An Expert Panel Discussion

<Title> Integrating Positive Psychology and Autism: A Roundtable

Moderators:

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Participants:

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Positive psychology is the scientific study of what makes life most worth living, focusing on individual and societal wellbeing.¹ It emphasizes the understanding and building of an individual's most positive qualities: optimism, courage, work ethic, future-mindedness, interpersonal skill, the capacity for pleasure and insight, and social responsibility.². The poorer outcomes seen in autistic people, such as their lower quality of life and their heightened rates of mental illness and suicidality, ^{3, 4, 5} demonstrate the need for increased focus on wellbeing. Mental health professionals working with autistic people often feel they lack the tools to help clients achieve positive change.^{6,7} Autistic people often struggle to access these and other services, particularly if they have higher support needs.^{8,9} This often means that families must attempt to cater for unmet needs;^{10.11} sometimes to the detriment of their own wellbeing. These

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points suggest that while positive psychology might be helpful for autistic people, it might also help professionals to help them, and as well as supporting wellbeing in those around them.

Autism and positive psychology have historically experienced limited overlap.¹² Recently, emerging research has suggested that positive psychology practices may support the well-being of autistic people ¹³⁻¹⁵ There may be opportunities, we suggest, to apply positive psychology practices with the wider autism community to promote improved wellbeing among autistics, their families, and service providers. This roundtable brought together autism and positive psychology scholars to explore those opportunities for synergy between the fields of autism and positive psychology, understand the barriers to useful cross-talk between these fields, and consider future directions for utilizing learnings from positive psychology for the benefit of autistic people and those who live and work with them. The following is a transcript of our discussion, with edits for clarity.

<H1>Patricia Wright, PhD, MPH: Today, we have brought together five panelists with expertise in autism and/or positive psychology with the shared intent of learning about how these two fields might integrate and benefit each other. Collectively, the panelists draw on experience and expertise across multiple fields, including neuroscience, clinical psychology, education, and positive psychology. Having shared discourse with so many disciplines represented is a fantastic gift.

I am an educator and public health professional by training and am pleased to moderate this discussion today. I have worked in autism services for my entire career across different industries and non-governmental and governmental organizations. I identify as allistic (non-autistic) and want to enter this conversation with humility. I am the executive director of Proof Positive: Autism Wellbeing Alliance, a foundation committed to integrating autism services and support with positive psychology. This round table is a learning opportunity for Proof Positive as well.

<H1>Rachel Moseley PhD, BSc: Hi, everyone. I am an autistic academic in psychology, based in the United Kingdom. My areas of specialization are mental health, suicidality, aging, and lifespan transitions in autistic adults. I want to express how thrilled I am to have you with us today. I am honored to be here to moderate your discussion, and to listen and learn from you.

<H1>Dr. Wright: We would be grateful if the panelists would briefly introduce themselves. This is an opportunity to help people understand who is in the virtual room and your connection to positive psychology and/or autism, before we go into your work in more depth later on. Dr. Tomasulo, would you like to start?

<H1>Dan Tomasulo, PhD, TEP, MFA, MAPP: Thanks so much for inviting me; I'm thrilled to be here. I am the academic director of the Spirituality Mind Body Institute at Teachers College, Columbia University. Lisa Miller's ¹⁶ work inspires our program, and my work has been to integrate positive psychology and spirituality. I teach positive psychology courses here and

was trained by Dr. Martin Seligman, often credited as the founder of positive psychology. Later in life, I did a Masters of Applied Positive Psychology.

<H1>Hari Srinivasan, BA: Hi everyone. I have autism and ADHD. (I use both 'person with autism' and 'autistic' interchangeably, as I do not distinguish between the usages). I primarily use text to speech software on my laptop or phone to communicate, as my speaking ability is a work in progress, though the speaking part continues to improve. My other disability challenges are on the sensorimotor, mood, and health fronts, all of which do present obstacles in my everyday life.

I graduated from UC Berkeley in psychology and disability studies. At Berkeley, my independent funded research as a Haas Scholar, was in positive psychology, specifically, the autistic experiences of awe and empathy. I was mentored by Professor Dacher Keltner, who is considered the seminal expert in the emotion of awe. I also taught a weekly class on autism, wrote about autism for the *Daily Californian*, and led Team Propaganda at the UC Berkeley Disability Lab which hacks low cost solutions for disability. I'm now a PhD student in neuroscience at Vanderbilt University, researching sensorimotor issues in autism and was recently awarded the National Science Foundation Graduate Research Fellowship. I'm also a Paul and Daisy Soros Fellow, and a NISE (Neurodiversity Inspired Science and Engineering) Fellow at the Frist Center for Autism and Innovation at Vanderbilt University.

On the advocacy front, I'm on the boards, or advisory boards of multiple disability organizations in the policy and law space, such as the Disability Rights Education and Defense Fund, Autistic Self Advocacy Network, Autism Society of America, The Brain Foundation, Duke University Autism Center for Excellence and Autism Europe. I also serve on NIMH's Interagency Autism Coordinating Committee, which helps advise federal policy on autism. And I continue to write about autism in media outlets like *Time*, *Newsweek*, and *Fortune*. I approach autism from many angles as I'm very vested in getting to translational solutions so that everyone across the autism profile gets to benefit.

<H1>Jodie Wilson, MAPP, BVSc: I am coming to you from Yugembeh Country in Southeast Queensland in Australia. I work at the Olga Tennison Autism Research Centre at La Trobe University as part of the health and well-being research program. I identify as AuDHD, having been formally identified as an adult with both autism and ADHD. I was, until a few years ago, an emergency and critical care veterinarian in clinical practice. I earned a master's degree in applied positive psychology at Melbourne University as a maternity leave project while pregnant with my now five-year-old son. During that time, I acquired a physical disability, which stopped me from working as a veterinarian. I was very lucky that while completing my master's degree, I noticed that many aspects of positive psychology did not seem to apply or work as expected when it comes to neurodivergent people like me. That led me to my current role, researching at the intersection of autism and well-being.

<H1>Sara Eileen O'Neil Woods, PhD: I am a clinical psychologist at the University of Washington Autism Center, and I also work in private practice at Discover Psychology. I have been exploring autism from a neurodiversity-affirming perspective for a number of years. Positive psychology emphasizes the importance of identifying individual and community strengths. I have applied that to autism both through my research and clinical practice, particularly specializing in autism assessment across the lifespan with an emphasis on autistic strengths. I also offer consultation and training to other professionals on using strengths-based approaches to understand and assess autism and other types of neurodivergence.

<H1>Tayyab Rashid, PhD: I am coming to you from Toronto, where I am a licensed clinical and school psychologist with expertise in positive psychology, resilience and wellbeing. I did my pre-and post-doctoral training with Martin Seligman at the University of Pennsylvania, focusing on developing positive psychotherapy as a strength-based approach. I have worked as a school psychologist for many years, applying a strength-based approach to psychological assessments. Traditionally, the assessment reports written after extensive testing are all about deficits. My work challenges that approach to assessment. I am interested in complex trauma and post-traumatic growth from various disabilities, as well as culturally contextualized strengths that might help us better understand and support people.

<H1>Dr. Wright: Thank you all. To start our discussion, I wanted to ask one of the content experts, Dr. Tomasulo, if you could just give a brief definition and description of positive psychology.

<H1>Dr. Tomasulo: Positive psychology is a relatively new and evolving field; the definition continues to grow, so what I say today is simply a foundation. Positive psychology is about individuals, organizations, and communities finding answers to a powerful question: "What makes life worth living?" Then, positive psychology provides individuals with the tools not only to alleviate suffering but to enhance positive emotional experiences, cultivate fulfilling relationships, and pursue a life that feels meaningful for them, which gives them a sense of accomplishment.

<H1>Dr. Wright: Thank you for that, Dr. Tomasulo. So, with that, what does the field of positive psychology have to offer that could benefit the autistic and the autism community - that is, not only autistic individuals but also families that include an autistic member, social service providers, and truly the community at large.

<H1>**Dr. Tomasulo:** I think the most powerful contribution that positive psychology has brought to psychology in general is the introduction of character strengths. ¹⁷ Through extensive research into human virtues, positive psychologists identified 24 character strengths (e.g. bravery, honesty, perseverance, hope, curiosity) that are associated with well-being and life satisfaction ^{18,19} and which lend themselves to applied interventions for improving these outcomes. ^{20,21} This is a radical shift because it is not just moving away from psychology and psychiatry's typical focus on 'what is wrong'; it's moving toward 'what is strong.' Having that

framework as the basis for individuals, providers, and families to understand and use is the greatest thing that positive psychology can offer. While there is a lot of room for nuance, the character strengths in and of themselves give us a framework about what we can move toward, not just what we are moving away from. That is the first thing.

The second thing is strength-spotting: learning to identify and appreciate the strengths in your own thoughts, feelings, and behavior, as well as the strengths in what others say and do.²² With this skill developed, there is this layer of appreciation that facilitates everything in relationships, including the interpersonal dynamics, the communication dynamics, and the framework under which a person responds. So, for me, character strengths are the biggest thing we have.

<H1>**Dr. Wilson:** I think applied in an autism context, positive psychology has the benefit of not being deficit-based. In addition, I have found that positive psychology practitioners are generally willing to engage with curiosity rather than judgment, regardless of the context they are operating in, and that comes back to understanding strengths and how to use them. I think that willingness to engage with curiosity is absolutely necessary when you are engaging with autistic people, particularly if you are not coming from a background of lived experience.

As Dr. Tomasulo said, this relatively new field is working towards establishing itself as a robust science, within which we could develop a well-being construct specific to autistic people. A concept of what well-being looks like for autistic people could inform not just psychological approaches and interventions but also wider service provision and policy. While it could be directly applied to understanding and supporting the well-being of autistic people as unique individuals, I'm also thinking along the lines of "happy wife, happy life" - that when autistic people are happier and living better lives, then the family and the greater autism community benefits too. I also think that positive psychology has a lot to offer for the well-being of those around autistic people, including non-autistic service providers. Ultimately, this feeds back around because service providers provide better professional support as their best selves, regardless of who they are supporting, and I think that is important too.

<H1>Dr. Rashid: For me, I think psychology is gradually coming full circle. Historically, psychology has focused on understanding human nature. For instance, a Freudian standpoint asks, are we aggressive, and are we driven by sexual desires? This kind of traditional thinking about human nature is about understanding who we are and then accepting it. Viewing autism from this traditional deficit-based perspective means that the bulk of our efforts are dispensed in identifying social deficits[†] in autistic adults, such as in non-verbal communication and stereotypical movements, and then setting up various interventions to mitigate challenges.

Positive psychology extends the humanistic thought of self-actualizing - fulfilling one's potential and living as one's truest, ideal self²³ so that autistic adults and parents of autistic children can

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[†] While *Autism in Adulthood* provides language guidelines for writing about autism and autistic people, we have preserved panelists' original language as much as possible in this Discussion.

see "What is human? What is the hallmark of human nature? What are we capable of?". So, rather than that traditional standpoint of adapting to or mitigating *deficits*, positive psychology is about adjusting, enhancing, and amplifying *strengths*. It gives us the tools, techniques, and processes to do that. It is about amplifying those strengths in scientific, manageable, buildable, culturally contextualized ways to understand people and people with challenges optimally. We all have challenges. The question is, how can we know our strengths, and then how can we adapt or amplify them?

<H1>Mr. Srinivasan: When you say positive psychology in the context of autism, what comes to mind immediately is the image of people with autism thriving and flourishing, and moving beyond surviving. It boils down to that!

My undergraduate research on the autistic experience of awe demonstrated this. My unpublished findings highlighted how even small experiences of awe act as a powerful tool in the autistic coping toolbox, offering profound doses of uplift and connectivity to the world. We tend to think of awe as this grandiose thing that necessitates expensive vacations to experience - this is of course not always possible for autistic individuals, especially with the messiness and expense of travel. But you can find awe in that 15-minute walk every day, by stopping to admire the grass and flowers or wonder at a tall skyscraper if you live in a city. Autistics can find awe in their interests or passions. The best part is that, unlike the price-gouging therapies we autistics are surrounded by since childhood, these everyday moments of awe offer profound benefits to our mental health, enhancing personal well-being as well as a sense of belonging, at no expense. Furthermore, the capacity of awe to expand one's sense of time, reduce stress, and promote prosocial behaviors, has distinct implications for service providers and community integration. By encouraging environments and activities that elicit awe, we can create inclusive spaces that appreciate the unique ways autistics perceive and interact with the world around them.

As far as the broader community is concerned, I agree with Dr. Wilson that often, when the autistic family member is doing better, so is the rest of the family.

<H1> Dr. Woods: I think there are a lot of ways that positive psychology can contribute to autistic people. The first is the recognition and study of strengths among autistic people generally: looking at unique characteristics of the autistic experience that are strengths, as well as looking at character strengths of that individual. There has been research investigating how certain character strengths, such as honesty and love of learning may be associated with autism and hence very common in autistic people. I2, In a similar way, positive psychology invites us to question whether things that have traditionally been framed as deficits really are deficits or whether they can be strengths in certain contexts. For example, there is the concept of 'flow,' a state of being deeply immersed in a task, which also describes the state autistic people can get into when they are involved in their focused interests. While "restricted interests" have traditionally been framed as deficits, they can clearly be beneficial. I think exploring autistic

flow states is really helpful since as well as being 'energizing' and rewarding for autistic people, these states can be so useful for learning and work.

Secondly, the principles of positive psychology help us, as clinicians, to focus on strengths and on using strength-based measures. For example, I use the 16 Personality Factor Questionnaire²⁶ when I am doing assessments with autistic adults. It is not a diagnostic tool for autism, but it helps me focus on a number of different types of strengths. For example, many autistic people have high levels of investigative traits, which suggests that some of them do well at working with scientific theories and problem-solving. As part of my assessments, I also use an interview that I developed to explore people's individual strengths associated with autism.²⁷ When I tell children and adults about the results of their assessment, I am able to help them better understand themselves not just based on problems that they have, but also based on their strengths.

Finally, I think it is helpful for the general public to see the positive aspects of autism because, as has been pointed out already, autism has been framed for so long as a set of problems that people have. Contributions from positive psychology might also help organizations to thrive by maximizing autistic potential. I think a lot of organizations have traditionally missed out on hiring autistic people because they are not able to see those strengths. So, as we work towards helping people recognize autistic strengths more, it will benefit organizations and autistic people, too.

<H1>Dr. Wright: What does the field of positive psychology need to learn or understand from the autism community to make this synergy work?

<H1>Mr. Srinivasan: For positive psychology to effectively serve the autism community, it must adopt a nuanced understanding of the diversity and complexity of autism and autistic people. A key insight from my research was the unique way autistics experience and process emotions, such as awe. Though these findings are not yet published, the findings challenge common misconceptions and highlight the depth and richness of autistic emotional life, underscoring the importance of not applying one-size-fits-all approaches. My research also suggested that the benefits of positive emotions, like awe, can be particularly potent for autistic well-being. However, for interventions to be successful, practitioners need to be mindful of sensory sensitivities and communication differences that are common among autistics.

Positive psychology must also recognize the needs of the most marginalized in the autism community, such as those with high support needs who face significant communication, health, and behavioral challenges. Even basic social inclusion is a non-starter for a good chunk of such autistics. For instance, parents of neurotypical children might have concerns about their children around an autistic child who may be aggressive or have self-injurious behaviors. Another example is a young adult I know who is homebound, with a worker who comes once a week and sits *outside* the house so that the parent can run errands. Such autistics are excluded even from segregated adult day programs meant for autistics. So, what kind of thriving and flourishing of autistics are we talking about here?

For some autistics, we can step right into the application of positive psychology. For others, we need to be working on challenge-based solutions at the same time. It's not a binary, either-or situation where you do one at the expense of the other. However, there is very valuable insight that can be derived from the disability justice principles of *Sins Invalid*.²⁸ This insight is that if we find solutions for the most marginalized members of a group, the entire group benefits. Just like elevators to help wheelchair users ended up benefiting everyone. This principle is also known as universal design, whereby making things accessible for people with diverse abilities, everyone actually benefits from environments that are simpler and more intuitive (see, for e.g., Centre for Excellence in Universal Design).²⁹

<H1>Dr. Woods: I think there is a need for more research to learn about autistic strengths.
There are unique autistic experiences that could be maximized - for instance, the monotropic nature of autistic attention, which often involves being focused on singular tasks, interests, and activities to the exclusion of most other things around the person³⁰ - this state can be extremely productive and satisfying for autistic people, so understanding more about it could be helpful.
Exploring sensory strengths is another example of an area for further research. We also need to consider cross-neurotype solidarity, which Mr. Srinivasan touched on. Self-determination is important for all autistic people, especially people with intellectual disabilities and non-speaking people who sometimes get left out.

There are two criticisms that are sometimes made about positive psychology – these especially need to be addressed as they pertain to autistic people. First, positive psychology focuses on strengths and positive aspects of life, but we must ensure there is also room for focusing on some of the problems and negative experiences that autistic people face. These include things like autistic burnout, ableism, and the challenges of living in a world that's designed for non-autistic people. ³¹⁻³³ Autistic people may need to be able to access support in the workplace, funding, and support through state agencies, and from a practical stance, sometimes identifying problems opens doors because of the way our society is structured. So we need to sometimes focus on problems to be able to open doors to help people access supports. Also, since a person's experience of these problems and of being autistic varies depending on other aspects of their identity, we must be able to consider multiple and intersecting aspects of a person's identity at once.

Secondly, the field of positive psychology has been criticized for focusing on subjective, individual well-being rather than collective justice. Some people might be concerned that instead of making systemic changes to our societies, there could be too much focus on individuals and just enabling employers to better exploit autistic people rather than working as flourishing communities. Capitalism very much affects the landscape of what it means to be autistic; Empire of Normality by Robert Chapman,³⁴ is a really good book that touches on some of those principles. As practitioners and researchers within this space, we must understand that within the autistic community and the disability community in general, collectivism and activism are key. People need to work together for justice, and in line with that, the neurodiversity paradigm

should be incorporated into the positive psychology sphere: 1) the idea that neurodiversity is natural and valuable, 2) the idea that there is one right brain or one correct way of thinking is socially constructed, and 3) the social dynamics that affect neurodiversity are similar to the social dynamics that affect other forms of human diversity (e.g., ethnicity, gender, or culture).³⁵

<H1> Dr. Wilson: I just want to thank Mr. Srinivasan for reminding us about universal design, ²⁸ because that is absolutely something that we need to keep in mind whenever we move into this space. Positive psychology needs to come to the understanding that if autistic people experience the world differently, it seems quite likely that we may experience well-being differently. It may be a case of putting aside our preconceived notions of what well-being looks like and redefining it as it pertains to autistic people. That might mean understanding what autistic well-being feels like, sounds like, tastes like, and looks like because it is very likely that the autistic experience of well-being may encompass sensory well-being as well as cognitive, emotional, and relational well-being, with components unique to this population. Crucially, anything that we develop as positive psychology practitioners should be informed and driven by the lived experience of autistic people. Moreover, given the individualistic and mutable nature of autistic profiles, we'll need to develop an approach that has the flexibility and responsiveness to meet the ongoing wellbeing needs of autistic people and the people who support them. As this pertains to universal design, it's likely that any ways that practitioners can adapt their practice for individuality, flexibility and accessibility will not only benefit diagnosed and undiagnosed autistic people, but also those with other cognitive and/or emotional differences, and those who are neurotypical.

<H1>Dr. Tomasulo: I think one of the fundamental skills within psychology is listening — and finding ways to listen better and understanding what to listen for. Positive psychology has helped us identify things to listen for, but we also need new ways to listen right now. One exciting area of development is the use of artificial intelligence (AI) and narrative understanding. If a person's strengths might be reflected in their stream-of-consciousness narratives and their way of talking, we can use AI as a way to get a deeper understanding of what is being said.³⁶. This new technology may allow us to not only listen at a deeper level, but also learn how to listen and what to listen for.

<H1>Dr. Rashid: Honestly, my colleagues have provided such wonderful thoughts that anything I say will be a repetition. But let me make three points. Firstly, positive psychology must learn from the autism community how to not dismiss, minimize, or avoid problems that are the day-in, day-out reality of autistic people and their families. As Dr. Woods pointed out, positive psychologists and practitioners sometimes jump very quickly on the bandwagon of building flourishing. To do that, to help people build their best selves, we need to fine-tune our

lens of empathy to understand them where they are. Leveraging strengths from a problem-solving approach will be much better than just empty building of strengths.

Secondly, autistic individuals and their families can be our role models. Most of them have stories of resilience and overcoming challenges. Understanding how they have dealt with and overcome those challenges will enrich positive psychology enormously. Documenting and researching these lived experiences would be a great collaboration.

My third and final point is strength differentiation. We know that life satisfaction correlates highly with strengths like gratitude, love, and curiosity, but beyond this generalized finding, working with autistic communities can help us understand the nuances of strengths like creativity, self-regulation, curiosity and team-building. We can learn a great deal by studying how autistic individuals have overcome challenges by fine-tuning these strengths. Our autistic communities are beautiful examples for us to understand how they build their resilience and use their strengths in different ways.

<H1>Dr. Wright: What synergies and barriers exist to integrating the two fields of positive psychology and autism support?

<H1>Dr. Woods: I think synergies between these two fields - areas where they would work well and complement each other - would include things like, as we have talked about, identifying autistic strengths, as well as general character strengths in autistic people. More attention has been paid, in the autism sphere, to the importance of having a positive sense of autistic identity,³⁷ which is an area where positive psychology is naturally well poised to contribute. The autism field is also increasingly looking into what wellness and well-being look like in autistic people,^{38,39} an area where positive psychology is again well-suited in terms of promoting well-being or flourishing, and also investigating the unique experience of autistic flourishing and what that looks like from different perspectives. Synergies where positive psychology can contribute to work in autism support also include putting strengths-based strategies into action in the workplace, as well as developing clinical programs that involve strength-based strategies, both from the assessment side (including making strengths-based recommendations) and the therapy side. Positive psychology has led to setting goals in therapy to maximize well-being instead of just remediating problems.

I think some of the barriers to integrating positive psychology in autism support would include things like the need for attention to problems. From a practical standpoint, we need to be able to talk about and investigate problems to be successful. So, making room for that will be important, even if it appears to divert from the intuitive focus of positive psychology. Integrating clinical psychology and positive psychology can be difficult because, traditionally, within clinical psychology, many of the services and supports have focused on identifying problems. There may be some tension there as we try to integrate the fields, but it is possible to do so successfully.

Finally, I think there is a general tendency for positive psychology to focus on individualism. To achieve social justice, there needs to be room for concepts like interdependence and collectivism, and consideration of contextual factors and intersectionality, how the social context affects autistic people's experiences, including things like poverty, racism, ableism, lack of access to support, suicide rates, and unemployment. Positive psychology has previously been criticized for not doing a good job of considering how inequality and racism negatively affect marginalized people.⁴⁰ We can overcome this barrier, but to do so, we must make room for discussion of problems (including systemic problems), and support communities in their activism. Positive psychology aims to create conditions that contribute to the optimal functioning of people, groups, and institutions, but we need to ask ourselves who gets to decide what "optimal functioning" means, allowing for different ways of defining what a good life looks like, integrating multiple perspectives, and, of course, valuing autistic input on that. Positive psychology has been found to be valuable in other marginalized groups - for example, exploring immigrant experiences and helping to identify characteristics associated with their life satisfaction (e.g., social support, character strengths, community values)⁴¹ - and so there is synergy here that, if properly applied, could be useful to autistic people as another marginalized group.

<H1>Mr. Srinivasan: Several synergies exist when integrating these two fields. A strengths-based approach, such as that of positive psychology, fosters a holistic enhancement of self-esteem and resilience among autistics. Cultivating well-being and happiness, which aligns with the goals of autism supports, offers a broader toolkit for supporting autistics, and could include strategies to foster positive emotions, engagement, relationships, meaning, and achievement. Ultimately this seeks to improve quality of life, and empirical evidence supports these approaches; for example, our research illustrates the tangible benefits of applying concepts like awe within the autism community. This has shown to reduce stress, improve social connections, and enhance overall well-being, illustrating clear and practical synergies.

Integrating the two fields faces significant barriers, starting with the high cost of therapy, which automatically makes it inaccessible to a large portion of autistics and their families. Being autistic already comes with a big financial cost. Furthermore, the accessibility and inclusivity of positive psychology interventions is limited across the spectrum, particularly for the most marginalized members. These challenges are compounded by biases and misconceptions that limit the relevance and applicability of positive psychology interventions to the broader autism community. A critical misunderstanding that exemplifies these issues is the misconception that autistics with higher support needs do not experience mental health issues. This not only excludes a significant portion of the autistic population from mental health initiatives but also from the benefits that positive psychology can offer, highlighting the urgent need for more inclusive and accessible practices in this field.

I have some suggestions to move us forward. First, it is crucial to develop tailored positive psychology interventions that take into account sensory sensitivities, communication differences, and the diverse ways autistics experience the world. Additionally, increasing accessibility and inclusion is vital; we need to ensure that these interventions are accessible to all within the autism community, which includes challenging biases and expanding the scope of research to encompass diverse autistic experiences. Moreover, there is a pressing need to educate and advocate—raising awareness among practitioners and the broader community about the benefits of positive psychology for autistics and advocating for inclusive practices that address mental health and well-being for everyone in the autism community. Finally, continuing collaborative research is essential. This research, such as my studies on awe and empathy, can provide empirical support for tailored interventions and challenge prevailing misconceptions about autism and emotional experiences, thereby fostering a more inclusive and effective approach.

Our research on awe provides concrete examples of how fostering positive emotional experiences can significantly benefit autistics. Let me share five highlights of applications from my research. First, autistics often find awe in nature, art, and scientific phenomena, which not only reduces stress but also enhances well-being. This sense of awe, characterized by feelings of vastness and a connection to something larger than oneself, has been shown to reduce stress and increase feelings of connection to the community. 42,43 Secondly, the autistic experience of awe often includes strong elements of empathy towards others who share similar awe-inspiring moments or who are present in awe-inspiring environments. This suggests that shared awe experiences can foster empathy and improve interpersonal relationships and social understanding. Third, engagement with awe-inspiring stimuli offers a respite from sensory overload, suggesting that controlled exposure to awe-inspiring, yet sensory-manageable environments can provide therapeutic benefits, reducing anxiety and improving mood. Fourth, autistics often report an altered sense of time during awe experiences, feeling as though time has slowed down, which allows for a more profound presence in the moment and gives them time to process experiences at their own pace, providing a kind of temporary sanctuary from the fastpaced and overwhelming world around them. Finally, some autistics have reported a heightened desire to engage in prosocial behaviors, such as acts of kindness or increased willingness to participate in community activities right after an awe experience, highlighting the potential of awe for personal benefit and social cohesion. We hope to publish this work and encourage further work in this area.

<H1>Dr. Wilson: I think the main barrier is not knowing what we don't know, and this is a significant bidirectional barrier between support services and autistic individuals. Along those lines, we can consider conditions that often co-occur with autism, such as alexithymia and interoception difficulties, as barriers to implementing positive psychology in autism support. Masking is also a barrier to helping autistic people benefit from positive psychology approaches. These things together mean that we must be particularly cognizant that the one-size-fits-all approach employed by so many clinical and non-clinical services is likely to represent a

significant barrier to the effective integration of positive psychology in autism support. We are lucky that person-centered care is a push in most approaches to disability, including autism, and positive psychology is very much aligned with that person-centered approach.

<H1>**Dr. Tomasulo:** The thing that I think needs to happen for the successful integration of positive psychology and autism support is for people to not work in silos, so that researchers, practitioners, and people with lived experience share a lot more. I was originally a researcher; I thought practitioners really didn't know what they were doing. Then when I became a practitioner, I thought, "Oh, how ridiculous the researchers are being — they don't do anything practical." I think we need more information from one another to understand what is important; I guess that is both the barrier and the solution. One area I've been focusing on is taking the best of positive psychology interventions, such as character strength activation, psychodrama, and group therapy, to enhance and modify group therapy applications for autistic people. The results are very promising, but much more research is needed.

<H1>Dr. Wilson: I'd like to add that barriers are likely to reflect the autistic communities' current concerns around service provision: communication, providing accessible means of information, and understanding that autistic people are often treated like unreliable witnesses to our own experiences. As a result, many autistic people have a trauma history, so we need to be completely dedicated to being trauma-informed in whatever we do going forward.

<H1>Mr. Srinivasan: Despite these barriers and challenges, there is now increased awareness of interventions focusing on strengths-based approaches, resilience training, and the cultivation of positive emotions in the autism population, which can enhance mental health and well-being across different cultural contexts. Having this conversation today speaks to the movement. However, I do want to circle back to a huge critical gap. It is common in the larger world for the mental health challenges faced by the rich and famous to receive disproportionate air time compared to those experienced by everyday people, the homeless, those with lower SES, and the disabled. In the autism world, too, there is inequality in the attention paid to mental health challenges across the community.

Misconceptions around higher support autistics means they are overlooked in mental health initiatives meant for autistics. This is sometimes justified by saying that their everyday support needs are more pressing, so there is no time. But I would argue that mental health is fundamental to quality of life. Another misconception used to justify the exclusion of these autistics is the idea that they must not have mental health needs, as they are all "supposedly" taken care of in structured programs where they are fed and watered. I've seen social media posts to this effect. This ridiculous misconception is not just incorrect but harmful. Unfortunately, these kinds of biases are pervasive even among practitioners. For instance, many CBT (cognitive behavioral therapy) websites explicitly state they only work with high-functioning autism. Or the more common, politically correct way of rejection is to inform such autistics that they are "not a good fit" for a program that was meant to support autistics.

To address these challenges, it is essential to integrate doses of well-being into the daily structures and routines of *all* autistics across the spectrum to reduce dependency on therapy that is often inaccessible due to bias and stigma. This could involve incorporating elements that evoke awe and empathy and creating opportunities for positive social interactions. I come back to the insight that if we find solutions for the most marginalized members, everyone ends up benefitting.

<H1>Dr. Wright: I would like to give the opportunity to those who want to provide a closing comment.

<H1>**Dr. Wilson:** I think that the only thing I would like to add is that our understanding of positive psychology as it pertains to autistic brains is incomplete. As we try to complete that understanding, we need to embed cultural humility in the process. We need to develop a shared mental model of autistic well-being, and we need to be trauma-informed. I think if we do those things and approach the process with kindness and curiosity, then we will be on the right track.

<H1>**Dr. Rashid:** What I learned from today's discussion is that positive psychology will be of greater benefit for individuals with autism if it is individualized. As Dr. Wilson said, cultural humility must be embedded in it. One size does not fit all. What good will it be if you do not connect the strengths with the problems?

<H1>**Dr. Woods:** I would say just in general, the fields of autism and positive psychology have exciting opportunities for interfacing with one another on an ongoing basis. I think there should be continued dialogue through research and in other spheres.

<H1>**Dr. Tomasulo:** I was really struck by the words of Dr. Wilson and Mr. Srinivasan. Dr. Wilson made the point about trauma, and for us to not forget about that. And Mr Srinivasan made such a great point about awe. When you talk about the range and the spectrum of human experiences, here we have the two things that really encompass why we are here. How do we cope with the worst of things, and how do we embrace the best of things? And so it really struck me that those two words and concepts came out. I am leaving today with that understanding.

<H1>Mr. Srinivasan: Thank you everyone for this productive conversation.

The essence from my perspective as an autistic is that we still have a lot of work left to do.

Key concerns include the oversimplification of needs and the potential exclusion of those with more complex challenges when focusing solely on strengths and well-being. This approach risks neglecting the intricate support required by many on the spectrum. Furthermore, there may be apprehensions about whether positive psychology interventions can be effectively tailored to meet the unique and varied needs of all autistic individuals, considering our diverse sensory sensitivities, communication methods, and personal preferences. There's also a danger of misunderstanding and misrepresenting the autistic community, with interventions possibly imposing neurotypical standards of happiness that feel inauthentic or unrelatable.

To address these issues, we need to broaden research to encompass wider autistic experiences, including communication and sensory challenges, which would involve developing adaptable and accessible research methodologies. Incorporating adaptive technologies like non-invasive engagement tools, VR/AR, and AI/ML-driven analytics could enhance accessibility and simulate environments that evoke positive emotions in a sensory-friendly manner.

It's also crucial to reconsider participant selection criteria in studies, removing barriers such as IQ cutoffs and the need for spoken communication to include a broader spectrum of autistic individuals. Advocates, clinicians, and professionals must champion the application of positive psychology that reflects the full spectrum, supported by both research and funding.

Strategies for moving forward include educational initiatives that broaden understanding among clinicians, therapists, and educators, and foster interdisciplinary collaborations that drive innovation in creating and applying positive psychology interventions. Additionally, we should evaluate and adapt these interventions continuously to ensure they are effective across the diverse range of autistics in various settings—from clinical environments to educational and community-based programs.

Ultimately, we need to do more than just sit at the table to discuss these issues; we must 'redefine the table' itself so that everybody can be represented.⁴⁵ This is what moves us toward "belonging" for all.

<H1>Dr. Wright: I hope this is just the beginning of a shared dialogue between all of us. Dr. Moseley has been listening to our discussion, and I would like to ask her to summarize the themes.

<H1>Dr. Moseley: Thank you, Dr. Wright. I feel like my head is bursting with ideas, and I just want to state again how amazing it is to have a panel with so much diversity of experience and expertise. The key points I've taken away from this discussion are:

- 1. Positive psychology could be a refreshing paradigm shift for autism research. People pointed out the synergies that we are seeing, including greater focus on positive aspects of being autistic. Our discussion recognised that autism research, and really the foundational understanding of autism, has always been deficit-focused. Positive psychology could bring humility, practitioners coming from a perspective of curiosity rather than "I'm right, I'm normal and you need to be more like me."
- 2. While positive psychology could be usefully applied to autism support and research, it is vital that practitioners and academics in that field listen to the autism community and do not minimize the daily challenges that autistic people face as a marginalized community. Although we can surmise that a strengths-based approach is likely to be beneficial to autistic people, based on existing work on positive autistic identity, ⁴⁶ efforts to help

- people identify and build the life they want to live must also recognize, respect and address individual and systemic problems experienced by autistic people.
- 3. Relatedly, while the person-centered approach of positive psychology is an asset to recognizing and respecting autistic people as unique individuals, it is essential that this strength is counterbalanced by recognition of systemic disadvantages and inequalities facing autistic people. We must not stop demanding societal change, even while practitioners focus on helping individuals change their own lives.
- 4. Intersectionality was a significant recurring theme in our discussion: the fact that autistic individuals differ significantly in their strengths and challenges, in their identities, areas of privilege and marginalization (for instance, in relation to ethnicity, sex or gender, or disability). It is so important that there is no one-size-fits-all approach and that any intervention reflects and respects intersectional experiences. Inclusion should be at the heart of our thinking around positive psychology and its applications: we must ensure the possible benefits from this approach are accessible to the whole autism community, including those most marginalized, who are often forgotten and least able to advocate for themselves.

Our discussion has shown that this is a fruitful avenue for further dialogue between these fields, but also that we've only just started to take steps along this path. In closing, I would like to echo Mr. Srinivasan, who was quoting from Robert Frost:

We have many, many miles to go, before we sleep.

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