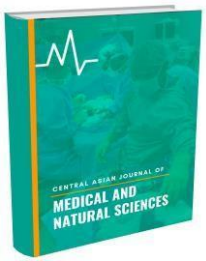

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Article

Autism: Fact or Fiction? Understanding The Spectrum

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Abstract: Autism Spectrum Disorder (ASD) is a condition of the brain that manifests as problems with how a person relates to others, speaks and behaves. This document reviews the latest progress in ASD research, how it is diagnosed, how it is treated and how much people know about it. Because of the growing number of ASD diagnoses worldwide, more people are interested in them, leading researchers to examine genetic, environmental and diagnostic causes. Experiments with artificial intelligence and other latest technologies are changing the way doctors diagnose patients. Because of AI, image recognition and behavior observation devices open up more ways to diagnose diseases quickly and effectively. They are demonstrating potential to provide more screening for those who lack access and assist decision-making by doctors. At the same time, recent studies in these areas have shown how people with ASD have differences in their brains, leading to better targeted and effective treatments. The assessment also covers the ways in which media influences the opinion of the public about autism. While showing autism in the media understands the condition, it can still lead to false ideas. Because of past biases and inaccurate information, many people still view autism in flawed ways. Thus, supporting people with ASD needs a collaborative, inclusive style. Accepting neurological differences, making sure technology helps and spreading correct knowledge can make life better for autistic people and those around them. Developing new approaches for caring for people with autism requires science, sensitivity, understanding and social duty.

Keywords: Autism Spectrum Disorder, Artificial Intelligence and Autism Interventions, Increasing Awareness, Media Pictures of Autism, Supporting Social Inclusion, Modern Technologies and Diagnosis of Autism

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1. Introduction

Autism Spectrum Disorder is recognized by problems with social communication, as well as restricted and repetitive behaviors, interests or activities [1]. People now see ASD as a key public health concern because it is affecting more people, families and medical systems around the world [2]. As ASD research advances, it is increasingly important to correct the ideas and beliefs that create difficulties in giving people with ASD the proper care and assistance they need.

It has been proven by statistics that there are now more global ASD diagnoses. WHO reports that around 1% of children—about 1 in 100—are affected by autism, while in the United States, the percentage is up to 2.8 percent—or 1 in 36, according to CDC data published in Reuters (2025). Researchers keep discussing if the increase is due to higher numbers of cases or better recognition and detection [3], [4]. [5] as well as other researchers suggest that both genetic and environmental variables—like copy number variations—might help to explain this increase. Technology plays an increasing role in recognizing

early signs of ASD and with advanced artificial intelligence and deep learning models, many workshops now rely on these tools [6],[7].

While progress is made in science, people's conversations about autism are often filled with inaccuracies, stereotypes and unsafe information. Media usually helps form people's opinions about autism yet can often oversimplify its nature. Some popular series such as The Good Doctor, can make it seem like autism is easier to handle than it really is which causes some people to misinterpret what autistic individuals experience [5], [8]. A systematic review conducted by Jones, [9] reviewed a number of studies about fictional representations that matter with respect to public understandings and show how they legitimize stigmatizing, or overly exceptional zed narratives. In addition, celebrity remarks, like those made by RFK Jr., are also simply re-producing unfounded claims stating that vaccines cause autism despite a solidified counter-evidence base [10].

The mismatch between what scientists say and what the public thinks needs to be carefully considered. The debate between fact and fiction regarding autism plays a practical role in real life. Some misbeliefs can postpone identification, encourage prejudice and cause bad or damaging ways to help [11]. Alternatively, fully understanding autism with neurodiversity in mind improves the lives of autistic people by helping them feel included, accepted and looked after [12].

The goal of this paper is to analyze the friction between facts supported by science and stories about autism spread through media and culture. The issue will look at how processes for diagnosing have changed, how stories and representations in society impact us and how alternative models support neurodivergent individuals [12];[9];[2]. In addition, the paper looks into what AI and robotics can bring to mental health care and the challenges involved in their use with various cultures [13]; [14];[15].

The structure of the paper comprises five distinct sections. The next portion of the study reviews the medical, social and technical approaches to autism. Part three looks at some of the common ways media and public discussions misrepresent issues. The next section explains the differences fact and fiction can have in diagnosis, choosing treatment and making policies. To conclude, the paper recommends how to close the divide between realized science and how the public interprets it.

2. History and Evolution of Autism Understanding

Although Autism Spectrum Disorder (ASD) was not described until the 20th century, habits linked to ASD surely existed in earlier periods. Still in 1943, Leo Kanner published a key paper describing 11 children with a special condition known for social avoidance, language problems and a love for things staying the same [6]. Less than a year after Leo Kanner, Hans Asperger wrote about children with average or better intelligence and clear speech, but who struggled with social interactions and empathy [9]. In the English-speaking world, Asperger's research was mostly ignored until the 1980s, but it was the basis for naming Asperger's syndrome as a formal diagnosis.

Because autism was misunderstood in the mid-20th century, it was frequently linked to either schizophrenia in children or alleged parenting issues. Bruno Bettelheim and many others used the now-rejected theory of the refrigerator mother hypothesis to argue that poor mother-child relationships were to blame for autism. Being viewed this way both shamed mothers and stopped them from seeking help early on. It wasn't until the 1970s and 1980s that experts began to view autism as a developmental, rather than a mental health, issue.

Changes in how autism is diagnosed have been key to improving both what scientists know and how the public sees autism. With the publication of DSM-III in 1980, Infantile Autism was officially added to Diagnostic and Statistical Manual of Mental Disorders as its own category under Pervasive Developmental Disorders [2].

In 2013, these different subcategories became known as one diagnosis: Autism Spectrum Disorder following the publication of the DSM-5. More importance was given to looking at symptoms on a continuum, by recognizing that symptoms vary greatly in severity [16]. The DSM-5 includes social communication difficulties, as well as a list of repetitive actions and sets industry-wide standards for how intensity is measured to guide personal support [8]. The change was made to help ensure everyone received the same diagnosis and to recognize that autism is on a spectrum.

In time, people have begun to see autism differently, focusing now on neurodiversity and the social impact of disability. In the early 2000s, the neurodiversity paradigm became popular and sees autism as simply a characteristic of many minds and personalities [12]. Because of self-advocates and scholars, focus has been placed on adjustments at school and work, instead of trying to get all autistic people to behave "normally" [11].

It has become clear over the past several years how cultural; gender and racial biases have affected the way autism was diagnosed. It has been found that girls, members of ethnic minorities and persons from low-resource areas are commonly not diagnosed correctly[4]. Improved awareness around the world and new types of AI-based screening tools are working to bridge these gaps [7]; [13].

In brief, the current state of our knowledge about autism has undergone a vast shift in the way we understand autism - from Kanner's and Asperger's mid-20th century case studies to today's models based on neurodiversity and individual care. New diagnostic criteria from the DSM-III to DSM-5 highlight our increasing understanding and continued efforts within the scientific community to align our discussions about autism and its complexity. The history of discovery reminds us to keep thinking about how language, policies, and societal notions affect the lives of autistic people.

3. Debunking the Myths: Fiction vs. Fact

Despite well-known facts about ASD, there continues to be much commonly shared but false information about it everywhere. Such myths add to the stigma surrounding autism and get in the way of people with autism being diagnosed, treated and included.

Myth 2: Immunizations cause autism

A lot of false information, especially about autism, is spread through the myth that vaccines could cause it. Even though there were many studies investigating vaccines and ASD before this, the notion started to spread after a 1998 paper published in the U.K. claimed the MMR vaccine might trigger autism. A variety of studies involving many individuals have shown that ASD is not caused by vaccines [2]. While an abundance of evidence has collected, the myth keeps being passed on, mainly thanks to social media and the way misinformation is shared today. Najeeb and Quadt (2024) mention that the internet allowed parents who were already hesitant about autism and vaccines to discover new networks online, filled with descriptions from other parents and lots of anti-vaccine arguments to help confirm their doubts. Because of this misinformation, some individuals became hesitant about getting vaccinated, began to question if vaccines work or are safe and the result was a real public health threat, like the comeback of eradicated diseases.

Myth 2: "People with autism lack empathy"

A further negative stereotype is the concept of lack of empathy by autistic people. This stems from the misunderstanding of the different ways autistic people may express or experience empathy. Some may have difficulty with aspects of social norms or even nonverbal behavior, but studies have shown that many autistic people have real ennobling sensitivities to the emotions of others [11].

also argue against the focus on a "double empathy problem," claiming that communication difficulties are commonly reciprocal, in that neurotypical people often struggle to understand autistic perspectives. They emphasize that it is not a lack of empathy, but rather differences in communication or engagement in some activities that

separate the groups. Negative stereotypes like social disengagement or exclusion are greatly exacerbated by mislabeling autistic people as emotionally detached.

Myth 3: "Autistic people are all geniuses or all intellectually disabled"

These depictions often involve savage portrayals of autistic individuals at the extremes, either totally disabled or enabled and independent due to astounding, sometimes savant-like, extraordinary abilities. However, autism is a spectrum, and autistic individuals come in a range of cognitive functions, interests, and limitations. As Syriopoulou-Delli (2025) states, "there are some autistic individuals who have discovered exceptional talent (and sometimes this is referred to as savant syndrome) however, the majority of autistic individuals would be described as not easily being put into extreme categories or labels".

Unfortunately, these stereotypes are further perpetuated by media characters like Rain Man, solidifying public assumptions and expectations about autism into shared expectations for decades. Despite the popular perception, [8], assert characters like Rain Man misrepresent the true diversity of autistic lived experiences while also further subordinating others who fall outside of these stereotypes.

Myth 4: "Autism is a result of bad parenting"

In the past, mothers who were thought to be cold and unloving were blamed for autism through the "refrigerator mother" lens. This myth has been disproven, but remnants of this viewpoint are still evident in some cultural narratives. One only need consider the historical and cultural emphasis on mothering, breastfeeding, and parent involvement.

Neurobiological and genetic research demonstrates that autism is a lifetime, complex interplay of genetic and environmental factors [12] with no causal connection to parenting and emotional attachment. The long-term effects of this persistent myth can be harmful to parents, particularly in resource-poor contexts, as it may cause resentment in the parent-child relationship, guilt in the parent for prior lapses in understanding, a delay in contacting professionals, and an unwillingness or inability to accept the diagnosis.

With this in mind, culturally relevant education and advocacy are crucial to not only amend these culturally-bound beliefs, but also to catalyze early intervention for children with autism.

Media Influence and Misinformation

The media helps to create and change how people view autism. Though documentaries, blogs and autistic self-advocates have given real insight, mainstream and social media often distort the facts by offering exaggerated accounts. As explained by Kang and Park (2024), many news stories highlight stories of extreme events or stories with unhappy outcomes which often influences viewers to have more fear of some groups. Social media algorithms make sure that things people react strongly to such as conspiracy theories and pseudoscience, appear more often in people's feeds.

Researchers Jones, Gordon and Mizzi (2023) suggest that viewers may not question these character types if they have not gained media literacy. The underrepresentation of autistic people who do not speak, who are women or from different races explains in part why the public misunderstands them. Because this group is hard to notice, misconceptions can persist and correct diagnosis can be challenging among many demographic groups.

Evidence-Based Counterarguments

We should work on making sure quality research is well distributed to protect against these myths. Researchers such as Yu et al. have pointed out that autism is likely inherited based on studies of brain imaging and of twins. In the same way, [7] argue that using AI in screening can improve early and accurate diagnosis.

They further encourage the replacement of deficit models with approaches that focus on rights and neurodiversity. These theories understand that autistic people encounter

problems because society is not accessible enough and often biased. Having this perspective allows us to correct misinformation and work towards making all feel included.

4. The Autism Spectrum: Diversity, Not Uniformity

The term "autism spectrum" aims to point out the many disparities in ability, characteristics and challenges people with autism spectrum disorder (ASD) might perceive. "Spectrum" connotes various types of behaviors with varying degrees of intensity. Because the features are not the same, it is hard to rely on simplistic labels and calls for deeper appreciation of autism.

Some people still use "high-functioning autism" and "low-functioning autism" to discuss how someone's mind operates and their skills. Now, some argue that these terms aren't broad enough and may lead to stigmatizing behaviors, not effectively showing the variety in what autistic individuals need and excel at [12]. Those in favor of alternative approaches suggest that assessments should focus on particular challenges and help provided to the child, instead of relying on fixed categories [4].

Many people on the autism spectrum also experience other diseases, making diagnosis and treatment more difficult. Many people with ASD also experience attention-deficit/hyperactivity disorder (ADHD), anxiety disorders and epilepsy which can reduce their quality of life and impair how well they function [17]. Understanding that these two disorders often exist at the same time leads to better care and more effective therapies.

Following the neurodiversity movement, autism is seen as being at one end of a natural spectrum of human neurobiology [12]. While earlier research and clinical settings regularly emphasized the gaps in autistic abilities, the framework under review encourages understanding, respects autistic perspectives and concentrates on individuals' strengths [9]. Interest in the neurodiversity paradigm has increased over the past few years and is now influencing what medicine, activism and policymaking do.

5. Causes and Risk Factors

Many people know ASD as a type of neurodevelopmental condition that has many complex causes. Heritability investigations and current genetic studies suggest that autism is largely influenced by genetic factors [5]. Researchers have found many candidate gene variants and CNVs that raise the risk of developing ASD, even though no one gene leads to the condition. Many genes interact to influence normal brain development during early life and this is what seems to cause autism [4]; [5].

Prenatal factors bring an increased risk for ASD. Some possible reasons are infections that developing babies get from their mothers, toxic or drug exposure by the baby during pregnancy or problems arising from the delivery [15]. Nevertheless, research proves that environmental elements play a role in autism only when they work together with gene-related factors [6]. The methods by which these factors impact ASD are still being studied.

Additional features of autism are differences in brain development timelines and unusual ways neurons connect. Improvements in imaging technology and analysis with machine learning have shown that there are abnormalities in white matter, cortical organization and synapses in people with ASD which may arise from interruptions in early brain development [17];[7]. Such brain changes also could account for why symptoms and behaviors are so varied across affected individuals.

One should hence clarify and correct misconceptions about causative factors of autism. Especially, the hypothesis that vaccinations cause autism has, again and again, been thrown out of scientific contention, with many meta-analyses and investigations debunking it [16][18]. Post discovery of data fabrication and ethical violations, the study by Wakefield (1998), which hypothesized that exposure to vaccines caused autism, was withdrawn in totality; there is also no credible evidence supporting an argument for a

vaccine-autism link [18]. It will be important for the public to understand the causes and risk factors based on evidence in order to help a better understanding and mental-health-related stigma of ASD.

6. Diagnosis and Early Detection

Patients are regarded as having Autism and Autism Spectrum Disorders via behavioral criteria listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and International Classification of Diseases (ICD-11) [5],[19]. The DSM-5 describes people with ASD as showing long-lasting disturbances in social communication and regular patterns of activities or behaviors. According to these criteria, autism changes from person to person, making symptoms and their severity vary [1].

If children are detected early, it gives us the chance to take action earlier, thereby helping their development. The M-CHAT and ADOS-2 tools are frequently used to detect children who might have autism [12];[5]. Parents answer the M-CHAT to help detect early signs in their children and trained clinicians use the ADOS-2 to observe and assess them. New AI-based tools for diagnosis now show potential for improving both the effectiveness and swiftness of early screening [6];[13].

Though major progress has been made, it is still problematic to diagnose autism because of cultural and gender biases. As a result of how symptoms are understood differently in cultures, diagnosis and reporting of certain conditions may be inaccurate [20]. Such deficits can affect someone differently in each culture, so it complicates usual assessment methods. Sometimes, because women on the spectrum tend to mask their symptoms and show less prominent signs, their ASD is overlooked or re-evaluated too late [12]. That results in many adults not having their condition diagnosed until much later in life, after years of not understanding why they behave the way they do [10].

In conclusion, while there have been strides towards standardized diagnostic criteria and validated screening tools to assist in early detection of ASD, further work still needs to be done to rectify the inequities in diagnosis and develop methods of assessment that are culturally and gender sensitive.

7. Interventions, Therapies, and Support

To address autism spectrum disorder (ASD) successfully, we must use several approaches that meet each person's needs. For many years, the main form of treatment for ASD has been behavioral, with Applied Behavior Analysis (ABA) being the treatment most favored and tested [16]. By applying reinforcement, ABA helps people enhance their behavior, communication, social abilities and control bad habits. Many people facing autism use Cognitive Behavioral Therapy (CBT), especially to manage anxiety and emotional problems they often have [12]. These developmental strategies such as DIR/Floortime, center around how playing and interacting with kids can strengthen their emotions and relationships while improving their social and communication skills [16].

Maximizing independent functioning also depends on using educational and occupational aid. Children on the autism spectrum learn academics and social skills better with the help of both common and specialized teaching methods. Occupational therapy helps those with sensory processing needs, making them more independent and improving their daily life [16]. Robot-assisted therapy is a new kind of technology used to encourage children to pay attention and interact with others and it has shown good results [14].

These treatments are designed for anxiety, hyperactivity or irritability, as they are often common with people on the autism spectrum [16]. Certain medications can be given to help treat some of the symptoms; among them are SSRIs and stimulants, however, care must be taken to watch for any adverse effects. The emphasis on family and community support in regard to autism cannot be underestimated. Parental participation is key to

successful intervention, as it provides consistency and emotional support; and community acceptance encourages the social inclusion and acceptance of autistic people [12]. Group support and advocacy organizations further aid families and individuals by providing them with information and neurodiversity-affirming perspectives.

In summary, a holistic strategy of behavioral interventions, education and support, medication, and family/community supports offers the best opportunity to improve the quality of life for individuals on the autism spectrum.

8. Autism in Society: Inclusion, Representation, and Rights

Having autistic individuals join education, jobs and society is a main goal to help them participate and be equal. Inclusive education is about helping autistic children study alongside other students and giving each one personalized support. But a lack of suitable resources and prepared teachers often holds back these initiatives, mainly in poorer regions [4]. Nevertheless, in the workplace, inclusion is still faced with old attitudes and a lack of measures to help autistic individuals, although their value through different opinions is now more accepted.

Autism rights are increasingly seen through the framework of global human rights instruments, including the UNCRPD which requires countries to ensure that those with autism have the same rights as everyone else (World Health Organization [WHO], 2023). Neurodiversity and autonomy are highlighted in the language spoken by advocacy movements [12]. Those involved in the neurodiversity movement advocate for better society and environments, instead of wanting autistic people to change to match society's expectations.

How autism is portrayed in the media changes the way people see it. Although a few works try to teach and include people, many still portray autism in ways that promote stereotypes and stigma [9]; [8]. Because of the way fictional media presents some aspects, the public can believe things that have a negative impact on policies and attitudes toward autism. While non-fiction stories can offer valuable knowledge, they sometimes inadvertently pass along misconceptions or outdated perspectives, says Jones et al.

In low- and middle-income countries, inclusion and rights advocacy face even more challenges, such as limited diagnostic and intervention capacity, and a misunderstanding of autism in the cultural context for some communities[7], [19]. Additionally, social stigma and lack of awareness have led to significant marginalization of individuals with autism and their families, through no fault of their own. It is vital that international approaches and culturally responsive programs are used to improve outcomes and ensure that autism-related services reach unserved and underserved populations.

In summary, advancing societal inclusion and representativeness of autistic people will require systemic change in educational, employment, media, and political system, based on the respect for diversity and human rights.

9. Conclusion

Having Autism Spectrum Disorder is difficult scientifically, but the disorder also provides our society with chances. With new research, specialists are able to better help individuals with autism. Technologies based on artificial intelligence are making it possible to diagnose cases much quicker and more accurately. By providing these resources, teachers will be able to reach more students sooner and assure better outcomes.

Progress in technology has not completely removed the obstacles. There are still people who have trouble getting diagnosed quickly, utilizing specialized services and who aren't well understood by the public. People's mistaken views about the causes of autism and what autistic individuals experience are still shaping public debate and laws. While the media has helped many people understand autism, it has not always managed to describe the deep variety and complexity that exists on the spectrum.

An important change in the area is that people are paying more attention to neurodiversity and no longer focus only on autism's medical issues. More people are realizing that we should listen to autistic people, celebrate what they excel at and push for schools, jobs and societies that welcome them.

The future in supporting and learning about ASD depends on uniting scientific, technological and human approaches. When we help others understand, accept diversity and emphasize ethical innovation, we can build up a society that helps everyone on the autism spectrum.

REFERENCES

[1] A. Adhikary, 'Identification of Novel Diagnostic Neuroimaging Biomarkers for Autism Spectrum Disorder Through Convolutional Neural Network-Based Analysis of Functional, Structural, and Diffusion Tensor Imaging Data Towards Enhanced Autism Diagnosis', arXiv Prepr. arXiv2305.18841, 2023.

[2] Y. Yu, S. Ozonoff, and M. Miller, 'Assessment of autism spectrum disorder', Assessment, vol. 31, no. 1, pp. 24–41, 2024.

[3] A. Lazarus, 'Narrative Rx: A Quick Guide to Narrative Medicine for Students, Residents, and Attendings', 2025.

[4] M. K. Yeung, J. Bai, and K.-L. Mak, 'Longitudinal changes in executive function in autism spectrum disorder: A systematic review and meta-analyses', Autism Res., vol. 17, no. 10, pp. 2045–2063, 2024.

[5] S. S. Abedini et al., 'A critical review of the impact of candidate copy number variants on autism spectrum disorder', Mutat. Res. Mutat. Res., vol. 794, p. 108509, 2024.

[6] C. K. Syriopoulou-Delli, 'Advances in Autism Spectrum Disorder (ASD) diagnostics: From theoretical frameworks to ai-driven innovations', Electronics, vol. 14, no. 5, p. 951, 2025.

[7] Y. Ding, H. Zhang, and T. Qiu, 'Deep learning approach to predict autism spectrum disorder: a systematic review and meta-analysis', BMC Psychiatry, vol. 24, no. 1, p. 739, 2024.

[8] G. Mittmann, B. Schrank, and V. Steiner-Hofbauer, 'Portrayal of autism in mainstream media--a scoping review about representation, stigmatisation and effects on consumers in non-fiction and fiction media', Curr. Psychol., vol. 43, no. 9, pp. 8008–8017, 2024.

[9] S. C. Jones, C. S. Gordon, and S. Mizzi, 'Representation of autism in fictional media: A systematic review of media content and its impact on viewer knowledge and understanding of autism', Autism, vol. 27, no. 8, pp. 2205–2217, 2023.

[10] N. Van Gelder, 'Between channels: essays from a late-diagnosed neurodivergent woman', 2025.

[11] R. Chapman and W. Veit, 'The essence of autism: fact or artefact?', Mol. Psychiatry, vol. 26, no. 5, pp. 1440–1441, 2021.

[12] P. Najeeb and L. Quadt, 'Autistic well-being: A scoping review of scientific studies from a neurodiversity-affirmative perspective', Neurodiversity, vol. 2, p. 27546330241233090, 2024.

[13] S. Zhang, 'AI-assisted early screening, diagnosis, and intervention for autism in young children', Front. Psychiatry, vol. 16, p. 1513809, 2025.

[14] C. Giannetti, 'Advancing Robot-Assisted Autism Therapy: A Novel Algorithm for Enhancing Joint Attention Interventions', arXiv Prepr. arXiv2406.10392, 2024.

[15] X. Yang, 'Understanding Cultural Sensitivity in Autism Education: A Semi-Structured Interview Among Chinese American Parents of Children With Autism', Tufts University, 2024.

[16] J. Camino-Alarcón, M. A. Robles-Bello, N. Valencia-Naranjo, and A. Sarhani-Robles, 'A systematic review of treatment for children with autism spectrum disorder: The sensory processing and sensory integration approach', Children, vol. 11, no. 10, p. 1222, 2024.

[17] T. C. McFayden et al., 'White matter development and language abilities during infancy in autism spectrum disorder', Mol. Psychiatry, vol. 29, no. 7, pp. 2095–2104, 2024.

[18] J. M. Taylor, 'All Is Lost: Perspectives on Autism in North Carolina, 1950--1972', The University of North Carolina at Chapel Hill, 2025.

[19] A. Aladetuyi, V. Odili, and M. Famurewa, 'Identifying Classification Algorithms for Multi-classification of Autism Spectrum Disorder: A Machine Learning Review.' 2023.

[20] W. Zhao, X. Nie, W. Zhu, and Z. Cai, 'Global Trends in the Application of Extended Reality Technology to Autism Research: Based on the Web of Bibliometric Analysis of Science (1999.1. 1--2023.3. 4)', in China Health Information Processing Conference, 2024, pp. 248–265.