PREVENTING THE STIGMATIZATION OF CHILDREN WITH AUTISM THROUGH AWARENESS- RAISING ACTIVITIES

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Abstract

Autism Spectrum Disorder (ASD) is one of the most complex neurodevelopmental conditions; beyond challenges related to communication and social interaction, autistic children face severe social stigmatization. The stigmatization of children with Autism Spectrum Disorders (ASD) remains one of the primary barriers to their full social and educational integration. In the field of pedagogy, preventing this phenomenon is not a matter of medical intervention, but rather of shifting social perceptions through education and awareness-raising. This paper analyzes the nature of stigma through the lens of Goffman's (1963) sociological framework, extending the analysis to encompass not only the child but also "stigma by association," which isolates the entire family unit. The primary objective is to examine how structured awareness-raising activities serve as preventive measures against such marginalization.

Keywords: Autism, Stigma, Social Contact Theory, Awareness-Raising Activities

Introduction

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition that emerges early in childhood and affects how a person communicates, interacts socially, and experiences the world around them. Autism is not a disease and has no "cure"; rather, it represents a form of neurodevelopmental diversity that manifests in various ways and with varying degrees of intensity.(National Autism Association of Kosovo, ANAK, 2012). Autism is characterized by a combination of these features, which vary from individual to individual:
difficulties with verbal and non-verbal communication;
challenges in social interaction and relationships;
repetitive behaviors, interests, or activities;
specific sensory sensitivities to noise, light, touch, or smells.
However, the global prevalence of autism is often expressed using two figures that appear different but actually measure different populations. The figure of approximately 1 in 100 children is based on modern screening (identification using assessment tools) and diagnostic studies conducted during childhood—a stage when children are monitored more closely by the healthcare and educational systems, allowing for earlier identification. This figure better reflects the current reality for younger generations, as well as improvements in diagnostic methods. In contrast, the figure of 1 in 127 people comes from global estimates that encompass the entire population—children, adults, and the elderly. Many adults with autism were never diagnosed because, in past decades, autism was either poorly understood or misclassified. This lowers the average when calculated across the entire population. Therefore, these two figures are not contradictory; they represent the same reality from two different statistical perspectives.

Stigma

A stigma refers to a socially devalued attribute that discredits a person and causes them to be seen as "deviant" in the eyes of others. It may be physical, social, or character-based and often leads to social exclusion. According to Goffman (1963), stigma functions as a process through which society devalues an individual due to a deviation from social norms. In the case of autism, this stigmatization occurs because the child's behaviors conflict with the community's

expectations. Recent empirical data highlights the severity of this issue, noting that "societal acceptance remains limited, with only 7% of autistic adults reporting feeling accepted, and neurotypical individuals often forming negative impressions of autistic individuals within seconds" (Cleary et al., 2023, as cited in Scoping Review on Autism Stigma, 2026).

Furthermore, this social devaluation does not only target the individual but deeply impacts the entire family unit. Studies confirm that "stigma was common among parents of children with autism in all surveyed studies, with critical variations related to cultural stigma in Western, Asian, and Middle Eastern countries, heavily influenced by the child's behavior and available social support" (Integrative Review on Parent Stigma, 2023). To combat this pervasive marginalization, modern advocacy emphasizes changing how the condition is discussed, as the choice of terminology plays a crucial role in shaping public perception. In line with this, "many autistic individuals argue that the concept of viewing autism strictly as a deficit reinforces the idea that autism is something to be cured or prevented, which is profoundly dehumanizing. Most autistic people favor identity-first language ('autistic') as integral to their lived experience" (Roman-Urrestarazu, Dumas, & Warrier, 2022, in JAMA Pediatrics).

Theories

Contact Theory- Social Contact Theory (originally formulated by Gordon Allport in 1954) is one of the most robust frameworks in social psychology for explaining and reducing prejudice. This theory posits that the most effective way to diminish fear, stigma, and stereotypes toward a marginalized group is to facilitate direct contact and interaction between members of that group and the broader society.

In the context of autism, stigma often stems from a lack of information and unfamiliarity with atypical behaviors. When neurotypical individuals have never had contact with an autistic child, they tend to interpret sensory meltdowns or a lack of eye contact as "deviant behavior" or a "lack of upbringing." Contact Theory suggests that structured interaction enables people to understand the inner world of autistic children, transforming fear into empathy.

Allport's Four Conditions for Awareness-Raising Activities

Allport argued that simply placing two groups in the same space is not enough to eliminate stigma; in fact, poorly organized contact can even increase it. For awareness-raising activities to be successful, they must meet four critical conditions:

- •Equal Status - During the activity, autistic children should not be portrayed as "victims deserving of pity," but rather as peers with equal rights and value.
- • Common Goals- Activities should require children to work together toward a shared objective (e.g., creating a school art project or playing a group game).
- • Intergroup Cooperation- The environment must foster mutual support rather than competition or elimination-based contests among students.
- • Authority Support- Activities should be guided by those in positions of authority (teachers, parents, school administration), which signals that the acceptance of diversity is an expected social norm.

Indirect and Digital Contact in the Modern Era-

Research in recent years has expanded this theory, demonstrating that "indirect" or "parasocial" contact (facilitated through technology and media) is as effective as physical contact. In societies where daily face-to-face interaction with autistic children is limited due to institutional or social isolation digital awareness-raising initiatives play a crucial preventive role.

The use of sensory simulators, such as virtual reality (VR) headsets, allows neurotypical individuals to "experience" visual and auditory overload, serving as a powerful form of indirect contact. According to the Autismity project, virtual reality (VR) platforms enable users to experience the sensory overload associated with autism by simulating everyday scenarios such as loud noises in a café, bright sunlight at school, or distracting lights on a tram. This type of contact reduces fear and anxiety, laying the social groundwork for a more natural inclusion and acceptance of children with autism within the community.

Activities

1. The "In My Shoes" (Walk in My Shoes) Intervention
The phrase "walk a mile in my shoes" is operationalized in anti-stigma campaigns as a form of perspective-taking and indirect social contact. According to empirical studies on school-based interventions by Hodges et al. (2021), the "In My Shoes" program is a peer-supported, structured framework designed to improve the social connectedness and classroom participation of students on the autism spectrum.
• Application- Neurotypical peers participate in interactive activities, peer modeling, and video diaries where they explore how their autistic classmates experience the school day.
• Anti-Stigma Impact- By actively imagining the school environment through the sensory and social lens of an autistic peer, students shift from a baseline of judgment to one of proactive support. This directly neutralizes the "first impression bias" noted by Cleary et al. (2023), replacing immediate negative judgments with cooperative empathy.
2. The Autism Iceberg is a foundational visual tool used in educational workshops to challenge the community's behavioral expectations and dismantle public stigma. It visually represents the idea that what society sees is only a fraction of the reality.
• Above the Waterline (Visible Behaviors)- This section represents the external behaviors that typically trigger social stigma and exclusion such as emotional meltdowns, repetitive movements (stimming), avoidance of eye contact, or social withdrawal. To an uneducated observer, these visible actions are often misclassified as "deviant," "disruptive," or a result of "poor parenting."
• Below the Waterline (Hidden Causes)- This massive, submerged section represents the underlying neurodevelopmental reasons driving the visible behavior. It includes severe sensory overload (hypersensitivity to noise or light), communicative frustration, executive functioning challenges, and intense anxiety.
• Anti-Stigma Impact- The Iceberg model addresses the core issue identified by Goffman (1963) that society devalues an individual when external behaviors conflict with social norms. By educating the public on what lies below the waterline, awareness activities reframe a visible "deficit" into a logical internal response to an overwhelming environment. Consequently, the community stops judging the visible symptom and begins accommodating the invisible cause.

Discussion

Practical awareness-raising interventions such as the perspective-taking school program "In My Shoes," virtual sensory-overload simulators, and the "Autism Iceberg" visual model effectively fulfill the scientific criteria of Contact Theory, specifically regarding equal status, shared goals, and intergroup cooperation. These activities enable neurotypical individuals to understand and contextualize the neurological and sensory causes underlying atypical behaviors. Consequently, they prevent the immediate formation of negative impressions and transform stigma into empathy.

Conclusions

The paper concludes that preventing stigma requires a radical transition from traditional "deficit models" toward the acceptance of neurodiversity and the adoption of identity-first language. Contact-based awareness activities must be institutionalized within educational curricula and public services to guarantee the sustainable, holistic inclusion of autistic children in society.

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