

Supplementary Information

Expanded Methods: Study Selection and Data Extraction

The same study selection and data extraction methods were utilised in the initial and updated database searches. Following initial screening, duplicates were removed, and remaining titles and abstracts were screened by the first and second reviewer. Disagreements concerning inclusion were resolved by discussion; however, this was only required for three articles, overall. Full text screening was then conducted. The reference lists of articles retained for inclusion were then screened to identify any additional, relevant articles. Following this, the first reviewer extracted coded data for study country, participant details (i.e., sample size description and diagnostic criteria), intervention/instruments used, outcome measures/variables examined, outcomes/findings, effect size (if applicable), strengths and risk of bias, and reasons for exclusion from quantitative synthesis (if applicable) for each included article in a formatted spreadsheet. The first reviewer analysed this information by cross-checking each study for any inconsistencies, then summarised the study strengths and risk of bias to determine study quality.

Table 1

Complete Search Strategy for Included Studies: Autistic Experiences of Interpersonal Violence in Relation to Gender

Outcome	Descriptor
Search for autism	1. “Autism Spectrum Disorder*”
	2. “Pervasive Developmental Disorder?Not Otherwise Specified”
	3. Autis*
	4. ASD
	5. ASC
	6. PDD?NOS
	7. Asperger*
	8. OR 1-7
Search for interpersonal violence	9. Violen*
	10. Abus*
	11. Assault*
	12. ((Negative OR Adverse) N5 (Experience* OR Encounter*))
	13. Victim*
	14. Stalk*
	15. Rape*
	16. Crim*
	17. (Sex* N3 Offen?e)
	18. Trauma*
	19. Harrass*
	20. Threat*
	21. Coerc*
	22. Intimidat*
	23. Bull*
	24. Cyber?bull*
	25. Forc*
	26. Manipulat*
	27. Gaslight*
	28. “Hate Speech”
	29. OR 9-28
Search for gender	30. Gender
	31. ((Sex OR Gender) N5 (Difference* OR Based))
	32. (Male* N3 Female*)
	33. (Men N3 Women)
	34. (boy* N3 girl*)
	35. OR 30-34
Search for combinations	36. 8 AND 29 AND 35

Expanded Results: Qualitative Synthesis of Violence Prevalence

Combination of Physical, Sexual, and Psychological Violence

Prevalence and related factors for combined physical, sexual, and psychological violence was examined among 20 studies (14 quantitative, 3 mixed methods, 3 qualitative) comprising 245,534 participants (7,881 autistic, 237,653 non-autistic). Compared to non-autistic controls, autistic participants were significantly more likely to have lifetime experiences of overall violence (27.1% vs. 4.5%, $d = 1.13$; Andrzejewski et al., 2022, 2023; Gibbs et al., 2021, 2022, 2023; Haruvi-Lamdan et al., 2020), negative interpersonal encounters (49.4% vs. 22.4%; Haruvi-Lamdan et al., 2020), poly-victimisation (76.3-79.6% vs. 47.7-54.5%, $d = 0.54$; Gibbs et al., 2022, 2023), more than one type of violence (76.3% vs. 46.4%, $d = 0.72$; Gibbs et al., 2022), and have a higher frequency of domestic violence events (42.% vs. 34%; Hwang et al., 2020) and ACEs (Yoshikawa et al., 2022). A high proportion of autistic participants reported having experienced overall violence (children, 88.3%; Pfeffer, 2016; adults, 91%-97%; Pearson et al., 2023; Reuben et al., 2021), including repeated and sustained victimisation across the lifespan (Pearson et al., 2022; Pfeffer, 2016). Violence was most commonly perpetrated by friends (75.8%), partners (54.5%), family members (72.7%), colleagues (65.7%), and other (44.4%; Pearson et al., 2023); however, common perpetrators differed during childhood (i.e., family members, teachers), at school and university (i.e., friends, peers), and during adulthood (i.e., intimate partners; Douglas & Sedgewick, 2023).

Specific forms of violence identified by quantitative research included child abuse (overall, 88.3%; Pfeffer, 2016; inpatient settings, 28.3%; Brenner et al., 2018; substantiated by CPS, 3.9%; Fisher et al., 2019), domestic violence (23.7%; Hwang et al., 2020; Pearson et al., 2022), physical and sexual violence (4.4%; Mandell et al., 2005), violent crime (25%-84%; Miller et al., 2022; Pearson et al., 2023; Pfeffer, 2016), and severe institutional abuse, caregiver or domestic abuse, and random assaults (34.1%; Kildahl & Helverschou, 2023). Within qualitative research, autistic people reported experiencing varying abusive tactics (i.e., physical abuse, gaslighting, coercion, financial abuse, isolation) and use of systems of power (e.g., court system, blocking university, forced contact with abuser through co-parenting) to hurt or impact their lives (Douglas & Sedgewick, 2023). Participants also reported more overt experiences of bullying or abuse (both physical and verbal), as well as being exploited and manipulated (e.g., targeted for being isolated, triggering meltdowns to discredit, being undermined) for being autistic (Douglas & Sedgewick, 2023; Marion et al., 2023).

In relation to gender, higher rates of interpersonal trauma were found among autistic gender marginalised groups, including transgender males (90%), cisgender females (78%), non-binary individuals

(76%), and transgender females (73%), compared to autistic cisgender males (60%; Reuben et al., 2021). Further, autistic non-cisgender adults were nearly three times more likely to experience a physically violent crime than autistic cisgender adults (Miller et al., 2022). While no gender differences were found for experiencing more than one violence type or poly-victimisation among adults (Gibbs et al., 2022) or for the frequency of ACEs (Yoshikawa et al., 2022), autistic girls were significantly more likely to experience more types of child abuse than autistic boys (McDonnell et al., 2021).

Physical Violence

Eight studies (7 quantitative, 1 mixed methods) examined the prevalence of and factors relating to physical violence, comprising 6,930 participants (6,000 autistic, 930 non-autistic). For lifetime physical violence, autistic participants were significantly more likely than non-autistic controls to experience child physical abuse ($d = 0.25$; Bemmouna et al., 2023), and physical abuse during adulthood (48.6% vs. 31.3%; Andrzejewski et al., 2023; Gibbs et al., 2022). Specific physical violence prevalence rates for autistic people included 56% of autistic adults (Reuben et al., 2021) and 8.2%-88% of autistic children (Duan et al., 2015; Mandell et al., 2005; McDonnell et al., 2021). Approximately 25% of autistic participants also reported being a victim of physical crime in their lifetime (Miller et al., 2022). Longitudinal data found no gender differences for child physical maltreatment likelihood (Duan et al., 2015; Mandell et al., 2005).

Sexual Violence

Factors relating the sexual prevalence of violence were examined by 16 studies (13 quantitative, 2 mixed methods, 1 qualitative), comprising 8,550 participants (7,134 autistic, 1,416 non-autistic). The likelihood of experiencing sexual violence was significantly higher among autistic participants than non-autistic controls (Andrzejewski et al., 2023; Bemmouna et al., 2023; Brown-Lavoie et al., 2014; Gibbs et al., 2022; Joyal et al., 2021; Yoshikawa et al., 2022). This included a higher likelihood (24.3% vs. 0.8%, $d = 0.29$ to 0.77 ; Andrzejewski et al., 2022; Bemmouna et al., 2023) and frequency of child sexual abuse ($d = 0.44$; Yoshikawa et al., 2022), higher rates of sexual victimisation during adolescence (37.1% vs. 26.9%; Joyal et al., 2021), and overall sexual violence in adulthood (78% vs. 47.4%; Brown-Lavoie et al., 2014), including sexual assault (30.4% vs. 19.9%) and unwanted sexual experiences (48.9% vs. 33.5%; Andrzejewski et al., 2023). Quantitative data found various forms of sexual violence among autistic participants were identified across different developmental periods, including a history of sexual violence in childhood and adolescence (2.7%-14%; Graham Holmes et al., 2020; Mandell et al., 2005; McDonnell et al., 2021; Pfeffer, 2016), and uncomfortable or unwanted sexual experiences (54%), sexual abuse or assault (17-31%), and reporting a sexually violent crime

(25%) during adulthood (Kildahl & Helverschou, 2023; Miller et al., 2022; Reuben et al., 2021). While one qualitative study found all included participants ($n = 24$) had experienced either been in an abusive relationship or had been sexually assaulted more than once (Douglas & Sedgewick, 2023).

In relation to gender, longitudinal data found that compared to autistic males, autistic females were significantly more likely to experience sexual violence during childhood (Mandell et al., 2005), but not during adolescence (Lu et al., 2022). While one cross-sectional study did not report statistical values but found no significant difference among autistic cisgender adults for lifetime likelihood of sexual victimisation (Brown-Lavoie et al., 2014). Rates for specific forms of sexual violence for women compared men were reported by an additional two cross-sectional studies, including overall victimisation (69% vs. 27%; Reuben et al., 2021), experiencing regret following sexual events (65.5% vs. 38.1%), engaging in unwanted sexual behaviours (60% vs. 33%), and experiencing unwanted sexual advances or behaviours (78.2% vs. 47.6%; Pecora et al., 2019). Among adult gender minorities, rates of overall sexual violence were 69% for non-binary people, 85% for trans men, and 60% for trans women (Reuben et al., 2021). One qualitative study comprising 24 participants found the majority of those assigned female at birth and some cisgender males reported experiences of physical sexual assault, rape, or coercion across numerous contexts (e.g., established relationships, friends, no prior contact with perpetrator; Douglas & Sedgewick, 2023).

Psychological Violence

Psychological violence prevalence was examined by 13 studies (8 quantitative, 3 mixed methods, 2 qualitative) comprising 6,641 participants (5,643 autistic, 998 non-autistic). Autistic participants were significantly more likely to experience various forms of psychological violence than non-autistic controls, including a greater likelihood of childhood emotional abuse ($d = 0.60$), emotional neglect ($d = 0.52$), physical neglect ($d = 0.43$; Bemmouna et al., 2023), more frequent childhood punishment, neglect, and emotional abuse (Yoshikawa et al., 2022), and an increased likelihood of stalking and harassment during adulthood (58.5% vs. 27.3%, $d = 0.73$; Gibbs et al., 2022). Autistic adults were also significantly more likely to witness interpersonal trauma than non-autistic adults, including physical violence (23.9% vs. 12.7%), sexual assault (5.1% vs. 1.9%), and unwanted sexual experiences (8% vs. 1.9%; Andrzejewski et al., 2023). While black autistic participants reported a significantly reduced likelihood of experiencing discrimination compared to black non-autistic participants ($d = 0.53$), autistic participants reported more diverse discrimination experiences (48% race, 30% autism and race, 19% autism, 3% race, autism, and gender) than non-autistic participants, who primarily reported race as the sole reason (90%; Davis et al., 2022).

Quantitative data found specific rates of psychological violence among autistic participants. For children, this included lifetime experiences of emotional maltreatment (8.7%; McDonnell et al., 2021) and witnessing victimisation (30%; Pfeffer, 2016), as well as discrimination (34%; Montenegro et al., 2022) and teacher harassment (11.9%; Lin et al., 2020; Liu et al., 2021) within the past year. For adults, forms of psychological violence included being harassed for one's gender (67.7%), sexuality (33.3%), and disability (33.3%; Barnett, 2017), as well as having their property damaged or stolen (25%; Miller et al., 2022). Qualitative experiences of stigma and discrimination were examined by two studies. In one study, all 45 participants reported experiencing stigma which varied, from being stereotyped (e.g., perceived as weird, being minimised), being separated (e.g., being othered or dehumanised), as well as experiences of status loss, misuse of power (e.g., undermined by teachers), and discrimination (e.g., accused of using disability as an excuse or to get attention; Marion et al., 2023). Experiences of discrimination were also reported in university settings, including stereotyped beliefs and invalidation for being autistic with low needs, as well as the university curriculum and discussions about autism being described as ableist, deficit-based, and dehumanising (Tan et al., 2023).

Gendered experiences of discrimination experiences in university settings were also observed, whereby autistic gender marginalised groups (e.g., females, transgender, non-binary) reported intersecting experiences of ableism and sexism, including stigma and misconceptions about autism, particularly in women (Tan et al., 2023). Support groups were also reported to be tailored towards men, with women describing not being taken seriously, undermined, and affected by white male privilege, being talked over, and not feeling free to speak directly without being regarded as rude or bossy (Tan et al., 2023). Among culturally diverse autistic women, autism and gender further intersected with race, involving experiences of ableism, sexism, and racism combined (Tan et al., 2023).

Traditional Bullying

27 studies (23 quantitative, 3 mixed methods, 1 qualitative), comprising 75,702 participants (11,979 autistic, 63,723 non-autistic) examined factors relating to the prevalence of traditional bullying. Autistic participants were found to be significantly more likely to be bullied by their peers (46-69% vs. 2-17%; Bemmouna et al., 2023; Hsiao et al., 2022; Junttila et al., 2023; Sedgewick et al., 2019; Sterzing et al., 2012; Zeedyk et al., 2014) and siblings (Toseeb et al., 2019, 2020) throughout childhood and adolescence than non-autistic participants, with parents reporting higher rates of peer victimisation among autistic and non-autistic children (69% vs. 9.25%) than teachers (54% vs. 3.8%; Junttila et al., 2023). While autistic and non-autistic

disabled participants reported no difference in the prevalence of emotional bullying (Fisher et al., 2013), autistic adolescents were significantly more likely to be bullied than their peers (46.3-69.9% vs. 10.6-33.7%; Ball & Zhu, 2023; Sterzing et al., 2012), and were bullied more frequently than non-autistic adolescents with (49% vs. 57%) and without ID (42% vs. 36%; Zeedyk et al., 2014) within the past year.

Six quantitative studies reported varied rates of bullying among autistic participants during childhood and adolescence (12%-73.3%; Ferrigno et al., 2022; Fisher et al., 2013; Fisher & Taylor, 2016; Holden et al., 2020; Miller et al., 2022; Zablotsky et al., 2014). One qualitative study found that although no autistic children were severely bullied, all were vulnerable, with discrepancies observed between children and parents in relation to incident severity (Hebron et al., 2015). Among autistic children and adolescents, 20.8%-82% reported experiencing bullying in the past year (Chiu et al., 2018; Chou et al., 2020; Liu et al., 2021, 2022) and 28%-70% in the past month (Cappadocia et al., 2012; Zablotsky et al., 2013, 2014), including bullying that was frequent (28%-30%; Cappadocia et al., 2012; Zablotsky, 2013), verbal (43.1%-78.8%), physical (14.7%-51.5%), and relational (9.1%-26.5%), involved provocation (63.5%; Adams et al., 2016, 2020; Zeedyk et al., 2014), as well as past week sibling bullying (58%; Deniz & Toseeb, 2023).

In relation to autism status and gender, autistic cis-females were significantly more likely to be bullied than autistic cis-males and non-autistic controls (Sedgewick et al., 2019). Autistic cis-males were significantly more likely to be bullied than non-autistic cis-females ($d = 0.73$), but not non-autistic males ($d = 0.07$; Sedgewick et al., 2019). Findings in relation to the gendered prevalence of bullying among autistic participants were mixed. Three longitudinal studies found no gender differences in lifetime (Matthias et al., 2021; Toseeb et al., 2020) or past year (Lu et al., 2022) bullying prevalence, while another found cis-females were significantly more likely to be bullied than cis-males (Holden et al., 2020). Two cross sectional studies did not report statistical values but found no gender difference in bullying prevalence or frequency (Chiu et al., 2018; Fisher et al., 2013).

Cyberbullying

Four quantitative studies examined factors relating to the prevalence of cyberbullying among 297 autistic participants. Rates of cyberbullying that occurred within the past year were examined among adolescents (13.7%-61.6%; Hu et al., 2019; Liu et al., 2021; Liu et al., 2022), with one study reporting a discrepancy in the prevalence between self- (13.7%) and parent-report (2.3%; Hu et al., 2019). 31% of adults reported experiencing cyberbullying in the past two to three months (Gibbs et al., 2022).

Homicide

Two quantitative studies obtained reports from the news-media to examine the prevalence of homicide among 64 autistic and 10 non-autistic children (Coorg & Tournay, 2013; Guan et al., 2021). The majority of victims were male (90.4%-91.7%), averaging 10 years old. The most common perpetrators were identified as mothers and step-mothers (28.9%-66.7%), followed by fathers and step-fathers (25%-33.3%). 38% of perpetrators identified as having mental illness, and 55% were single-parents (57% mothers, 50% fathers; Coorg & Tournay, 2013). The most common form of homicide was identified as gunshot (23.1%), followed by drowning (19.2%), and suffocation (19.2%; Guan et al., 2021), with 55.5% of perpetrators completing suicide following the homicide.

Table 2
Summary of Key Findings for Autistic Experiences of Interpersonal Violence Prevalence, and Quality Appraisal

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Barnett (2017) USA	N = 24 (no ID) Semi-structured interviews 5 m, 13 f, 6 transgender/gender-queer 22 White, 2 non-white (M = 36.5 years)	Participants were recruited if they self-identified as autistic	Semi-structured, Internet-facilitated interviews	Prevalence Harassment Gender harassment, heterosexist harassment, disability harassment	Harassment Gender (67.7%), sexuality (33.3%), & disability (33.3%)	Study retained for narrative review only	High quality (100%): Qualitative approach appropriate to address research objective. Findings were adequately derived from data. However, majority of participants self-identified as white, & had received post-secondary or professional training, limiting generalisability.	Qualitative study
Douglas & Sedgewick (2023) UK	N = 24 (No ID) Self-report 6 m, 15 f, 3 non-binary 23 White, 1 Latino (M = 39 years, SD = 11.82)	Participants formally diagnosed (n = 23) or self-identified as autistic (n = 1) Autism qualified via <i>Autism Spectrum Quotient</i> (AQ)	Demographics questionnaire AQ Semi-structured interviews	Prevalence Interpersonal violence (sexual, psychological, physical, systemic, autism-related)	Interpersonal Violence Sexual Abuse. All participants had been sexually assaulted/raped or were in abusive relationship more than once Majority of people AFAB were physically sexually assaulted, raped or coerced into sex by strangers, friends, and acquaintances across multiple contexts (e.g., established relationships, no prior contact with perpetrator) Additional Abuse Experiences. Participants experienced abusive tactics (e.g., gaslighting, coercion, physical or financial abuse, isolation, systems of power) to hurt or impact their lives (e.g., court system, blocking university) Perpetrator Characteristics. Perpetrators varied across childhood (family members, teachers), at school/university (friends/peers), and in adulthood (intimate partners of opposite and same sex) Autism-Related Victimization. Participants reported autism-related exploitation and victimization (e.g., targeted for being socially isolated, triggered meltdowns to discredit	Study retained for narrative review only	High quality (100%): Study approach and data collection methods adequate to answer research question. However, study comprised a small sample of primarily white, late-diagnosed, autistic participants without ID, limiting generalisability.	Qualitative study

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Hebron et al. (2015) UK	N = 5 (ID not specified [n/s]) Self-report 3 m, 2 f Age range 5 to 13 years	Participants had confirmed autism diagnosis from qualified professional	Semi-structured interviews	Prevalence Experiences of traditional bullying	victim, having perception of self and relationship undermined) Bullying Vulnerability. No children were severely bullied, but all were vulnerable Experience. Incidents perceived as subtle by parents not recognized by children, but incidents perceived as minor by parents perceived as severe by children Discrepancy between adults & children in perceptions of severity of incidents suggests bullying should be seen from perspective of victim	Study retained for narrative review only	High quality (100%): Qualitative data collection and analysis included semi-structured interviews utilized thematic analysis and was adequate to address research objective. Findings were adequately derived and interpreted from the data and presented coherently.	Qualitative study
Pearson et al. (2023) USA UK Europe Canada Venezuela	N = 102 (ID n/s) Self-report 21 m, 64 f, 14 non-binary, 17 other 89 White, 12 non-White, Age range 19 to 73 years (M = 37.8 years)	72 received clinical diagnosis of autism 30 self-identified as autistic	Structured interviews administered online and face-to-face	Prevalence Experiences of interpersonal violence	Interpersonal Violence 81 (79.4%) experienced a violent crime, 99 (97%) were victimized, and many described expecting to be victimized for being autistic Victimization First Occurred. Childhood (49.3%), as a teenager (35.8%), & during adulthood (14.8%) Victimization First Perpetrated by Someone Participant Knew. Childhood (66.7%), teenage years (23.2%), & adulthood (10.1%) Who perpetrated violence: friend (75.8%), partner (54.5%), family member (72.7%), colleague (65.7%), & other (44.4%)	Study retained for narrative review only	High quality (100%): Written and spoken structured/semi-structured interviews allowed to adequately address the research objective. Findings were presented cohesively, and adequately derived and interpreted from the data.	Qualitative study
Andrzejewski et al. (2022) USA	N = 241 (ID n/s) Parent-report Autistic sample (n = 117) 83 m, 34 f 97 White (M = 8.6 years) Non-autistic sample	All participants formally diagnosed Autism qualified by AQ	<i>Adverse Child Experiences Questionnaire (ACE)</i> <i>Perceived Stress Scale (PSS)</i> <i>AQ-10</i>	Prevalence ACEs (including childhood maltreatment) experienced by parents & youth in autistic & non-autistic groups	Childhood Maltreatment Rates of childhood maltreatment (CM) were significantly higher for autistic children than non-autistic children (d = 0.79)	Study retained for narrative review only	High quality (80%): Utilized crowdsourcing platforms. Although autistic status not validated in study, participants were asked specific diagnostic information. However, sample consisted of mainly white participants, limiting generalisability. Reliance on parent-report could have resulted	Study did not explore prevalence of CM among autistic group by gender

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Ball & Zhu (2023) USA	(<i>n</i> = 124) 67 m, 57 f 88 White (<i>M</i> = 9.3 years) <i>N</i> = 29,027 (ID n/s) Parent- report Autistic sample (<i>n</i> = 1011) 825 m, 186 f 571 White, 266 Hispanic, 115 Black, 20 Asian, 38 Other (<i>M</i> = 15.68 years) Non-autistic sample (<i>n</i> = 28,016) 14008 m, 14008 f 13,812 White, 7,480 Hispanic, 3950 Black, 1261 Asian, 1513 Other (<i>M</i> = 14.67 years)	Parents reported child received autism diagnosis from doctor or health care provider	<i>National Survey for Children's Health (NSCH)</i>	Prevalence Bullying frequency	Bullying Frequency Higher rates of bullying among autistic participants (69.9%) than non-autistic participants (33.7%) within past year	Study retained for narrative review only	in CM being under-reported in sample High quality (80%): Sample appeared representative of autistic population; however, definitions of levels of autism needs were not provided to parents. Further, data only derived from parent-report & definition of bullying was not provided to parents. Findings may not accurately reflect frequency of bullying among adolescents.	Study did not examine prevalence of bullying in relation to gender
Brenner et al. (2018) USA	<i>N</i> = 350 (203 no ID, 147 ID) Parent-report 277 m, 73 f 277 White (<i>M</i> = 12.9 years, <i>SD</i> = 3.34)	Autism confirmed by <i>Autism Diagnostic Observation Schedule, Second Edition (ADOS-2)</i> AQ used to qualify autism within	ADOS-2 Medical Intake Form	Prevalence Amount and type of abuse in inpatient settings	Abuse Overall abuse (28.3%), physical (13%), emotional (12%), sexual (8%), sexual & emotional (1%), & physical & emotional (16%) Gender. No gender differences in abuse (<i>d</i> = 0.22)	Overall abuse (<i>d</i> = 0.22)	High quality (80%): Purposive sampling relevant to address research questions. Sample was fairly diverse (e.g., ID, gender), although predominantly white. However, measures were not designed to collect trauma- specific information.	Study included
Brown-Lavoie et al. (2014) USA Canada	<i>N</i> = 212 Self-report Autistic sample (<i>n</i> = 95, no ID) 58 m, 37 f	AQ used to qualify autism within	<i>Sexual Experiences Survey, victimization version</i>	Prevalence Sexual victimization (unwanted sexual contact,	Sexual Victimization Autistic group (78%) had significantly higher prevalence than non-autistic group (47.4%, <i>d</i> = .76).	Study retained for narrative review only	High quality (80%): Acknowledged convenience sampling method, but participants primarily consisted of those without ID and findings	Specific statistical values for sexual victimization

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Fisher et al. (2013) USA	(<i>M</i> = 27.8 years, <i>SD</i> = 4.3) Non-autistic sample (<i>n</i> = 117) 66 m, 51 f (<i>M</i> = 27.6 years, <i>SD</i> = 4.7) <i>N</i> = 103 Parent-report	sample (<i>AQ</i> > 26)	Demographics questionnaire <i>Social Vulnerability Questionnaire</i> (SVQ)	sexual coercion, & rape)	Gender. No gender differences in sexual victimization	Study retained for narrative review only	may not generalise to broader autism population.	by gender not included in study, but were reported to be not significant
	Autistic Sample (<i>n</i> = 29; 16 no ID, 13 ID) 24 m, 5 f Race n/s Non-Autistic Sample (<i>n</i> = 74) 35 m, 39 f (<i>M</i> = 25.4 years, <i>SD</i> = 10.39)	Not specified		Prevalence Emotional bullying	Emotional Bullying Lifetime experience of victimization among autistic group (72%) No significant differences in autistic group in rate or type of victimization, relative to Down Syndrome (DS) and Williams Syndrome (WS)			
Gibbs et al. (2021) Australia	<i>N</i> = 294 (no ID) Self-report Autistic sample (<i>n</i> = 245) 80 m, 144 f 21 Other 180 White, 7 Asian, 2 Aboriginal & Torres Strait Islander, 10 Other (<i>M</i> = 44 years) Non-autistic sample (<i>n</i> = 49) 9 m, 40 f 27 White, 7	208 participants were formally diagnosed with autism, 37 self- identified as autistic	<i>The Childhood Traumatic Events Scale (CTES)</i> <i>AQ-S</i>	Prevalence Rates of reported interpersonal violence (physical & sexual), & gender differences in rates	Interpersonal Violence Significantly more autistic adults (49.4%) reported experiencing childhood violence than non-autistic adults (22.4%; <i>d</i> = 0.66). There was no significance in the rate of recent violence among autistic (10.6%) & non-autistic adults (6.1%; <i>d</i> = 0.33) Gender. Autistic females were more likely to experience sexual violence (<i>d</i> = 0.78), physical violence (<i>d</i> = 0.35) & overall violence (<i>d</i> = 0.48) than autistic males	Sexual violence (<i>d</i> = 0.78) Physical violence (<i>d</i> = 0.35)	High quality (80%): Snowball sampling relevant for research questions. However, participants only included those without ID and from higher education backgrounds, limiting generalisability.	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Cappadocia et al. (2012) Canada USA	Asian, 15 n/s ($M = 44$ years) $N = 192$ (27 no ID, 61 ID n/s) Parent-report 163 m, 29 f 102 Race n/s ($M = 11.7$ years, $SD = 3.6$)	All participants formally diagnosed $AQ > 30$ used to qualify autism within sample	Select items from <i>Promoting Relationships & Eliminating Violence Network Assessment Tool, Parent Version</i> (PREVNet tool)	Prevalence Bullying (physical, verbal, social & cyber) frequency & likelihood	Bullying Within last month (77%), occurring only once (11%), 2-3 times (23%), once per week (13%), and 2-3 times per week (30%) Gender. No gender difference in frequency of bullying ($d = 0.17$) Autistic females were more likely to experience cybervictimization than autistic males ($d = 0.69$) No gender differences in physical ($d = 0.32$), verbal ($d = 0.13$), or social bullying ($d = 0.12$)	Cyberbullied ($d = 0.69$) Physical violence ($d = 0.32$) Psychological violence (verbal & relational) ($d = 0.13$)	High quality (80%): Appropriate use of measures and statistical analyses; however, convenience sampling may have limited generalisability of findings.	Study included
Chiu et al. (2018) China	$N = 565$ (no ID) Self-report 512 m, 53 f 14% of families reported income < US\$1000 per month	Not specified	Novel bullying questionnaire	Prevalence Various types of psychological bullying	Bullying Exclusion (72%), verbal (66%), extortion (7%), & sexual harassment (25%) At least one type of victimization experienced (82%) More than 2 types of victimization (60%)	Study retained for narrative review only	High quality (80%): Study derived from nationally representative sample, however, study only included participants with low needs, and had a lower percentage of females than national data of autistic students.	Statistical values for gender differences in bullying not reported, but were not significant
Chou et al. (2020) Taiwan	$N = 219$ (no ID) Parent- & self-report 192 m, 27 f Age range 11 to 18 years ($M = 13.7$ years, $SD = 2.1$)	Autism diagnosis determined via DSM-V criteria	<i>School Bullying Experience Questionnaire, Chinese Version</i> (C-SBEQ) <i>Rosenberg Self-Esteem Scale</i> (RSES)	Prevalence Bullying involvement, including: neutrals; victims only; perpetrators only; & perpetrator-victims	Bullying Self-Report. Victims only (17.8%), perpetrator-victims (9.1%) Parent-Report. Victims only (23.7%), perpetrator-victims (28.8%)	Self-Report Victimized-only ($d = -0.14$) Parent-Report Victimized-only ($d = 0.19$)	High quality (80%): Use of non-probability sampling was relevant to address the research question. However, sample were low needs enrolled from psychiatry clinics, limiting generalisability.	Shared same sample as Liu et al., 2022 & was excluded from meta-analysis as it made least unique contribution to findings.
Fisher & Taylor (2016) USA	$N = 30$ (ID n/s) Self-report 26 m, 4 f 27 White, 3 Black ($M = 18.19$ years, $SD = 0.49$)	Autism confirmed by using DSM-IV criteria, the ADOS and ADI-R	ADOS ADI-R Open-ended interviews	Prevalence Bullying	Bullying 73.3% of participants reported a history of bullying	Study retained for narrative review only	High quality (80%): Participants only asked about history of bullying, not which types they experienced, limiting nuanced examination and making it unclear as to whether data	Qualitative study

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Gibbs et al. (2022) Australia	N = 228 Self-report Autistic sample (n = 118; no ID) 25 m, 77 f, 10 non-binary, 3 gender-fluid, 1 intersex, 1 transgender m, 1 n/s 102 White, 7 Asian, 9 Other (M = 35.8 years) Non-autistic sample (n = 110) 25 m, 84 f, 1 other 81 White, 18 Asian, 11 Other (M = 37.1 years)	118 formally diagnosed, 14 self-identified as autistic	Demographics questionnaire Data from the Australian Bureau of Statistics (ABS) Questionnaire assessing violence experiences developed for the purposes of the study	Prevalence Rates of interpersonal violence (physical, sexual, stalking, & harassment), & gender differences in violence prevalence	Interpersonal Violence Autistic participants more likely to experience violence than non-autistic controls, including sexual harassment (75.4% vs. 56.4%, d = 0.48), stalking & harassment (58.5% vs. 27.3%, d = 0.73), sexual violence (56.8% vs. 28.2%, d = 0.67), physical violence (58.5% vs. 36.4%, d = 0.50), more than one violence type (76.3% vs. 46.4%, d = 0.72), & repeated victimization (76.3% vs. 54.5%, d = 0.54). Gender. Autistic females more likely to be sexually harassed than autistic males (d = 0.60) Autistic females not more likely to experience stalking & harassment (d = 0.29), sexual (d = 0.47) or physical violence (d = -0.22), more than one violence type (d = 0.38), nor repeat violence (d = 0.20) than autistic males	Sexual violence (sexual harassment & forcing & sexual violence) (d = 0.54) Psychological violence (stalking & harassment; d = 0.29) Physical violence (d = -0.22) More than one type of violence (d = 0.38)	collection methods adequately addressed the research question. High quality (80%): Snowball sampling relevant for research questions. However, sample only consisted of those without ID and who had completed tertiary education, limiting generalisability. Small sample of gender non-conforming and male participants prevented comparison analyses. Although novel questionnaire was reviewed by autistic advisory group to improve accessibility and acceptability of items, retrospective nature of research may have led to recall bias	Study included
Gibbs et al. (2023) Australia	N = 228 Self-report Autistic sample (n = 118, no ID) 25 m, 77 f, 15 other, 1 n/s 102 White, 7 Asian, 9 Other (M = 35.79 years, SD = 13.33) Non-autistic sample (n = 110)	Participants were formally diagnosed (n = 104) or self-identified as autistic (n = 18) Autism qualified via scoring > 65 on AQ-S	AQ-S <i>The Multidimensional Social Competence Scale (MSCS)</i> <i>Gudjonsson Compliance Scale (GCS)</i> Items based on the ABS Personal Safety Survey	Prevalence Repeated experiences of interpersonal violence (sexual harassment, stalking and harassment, sexual violence, physical violence)	Interpersonal Violence Autistic participants more likely to experience poly-victimization than non-autistic participants (76.3% vs. 46.4%, d = 0.72) Autistic participants more likely to experience all 4 forms of violence compared to non-autistic participants (27.1% vs. 4.5%, d = 1.13)	Study retained for narrative review only	High quality (80%): Online and snowball sampling method relevant to address research question. Sample was predominantly white, female, without ID, and had completed tertiary study, limiting generalisability. Small sample size and large number of variables measures also potentially precluded ability to detect statistical effects	Study did not examine victimization likelihood in relation to gender

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Graham Holmes et al. (2020) USA	25 m, 84 f, 1 other 81 White, 18 Asian, 11 Other; ($M = 37.13$, $SD = 12.19$) $N = 298$ (234 no ID, 64 ID) Parent-report 157 m, 141 f Age range 12 to 18 years ($M = 14.3$ years)	Parents recruited if their child had received a formal diagnosis of autism	<i>Sexual Behavior Inventory</i> <i>Parent Action Inventory</i>	Prevalence Overall prevalence of & gender differences in prevalence of sexual abuse	Sexual Abuse Approximately 6.4% of participants were reported to have a history of sexual abuse Gender. No gender differences in sexual abuse ($d = 0.22$)	Sexual abuse ($d = 0.22$)	High quality (80%): Recruitment relevant to address research questions. However, participants were primarily white and middle class, limiting generalisability. Reliance on parent-report may have under-estimated abuse history	Study included
Holden et al. (2020) UK	$N = 680$ (480 no ID, 200 ID) Parent-report 508 m, 172 f 377 White, 163 Black, 37 Asian, 12 Mixed-race, 35 Other, 56 n/s ($M = 15.2$ years, $SD = 1.4$)	Autism diagnoses identified via Clinical Record Interactive Search (CRIS)	Exposure to bullying detected via screening of individual clinical records	Prevalence Prevalence of and gender differences in traditional bullying	Bullying 30% of autistic adolescents reported bullying at baseline Gender. Autistic females more likely to be bullied at baseline than autistic males ($d = 0.24$)	Study retained for narrative review only	High quality (80%): Longitudinal cohort relevant to address research question. Sample was diverse in terms of ID, gender, and race. However, data not collected for research purposes – obtained from electronic records of naturalistic cohort & may be subject to inaccuracies.	Study had incompatible design (cohort study)
Hu et al. (2019) Taiwan	$N = 219$ (no ID) Self- & parent-report 192 m, 27 f 219 Asian Age range 11 to 18 years ($M = 13.7$ years, $SD = 2.1$)	Participants diagnosed with autism by child psychologist using <i>DSM-5</i> criteria	<i>Cyberbullying Experiences Questionnaire (CEQ)</i> <i>Close-Ended Questionnaire of the Occupational Survey (CEQ-OS)</i>	Prevalence Self-report & parent-reported cyberbullying	Cyberbullying Overall victims (self- & parent-report; 14.6%), self-reported victims (13.7%), parent-reported victims (2.3%) Gender. No gender differences in cyberbullying ($d = 0.33$)	Cyberbullying ($d = 0.33$)	High quality (80%): Study used non-probability sampling that was relevant to address the research questions. It also used reliable and validated measures of cyberbullying. However, sample consisted of participants without ID who had visited medical units for treatment, limiting generalisability.	Study shared same sample as Liu et al., 2022, and was excluded from the meta-analysis as it adds least variance to findings
Lin et al. (2020) Taiwan	$N = 219$ (no ID) Self- & parent-report 192 m, 27 f 219 Asian	Diagnosed with autism according to <i>DSM-5</i> criteria	Single item measure of teacher harassment <i>Close-Ended Questionnaire of</i>	Prevalence Teacher harassment	Teacher Harassment Autistic participants who had experienced teacher harassment (11.9%) Gender. No gender differences in teacher harassment ($d = -0.05$)	Teacher harassment ($d = -0.05$)	High quality (80%): Study used relevant sampling strategy and reliable and validated measures. However, generalisability was limited as participants were those without ID who studied in inclusive classrooms.	Study shared same sample as Liu et al., 2022, and was excluded from the meta-analysis

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
	(<i>M</i> = 13.9 years)		<i>the Occupational Survey (CEQ-S)</i>					as it adds least variance to findings
Liu et al. (2021) Taiwan	<i>N</i> = 219 (no ID) Self-report 192 m, 27 f 219 Asian Age range 11 to 18 years (<i>M</i> = 13.7, <i>SD</i> = 2.1)	Diagnosed with autism according to <i>DSM-5</i> criteria	<i>C-SBEQ</i>	Prevalence Traditional bullying & cyberbullying	Bullying Cyberbullying. Victimized (13.7%) Traditional Bullying. Victimized (26.9%) Gender. No gender differences in cyber bullying (<i>d</i> = 0.23) or traditional bullying (<i>d</i> = 0.08)	Traditional bullying (<i>d</i> = 0.23) Cyberbullying (<i>d</i> = 0.08)	High quality (80%): Cross-sectional design limited ability to draw conclusions about the directionality of the findings. Study was reliable and validated measures and acknowledged possible limitations of reliance on self-report. Participants consisted of those without ID and findings are not generalisable to broader autism population.	Study shared same sample as Liu et al., 2022, and was excluded from the meta-analysis as it adds least variance to findings
Liu et al. (2022) Taiwan	<i>N</i> = 219 (no ID) Self- & parent-report 192 m, 27 f 219 Asian Age range 11 to 18 years (<i>M</i> = 12.7 years)	Diagnosed with autism according to <i>DSM-5</i> criteria.	<i>C-SBEQ</i> Single item assessing teacher harassment. <i>CEQ-OS</i>	Prevalence Traditional bullying, cyberbullying, & teacher harassment	Bullying School bullying (61.6%), cyberbullying (14.6%), teacher harassment (11.9%) Gender. No gender differences in traditional bullying (<i>d</i> = 0.04), cyberbullying (<i>d</i> = 0.33), nor teacher harassment (<i>d</i> = -0.05)	Traditional bullying (<i>d</i> = 0.04) Cyberbullying (<i>d</i> = 0.33) Teacher harassment (<i>d</i> = -0.05)	High quality (80%): Relevant sampling strategy for research questions, but participants were without ID & recruited from psychiatric departments of university hospitals, limiting generalisability. Reliable & valid measure of teacher harassment, but single dichotomous item prevented examination of context of teacher victimization.	Study shared same samples as Chou et al., 2020, Lin et al., 2020, & Liu et al., 2021, but was examined via meta-analysis as it maximized the variance of findings
Pecora et al. (2019) Australia	<i>N</i> = 459 Self-report Autistic Sample (<i>n</i> = 232, no ID) 95 m, 111 f, 26 Other Race n/s (<i>M</i> = 25.2 years) Non-Autistic Sample (<i>n</i> = 227) 62 m, 152 f, 12 Other	Participants formally diagnosed with autism <i>AQ</i> > 32 used to qualify autism within sample	<i>AQ Sexual Behaviour Scale – Version 3 (SBS-III)</i>	Prevalence Amount & type of adverse sexual experiences (regretted sexual experiences, engaging in unwanted sexual behavior, victim of unwanted sexual advances/	Negative Sexual Experiences Sexual Events Later Regretted. Females (65.5%), males (38.1%) Engagement in Unwanted Sexual Behaviors. Females (60%), males (33.3%) Victim of Unwanted Sexual Advances or Behaviors. Females (78.2%), males (47.6%) Gender. Autistic females more likely to be sexually victimized than autistic males (<i>d</i> = 0.66)	Sexual victimization (<i>d</i> = 0.66)	High quality (80%): Snowball sampling method used. Participants only included those without ID, limiting generalisability. Study used valid and reliable measures and appropriate statistical analyses to address research questions.	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Pfeffer (2016) Interactive Autism Network (IAN) USA	(<i>M</i> = 22.2 years) <i>N</i> = 262 Self- & parent-report 204 m, 58 f 228 White, 7 Black 12 other or mixed race (<i>M</i> = 11.1 years)	Autism was diagnosed according to <i>DSM-IV</i> criteria	Novel demographic questionnaire <i>Juvenile Victimization Questionnaire (JVQ)</i> Novel open-ended questionnaire expanding upon the <i>JVQ</i> Semi-structured interviews	behaviors) in autistic group Prevalence Rates of past year interpersonal victimization & extent of poly-victimization	Childhood Interpersonal Violence 88.3% victimized at least once in lifetime Among victimized, 92% had been victimized more than once in past year Most Common. Assaults & bullying: 74.3% in last year, 84% across lifetime, including bullying (40.4%) & emotional bullying (61.6%) Second Most Common. Property crime, 49% in last year, 64.2% in lifetime Third Most Common. Maltreatment, 36% in last year, 50.4% in lifetime, including psychological (43.7%) & physical abuse (20.6%), & neglect (9.2%) Fourth Most Common. Witnessed victimization, 20.4% in last year, 30% in lifetime Least Common. Sexual assault, 7.6% in last year, 14% in lifetime	Study retained for narrative review only	High quality (80%): Qualitative questionnaire and semi-structured interviews appropriate to answer the research objective. However, it is unclear whether parents reported on victimization or factors occurring in the home. Findings adequately derived and interpreted from the data.	No specific statistical values were presented for gender differences in victimization
Reuben et al. (2021) USA	<i>N</i> = 687 (no ID) Self-report 230 m, 242 f, 13 transgender f, 40 transgender m, 127 non-binary 587 White, 40 Black 32 Hispanic, 32 Other race Age range 22 to 51+ years	Participants formally diagnosed, or reported suspected autism Autism status qualified by a score of > 65 via the <i>Ritvo Autism Asperger Diagnostic Scale – Revised (RAADS-R)</i>	<i>RAADS-R</i> <i>LEC-5</i>	Prevalence Direct experience of, or exposure to interpersonal violence (physical and sexual, i.e., sexual assault, & unwanted or uncomfortable sexual events)	Interpersonal Violence Direct exposure. Overall (72%), physical (56%), sexual assault (31%), & unwanted/uncomfortable sexual experiences (54%) Gender. Trans males (90%), females (78%), nonbinary (76%), trans females (73%), & males (60%) were exposed to IPT Autistic females significantly more likely to experience a combination of physical & sexual violence (<i>d</i> = 0.23) & sexual violence (<i>d</i> = 0.97) than autistic males Autistic females were not significantly more likely to experience physical violence than autistic males (<i>d</i> = 0.05)	Males vs. Females Sexual victimization (<i>d</i> = 0.97) Physical violence (<i>d</i> = 0.05) Overall (<i>d</i> = 0.23) Gender Minorities Vs. Males. Overall (<i>d</i> = 0.52) Vs. Females. Overall (<i>d</i> = 0.09)	High quality (80%): Participants included those who self-selected to participate in study & may represent those more likely to have experienced IPT. Sample included gender marginalized groups but was primarily white and without ID, while data related to participant nationality not reported. Findings may not generalise to broader autism population.	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Sedgewick et al (2019) UK	N = 102 Self-report Autistic sample (n = 53, no ID) 26 m, 27 f (M = 14 years) Non-autistic sample (n = 49) (M = 14 years) 71% White, 9% Black, 20% Asian Age range 11 to 18 years	All autistic participants received clinical autism diagnosis under <i>DSM</i> and <i>ICD-10</i> criteria	SRS-2 <i>RPEQ</i> Semi-structured interview conducted at participant's home, school, or university	Prevalence Bullying by diagnostic group, and gender differences in bullying	Bullying Autism Status. Autistic participants more likely to be victimized than non-autistic participants ($d = 0.69$) Autism Status & Gender. Autistic females more likely to be victimized than autistic males and non-autistic males and females ($d = 0.62$) Autistic males more likely to be victimized than non-autistic females ($d = 0.73$) but not non-autistic males ($d = 0.07$) Gender. Autistic females more likely to be bullied than autistic males ($d = 0.67$)	Traditional bullying ($d = 0.67$)	High quality (80%): Author's presented good rationale for use of mixed-methods approach. Qualitative and quantitative components effectively integrated to address the research question. Qualitative data collection methods were adequate and appropriate. Study used valid and reliable measure, but reliance on self-report limited more contextual examination of conflict experiences. Participants were primarily white and without ID, limiting generalisability.	Study included
Sterzing et al. (2012) USA	N = 900 (ID n/s) Parent-report 760 m, 140 f 587 White, 201 Black, 112 mixed-race Age range 13 to 16 years	Participants selected from official special education enrolment- reporting category of autism	Parent interviews & novel parent- report questionnaire	Prevalence Bullying Involvement	Bullying 46.3% of autistic participants experienced bullying, 10.6% of same-age general population experienced bullying Gender. No gender differences in victims only of bullying in autistic group ($d = 0.14$)	Study retained for narrative review only	High quality (80%): Multistage, stratified, & random sampling allowed for nationally representative cohort. However, bullying involvement items not defined for participants and may have been subject to misinterpretation. Reliance on parent-report may underestimate prevalence of bullying involvement.	Study had incompatible design (cohort study)
Tan et al. (2023) Australia	N = 21 (No ID) Self-report 12 f, 6 non- binary/gender fluid, 3 transgender 16 White, 5 non-White Age range 23-56 years (M = 36.3, SD = 9.1)	20 participants formally diagnosed, 1 self- identified as autistic	Semi-structured interviews	Prevalence Discrimination at university	Discrimination Many participants experienced autism-related stigma at university, including stereotyped beliefs & invalidation for being autistic with low needs University curriculum & discussions described as ableist, deficit-based, & dehumanizing Gender. Autistic females reported intersecting experiences of ableism & sexism, including stigma & misconceptions about autism, particularly in women, support groups tailored towards autistic males, not being taken seriously, entitlement & white male privilege,	Study retained for narrative review only	High quality (80%): Study incorporated adequate approach to address research question. However, participants who had experienced university discrimination may have been more likely to participate in study. Study also relied on self- report and did not seek perspectives of university/disability support staff, limiting nuance of examination. Participants were primarily white, AFAB, and without ID, limiting generalisability	Qualitative study

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Toseeb et al. (2018) UK	N = 14,177 (ID n/s) Self-report Autistic Sample (n = 475) 385 m, 90 f (M = 10.7 years) Non-Autistic Sample (n = 13,702) 6988 m, 6714 f (M = 10.7 years) 11,534 White, 2107 Non-White, 536 race n/s	Autism diagnosis reported by parents of autistic children	Data was accessed via UK Data Archive	Prevalence Sibling bullying types (uninvolved, bully, victim, & bully-victim)	being talked over, & not being free to speak directly without being regarded as rude or bossy Gender and Race. Culturally diverse autistic women experienced ableism, sexism, & racism combined Sibling Bullying Sibling bullying among autistic children (19%) & non-autistic children (16%) Gender. No gender differences in sibling bullying victimization in autistic group (d = -0.04)	Study retained for narrative review only	High quality (80%): Random sampling allowed for nationally representative cohort; however, large battery of data allowed for wide variety of covariates to be examined. Reliance on self-report may have been subject to misinterpretation among children and use of dichotomous prohibited further exploration of sibling bullying	Study had incompatible design (cohort study)
Toseeb et al. (2020) UK	N = 8411 (ID n/s) Self-report Autistic Sample (n = 231) 180 m, 51 f Non-Autistic Sample (n = 8180) 4090 m, 4090 f Age range 11 to 14 years 7050 White, 16 Non-White	Autism diagnosis reported by parents of autistic children	Data was accessed via UK Data Archive	Prevalence Sibling bullying involvement (victim-only, bully-only, bully-victim)	Sibling bullying 20% autistic children experienced sibling bullying, 16% of non-autistic children experienced sibling bullying	Study retained for narrative review only	High quality (80%): Random sampling technique incorporated nationally representative cohort. Reliance on self-report among autistic children may have resulted in misinterpretation of items pertaining to sibling bullying.	Study had incompatible design (cohort study)
Warrier & Baron-Cohen (2021) UK	N = 150 (ID n/s) Self-report	Participants reported to have been diagnosed	<i>Childhood Trauma Screener (CTS)</i>	Prevalence Childhood trauma (physical,	Childhood Trauma Substantially elevated scores of childhood trauma in sample Gender. Autistic females more	Study retained for narrative review only	High quality (80%): Participants more likely to be healthier, of higher SES, & more educated, limiting generalisability.	Study measured gender differences in

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Yoshikawa et al. (2022) Japan	Autistic participants from UK biobank Born between 1936-1970 Race n/s N = 101 Self-report Autistic sample (n = 63, no ID) 48 m, 15 f 63 Asian (M = 27.3 years) Non-autistic sample (n = 38) 27 m, 11 f 38 Asian (M = 27.8 years)	with autism by qualified medical professional Autistic participants recruited from psychiatric outpatient services & were diagnosed by psychiatrists under <i>DSM-V</i> criteria	<i>ADOS-2</i> Japanese version of the AQ <i>Mini-International Neuropsychiatric Interview</i> <i>CATS</i>	Prevalence Diagnostic & gender differences in frequency of ACEs (including punishment, sexual abuse, neglect, & emotional abuse)	likely to have higher severity of childhood trauma than autistic males ACEs Autism status. Autistic participants had higher amounts of ACEs than non-autistic participants ($d = 1.02$), including punishment ($d = 0.49$), sexual abuse ($d = 0.44$), neglect ($d = 0.93$), emotional abuse ($d = 1.09$) Gender. No gender differences between autistic participants with higher number of ACEs vs. participants with lower number of ACEs	Study retained for narrative review only	Retrospective nature of trauma measure may have led to recall bias. High quality (80%): Autistic group comprised Asian participants without co-occurring ID, limiting generalisability. Self-report questionnaire on ACEs may be subject to recall bias.	severity of childhood trauma, not likelihood Study examined frequency of gender differences in ACEs, not likelihood
Zeedyk et al. (2014) USA	N = 175 Self- & parent-report Autistic Sample (n = 44, no ID) 39 m, 5 f 25 White, 19 Non-White Non-Autistic/ID Sample (n = 131) 65 m, 66 f 72 White, 59 Non-White Aged 13 years	Autism diagnosis obtained by qualified medical professional, under <i>DSM-IV-TR</i> criteria	<i>CBCL Social Skills Rating System</i> (SSRS) Mother and adolescent semi-structured interviews	Prevalence Bullying	Bullying Self- & Parent-Report. Autistic participants more likely to be bullied than ID & non-autistic sample ($d = 0.67$) Self-Report. Autistic youth had highest level of physical (51.5%) & verbal (78.8%), and lowest level of relational bullying (9.1%) Autism Status. Self- (75%) & parent-reports (80%) found autistic youth were victimized more frequently than their ID (49% vs. 57%) or non-autistic peers (42% vs. 36%)	Study retained for narrative review only	High quality (80%): Relevant sampling strategy for research questions; however, high proportion of males compared to females, and lack of co-occurring ID suggests findings not generalisable to broader autism population	Study did not explore prevalence of victimization in relation to gender
Adams et al. (2020) IAN USA	N = 279 (ID n/s) Parent-report 229 m, 50 f	Autism diagnosis received	Web-based, 63-item <i>Bullying and School Experiences of</i>	Prevalence Negative peer experiences (physical &	Peer Victimization Verbal (43.1%), ignored (26.5%), physical (14.7%), & provoked (60.6%)	Study retained for narrative review only	Good quality (60%): Collected data relevant to address the research objective. However, sample consisted of primarily	Study used same sample as Zablotsky et al., 2013-2014,

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
	261 White, 264 non-Hispanic 253 attended public school ($M = 12.8$ years, $SD = 3.6$)	from medical professional	<i>Children with ASD Survey</i>	verbal victimization, being ignored, and being provoked)	Gender. Autistic females more likely to experience verbal victimization ($d = 0.28$) & being ignored ($d = 0.49$) than autistic males. No gender differences in physical victimization ($d = -0.25$) & being provoked ($d = 0.03$)		white males from higher income households, limiting generalisability to wider autism population. Further, most measures were also single-item and not previously validated.	but had smaller sample size than Zablotsky et al., 2014
Andrzejewski et al. (2023) USA	$N = 637$ (ID n/s) Self-report Autistic sample ($n = 276$) 128 m, 93 f 55 trans/non-binary 205 White, 14 Black, 57 Other ($M = 29$ years) Non-autistic sample ($n = 361$) 172 m, 180 f, 9 trans/non-binary 239 White, 53 Black, 69 other ($M = 45.69$ years)	214 autistic participants formally diagnosed, & 62 self-identified as autistic	<i>Life Events Checklist for DSM-5 (LEC-5)</i> <i>PTSD Checklist for DSM-5 (PCL-5)</i> AQ	Prevalence Interpersonal trauma (e.g., sexual assault, physical assault)	Interpersonal Trauma Autistic group more likely to experience, witness, & learn about interpersonal trauma than non-autistic group ($d = 0.29$) Rates of experiencing interpersonal trauma were higher among autistic adults compared to non-autistic adults, including physical assault (48.6% vs. 31.3%), sexual assault (30.4% vs. 19.9%), & unwanted sexual experiences (48.9% vs. 33.5%) Rates of witnessing interpersonal trauma were higher among autistic adults compared to non-autistic adults, including physical assault (23.9% vs. 12.7%), sexual assault (5.1% vs. 1.9%), and unwanted sexual experiences (8% vs. 1.9%)	Study retained for narrative review only	Good quality (60%): Sampling strategy relevant to address research question; however, sample comprised primarily white, cis-gender participants', limiting generalisability. Further, sole reliance on the PCL-5 prevented a contextualized examination of broader traumatic experiences	Study examined gender differences in traumatic events overall, not interpersonal trauma
Bemmouna et al. (2023) France	$N = 724$ (no ID) Self-report Autistic sample ($n = 154$) 46 m, 89 f, 19 non-binary race n/s 18-61 years BPD sample ($n = 111$) 15 m, 87 f, 9 non-binary	Participants received formal diagnosis of autism	<i>Childhood trauma questionnaire-short form (CTQ-SF)</i> <i>Assessment of bullying experiences (ABE)</i> Demographics and clinical data questions at end of survey	Prevalence Child abuse (physical, sexual, & emotional) Bullying (verbal, relational, physical, & cyberbullying)	Child Abuse Autism Status. Autistic group more likely than non-autistic group to be emotionally ($d = 0.60$), physically ($d = 0.25$), & sexually abused ($d = 0.29$), & emotionally neglected ($d = 0.43$) Bullying Autism Status. Autistic group more likely than non-autistic group to be bullied ($d = 0.98$)	Study retained for narrative review only	Good quality (60%): Qualifying information regarding autism status not obtained, & autistic participants were those without ID, limiting generalisability. Further, concerns relating to confounder bias included age not being homogenous between groups, cutting & other forms of self-harm not being differentiated, & autistic participants being less likely to have emotional dysregulation due to being recruited from the	Study did not examine prevalence of child abuse or bullying in relation to gender

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Fink et al. (2018) Netherlands	race/ns 18-62 years Non-autistic sample (<i>n</i> = 459) 86 m, 344 f, 29 non-binary race n/s 18-65 years <i>N</i> = 120 (no ID) Peer-, teacher-, & parent-report 107 m, 13 f All attended a special secondary school for autistic adolescents	Diagnosed by qualified professional using <i>DSM-IV-TR</i> criteria	<i>Bullying Role Nomination Procedure, Internet Version (BRNP)</i>	Prevalence Bullying Victims of bullying	Bullying Gender. No gender difference in being bullied (<i>d</i> = -0.04)	Traditional bullying (<i>d</i> = -0.04)	general population. The study also comprised a small sample, whereby division into three groups limited statistic power Good quality (60%): Sampling technique not described; however, small number of females & no participants with co-occurring ID limited generalisability. Sole reliance on peer-report may have underestimated bullying experiences.	Study included
	<i>N</i> = 24,306 CPS records Autistic sample (<i>n</i> = 387; 167 no ID, 107 ID) 320 m, 67 f race n/s Non-autistic sample (<i>n</i> = 23,919) 12,127 m, 11,792 f Aged 10 years							
Fisher et al. (2019) Autism & Developmental Disabilities Monitoring Network (ADDM) USA		Children confirmed as autistic by clinical review	Tennessee Department of Children's Services (TNDCS) records (2006-2016) Initial referrals to child abuse hotline, cases that resulted in further action, & substantiated maltreatment cases	Prevalence Child maltreatment (likelihood of maltreatment, being screened for further action, & substantiated maltreatment)	Child Maltreatment For autistic group: 17.4% referrals, 10.6% further action, & 3.9% substantiated maltreatment Gender. Proportion of autistic females (13.6%) with substantiated maltreatment was larger than autistic males (1.9%; <i>d</i> = 1.15)	Substantiated maltreatment (<i>d</i> = 1.15)	Good quality (60%): Data collection only examined children aged 10 years & results only represent a portion of children's experience of maltreatment in child protective services. Further, child protection records contained limited information, potentially oversimplifying autism status itself as risk factor, & preventing further exploration of contextual factors relating to abuse.	Study included
Greenlee et al. (2020) USA	<i>N</i> = 105 (no ID) Self- & parent report 55 m, 50 f, 87 White, 2 Black, 2 Native American, 6	Parents reported child autism diagnosis from qualified medical professional	Demographics questionnaire <i>Peer Experience Questionnaire-Revised (PEQ-R)</i>	Prevalence Instance of traditional bullying	Peer Victimization Gender. 88% of autistic females & 70.9% of autistic experienced bullying at least once, but difference not significant (<i>d</i> = 0.16) Autistic females less likely to experience physical victimization than autistic males (<i>d</i> = -0.91)	Traditional bullying (<i>d</i> = 0.16)	Good quality (60%): Convenience sampling method relevant to address research questions, but majority of sample were white and without ID, limiting generalisability. Further, it's unclear whether the <i>PEQ-R</i> is an accurate	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Guan et al. (2021) USA	mixed-race, 8 Other ($M = 14.75$ years) $N = 52$ (ID n/s) News-media 47 m, 5 f Age range 2 to 20 years ($M = 10.4$ years, $SD = 5.3$)	Childs autism status obtained from news media	News reports of homicide incidents of autistic children in USA between 2000-2019	Prevalence Homicide incidents of autistic children, characteristics of victims/perpetrators & cause of death	No gender difference in relational victimization ($d = 0.24$) Homicide Victims. Majority of victims were male (90.4%) averaging 10 years Perpetrators. Majority of perpetrators were parents (64.5%): mothers/stepmothers (28.9%), & fathers/stepfathers (25%). 4.7% had mental illness	Study retained for narrative review only	representation of victimization among autistic adolescents. Good quality (60%): Cases obtained from news media may be susceptible to selection bias (e.g., deemed “newsworthy”). Further, data extracted from news media & may contain inaccuracies in reporting.	Study did not explore prevalence in relation to gender
Coorg & Tournay (2012) USA	$N = 12$ (11 no ID, 1 ID) News-media 11 m, 1 f ($M = 10.5$ years)	Participants in media reports reported to be diagnosed with autism, but unclear how autism was specified	Authors conducted an internet-based newspaper review of US newspaper reports between 1982-2010	Prevalence Filicide (i.e., child murder by parent) of autistic children, followed by suicide of parent	Homicide: Filicide-Suicide Victims. The majority of cases were autistic children (57.1%), primarily males (91.7%), averaging 10 years Co-occurrences: 2 epilepsy, 1 ADHD, 1 ID Perpetrator. Most common perpetrators were mothers (66.7%), followed by fathers (33.3%). 38% had mental illness. 55% of parents were single mothers (57%) & fathers (50%) Suicide. Suicide was completed in 55.5% of cases	Study retained for narrative review only	Good quality (60%): Results obtained from internet-based newspaper review & may underestimate true incidence of filicide cases. Data collection methods may include inaccuracies in news reporting. However, measures were appropriate given their logistical use in obtaining data for filicide-suicide cases, yet it is unclear if cases are representative of broader autism population	Study did not explore prevalence of filicide in relation to gender
Deniz & Toseeb (2022) UK	$N = 416$ (ID n/s) Self-report 324 m, 92 f 366 White, 50 Non-White ($M = 11.20$ years)	Participants reported receiving an early or late diagnosis of autism	<i>Sibling bullying questionnaire (SBQ)</i>	Prevalence Sibling bullying	Sibling Bullying Among all 258 autistic participants who were bullied at least once a week, 58% were victimized by siblings, 35% were victims only	Study retained for narrative review only	Good quality (60%): Sample was nationally-represented, but were primarily male, preventing a multi-group SEM. Study used single-item measure of sibling bullying & did not specify if measures have been validated for autistic use. Further, study did not control for other types of bullying and victimization, risking confounder bias	Study examined frequency of bullying involvement, not likelihood
Duan et al. (2015) China	$N = 180$ (ID n/s) Parent-report	Diagnosed by qualified professional	Novel, self-administered, questionnaire measuring child	Prevalence Physical maltreatment in autistic	Childhood Physical Maltreatment Past 3 Months. At least one form of CPM (88%), at least one minor CPM (86%), & at least one severe CPM	CPM ($d = 0.20$)	Good quality (60%): non-probability sampling appropriate, but may limit generalisability. The	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Ferrigno et al. (2022) Italy	138 m, 42 f Age range 2 to 5 years ($M = 40.3$ months, $SD = 10.4$ months)	using <i>DSM-IV</i> criteria <i>Childhood Autism Rating (CARS)</i>	physical maltreatment (CPM) <i>CARS</i>	children aged 2-5	(35%) Gender. No gender differences in minor ($d = 0.21$) & severe CPM ($d = 0.18$), overall CPM than no- CPM ($d = 0.20$), or CPM severity		questionnaire was novel, but reliability was assessed as good via intra-class correlation. However, reliance on parent- report may have resulted in CPM being under-reported.	
	$N = 464$ (ID n/s) Self-report 361 m, 103 f race n/s Age range 18- 50 ($M = 29.93$ years, $SD = 6.83$)	All participants formally diagnosed with autism	The <i>Multistep Network Model</i> diagnostic and evaluation assessment	Prevalence Bullying	Bullying 30% of autistic experienced bullying Gender. No gender differences in being bullied ($d = 0.05$)	Bullying ($d = 0.05$)	Good quality (60%): Study did not specify level of autism needs or race among participants. Study solely relied on self-report and did not verify victimization through psychometric instruments.	Study included
Haruvi-Lamdan et al. (2020) Israel	$N = 50$ Self-report Autistic sample ($n = 25$; no ID) 15 m, 10 f, ($M = 22.9$ years, $SD = 3.7$) Non-autistic sample ($n = 25$) 15 m, 10 females ($M = 22.8$ years, $SD = 3.4$)	Autistic participants formally diagnosed with autism by qualified clinician	<i>LEC-5</i> <i>PCL-5</i> <i>AQ</i>	Prevalence Traumatic events & negative social experiences (e.g., bullying, relational victimization)	Traumatic Events Autism Status. Autistic adults experienced more potentially traumatic events overall ($d = 1.00$), & negative social events ($d = 1.50$) than non-autistic adults No diagnostic group difference was found in exposure to DSM-5 traumatic events Gender. Autistic females had more negative social events than autistic males ($d = 2.19$) No gender differences in exposure to DSM-5 traumatic events ($d = 0.89$)	Negative interpersonal interactions ($d = 2.19$)	Good quality (60%): Non- probability sampling appropriate to address research questions, but as sample only consisted of those without ID, findings not generalisable. Further, it is unclear whether the <i>PCL-5</i> was appropriate measure as it has not been validated for autistic use.	Study included
Hsaio et al. (2022) Taiwan	$N = 353$ (ID n/s) Parent-report Autistic sample ($n = 121$) 107 m, 14 f race n/s Non-autistic sample ($n = 232$)	Youth diagnosed by psychiatrists using <i>DSM-IV</i> criteria, Autism was qualified via <i>ADI-R</i>	<i>ADI-R</i> <i>SRS</i> <i>CBCL</i> the Chinese version of the <i>Social Adjustment Inventory for Children and Adolescents (SAICA)</i>	Prevalence Bullying	Prevalence Autistic participants more likely to be bullied than non-autistic participants (69% vs. 17%; $d = 1.55$)	Study retained for narrative review only	Good quality (60%): Sample recruited from psychiatric clinic and were predominantly male, limiting generalisability. Study only conducted one follow-up assessment, preventing interpretation of victimization trajectory. Use of single-item measure of victimization raises concerns of reliability &	Study did not examine prevalence of bullying in relation to gender

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Joyal et al. (2021) Canada	188 m, 44 f race n/s ($M = 11.8$ years) $N = 172$ (no ID) Self-report Autistic sample ($n = 68$) 41 m, 27 f 68 White ($M = 19$ years) Non-autistic sample ($n = 104$) 29 m, 75 f 104 White ($M = 18.5$ years)	Autistic participants formally diagnosed with autism using <i>DSM-IV-TR</i> criteria	An adapted version of the <i>SBS-III</i>	Prevalence Negative sexual experiences	Negative Sexual Experiences No difference in sexual victimization between autistic & non-autistic groups (37.1% vs. 26.9%; $d = .026$) Gender. Autistic females more likely to experience sexual violence than autistic males ($d = 1.13$)	Sexual violence ($d = 1.13$)	measurement error, preventing examination of bullying types Good quality (60%): Participants were those without ID and findings not generalisable. Study used valid and reliable measure of sexual victimization. However, division of diagnostic groups by gender significantly lowered statistical power.	Study included
Juntilla et al. (2023) Finland	$N = 4408$ (no ID) Parent- & teacher-report Autistic sample ($n = 28$) 17 m, 11 f race n/s Non-autistic sample ($n = 4,380$) 2,154 m, 2,226 f race n/s Age range 7-8 ($M = 8.3$ years)	Autistic participants formally diagnosed with autism using <i>DSM-IV</i> criteria Autism confirmed via <i>ADOS</i> & <i>ADI-R</i>	<i>ADI-R</i> <i>ADOS</i> 14-item parental questionnaire	Prevalence Bullying	Bullying Parent- & Teacher-Report. Autistic group had higher rates of bullying than non-autistic group (46% vs. 2%) Parents reported higher rates of bullying for autistic (69%) & non-autistic children (9.25%) than teachers (54% vs. 3.8%)	Study retained for narrative review only	Good quality (60%): Sample comprised small number of autistic participants without ID, limiting generalisability & raising concerns for reduced statistical power. Item measuring bullying did not include definition & have been interpreted as relating to current bullying, risking limited measurement of bullying prevalence	Study did not examine prevalence of bullying in relation to gender
Kildahl & Helverschou (2023) Norway	$N = 88$ (88 ID) Parent- & clinician-report 62 m, 26 f race n/s age range 15-68 years	Participants were assessed for & diagnosed with autism using ICD-10 criteria	Interdisciplinary assessment based on protocol used in the Autism, Intellectual Disabilities,	Prevalence Violence (i.e., severe institutional abuse, caregiver, or domestic	Interpersonal Violence 34.1% experienced violence, 17% experienced sexual violence, & 6.8% experienced violence & sexual violence (6.8%). Gender. Violence: 37.1% males, 26.9% females, with no gender	Overall violence (including sexual violence) ($d = 0.52$) Sexual violence ($d = 0.12$)	Good quality (60%): Study recruited clinical sample with co-occurring mental health conditions & ID, limiting generalisability. Further, study examined limited forms of violence, preventing	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
	($M = 27.58$ years, $SD = 10.82$)	prior to inclusion	Mental Illness (AUP) study	abuse, & random assaults) & sexual violence	difference ($d = -0.26$) Sexual violence: 16.1% males, 19.2% females, with no gender difference ($d = 0.12$) Overall violence (including sexual violence): 4.8% males, 11.5% females, with no gender difference ($d = 0.52$)		examination of physical or psychological victimization	
Lu et al. (2022) Taiwan	$N = 184$ (no ID) Self- & teacher-report 184 Asian 167 m, 17 f Age range 12 to 13 years	Data obtained from Special Needs Education Longitudinal Study (SNELS) database or records held by Special Education Needs Committees of local governments	Online questionnaires assessing student characteristics, types of victimization, & school environment characteristics	Prevalence Prevalence of & gender differences in bullying (insults or teasing, extortion, sexual harassment)	Bullying Gender. No gender differences in insults or teasing ($d = 0.01$), extortion ($d = -0.07$), & social exclusion ($d = -0.37$) Autistic females were less likely to be sexually harassed than autistic males ($d = -0.32$)	Study retained for narrative review only	Good quality (60%): Relevant sampling strategy for research questions, but participants included those without ID, limiting generalisability of findings. Further, the small number of female participants may not have provided sufficient power to examine gender differences.	Study had incompatible design (cohort study)
Mandell et al. (2005) USA	$N = 182$ (ID n/s) Parent-report 108 m, 48 f 110 White ($M = 11.6$ years, $SD = 3.8$)	Autism diagnosis as received by qualified clinician using <i>DSM-IV</i>	Structured interviews with parents	Prevalence Childhood abuse (physical & sexual) in community-based mental health settings between 1997 to 2000	Childhood Abuse Overall abuse (30.8%), physical abuse only (14.1%), sexual abuse only (12.2%), & physical & sexual abuse (4.4%)	Study retained for narrative review only	Good quality (60%): Participants were recruited from comprehensive community mental health services, limiting generalisability. Reliance on parent-report may have resulted in recall bias & potential stigma may have influenced responses.	Study had incompatible design (cohort study)
Miller et al. (2022) USA	$N = 3,902$ (3,408 no ID, 854 ID) Self- & parent report 2973 m, 870 f, 59 other 3067 White, 835 Non-White Age range 12-25+ years	Participants received formal autism diagnosis	Demographics, clinical information, & service needs survey Open-ended questionnaire on CJS experiences conducted via mail, online, or phone.	Prevalence Prevalence of & gender differences in experiencing a violent crime	Victims of Violent Crime Among 839 participants included in qualitative synthesis, 25% were victims of crime: assault/abuse (25%), sexual violence (25%), property stolen/damaged (21%), bullied (12%), & witnessing a crime (1.5%) Gender. Females more likely than autistic males to experience violent crime ($d = 0.21$)	Violent Crime Females vs. males ($d = .21$) Other vs. females ($d = .73$) Other vs. males ($d = .95$)	Good quality (60%): Rationale for mixed-methods approach not clearly defined. Qualitative approach included single item on questionnaire, potentially resulting in misinterpretation & preventing follow-up questions. It is unclear whether this approach is adequate to address research questions. Participants were primarily white, limiting	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Montenegro et al. (2022) Argentina Brazil Chile Domenican Republic Uruguay Venezuela	<i>N</i> = 2,484 Parent-report 2,076 m, 408 f Pre-school age (<i>n</i> = 867) elementary age (<i>n</i> = 1089), adolescents (<i>n</i> = 264), adults (<i>n</i> = 264) Race n/s	Parent reported child received formal diagnosis of autism	<i>Caregiver Needs Survey</i> developed by Daniels et al. (2017)	Prevalence Experiences of & gender differences in discrimination	Gender minorities more likely to experience violent crime than males (<i>d</i> = 0.95) and females (<i>d</i> = 0.73) Discrimination 34% of the sample experienced discrimination in the past 12 months Gender. No gender differences in discrimination in past year (<i>d</i> = 0.05)	Discrimination (<i>d</i> = 0.05)	generalisability. Lower parent inclusion rate raises concerns for non-response bias. Good quality (60%): Study acknowledged convenience sampling method. Parents primarily from higher educational backgrounds, limiting generalisability. Survey did not examine parents knowledge & acceptance of autism, which may influence perceptions of stigma.	Study included
Pearson et al. (2022) Online (N/S)	<i>N</i> = 43 (ID n/s) Self-report 13 m, 27 f, 2 non-binary, 1 genderqueer Participants were adults (age n/s)	36 formally diagnosed, 7 self-identified as autistic	Open-ended survey	Prevalence Type & experience of interpersonal violence	Interpersonal Violence Most participants experienced repeated or sustained victimization across lifetime; teenage years particularly vulnerable for bullying Most common forms of violence were intimate partner violence & family violence, followed by peer & colleague victimization	Study retained for narrative review only	Good quality (60%): Qualitative data collection included 2-items from qualitative questionnaire, risking misinterpretation & prohibiting follow-up questions. It is unclear whether data collection allowed to adequately address the research question.	Qualitative study
Schrooten et al. (2018) Netherlands	<i>N</i> = 1003 Peer-report Autistic sample (<i>n</i> = 260, no ID) 224 m 36 f (<i>M</i> = 13.8 years, <i>SD</i> = 1.42) Non-autistic sample (<i>n</i> = 743) 380 m, 363 f (<i>M</i> = 13.4 years, <i>SD</i> = 1.24)	Autism diagnosis obtained by qualified medical professional	<i>Participant Roles Questionnaire</i> , short version. Sociometric data collection assessed social status	Prevalence Participant roles in bullying (bully, assistant, follower, defender, outsider, victim)	Bullying Gender. No gender differences in bullying in autistic group (<i>d</i> = 0.04)	Traditional bullying (<i>d</i> = 0.04)	Good quality (60%): No ID in sample & small proportion of autistic females compared to autistic males limited generalisability of findings. Reliance on peer-report may not accurately measure autistic victimization experiences.	Study included
Triantafyllopoulou et al. (2022)	<i>N</i> = 78 (no ID) Self-report 29 m, 43 f	All participants received	Adapted version of the <i>Facebook</i>	Prevalence Prevalence of & gender	Cyberbullying 31% experienced cyberbullying in the past 2-3 months	Cyberbullying (<i>d</i> = 0.49)	Good quality (60%): Sampling strategy not clearly described. Participants who had	Study included

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Online (N/S)	62 White, 16 Non-White Age range 18 to 59 years ($M = 29.3$ years)	formal diagnosis of autism	<i>Intensity Scale (FIS)</i> <i>European Cyber-bullying Intervention Project Questionnaire (ECIPQ)</i>	differences in cyberbullying	Gender. Autistic females more likely to experience cyberbullying than autistic males ($d = 0.49$)		experienced cyberbullying may have been more likely to respond to study, potentially overestimating victimization experiences. The small number of participants may limit generalisability of findings.	
Zablotsky et al. (2013) IAN USA	$N = 1221$ (ID n/s) Parent-report 1001 m, 220 f 1087 White, 134 Non-White Age range 6 to 15 years ($M = 10.6$ years, $SD = 2.9$)	Autism diagnosis obtained by qualified medical professional	Adapted version of the <i>Bullying and School Experiences of Children with ASD Survey (BSE)</i>	Prevalence Bullying behavior's (victim, perpetrator, bully-victim)	Bullying 38% Past month, 28% frequently bullied in past month Gender. No gender differences in being bullied ($d = 0.12$)	Bullying victim ($d = 0.12$)	Good quality (60%): Recruitment strategy may have resulted in parents more inclined to participate in study if their child was bullied. Study used valid & reliable measures, but reliance on parent-report may have underestimated rate of bullying. Higher proportion of white male participants who attended public school limits generalisability.	Study used same sample as Adams et al., 2020 & Zablotsky et al., 2014, but had a smaller sample size than Zablotsky et al., 2014
Zablotsky et al. (2014) IAN USA	$N = 1221$ (285 no ID, 891 ID) Parent-report 970 m, 206 f 1051 White, 125 Non-White ($M = 10.6$ years, $SD = 2.9$)	Autism diagnosis obtained by qualified medical professional	Adapted version of the <i>BSE</i> 16 items derived from <i>SCQ</i>	Prevalence Bullying behaviors (victim, bully, bully-victim).	Bullying 63% had been victimized in lifetime, 28% were bullied in past month Gender. No gender differences in being bullied ($d = 0.16$)	Bullying victims ($d = 0.16$)	Good quality (60%): Parents whose children were bullied may have been more inclined to participate in the study. Used of reliable & validated measures, but reliance on parent report may have underestimated victimization. Sample primarily white males attending public school, limiting generalisability	Study used same sample as Adams et al., 2020 & Zablotsky et al., 2013, but was included due to having largest sample
Adams et al. (2016) IAN USA	$N = 432$ (ID n/s) Parent-report 368 m, 64 f 394 White, 402 non-White/Hispanic 406 attended public school ($M = 12.9$ years, $SD = 1.9$)	Each adolescent underwent autism assessment at specialty clinic or Paediatric hospital	Modified version of the <i>Schwartz Peer Victimization Scale</i>	Prevalence Traditional bullying (verbal, physical, ignored, & being provoked)	Peer Victimization Verbal (43.1%), physical (17.4%), ignored (30.6%), & provoked (63.5%)	Study retained for narrative review only	Low quality (40%): Sampling strategy not clearly defined (secondary data) & may have included participants more likely to have peer difficulties. Sample was also primarily white males from higher SES households, limiting generalisability.	Study did not explore prevalence of bullying in relation to gender

Study and Country	Participant details		Measures/ instruments used	Variables examined	Outcomes/findings	Effect size	Summary of MMAT quality appraisal	Reasons for exclusion from meta-analysis
	Sample size description	Diagnostic criteria						
Davis et al. (2022) USA	<i>N</i> = 62 (ID n/s) Self-report Autistic sample (<i>n</i> = 32) gender n/s 32 Black (<i>M</i> = 24 years, <i>SD</i> = 3.35) Non-autistic sample (<i>n</i> = 30) gender n/s 30 Black (<i>M</i> = 23 years, <i>SD</i> = 2.11)	Autistic participants received formal diagnosis of autism	<i>Understanding Discrimination Scale (UDS)</i> <i>Everyday Discrimination Scale (EDS)</i> <i>PSS</i> <i>Multidimensional inventory of Black identity (MIBI)</i> <i>Arc's (ARC)</i> Self-Determination—Psychological Empowerment Scale	Prevalence Discrimination	Discrimination Autism Status. Black autistic group less likely to report discrimination than black non-autistic group (<i>d</i> = 0.54) Autistic Group. Reported reasons for overall discrimination: 48% being black, 30% being autistic & black, 19% being autistic, 3% being black, autistic, & male/female Reasons for being threatened & harassed: 34% being black, 12% being black & autistic, 44% being autistic, 10% being black & male/female Non-Autistic Group. Reasons for overall discrimination: 86% being black Reasons for being threatened & harassed: 90% being black	Study retained for narrative review only	Low quality (40%): Sample were primarily without ID, limiting generalisability. Study used appropriate statistical analysis; however, small sample raised concerns of reduced statistical power. Study did not measure whether intersectional terms were properly understood	Study did examine gender differences in discrimination
Hwang et al. (2020) Australia	<i>N</i> = 416,441 Police records Autistic Events (<i>n</i> = 1602, 283 no ID, 38 ID) Unique victims (<i>n</i> = 314) 182 m, 132 f (<i>M</i> = 29.8 years) Race n/s Non-Autistic Events (<i>n</i> = 414,840) (<i>M</i> = 40.25 years)	Dataset obtained via police-recorded cases pertaining to autism	Text mining of domestic violence incidents using a family open-source text analysis tools & processes	Prevalence Domestic violence events and gender differences in prevalence	Domestic Violence Of all DV events involving autistic individuals (<i>n</i> = 1601), 23.7% were victims only Higher proportion of autistic people experienced more than one DV event than non-autistic people (42% vs. 34%) Gender. Autistic females less likely to be victims of domestic violence than autistic males (42% vs. 58%; <i>d</i> = -0.36)	Study retained for narrative review only	Low quality (40%): Data relies on reporting practices of police & those present at event & may be subject to inaccuracies. Cases also only represent those in which autism was disclosed & may not generalise to broader autism population. Missing data was apparent for most variables in dataset raising concerns for non-response bias.	Data included in study were not comparable for meta-analysis, relative to other included studies
Matthias et al. (2021) USA	<i>N</i> = 9500 Self- & parent report Autistic sample (<i>n</i> = 1000, ID n/s)	Not specified	Demographics, communication skills, & social ability survey Self-reported survey that assessed self-	Prevalence Gender differences in bullying	Bullying Gender. No gender differences in bullying in autistic group (<i>d</i> = 0.10)	Study retained for narrative review only	Low quality (40%): Longitudinal cohort was relevant to address research questions & included nationally representative sample. However, lack of teacher-report may result in inaccuracies in rate of bullying reported. High	Study had incompatible design (cohort study)

Table 3*Study Quality Assessment Using the Mixed-Methods Appraisal Tool (MMAT)**

Study	S1	S2	1.1	1.2	1.3	1.4	1.5	4.1	4.2	4.3	4.4	4.5	5.1	5.2	5.3	5.4	5.5
			Qualitative					Quantitative descriptive					Mixed-methods				
Adams et al. (2016)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Unclear	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Adams et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	No	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Andrzejewski et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Andrzejewski et al. (2023)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Ball & Zhu (2023)	Yes	Unclear	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Barnett (2007)	No	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Bemmouna et al. (2023)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Unclear	n/a	n/a	n/a	n/a	n/a
Brenner et al. (2018)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	No	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Brown-Lavoie et al. (2014)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Cappadocia et al. (2012)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Chiu et al. (2018)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Chou et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Coorg & Tournay (2012)	Yes	Unclear	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Yes	Unclear	Yes	n/a	n/a	n/a	n/a	n/a
Davis et al. (2022)	Yes	Unclear	n/a	n/a	n/a	n/a	n/a	Unclear	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Deniz & Toseeb (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Unclear	Yes	n/a	n/a	n/a	n/a	n/a
Douglas & Sedgewick (202)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Duan et al. (2015)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Ferrigno et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Fink et al. (2018)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Unclear	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a

Table 3 Continued

Study	S1	S2	1.1	1.2	1.3	1.4	1.5	4.1	4.2	4.3	4.4	4.5	5.1	5.2	5.3	5.4	5.5
			Qualitative					Quantitative descriptive					Mixed-methods				
Fisher & Taylor (2016)	Yes	Yes	Yes	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Fisher et al. (2013)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Fisher et al. (2019)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Gibbs et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Gibbs et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Gibbs et al. (2023)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Graham Holmes et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Greenlee et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Guan et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Yes	Unclear	Yes	n/a	n/a	n/a	n/a	n/a
Haruvi-Lamdan et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Hebron et al. (2015)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Holden et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Hsaio et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Hu et al. (2019)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Hwang et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	No	No	Yes	n/a	n/a	n/a	n/a	n/a
Joyal et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Unclear	n/a	n/a	n/a	n/a	n/a
Junttila et al. (2023)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Kidahl & Helverschou (2023)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Lin et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Liu et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a

Table 3 *Continued*

Study	S1	S2	1.1	1.2	1.3	1.4	1.5	4.1	4.2	4.3	4.4	4.5	5.1	5.2	5.3	5.4	5.5
			Qualitative					Quantitative descriptive					Mixed-methods				
Liu et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Lu et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Unclear	n/a	n/a	n/a	n/a	n/a
Mandell et al. (2005)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Marion et al. (2023)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Unclear	No	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Matthias et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	No	Unclear	n/a	n/a	n/a	n/a	n/a
McClemont et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
McDonnell et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	No	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Miller et al. (2022)	Yes	Yes	Unclear	Unclear	Yes	Yes	Yes	Yes	No	Yes	Unclear	Yes	No	Yes	Yes	Yes	Yes
Montenegro et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Pearson et al. (2022)	Yes	Yes	Unclear	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Pearson et al. (2023)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Pecora et al. (2019)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Pfeffer (2016)	Yes	Yes	Yes	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Reuben et al. (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Schrooten et al. (2018)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Sedgewick et al. (2019)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Sterzing et al. (2012)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Toseeb et al. (2018)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Toseeb et al. (2020)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Unclear	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Triantafyllopoulou et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Unclear	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a

Table 3 Continued

Study	S1	S2	1.1	1.2	1.3	1.4	1.5	4.1	4.2	4.3	4.4	4.5	5.1	5.2	5.3	5.4	5.5
			Qualitative					Quantitative descriptive					Mixed-methods				
Warrier & Baron-Cohen (2021)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Yoshikawa et al. (2022)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Zablotsky et al. (2013)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Unclear	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Zablotsky et al. (2014)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Unclear	Unclear	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a
Zeedyk et al. (2014)	Yes	Yes	n/a	n/a	n/a	n/a	n/a	Yes	No	Yes	Yes	Yes	n/a	n/a	n/a	n/a	n/a

*Headings taken from the MMAT:

“Screening Questions (For All Types)

S1. Are there clear research questions?

S2. Do the collected data allow to address the research question?

1. Qualitative

1.1. Is the qualitative approach appropriate to answer the research question?

1.2. Are the qualitative data collection methods adequate to address the research question?

1.3. Are the findings adequately derived from the data?

1.4. Is the interpretation of results sufficiently substantiated by data?

1.5. Is there coherence between qualitative data sources, collection, analysis, and interpretation?

4. Quantitative Descriptive

4.1. Is the sampling strategy relevant to address the research question?

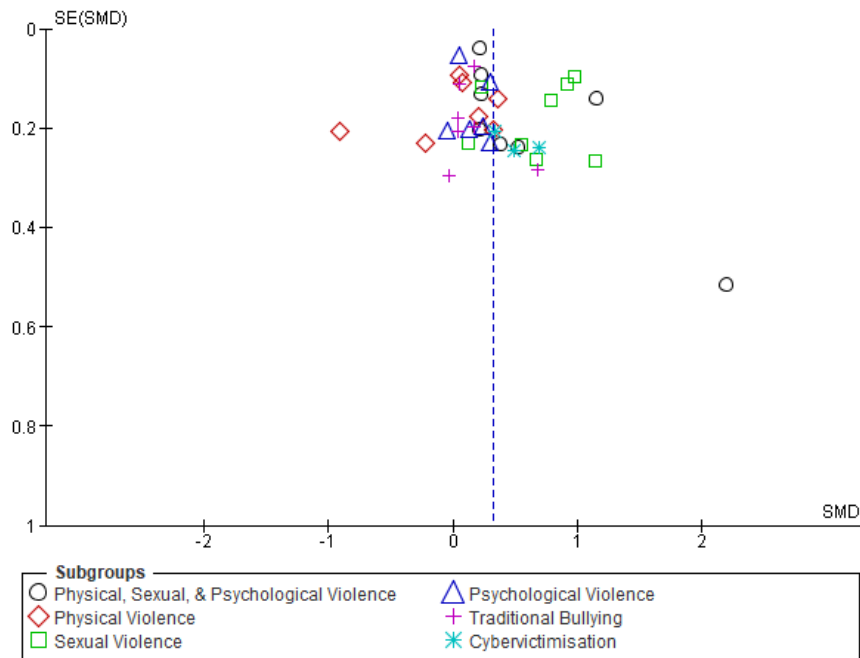
- 4.2. Is the sample representative of the target population?
- 4.3. Are the measurements appropriate?
- 4.4. Is the risk of nonresponse bias low?
- 4.5. Is the statistical analysis appropriate to answer the research question?

5. Mixed-Methods

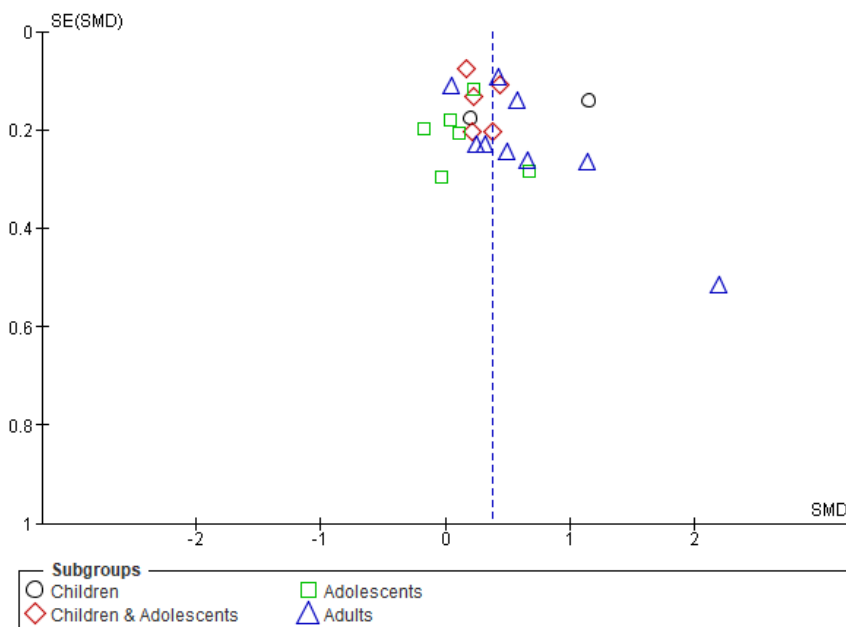
- 5.1. Is there an adequate rationale for using a mixed methods design to address the research question?
- 5.2. Are the different components of the study effectively integrated to answer the research question?
- 5.3. Are the outputs of the integration of qualitative and quantitative components adequately addressed?
- 5.4. Are divergences and inconsistencies between quantitative and qualitative results adequately addressed?
- 5.5. Do the different components of the study adhere to the quality criteria of each tradition of the methods involved?" (Hong et al., 2018)

Fig. 2

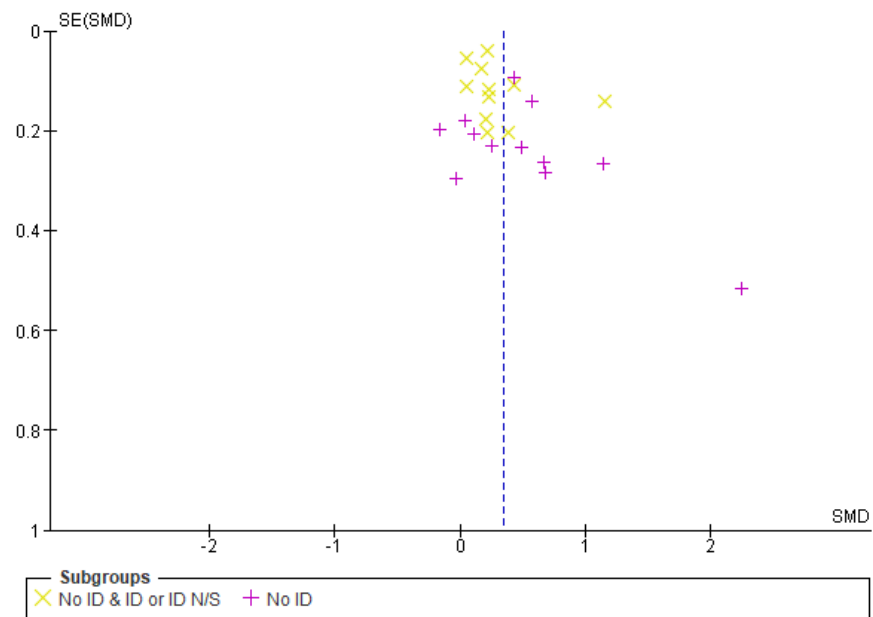
Heterogeneity for Interpersonal Violence by a) Violence Types, b) Age, c) Co-Occurring ID, d) Gender, e) Diagnosis Type, and f) Report Type



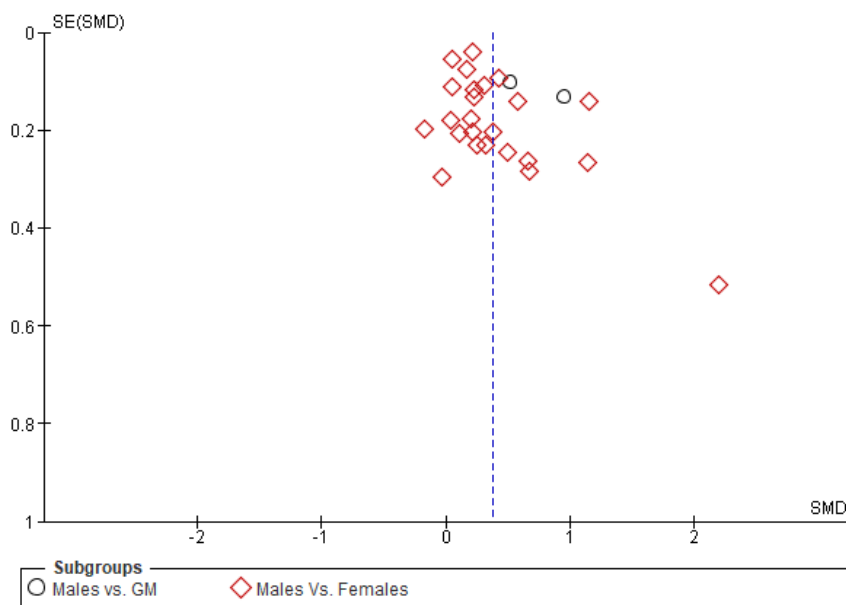
Note. This figure is a funnel plot of heterogeneity for interpersonal violence by violence types.



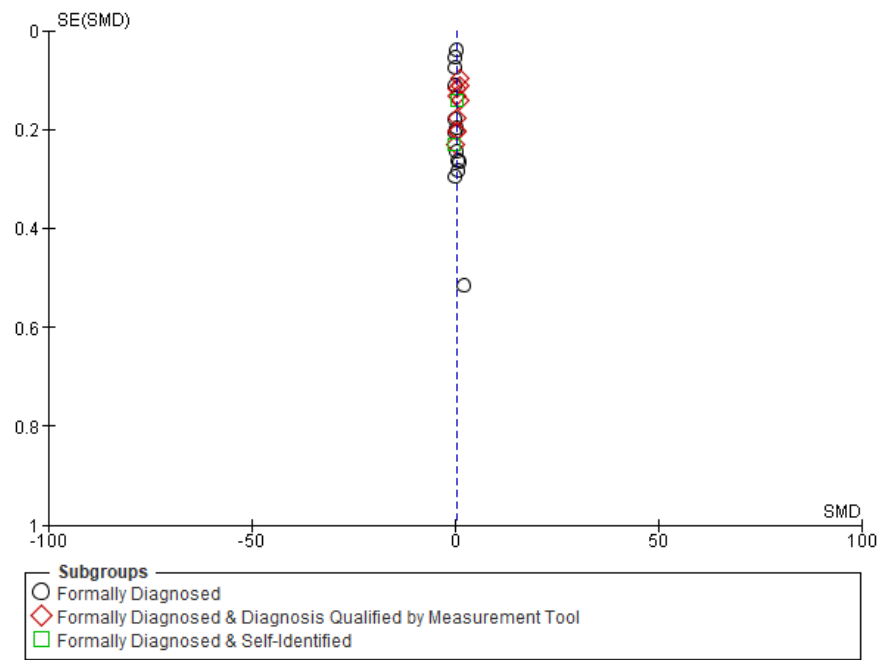
Note. This figure is a funnel plot of heterogeneity for interpersonal violence by age.



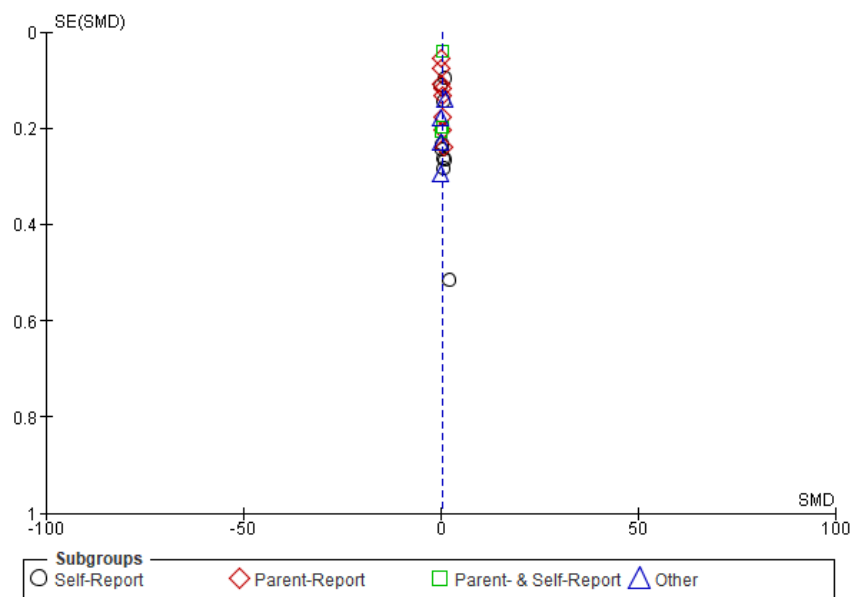
Note. This figure is a funnel plot of heterogeneity for interpersonal violence by co-occurring ID.



Note. This figure is a funnel plot of heterogeneity for interpersonal violence by gender groups.



Note. This figure is a funnel plot of heterogeneity for interpersonal violence by diagnostic type.



Note. This figure is a funnel plot of heterogeneity for interpersonal violence by report type.

Fig. 2a

Forest Plot of Gender Differences in Prevalence of Violence Types: Lifetime

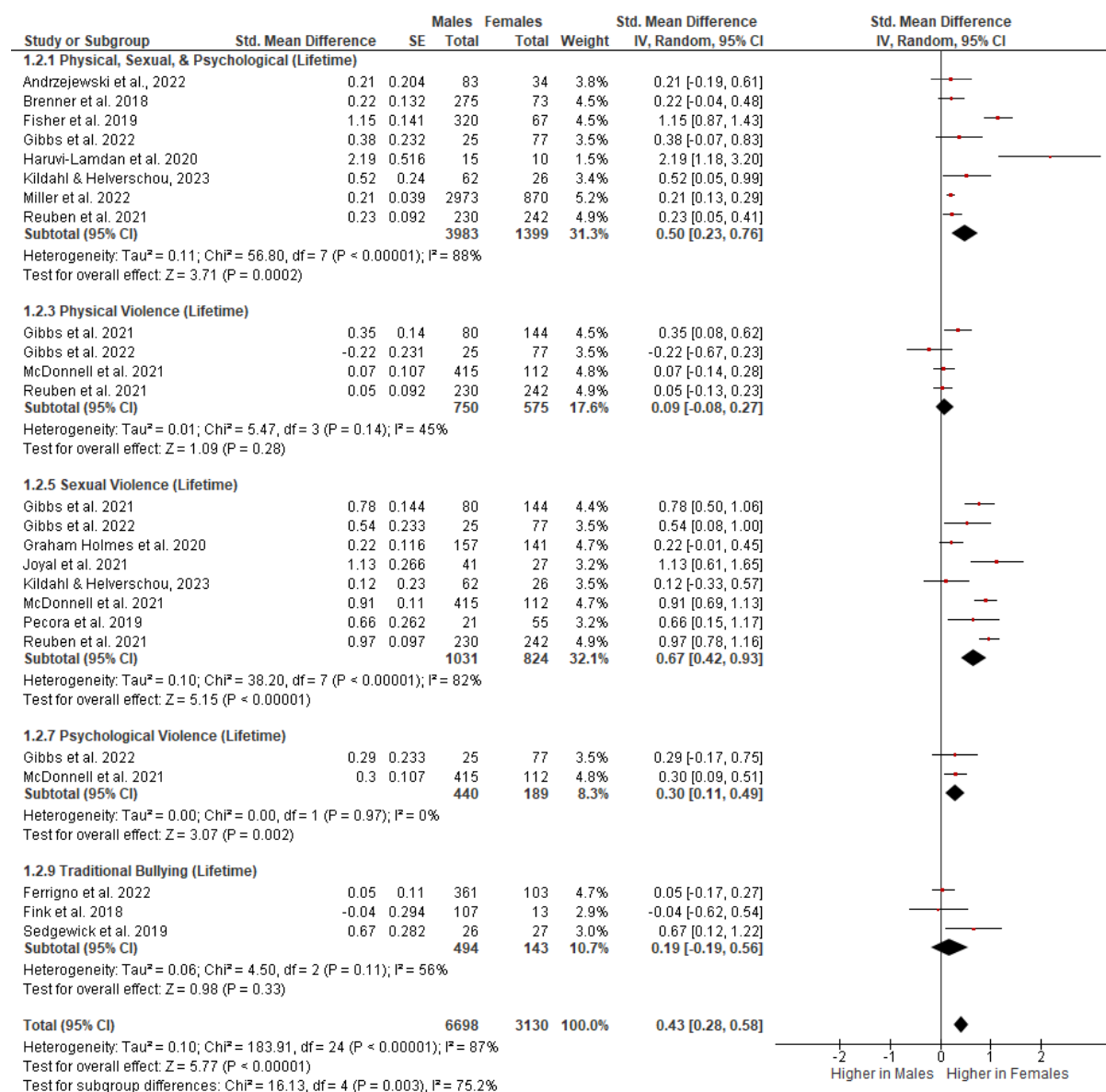


Fig. 2b

Forest Plot of Gender Differences in Prevalence of Violence Types: Past Year

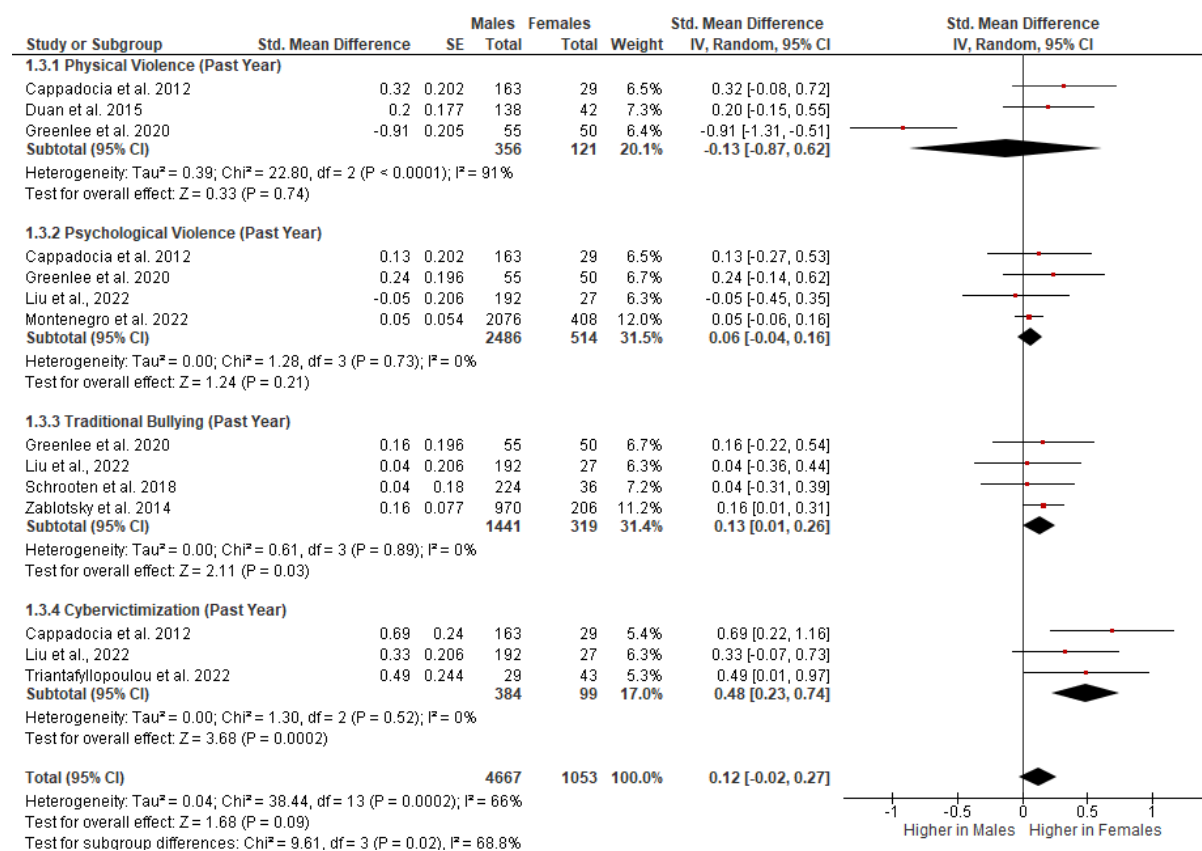


Fig. 3a

Forest Plot of Gender Differences in Violence Prevalence by Age

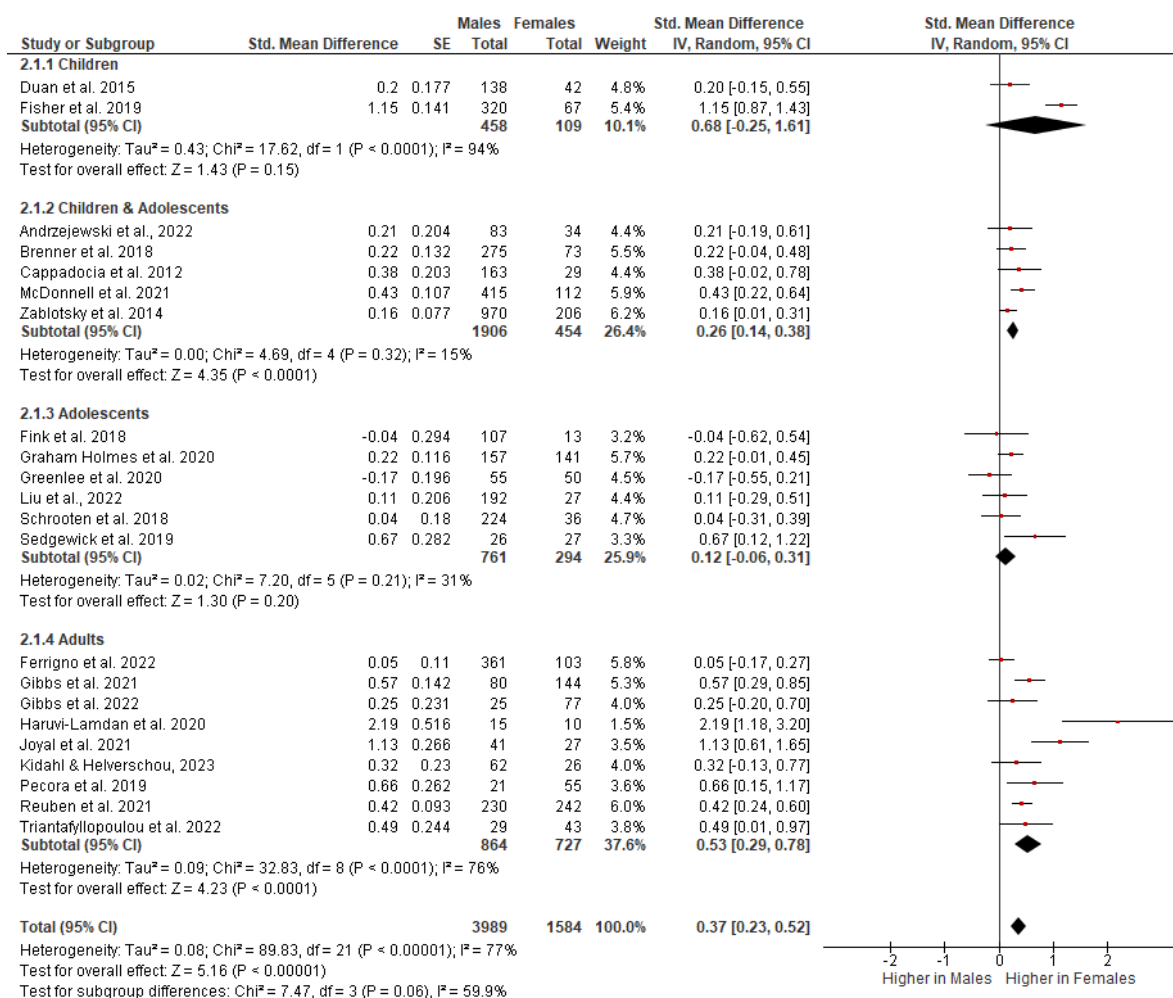


Fig. 3b

Forest Plot of Gender Differences in Violence Prevalence by Age: Lifetime and Past Year

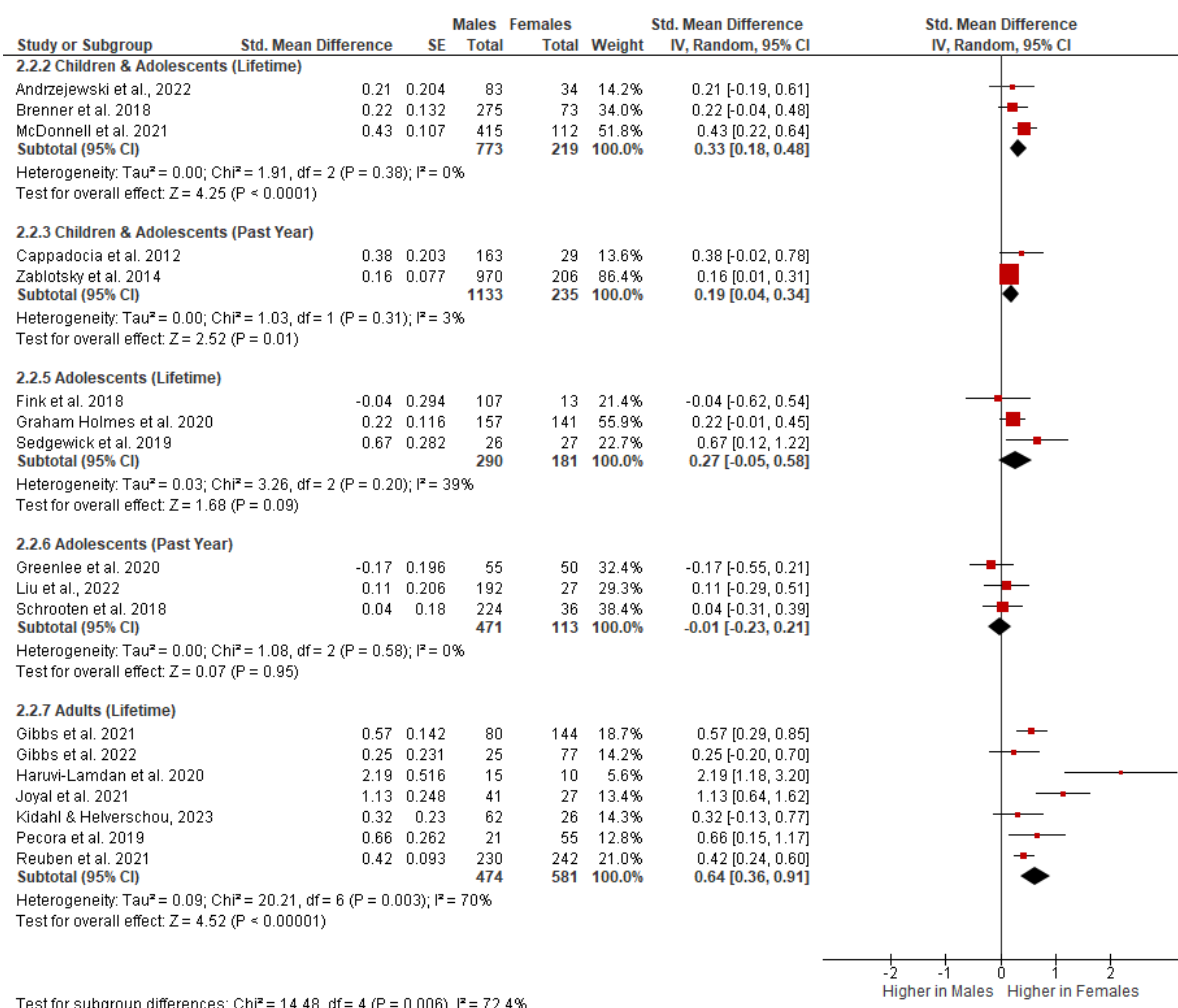


Fig. 3c

Forest Plot of Gender Differences in Violence Prevalence by Co-occurring ID

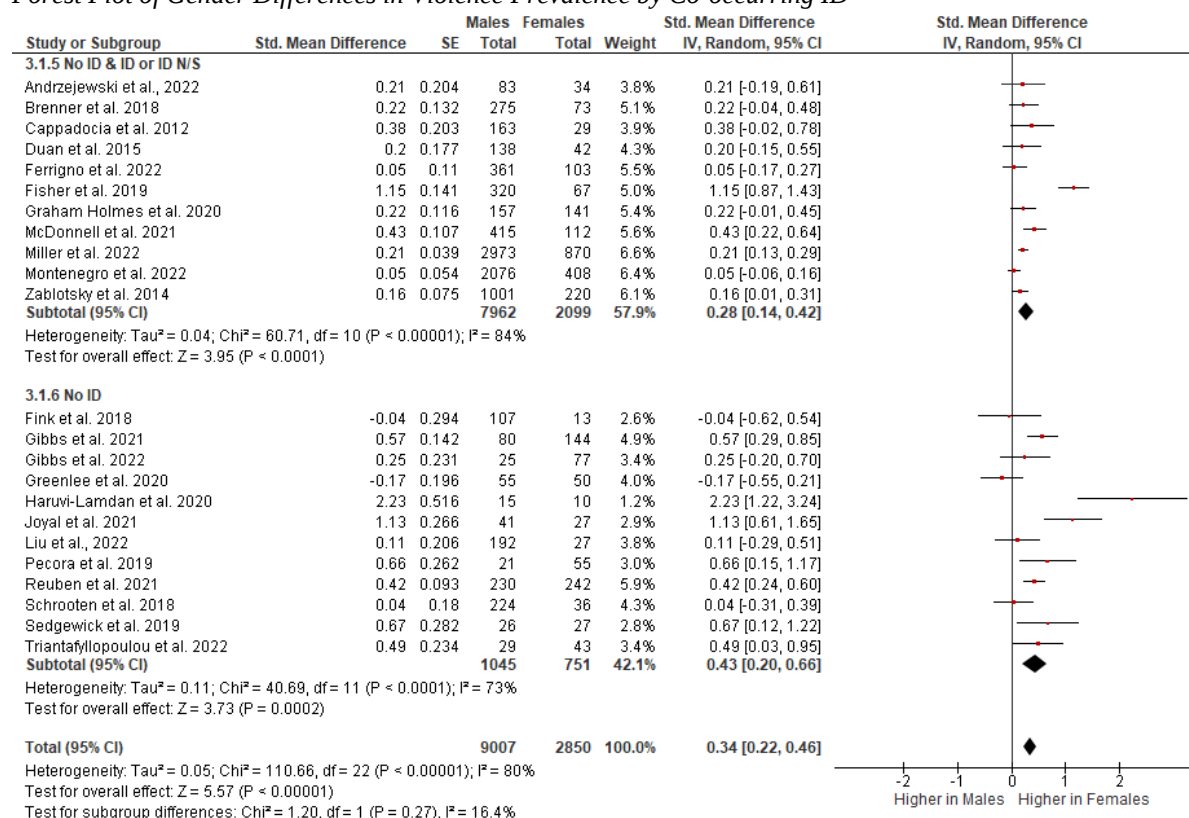
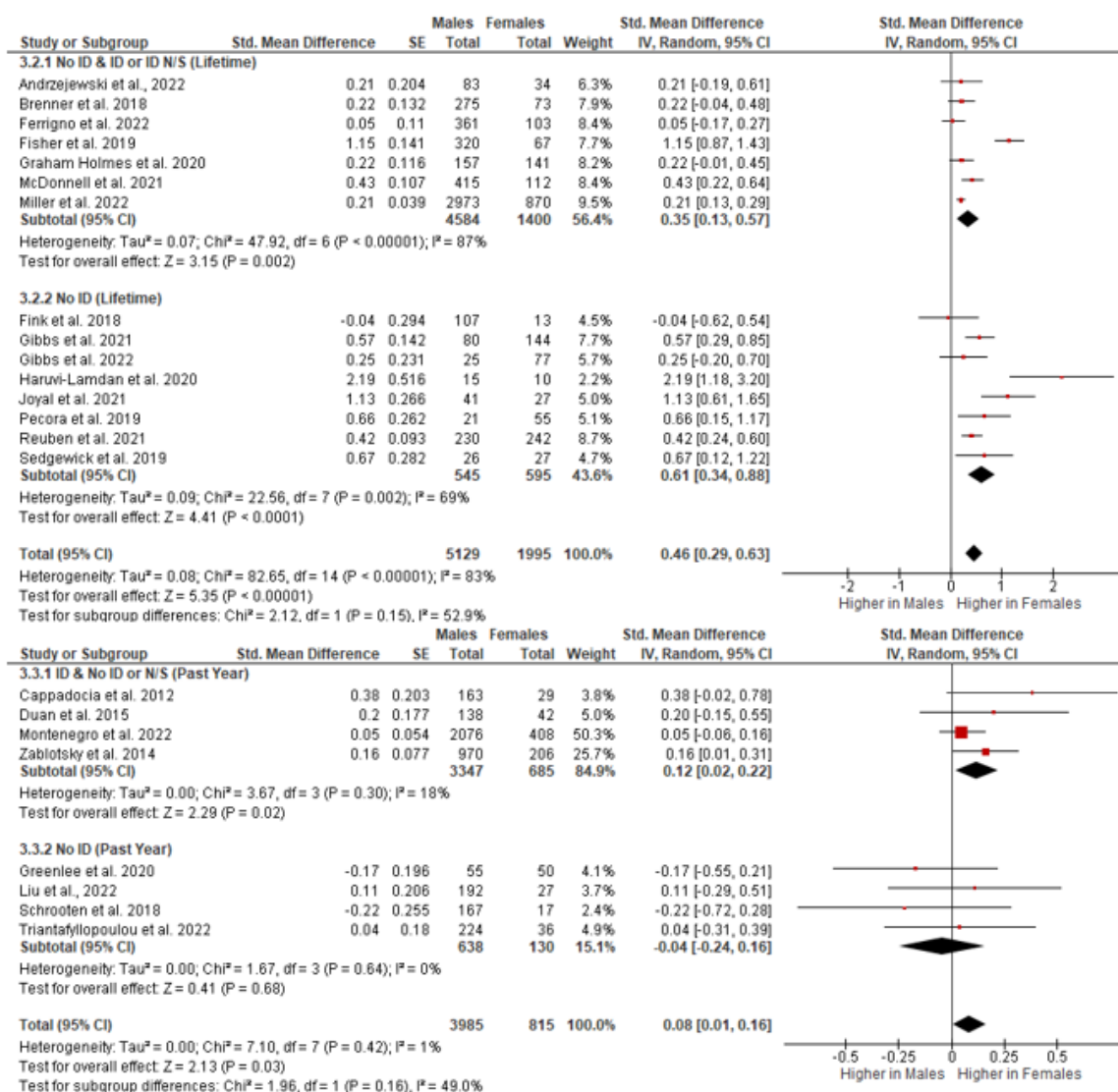


Fig. 3d

Forest Plot of Gender Differences in Violence Prevalence by Co-Occurring ID: Lifetime and Past Year



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