclusions back to the participants so
they could provide comments and clarification if needed. The member checks were utilized after all of the data had been collected and analyzed. Care was also taken to ensure reliability as well by creating as much similarity as possible. The procedures of the study were explained the same way to all participants, all participants were asked the same questions within the same time frame, all interviews were recorded and reviewed immediately after interview session, and the same information regarding the proposed conclusions of the study was shared with all five participants.

This study was conducted over a two-year period of time due to personal and time constraints of the participants and to allow them sufficient time to reply to each of the questions. For the majority of interview sessions, only one to three questions were asked so as to not overwhelm the participants but to give them the opportunity to thoroughly reply and share what information they wanted to.

With the identification of the four themes, an overarching theme was identified. The voices of women with Asperger Syndrome are rare in the professional literature on autistic spectrum disorders and the women themselves want to be a part of the growing body of knowledge on this subject.

Participants

The participants were selected from the high-functioning end of the autistic spectrum, having a diagnosis of Asperger Syndrome. The names in this study are pseudonyms which were chosen by the participants. The following vignettes include summative and descriptive information on each of the participants from the information they shared with the researcher. This information was included to provide the reader with a glimpse into the lives of each of the five participants.

**Xenia.** Xenia is a 40-year-old woman with a diagnosis of AS who is divorced and lives alone with her two cats in the Midwest. When she was very young, her IQ was tested as being 48, she did not play with toys, and she did not talk until she was 4 years old. Her father used to place a can of Coke in front of her and made her say “Coke” before he gave it to her. She now says “I’ve been addicted to Coke ever since!” He also required her many siblings to spend 15 minutes each day to help her learn social skills. In elementary school, Xenia received services for students with learning disabilities but had no adaptations of material or assignments. In her secondary school years, she received no services and was included in all general education classes. She was diagnosed with AS by a licensed professional at the age of 19. Xenia has an undergraduate degree in Political Science and shared that she received good grades in college in those courses. Xenia has always been very interested in countries. She collects flags and bus schedules from different cities and countries she has visited. Xenia has struggled with obtaining and maintaining employment and has held many different jobs in her life. Her current job is a respite caregiver for a teenager with autism which she has held for four years now and she does enjoy it. Xenia described herself as being friendly, talkative, open-minded, and committed to the cause of autism.
Rosalind. Rosalind is a 45-year-old woman with a diagnosis of AS who is divorced and lives on the East coast with her teenage son who is also on the autistic spectrum. Rosalind described herself as being intelligent, unorganized, and messy, and had passionate interests in Ancient Egypt, Japanese culture, and science fiction when she was growing up. Now that she and her sister are adults, they get along better but there was a great deal of competition between them when they were growing up. Rosalind shared that she was the “smarter one” and her sister was the more “social one.” Rosalind has held a number of jobs in her lifetime, mostly menial, entry-level jobs. She successfully held a job working in a preschool for children with special needs, but that job, too, was recently cut, due to funding. She was diagnosed with AS by a licensed professional at the age of 39. Rosalind has recently become more active in public speaking about autism and was recruited to become a member of an autism advisory board in her community.

Judith. Judith is 35 years old and has a diagnosis of AS. She was married for the first time at an young age and has a 12-year-old daughter who is diagnosed as having high-functioning autism. Judith’s official diagnosis of AS, by a licensed professional, was made a couple of years after her own daughter was diagnosed. She has since remarried, moved to the Midwest, and recently had a baby boy. Judith came from an abusive and dysfunctional family from whom she is now estranged. She was physically, verbally, and sexually abused by her father and brother, and her mother defended them. When she was growing up, her brother teased and humiliated her often and encouraged his friends to do so as well. She did well academically, however, and loved math, science, and art the most. She did not receive any special services during her school years, and received mostly all A’s and B’s. She struggled with the organization of homework in junior high but knew, by high school, that she needed to improve her grades in order to attend college. She graduated from college with a bachelor’s degree in Art, Magna Cum Laude. She does not see her daughter very often because she left her with the girl’s father when she moved far away from her family. She has held many jobs in her life, everything from being an email tech to an office assistant to working in quality management. She now does temporary administrative work and is happier with her new life now.

Marie. Marie is a 58-year-old woman with AS who lives on the East coast in a big house she inherited from her parents. She is divorced and has a 20-year-old son who has some traits of autism but is “mostly NT” (neurotypical - person without autism). She herself was officially diagnosed with AS by a licensed professional at the age of 53. She described herself as being a little eccentric and a “techie.” Marie was teased a great deal when she was growing up and had to develop defense mechanisms in order to survive. She was not interested in what other girls did. She was not into fashion or clothes but now enjoys getting clothes from other countries because “it’s cool.” In high school, Marie received grades of B+ and A- in most subjects and was excellent in art. She attended college for two years and was asked to leave by the Dean of Students and was told that she was “just not the type of person” they wanted at their college. She then attended a film school at a large city university and felt more accepted there. She has been a secretary for 36 years but has held many different secretarial jobs over the years. The longest period of time she ever held one job was for five years in a one-person law firm. She is currently working on making a film and would be a “big cheese Hollywood
director” if she could. She stated that the autism society is now becoming “a voice to be reckoned with.”

Erin. Erin is 41 years old with Asperger Syndrome. She was previously married and has a son with a diagnosis of Pervasive Developmental Disorder. She has fibromyalgia which severely affects her life. She currently is in a “serious relationship” with a male who has been diagnosed as having high-functioning autism. She was diagnosed as having AS at the age of 36 and it was that psychologist who suggested that she and her son live in a different house than her significant other. Life is calmer for her when her partner is able to leave and go to his home when needed. When all three live together, her son “gets wound up and starts freaking out,” her partner starts “to stim,” and she finds herself desperately needing “a break”. Erin had been going to college to become a social worker or perhaps a psychologist; however, she discontinued college when she realized that her fibromyalgia was interfering with her ability to continue schoolwork and care for her son. At this time, her job involves helping people who need help with housing and food, etc. She feels connected to the Mother Earth and shared that the “elements of the sun, moon, and the tides connect me to the earth.” Erin’s life is chaotic and stressful and she tries very hard to survive “in spite of it all.”

Results and Discussion

This study provides insight into an important, and rarely heard viewpoint. During data analysis, four subthemes were identified. The following is a discussion of the themes that emerged from the data.

Consciousness of Atypical Interests

These women with AS perceived themselves as different from other girls as they grew up. They did not have the same interests as neurotypical girls and they had unusual interests. They were not into typical girl things, although they did try and fit in. Xenia described how she tried to be like her female peers when she was growing up but she felt as though her interests were not the same as her peers. While they seemed more interested in music, sports, rock singers, and the opposite sex, she was interested in numbers, rocks, Indians, communism, and her biggest passion which was South America. She shared that she used to jump rope with tunes she made up using the names of various countries in South America. She recited one such tune as “Venezuela, Columbia, Ecuador, Peru, Chile, and Argentina.” She said that “it’s hard to stifle what you like because you are trying to fit in!”

Rosalind shared that “as a teenager, I experimented with makeup and hairstyling, though, but didn’t get it right. I didn’t care and no one showed me! I never have been a typical woman interested in doing the typical girly thing that others do. In high school, I was the only girl in the Electronics Club!” Judith also described her attempts to fit in with other girls but that she “wasn’t into the mall-shopping, gum-popping, chit-chatty stuff. I was not one of the popular girls, although I tried.”
Marie stated that she never was into jewelry or fashion and still is not. When she was growing up, she said that “the cliques and fashion didn’t make any sense to me. Girls like to wear jewelry but I missed the point of jewelry entirely. They seem like small sculptures to me. I look at the stones and try to figure out what is so interesting but some of it just gives me the creeps!” Marie was in an all-boys’ club, the Chess Club. She shared that she was a good chess player “but the boys would gang up on me, tease me, and move the pieces around while I wasn’t looking.”

The participants expressed that they have achieved success in certain areas of their lives, which has been important to them, but not in the way that they perceive to be of the NT world which include work, earning capacity, and relationships. For the most part, the women are happy with who they are now even though the journey has not been easy. For example, Erin shared that she defines success as “finding a way to accept yourself and to be happy with who you are, but for someone with AS, accepting yourself has to be an act of rebellion, and therefore, an AS person’s idea of success may be viewed negatively by an NT person or society. I know that I have my own normal now.”

Xenia felt that defining success will vary from person to person, and for her, she felt that she is successful because she has a college education, has been married, and lives independently. She stated that while some adults are successful “from the eyes of the Anglo-American culture, which includes enough money, good jobs, and nice houses,” from the eyes of her Greek Orthodox Christian lifestyle, she does not know that they are more successful than she is.

Judith shared that she had been told repeatedly by her parents that she was “stupid and an embarrassment,” but she has “learned from those experiences and from other things in life that success for an individual can’t be defined by anyone else for that person.” She now feels as though she is successful and happy. “I believe that in this world, perfection isn’t possible, but progress is, and in that respect, I am successful.”

Rosalind stated that she has come to terms with the way her life is and the traditional “life in the suburbs with a husband, a house with a white picket fence, 2.3 kids, and a cat and a dog, and a career that pays well is not available to me now and probably never was.” She said that she used to compare herself to her “NT sister” but knew that she does not like “the stuff that goes along with that kind of life anyway.” She felt that she is successful with who she is now and she is “pleased with the fact that I get recognition from my public speaking and I also feel good about being so involved with my adult support group. I never miss meetings and I bring the refreshments!”

Marie was very descriptive about her feelings of success and where she is at in her life now. She stated that she has succeeded at being an artist who can “develop and communicate one’s vision, or at least to seem to communicate it.” She expresses frustration, however, with being an “Aspie woman artist” which she felt has held her back and that her “ability as an artist is irrelevant,” which she was “made to know early
on.” She explained that “there was an inability of people to relate to me or for me to relate to people in a socially acceptable female way.”

**Difficulties with Male Relationships**

The five women with AS expressed having difficulty with their relationships with males. All five of these women have been married and divorced. One has remarried and another has a partner, and the other three have remained single. All five of them have struggled with maintaining relationships. Some of them felt that because of their upbringing and society influences, they have felt a need to be married in order to have a full and satisfying life. Women in general may feel this way because of societal and family pressure but in women with AS, their struggles may be magnified by their very traits of autism.

Marie’s explanation of this struggle is that “ultimately, we will either not be able to satisfy an NT partner and will get tired of trying or maybe just our solitary nature will reassert itself. Aspie marriages, when both are aspies, are better when there is an interest in common. Since for us, the sentimental romantic stuff doesn’t exist, marriage and all relationships have to be based on things.”

Rosalind explained why she thinks women with AS end up in bad relationships by stating “young women with AS struggle with personal safety because they don’t understand what is happening and don’t have boundaries. They end up being unwilling partners and at risk for abuse.” She shared that, during adolescence and into her early 20’s, she did not “know about” personal safety and this “became an issue for her.”

In her atypical living arrangements, Erin expressed that her life is calmer and less chaotic. However, she continued to struggle with it not being what she thinks she wants. “I sometimes wonder how long I can be happy with a relationship that doesn’t look like what I want. Lately, though, I have examined the reason I feel the relationship is incomplete and I really think it is because society tells me that to be complete, I need to be in a stable, married-type relationship.”

**The Process of Diagnosis**

Women with AS have oftentimes not been properly and accurately diagnosed until they seek out the diagnosis themselves. This was a major concern for all of the women and they shared a great deal of information about what it was like for them growing up and in school, what they read about autism when they were younger but not yet diagnosed, and how others led them to understanding that they, as most of these women stated, “probably have it.” Several of them were led to this understanding by having their own children diagnosed as being on the spectrum first and how it was like “looking in a mirror,” said Judith. Four of the five women have children, and each of those four children has been diagnosed as being on the autistic spectrum. Even though they may have read about ASD or had recognized traits in their own children, the women did not pursue their own diagnosis until they had the experiences with their children.
Rosalind shared that “I had begun to see myself as exhibiting the same problems as my son, not just in the present but all through my school years. Somebody had mentioned AS to me a year earlier and I investigated it. I began to realize that I probably had it although I didn’t want to admit it at first.” She also shared that she wished she had “known about my diagnosis earlier - it would have changed how I kept trying to fit in and what my vocational expectations were. I would have been myself earlier!”

Marie had read about autism many years earlier but noted that the children in the stories had language difficulties that she did not have herself. However, as she started noticing things about her son, “who is a little bit aspie,” she pursued a diagnosis that she knew was “perfectly obvious” that she had.

Judith, too, noticed traits in herself after her daughter was diagnosed as having AS. She believed that her daughter has taught her a great deal about herself, especially giving her courage to pursue her own diagnosis. “Watching her struggle and respond to her environment in so many of the same ways I did at her age, seeing her develop similar interests, perseverate, even talk to herself…it was like looking in a mirror. I would ask her to describe to me what she was feeling or why she would do something and her reasons were similar to what I would have done.”

While talking about the diagnosis process itself, the women voluntarily shared their opinions on being compared to men with AS. Rosalind talked about other women with AS whom she has known and about some of their experiences. She has heard that “they know they have AS, too, but they just cannot get the official diagnosis. Many male shrinks like to use the personality disorder label, especially the borderline one, for women with AS.”

Xenia shared her thoughts about other diagnoses women are given first and why she feels girls are not diagnosed right away. “Women have a tendency not to act out and if a woman is eccentric, people don’t feel as threatened, so therefore, it does not get diagnosed. Also, we may get diagnosed with more things like depression and some type of personality disorder if we do get diagnosed.”

On this topic, Judith shared her thoughts about how women should be compared and why. She stated that “AS looks very different in women and we must be compared to NT women, not AS men.” Rosalind had made a similar statement and explained it further by saying that she thinks that women with AS are compared to men, women look “okay” in the social department so that is why women with AS need to be compared to NT women. She emphasized “and that is where I stick out like a sore thumb.”

This issue is echoed by Faherty (2002, p. 9) when she wrote about the women with AS in her women’s group. She wrote that they are “doubly challenged by the added assumptions that society places on the female gender” because they are supposed to relate to society in a certain way, and are supposed to have a “natural empathy towards others.”
Lawson (2003) pondered that perhaps being odd may be more obvious because women with AS may not fit how society views traditional roles and rules in her article about being a woman with AS.

It is noteworthy that the children of the women in this study all have been diagnosed as being on the autistic spectrum. This may correlate with increased claims of autism as being genetic, of autism running in families, but may also be related to the gene-environment interaction model as described by Herbert (2006). This model supports the idea that “genes related to autism may not so much cause autism as set some people up to have greater vulnerability to factors that can trigger autism” (Herbert, 2006, p. 20).

**Employment Difficulties**

Women with AS, like most adults with AS, frequently experience un- and unde employment. All five women have had difficulty with obtaining and maintaining meaningful and satisfying employment. They have all held a great number of jobs in their lifetimes and have lost many jobs for one reason or another. This was an area the participants discussed at length which demonstrated their frustration with this part of their lives. They shared their experiences with trying to obtain and maintain meaningful employment. They encountered difficulties with getting along with co workers and supervisors, and they ended up working in entry level positions for short periods of time. They did not feel as though their experiences were unique to them as women but rather very typical for most adults with AS. Each of them shared a brief summary of their job experiences.

Xenia expressed frustration in what her job experiences have been like. “I have a degree in Political Science but have never worked in this area. I am just trying to get a decent job with decent pay and benefits. I have cleaned cat cages, done janitorial work, office work at the VA, I have been a telemarketer and have done data entry work, and I worked in a group home on the early morning shift. I now work as a respite caregiver for a teenager with autism.” Xenia is a strong advocate for affirmative action as a way to provide meaningful employment for adults with AS.

Rosalind lost another job during the course of this study and it had been a successful one for her, one in which she felt valuable, with children with special needs. She shared these thoughts: “I had to take whatever job I could get, whatever was offered to me. I have had basically entry level jobs that don’t require a college degree (I don’t have one) or fast food restaurant jobs. I don’t think I’ve ever lasted more than one year at any of those jobs. I was working part-time after a lifetime of failed employment attempts at a preschool for children with special needs but was just let go because of funding cuts.”

Marie has been a secretary for 35 years but has had many different jobs within this field. The longest she has worked at a job was for five years, in a one-person law firm. She shared these comments. “I have had so many jobs in my lifetime. Whenever I work for a large law firm, soon the NT secretaries and other NTs will feel uncomfortable and try to
get rid of me. Their problem is that I work very hard, accurately and intelligently. I try to make it as difficult as I can for them to find an excuse to get rid of me.”

Judith met her current husband at one of her many jobs but has been very unsuccessful with being able to maintain any as well. She said “I think the longest I ever held a job was for two years and even then, I juggled a few times within that department. I have been an office assistant, an email tech writer, worked in a pizza place and a clothing store, and tried to run my own crafts business. I mostly did administrative temp work for awhile. At this time, I am not working.”

Erin has many dreams for herself for future employment and enjoys being in the academic setting of college. She shared that “At my current rate of study, I will be a student forever! I wanted to get a Bachelor’s degree in Social Work and go into Psychology after that. I had hoped to have my own private practice someday” but the rigorous schedule of school was difficult for her because of her fibromyalgia and caring for her son, who is on the autistic spectrum as well.

Each of the women was able to explain why she had difficulty in the workplace. Xenia shared that even though she likes people and gets along well with others, it is easier for her to work in a 1:1 situation. “I don’t do well with working with groups of people.” Judith has changed jobs many times in her life for a variety of reasons. Some of the jobs were “dead-end” and in others, the expectations were not made clear to her. She shared that “I didn’t understand what was expected of me and as usual, I expected myself to just figure it out on my own rather than ask questions.” Marie felt that co-workers became uncomfortable soon after starting a new job and tried to get rid of her. She stated that “I have no trouble doing the work, that isn’t the problem. I really understand the stuff and their problem is that I work so very, very hard” but as one supervisor told her, she didn’t have the “right emotions.” Rosalind shared that her son and sister have told her that she is “negative” and doesn’t “do well” in interviews. She has had to take whatever job was offered to her. If an employer went only by the interview, she “didn’t do well” and was not usually offered the job. She expressed that the job expectations are not always clear to her but when she has told her supervisors that, “they usually make adjustments.” Each of the women felt that if they had better support on the job, if expectations were made clear, and if adaptations were made, they could be very successfully employed.

Recommendations

The women described their struggles with trying to fit in with their peers at school. One recommendation is to start at a young age to help girls with AS develop skills and self-esteem to be better prepared as adults. Parents and school personnel should encourage girls with AS to join a special interest group, club, or extra-curricular activity in order be with peers who have similar interests. These may include, for example, the math club, a poetry group, a horse-riding club, the drama club or debate team, a ceramics club, or designing sets for school plays. Participation in groups and organizations can
help develop academic and social skills as well as provide opportunities for girls with AS to feel successful and build on their strengths. Being a part of these groups at school can help a girl with AS to develop a higher self-esteem and feel like she is a part of a group, and more able to fit in. Another important issue to address is the direct teaching of social and relationship skills so they can learn how to cope, interact, improve their self-esteem, expand their minds, and utilize their strengths and passions. This can be done through social skills groups, role play situations, social stories, and workshops in high school or college such as anger management, healthy relationships, dealing with a difficult boss (or co-worker), overcoming test anxiety, and stress management.

The difficulties these women have faced regarding employment are not unique to many adults with AS (Hurlbutt & Chalmers, 2004). Information regarding strategies and programs that can help them be more successful in the workplace are becoming more available. Recommendations include the use of the supported employment model, community-based instruction, career-planning, and the master apprentice model (Attwood, 1998, Meyer, 2001; Wehman & Kregel, 1997). It is important to remember to find a good match with the individual’s strengths, abilities, interests, and needs, as well as providing a structured environment with clear expectations, rules, and assignments (Meyer, 2001). Grandin & Duffy (2004) had several recommendations for helping adults on the autistic spectrum be more successful on the job. These included developing a person’s specific talents to help find a job that would make a good fit, controlling and minimizing sensory difficulties, developing social skills to help the individual have more positive interactions with co-workers, and utilizing a mentor to help learn the social rules in the work environment. It is also important to analyze work environments, with regard to specific job requirements and necessary social skills to match the individual’s preferences, strengths, and unique needs (Hurlbutt & Chalmers, 2004). Other professional support services should also be available for adults with AS to help them cope with the social aspects of the job that may be difficult for them. These services may include psychiatric services, including medication, or psychological, including counseling.

The participants in this study served as a “voice” for women with Asperger Syndrome, an opportunity to hear from some women with AS who have not achieved the successful status as the ones who have published their life stories, those who have not achieved notoriety and fame. However, the results should be interpreted with caution. This study was confined to five women with AS who responded to requests for participants by word-of-mouth and who provided self-disclosure of a formal diagnosis of AS. Therefore, the results of this study are limited to these five specific participants.

The findings and recommendations in this preliminary study contribute to the literature regarding women with AS, a relatively new area to study. It may also contribute to current research on genetics and the role of the environment as related to the diagnosis of autistic spectrum disorders.
APPENDIX A

Sample interview questions

1. Please tell me about your life as a child and growing up in your family.
2. When did you receive an official diagnosis of Asperger Syndrome?
3. What was it like for you in school? Did you receive support in school?
4. What are some of the jobs you have held? What are your experiences on the job?
5. Did you disclose your diagnosis of Asperger Syndrome? What were your relationships like with your co-workers? Your bosses?
6. What would your ultimate job be if you had the chance?
7. Who are the most important people in your life and why?
8. Are you happy with your life right now?
9. What kinds of relationships and experiences have you had with males?
10. Do you feel women with AS are different from men with AS? Why or why not?
References


