International Journal for Autism Challenges & Solution
Vol 2 Issue 2 (2025)
Pages (72 - 85)

Available at
www.emiratesscholar.com

Resilience Building Strategies in Autism Research: A Capabilities Resilience and Inclusion Model

John Mendy
Lincoln International Business School, University of Lincoln, Lincoln, UK
jmendy@lincoln.ac.uk

ARTICLE HISTORY

Received: 19 September 2025.
Accepted: 19 November 2025.
Published: 27 December 2025.

PEER - REVIEW STATEMENT:

This article was reviewed under a double-blind process by three independent reviewers.

HOW TO CITE

Mendy, J. (2025). Resilience Building Strategies in Autism Research: A Capabilities Resilience and Inclusion Model. *International Journal for Autism Challenges & Solution*, *2*(2), 72-85. https://doi.org/10.54878/kpqt2g98

ABSTRACT

The lack of inclusion and engagement of people with Autism Spectrum Disorder (ASD) in the workplace is a key resilience building and sustainability challenge. Despite current research advocating for a range of models and practical interventions such as Community-Based Participatory Research (CBPR), ecosystem, strengths-based and nanotechnological approaches, the resilience problem faced by people with autism continues. Additionally, while Autism Work Peer Support Group (AWPSG) programs may deliver local governments' cost-efficiencies and help in strategizing resource value maximization, the support strategies provided for people with autism remain inadequate. This resilience gap in autism research is addressed by drawing on twenty-four jobseekers and two Disability Employment Advisors' focus group data from one Department of Work and Pensions branch, UK. The results comprised of survey responses in which participants highlighted the benefits of making friends, developing increased confidence in their skills, being optimistic about finding and retaining employment. These were used to develop the study's key contribution: a practical model referred to as 'Capabilities Resilience and Inclusion Model' (CRIM). The model comprises a four-stage set of actions that provide

Keywords: *autism, resilience, inclusion, workplace, best practices model, community*

1. Introduction

The current world of employment is fraught with the problem of resilience faced by people with autism (Hamann et al., 2020). The research identifies a range of resilience problems faced by staff with autism range from discrimination to improper structural workplace adjustments and digitalization ((Yan, 2025; Tomczak & Ziemiański, 2023; Waisman-Nitzan et al., 2019). Additional resilience-related problems include how to adapt to remote work (Tomczak et al., 2022). The current approaches used in theorizing the resilience problem range from a Community-Based Participatory Research (CBPR - Suarez et al., 2020; Israel et al., 2019), or a strengths-based approach (Johnson, 2022; Wong et al., 2018) or an architectural and ecosystem approach (Vincent & Fabri, 2022; Nicholas et al., 2018; Mostafa, 2008). Despite such usages, the resilience problem of people with autism in the workplace has continued for decades (Pellicano et al., 2022; Nicolaidis et al., 2011). Further, a model that captures the theoretical and practical resilience capability needs of jobseekers with autism is lacking. This study addresses this problem and gap in the literature.

Therefore, the study asks the following questions:

RQ1. What resilience capabilities do individuals and institutions need to strategically and sustainably manage the resilience problem faced by people with autism?

RQ2. What model will be useful in drawing out the actions/capabilities needed to resolve the resilience problem?

The study contributes at multiple levels. It develops a Capabilities Resilience and Inclusion Model' (CRIM) to help redefine resilience from a trait-based, neoliberal concept to one that recognizes a collective responsibility. This contribution helps in highlighting a shift toward a more evolving collective agency-driven approach to the resilience problem resolution in Autism research. Second, the CRIM identifies 4 resilience and inclusion capabilities individuals and institutions' staff collectively and strategically need to address the resilience challenge. The capabilities are 1) open mindedness to change; 2) network synergy; 3) socio-cultural knowledge and 4) strategic training. Third, this CRIM serves as a useful mechanism that helps workplaces recognize challenges to resilience, inclusion and sustainability building efforts and identifies a set if actions needed.

2. Resilience

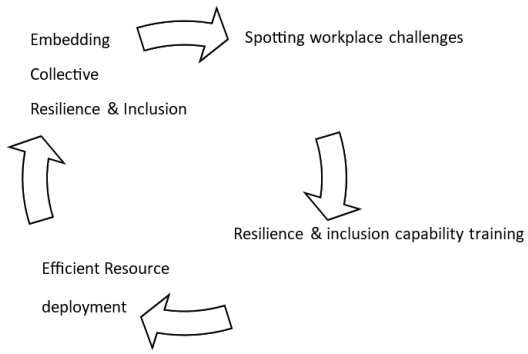
The concept of resilience is multifaceted. While some researchers perceive it as a dynamic process of positively adapting or 'bouncing back' from significant trauma, negativity or adversity (Bonanno, 2004; Luthar et al., 2000) recent calls for resilience capacity building have motivated this study (Szatmari 2019; Seville, 2018; Bardoel et al, 2014). However, the resilience actions needed are missing. Current models focus on responding to maladaptive employee behaviors, material and psycho-social resource use (Corazon et al., 2018; Seville, 2018; Yousef & Luthans, 2007). This study responds to this problem.

Capabilities Resilience and Inclusion Model Development

The afore analysis highlighting the resilience problem faced by people with autism led to the creation of this study's contribution: a Capabilities Resilience and Inclusion Model for Autism Employment. Additionally, two novel notions for Autism Research and Practice are introduced, namely 1) 'capabilities resilience embeddedness' (focusing on core actions required), and 2) 're-imagining employment adversity' (focusing on a shift from a technical resolution to a collective, action-oriented thinking to resolve the resilience problem). The model has 4 capabilities/actions: 1) spotting workplace challenges, 2) resilience capability training, 3) efficiently deploying human and non-human resources and 4) embedding collective resilience and inclusion capabilities (see Figure 1 below).

Figure 1

Capabilities Resilience and Inclusion Model



Contributions to Current Autism Research and Practice

The existing literature focuses on technicalities of AI usage to identify and diagnose ASD challenges. This includes the use of Nanotechnology and related techniques (Bhat et al., 2024; Afif, 2024; Al Hamieli & Habbal, 2024; Tomczak et al., 2021). This study contributes an alternative: an identification of the resilience problems of people with autism using interviews, one-to-one conversations and performance audits. While some studies highlight the use of videos to improve ASD social communication skills (Nooh & Nooh, 2025), this study's model adds resilience and inclusion capability training to do so. Clagg et al. (2021) proposed an ecosystem which centers on the application of learning to address systemic resilience issues faced by people with autism at work. This study's model's third contribution is efficient use of organizations' resources to build people with autism's resilience. The final aspect focuses on embedding resilience building within organizational systems, practices, policies and procedures to sustain the resilience of staff with autism.

However, the lack of attention on how to operationalize resilience and inclusion capabilities building, and in some instances the neoliberal individual employee fault, in addressing workplace challenges faced by ASD, including exclusion, inequality, and lack of voice has led to unsustainable organizations and the development of this first aspect of the model. This first aspect draws attention on the non-organizational structural and procedural aspects of resilience and inclusion building that have been neglected in previous and current research and practice.

Resilience and inclusion capability training is the model's second aspect. While the literature and research currently focus on empathy development for managers and carers and being innovative in social care delivery (Madden & Coffey, 2025; Ameis et al., 2020), it neglects the wider workforce population, including people with ASD, staff and carers. Further, the literature also opines that resilience is built *onto* staff via strategies ranging from mentoring, coaching and counselling to teaching individual ASD how to foster resilient behaviors (Ghanouni et al., 2024). While such a perspective may exclude and marginalize some, while promoting seminal scholarships' generic training and developmental agenda (Cooper et al. 2013; Kuchinke, 2010; Chalofsky, 2007), it further corrodes inter-group relational and collective resilience building (Gvaramadze, 2008). The second aspect of the model redresses this abnormality.

The model's third aspect: efficiently deploying human and non-human resources recognizes the potential limitations of adopting organizations' traditionally structural training regimes to develop people's resilience. It highlights a more combined approach that draws attention to the psycho-social significance of developing wider resilience and inclusion and more strategic networks. While previous research focused on the organization's, technologies' and other care supporters' role and conceptualized the socio-communication challenges of ASD (Yan, 2025) as an individualistic problem (Bhat et al., 2024; Ghanouni et al., 2024), the third model's aspect stresses the criticality of an alternative perspective: how to build resilience and inclusion utilizing a holistically combined structural, human cultural and socio-political engagement strategies as a more inclusive set of strategic response to the resilience - sustainability problem.

Embedding collective resilience and inclusion capabilities is the model's fourth aspect highlighting another key missing element beyond the current strengths'-promising (Johnson, 2022) structure-technical approaches ranging from

gaming (Nooh & Nooh, 2025) to AI (Afif, 2024) to technological and Nanotechnology measures (Tomczak & Ziemiański, 2023; Bhat et al., 2024), collectivizing and embedding resilience and inclusion capabilities in organizations, family structures, and overall care support systems. This becomes a culture over time to address individual, departmental and collective adversities in workplaces, including the marginalization and exclusion of ASD from work engagement. While previous and current research oscillates between problem identification and diagnosis (Al Hamieli & Habbal, 2024; Afif, 2024) to coping strategies (Al Hamieli & Habbal, 2024), embedding the 4 sets of resilience and inclusion capabilities transcends Roelvink and Zolkos's (2015) 'affective ontologies', Madden and Coffey's (2025) empathetic approach and Ameis et al.'s (2020 innovative social care delivery intervention as aspect 4 seeks to encrust resilience and inclusion as a challenge-mitigation strategy in organizations' cultural and strategic architectures as a new resilience - inclusion - sustainability challenge resolution norm.

3. Methodology

This study is inspired by the participatory principles underpinning Community-Based Participatory Research (CBPR) based on its potential to unravel marginalized people with autism's work and worldviews (Racadio et al., 2014; Minkler & Wallerstein, 2010). Stakeholder involvement throughout the research process from scoping to data presentation, analysis and reporting has been crucial in engaging the autism community at the DWP as acknowledged in previous research (Nicolaidis et al., 2011; Racadio et al 2014). While the CBPR approach has been utilized in previous marginalized group studies ranging from health care to the welfare of adults with autism, its fundamental bottom-up research design (Johnson, 2022; Israel et al., 2019; Nicolaidis et al., 2015a; Racadio Rose & Kolko, 2014) its bottom-up principle underpins research work. However, improving organizations' overall ecosystem to address the resilience problem needs something additional to earlier recommendations made by Vincent and Fabri (2022) and Afif (2024), among others. How this was done is addressed in the next three sections.

Autism Work Peer Support Group: A Purposeful Sampling Approach and Justification

Purposeful sampling is common in disability and action/outcomes-orientated studies (Palinkas et al., 2015). Maximum variation sampling was deployed with the help of the Disability Advisor. This helps to increase the variety of jobseekers with autism, their personal demographics, including employment history and experiences within and outside work, academic qualifications and functional capabilities (Creswell & Plano Clark, 2011). Such sampling was enhanced by adopting a multistage funneling approach in which a diverse set of participants' perspectives and experiences of how they addressed employment and unemployment challenges were adopted. These were gradually (in step format) funneled to more specific questions highlighting jobseekers with autism challenges and the appropriate resilience and inclusion building capabilities.

Twenty-six participants consisting of twenty-four jobseekers and two Disability Employment Advisors comprised the study's Autism Work Peer Support Group (AWPSG) as the research population. Demographically, there were seventeen male and seven female ASD ranging between eighteen and forty-six years of age. 90% of both genders had secondary education, the highest of which was A-levels and the remaining 10% had a minimum of a Higher National Diploma. Each of them was included in the sample because they have had varied experiences of work, from none to part-time to full-time employment in a range of industries (retail, administration, customer service and catering). Some had been unemployed and seeking active employment from one - ten years. The two Disability Employment Advisors (one male and one female) assisted as AWPSG facilitators, thereby necessitating their inclusion.

Peer Support Strategies for Autism Work

The AWPSG was set up by 2020 within the DWP as a research framework that helps participants to interact freely, to reflect upon and share their perspectives on their in and out-of-work challenges and how they dealt with them (via what

actions). By bringing together other ASD with relatively similar lack of inclusion and disengagement-at-work issues, it was anticipated that participants would engage with each other and discuss challenges, motivators and hinderances in addressing workplace and out-of-work issues. Such a key principle of participatory research facilitated rich exchanges of ideas/perspectives/opinions and behaviors and provided the basis for setting up the AWPSG. It is also believed to be a major conduit of obtaining participants' beliefs, ideologies, rationalizations, counter-beliefs and justifications for these (Barbour, 2008). Although an individually organized interview for each ASD jobseeker participant was a tempting option, it was decided not to utilize this as their underlying conditions and personality type would most probably lead to disengagement and eventual withdrawal from engaged and prolonged conversations.

In line with the bottom-up approach of CBPR, all the AWPSG members were asked to be part of the decision-making processes of identifying which structure, frequency, format and size of the sessions they preferred (e.g., where, when/which days/dates, topic areas to be discussed and activities to be conducted). Jointly agreeing these research practicalities between the ASD and facilitator participants were crucial for the success and viability of the data collection, presentation and analysis and the final reporting of the study and the extent to which all participants willingly provided and received the support needed (see Table 1 AWPSG members' decisions and resolution mechanisms). The twenty-four participants with autism agreed to this format's shape, scale and location and the anticipated effectiveness of the support to be received from peers and facilitators alike (Mendy & Hack-Polay, 2018). Their request to have two of the Disability Employment Advisors they have worked with overtime as sessions' coordinators/facilitators was also incorporated within the consultation and discussions meetings. Group members also agreed to capture each session's conversations and to share the minutes with the researchers via email.

Table 1

Sample of significant decisions and resolutions at the AWPSG conversations

Key decisions	Joint solutions
Main type of peer support	In person group support
Additional/complementary peer support	Online peer support group (e.g. Digital Forum, emails)
Site/Location	Familiar/unthreatening environment (e.g. local Jobcenter under DWP, UK)
Frequency	Once every fortnight
Duration	1 & ½ hours
Membership type	Closed (e.g. only for people with ASD, seeking work)
Facilitation, management & coordination	Organizational & researchers' support (DEA facilitators with autism knowledge and familiar with each of the ASD, researchers' scholarly knowledge on topic)
Peer support	Unemployment & employment related knowledge & experiences

Autism Work Peer Support Group: Co-Creating a Research Questionnaire Approach for Autism Research and Practice

A year after its set up, and after multiple sessions, it was a thirteen-item questionnaire that was jointly agreed as the evidence/data collection

instrument by all members. Each was requested to complete it as one way of capturing each person's challenges and how they addressed them as a set of intervention tools. While the first set of seven items assessed how the AWPSG measures accommodated jobseekers with autism's requirements and enhanced their participation in the sessions, the remaining 6 items evaluated how their employment perspectives may have changed, and how their self-esteem, employability and social network capabilities evolved to ascertain what effects (if any) the utilization of the CBPR approach on their individual and collective propensities to build resilience there were (Tables 2 &3 for each of the evaluated items). A 4-point Likert scale from 'Strongly Agree' to 'Strongly Disagree' was used to capture and present the range of the agreement and/or disagreement that participants had with the workplace intervention adjustments and resilience items. Additional feedback, in the form of qualitative comments, was gathered from each member at the end of the questionnaire. The review of the qualitative data provided additional insights of each participants' behaviors, attitudes and perspectives on other members, the jobs they had had in the past, the AWPSG and their wider social interactions and networks as has been previously researched (Hillier, et al., 2007).

Theoretically, I have developed a novel CRIM for Autism research where one did not exist before. It extends, and thereby theoretically enriches Autism research by extending the CBPR and allied bottom-up approaches (Johnson, 2022; Pellicano et al., 2022; Heselton et al., 2021). First, the new model takes account of the marginalized and how their viewpoints could be included within an Autism work model, amplifies 4 stages of their adaptability to challenges and the benefits of doing so via resilience and inclusion capabilities.

Via the utilization of the AWPSG, this study therefore advocates for the inclusion of the CRIM into resilience research to extend and enrich earlier studies on marginalization, discrimination and nanotechnology (Yan, 2025; Al Hamieli & Habbal, 2024; Bhat et al., 2024; Chalofsky, 1992). The CRIM model highlights an inter-relational, multi-dimensional set of capabilities needed within an autism employment service intervention for individuals with autism, their families and communities and organizations if meaningful inclusion and engagement in autism work is to be realized beyond attempts made by earlier scholars (Nooh & Nooh, 2025; Afif, 2024). This novel CRIM therefore fills the resilience - inclusion - sustainability capabilities gap in Autism Employment which previous studies, including Tomczak et al, (2021) and Hillier et al. (2014) had earlier.

4. Results

Two datasets are presented in this section: first, how members chose to agree or disagree with the AWPSG interventions in accommodating (or limiting) jobseekers with autism's workplace requirements and enhancing participation (Table 2) and second, how each member agreed or disagreed with the resilience items (Table 3). The first dataset led to the second to ascertain which capabilities are significant in enhancing resilience among job seeking ASD and how to cope with the challenges. Below is a depiction of how strongly participants agreed with the focus group items and some representative quotes.

Table 2

Agreement of AWPSG Members with the CBPR Implementation-Quality Items

CBPR Implementation-Quality Items	Agreement of AWPSG Members			
	Strongly Agree	Agree	Disagree	Strongly Disagree
By participating in the focus group, I was able to	70%	30%	0%	0%

express my views and opinions. "[session were] very informative, knowledgeable and enjoyable"				
Having regular meetings helped me feel comfortable, relaxed and able to discuss with other members. "well organised and sufficient. Great information given".	45%	50%	5%	0%
Having regular meetings helped me discuss difficult work topics with other members. "this workshop as a starting point-there are so many considerations to be made and discussed"	35%	65%	0%	0%
Having a facilitator from the DWP at meetings helped me discuss difficult work topics with other members. "I see this workshop as a starting point-there are so many considerations to be made and discussed"	50%	50%	0%	0%
I feel my opinions and views changed how other members thought about the topics. "time to discuss/engage in interactive table discussions".	30%	60%	10%	0%
I feel other members' opinions and views changed how I think about the topics. "[inclusion of] topics, particularly X's session based on his own lived experiences"	30%	60%	10%	0%
It is good to have the option to express my opinions and views online through the digital forums instead of sharing them in person. "I thought the content was all very useful for introductory level understanding"	35%	50%	15%	0%

In the main, participants' qualitative responses to the CBPR items were either in agreement or strong agreement with the questionnaire statements. While collective organizational and researcher effort that went into the research design enhanced accessibility to AWPSG sessions and boosted participants' active engagement, the social interactions that were created within such a setting/environ proved beneficial for the research outcomes (see data on the AWPSG members' individual self-esteem, and collective social networking, and employability skills - Table 3).

Table 3
Agreement of AWPSG Members with the Resilience Items

Resilience Strategy Items	Agreement of AWPSG Members			
	Strongly Agree	Agree	Disagree	Strongly Disagree
I have made friends with members.	10%	70%	20%	0%
Participation has increased confidence in my skills.	35%	65%	0%	0%
Participation has made me feel better about myself.	45%	55%	0%	0%
Participation has made me feel more positive about employment.	45%	55%	0%	0%
Participation has made me more confident in finding employment.	25%	75%	0%	0%
Participation has made me more confident in retaining employment.	25%	60%	15%	0%

5. Discussions

The responses from focus group participants pointed to 1) either majorly agreed or 2) strongly agreed with the items. While the first and second set of responses purported that members majorly demonstrated strong capabilities for resilience, the extent to which they felt included and engaged because of the organizational interventions to support their development needed something special.

The study was able to highlight 3 significant patterns from the findings to inform the field of Autism Employment and Resilience. The first one was that most of those who participated in the AWPSG reported favorably on the impact of the structure, location and format on how their transition-to-work needs, preferences and behaviors were catered for. The additional outcome of such support led to their promotion of the sessions and their active participation. While this result aligns with Hillier et al. (2007), it was also highlighted how active AWPSG participation positively affected members' abilities to develop further social interactions with others, enhance their self-esteem, and boost their job hunting and retention confidence. Second, while one may claim that such results, in their totality, could be taken to underpin the efficacious and efficient delivery and management of the AWPSG program, the extent to which they simultaneously demonstrated the inclusive benefits and usefulness of a framework beyond the CBPR Approach remained to be surfaced. To explore whether this was possible, it was thought important to investigate whether deploying an employment-driven, facilitator and researcher-led ASD peer support architecture beyond the traditional CBPR intervention could bear some additional advantages beyond their educational (McCurdy & Cole, 2014), vocational (employment-driven - Hillier et al., 2007) and technical adaptability skills' value (Lai & Szatmari, 2019). Third, respondents' statement trends were used to explore how this research was able to extend

the CBPR Approach from its bottom-up principles to highlighting the inclusivity and engagement it provided for people with autism in the context of work. The exploration interestingly highlighted that it was possible to enhance participants' inclusion, engagement and potential in their quest for more sustainable employment. The DWP's organizational adaptability facilitated the conduct of the study's resilience items in enhancing the AWPSG beyond Nicolaidis et al. (2015b) and Jivraj et al.'s (2014) emphasis on research procedure.

While the AWPSG format may be like CBPR's notion of accessibility and active engagement of participants, there are some key variances which further highlight how the focus group sessions further enrich the CBPR Approach. First, the ASD active involvement from concept development to actual implementation fostered a safe psychological and practical research exchange context in which each member was guaranteed of the moral, and psycho-social support to voice their thoughts, anxieties, concerns and hopes of a brighter employment prospect. They also felt part of a bigger, purpose-driven community where they could make meaningful strides to become more resilient against personal adversities. A sense of belonging to a collective started to signal the possibility that the group could address the resilience challenges they individually faced particularly in workplaces. While this result is aligned with Hillier et al.'s (2007), members' active focus group participation further resulted in personal friendship circles' enlargement as well as a professional boost: some members secured work as administrators, customer service employees and manufacturing staff. This result corroborates Johnson's (2022) and Wong et al.'s (2018) strengths-based approach in autism work and provides an overarching architecture beyond the structural design of Mostafa (2008). Despite Lai and Szatmari (2019) and Szatmari (2018) earlier demonstrating the significance of belonging in capability interventions, similar to the AWPSG, resilience and inclusion building in this study were further boosted by additional aspects: the focus group utilized as an educational tool for employment and adversity coping skills, a social exchange conduit and a personally safe, amenable context to explore one's potentials.

Implications:

Theoretically, I have developed a novel CRIM for Autism research where one did not exist before. It extends, and thereby theoretically enriches Autism research by extending the CBPR and allied bottom-up approaches (Johnson, 2022; Pellicano et al., 2022; Heselton et al., 2021). First, the new model takes account of the marginalized and how their viewpoints could be included within an Autism work model, amplifies 4 stages of their adaptability to challenges and the benefits of doing so via resilience and inclusion capabilities. Via the utilization of the AWPSG, this study therefore advocates for the inclusion of the CRIM into resilience capabilities' building interventions and support strategies at work and outside work to complement earlier work on marginalization by Chalofsky (1992), on staff with autism's workplace discrimination (Yan, 2025) and on the benefits of emerging technological/ nanotechnological advancements (Al Hamieli & Habbal, 2024; Bhat et al., 2024). The CRIM model highlights an inter-relational, multi-dimensional set of capabilities needed within an autism employment service intervention for individuals with autism, their families and communities and organizations if meaningful inclusion and engagement in autism work is to be realized beyond attempts made by earlier scholars (Nooh & Nooh, 2025; Afif, 2024). This novel CRIM therefore fills the resilience - inclusion - sustainability capabilities gap in Autism Employment which previous studies, including Tomczak et al, (2021) and Hillier et al. (2014) had earlier.

Practically, the CRIM demonstrates the art and practice of intervening where it positively matters in Autism research - the resolution of the inclusion and engagement challenge faced by people with autism at work. An autism employment and capabilities and solution-driven framework for carers, management and policy developers have been developed for people who work with under-represented, marginalized and adversity-challenged groups, including ASD in society and workplaces. Although earlier scholars (e.g., Nooh & Nooh, 2025; Bhat et al. 2024; Chalofsky & Cavallaro, 2013) have sought to address not only the technical and developmental skills of people

with ASD, this study goes a step further by demonstrating the 4-stage benefits of combining technical and human-focused skills development in a tripartite strategic collaborative working framework (including DEA facilitators, ASD and researchers) in designing an overall architecture beyond the ecosystem and autism architecture proposals of Vincent and Fabri (2022), Nicholas et al. (2018) and Mostafa (2008) respectively. The model is designed to help to 1) identify autism inclusion and engagement challenges, 2) highlight resilience and inclusion capabilities needed and 3) promote a more effective way of inclusive working than previously imagined/recommended. Such an architectural, resilience strategies development model is anticipated to boost employment for all, particularly those with ASD for a more just, equitable, inclusive and thriving society. The study's results and the CRIM further contribute to previous Autism research and practice by not only focusing on workplace and societal challenges faced by this group, but highlighting how the resilience capabilities also serve as a call to embed them into a comprehensive employment policy and best practice guidelines for staff, carers and family members working with and caring for people with ASD by adopting the following actions: 1) using their capability to spot inclusion and engagement threats to strategically mitigate against employees with autism's marginalization, work disengagement, under-representation and under-employment/unemployment; 2) using their resilience and inclusion training to technically, empathetically and strategically address staff with autism's adjustments needs; 3) using human and non-human resources to promote a more friendlier autism-workplace environment from recruitment and selection to performance management to retirement schemes and 4) fostering a collective resilience ecosystem in workplaces and society for a more thriving, accommodating and flourishing workforce. The call to embed resilience and inclusion capabilities in Autism research and practice could therefore not be timelier given the increasing grand sustainability, competence and resilience development challenges faced by marginalized groups across work and societal settings (Ghanouni et al., 2024; Bhat et al., 2024). The timeliness of the theoretical and practical contributions, including the CRIM and accompanying 'best practices' guidelines on resilience and strategic sustainability building for ASD is crucial in addressing the underpinning, ongoing psycho-social, mental, economic and workplace disenfranchisement being experienced worldwide by people with ASD and their families. Future studies could explore how deploying the CRIM could address additional ASD adversities beyond the resilience - inclusion - sustainability challenge outside of the Department of Work and Pensions and the UK and how strategic the emergent solutions could be for people with ASD, organizations, society, family members and managers.

Study's Limitations

The AWPSG program could be deployed in workplace environments as an impactful intervention that supports high functioning ASD jobseekers' resilience. However, the current research and its contributory model and peer support strategies have not been tested across high, medium and low-functioning ASD within and outside work and outside of the UK. While doing so could facilitate a more comprehensive model development and a potentially grander set of strategic initiatives for ASD across the spectrum, it does not guarantee unlimited benefits in addressing *all* challenges faced by people with ASD. This is particularly notable given the small sample size and its focus on a single Department for Pensions in a single county in the UK.

Conclusion and Future Studies for Autism Research and Practice

This study enriches the theoretical, research and practice aspects of Autism Resilience and Workplace Inclusion studies from previous and existing foci on the benefits of structural and technological interventions, including Nanotechnology (Nooh & Nooh, 2025; Al Hamieli & Habbal, 2024) to a more holistic model incorporating the actions/capabilities needed. This augurs a welcome shift in resilience and inclusion to a more capabilities/actions-orientated framework to resolve the resilience problem faced by people with autism in the workplace.

Theoretically, the development of a CRIM model extends the bottom-up principles on which the CBPR Approach in the Social Sciences was developed (Johnson, 2022; Heselton et al., 2021) by highlighting how the AWPSG, as a workplace tool, was designed, deployed, justified, evaluated and what its key resilience capabilities are. Its benefits also include resolutions for autism employment and sustainable work challenges faced by ASD and their families. Research-wise, the investigation into how the autism group made decisions and resolutions during their focus group conversations, how they implemented these and the extent to which they demonstrated behaviors akin to the resilience capabilities' items highlight how a well-designed investigative framework and questioning could 1) surface challenges, 2) provide new opportunities and resolutions beyond traditional methods (e.g. interviews, observations, experiments etc.) and 3) how structure-technical interventions could be reconceptualized beyond current depictions from Bhat et al. (2024) among others.

Practice-wise, the results and CRIM contribute a holistic set of resilience and inclusion capabilities (or a 4-stage 'best practices' guidelines) that could address the challenges-based Autism research and practice beyond the more silo-skill approach adopted by earlier investigators such as Madden and Coffey (2025), Szatmari (2018) and Lai and Szatmari (2019) or the workplace adjustments of Waisman-et al. (2019) or nanotechnological (Bhat et al., 2024) or ecosystem recommendation (Nicholas et al., 2018) and how the amalgam of technical and non-technical capabilities could be deployed by disability advisors, mentors, coaches, carers, managers and policy developers across workplace settings. It is suggested that future studies in Autism support strategies should involve more sensitive measures of resilience and sustainability changes and adaptations prior to and after their deployment. Self-perceived/framed vs actual resilience capabilities before, during and after the utilization of the 4-stage 'best practices resilience and inclusion' guidelines could also be tested across different industries, countries and regions to ascertain their effectiveness and efficiencies for people with ASD, governmental and non-governmental organizations alike and support Autism research and practice sites.

References

Afif, A. (2024). The Role of Artificial Intelligence in Enhancing Identification of Autism in Children Through Motor Abnormalities. *International Journal for Autism Challenges & Solution*, *1*(2), 18-29.

Al Hamieli, M., & Habbal, F. (2024). Developing an AI-Driven Mobile Application for Early Autism Diagnosis and Classification. *International Journal for Autism Challenges & Solution*, *1*(2), 63-81.

Ameis, S. H., Lai, M. C., Mulsant, B. H., & Szatmari, P. (2020). Coping, fostering resilience, and driving care innovation for autistic people and their families during the COVID-19 pandemic and beyond. *Molecular Autism*, *11*(1), 61.

Baldwin, S., Costley, D., & Warren, A. (2014). Employment activities and experiences of adults with high-functioning autism and Asperger's Disorder. *Journal of Autism and Developmental Disorders, 44*, 2440-2449.

Bardoel, E. A., Pettit, T. M., De Cieri, H., & McMillan, L. (2014). Employee resilience: An emerging challenge for HRM. *Asia Pacific Journal of Human Resources*, *52*(3), 279-297.

Bhat, R. S., Alkhudhairy, R., Alshehri, A. A., & Singh, R. (2024). Nanotechnology-an innovative approach to cope with the distinctive challenges linked with Autism Spectrum Disorder. *International Journal for Autism Challenges & Solution*, *1*(1), 28-38.

Bonanno, G.A. (2004). Loss, trauma, and human resilience: Have I underestimated the human capacity to thrive after extremely aversive events? *American Psychologist, 59*, 20-28.

Brosnan, M., Parsons, S., Good, J., & Yuill, N. (2016). How can participatory design inform the design and development of innovative technologies for autistic communities? *Journal of Assistive Technologies, 10*(2), 115-120.

Chalofsky, N., Cavallaro, L. (2013). A good living versus a good life: Meaning, purpose, and HRD. *Advances in Developing Human Resources, 15*(4), 331-340.

Chalofsky, N. (1992). A unifying definition for the human resource development profession. *Human Resource Development Quarterly*, *3*(2), 175-182.

Dawson, N. E., Parker, S. L., & Okimoto, T. G. (2024). Profiles of diversity and inclusion motivation: Toward an employee-centered understanding of why employees put effort into inclusion and exclusion. *Human Resource Management*, *63*(1), 45-66.

Fletcher-Watson, S., Adams, J., Brook, K., Charman, T., Crane, L., Cusack, J., … Pellicano, E. (2019). Making the future together: Shaping autism research through meaningful participation. *Autism, 23*(4), 943-953.

Ghanouni, P., Raphael, R., Seaker, L., & Casey, A. (2024). How to build resiliency in autistic individuals: an implication to advance mental health. *BMC psychology*, *12*(1), 420.

Gross, J.J. (2015). The extended process model of emotion regulation: Elaborations, applications, and future directions. *Psychological Inquiry, 26*, 130-137.

Hedley, D., Uljarević, M., Cameron, L., Halder, S., Richdale, A., & Dissanayake, C. (2017a). Employment programmes and interventions targeting adults with autism spectrum disorder: a systematic review of the literature. *Autism, 21*(8), 929-941.

Hedley, D., Cai, R., Uljarević, M., Wilmot, M., Spoor, J.R., Richdale, A., & Dissanayake, C. (2017b). *Transition to work: Perspectives from the autism spectrum. Autism*. Epub ahead of print 1 March 2017.

Heselton, G.A., Rempel, G.R., & Nicholas, D.B. (2021). Integrating community participation with interpretative phenomenological analysis: Reflections on engaging the autism community. *International Journal of Qualitative Methods*, *20*, 16094069211055575.

Hillier, A., Fish, T., Cloppert, P., & Beversdorf, Q.D. (2007). Outcomes of a social and vocational skills support group for adolescents and young adults on the autism spectrum. *Focus on Autism and other Developmental Disabilities, 22*(2), 107-115.

Hillier, J. (2014). Performances and performativities of resilience. In *Evolutionary governance theory: theory and applications* (pp. 167-183). Cham: Springer International Publishing.

Howlin, P., Alcock, J., & Burkin, C. (2005). An 8-year follow- up of a specialist supported employment service for high- ability adults with autism or Asperger syndrome. *Autism, 9*, 533-549.

Israel, B.A., Schulz, A.J., Coombe, C.M., Parker, E.A., Reyes, A.G., Rowe, Z., & Lichtenstein, R.L. (2019). Community-based participatory research. *Urban health*, *272*(2), 272-282.

Jivraj, J., Sacrey, L.A., Newton, A., Nicholas, D., & Zwaigenbaum, L. (2014). Assessing the influence of researcher-partner involvement on the process and outcomes of participatory research in autism spectrum disorder and neurodevelopmental disorders: a scoping review. *Autism, 18*(7), 782-793.

Johnson, K. R. (2022). Using a strength-based approach to improve employment opportunities for individuals with autism spectrum disorder. *New Horizons in Adult Education and Human Resource Development*, *34*(1), 16-25.

Lai, M.C., & Szatmari, P. (2019). Resilience in autism: Research and practice prospects. *Autism, 23*(3), 539-541.Luthar, S.S., & Cicchetti, D. (2000). The construct of resilience: implications for interventions and social policies. *Development and psychopathology, 12*(4), 857-885.

Madden, R., & Coffey, L. (2025). Experiences of Empathy-Based Stress Among Care Staff Supporting Children and Adolescents with Intellectual Disabilities and/or Autism in Residential and Respite Services: A Qualitative

Exploration. *Health & Social Care in the Community*, *2025*(1), 9828118.

McCurdy, E.E., & Cole, C.L. (2014). Use of a Peer Support Intervention for Promoting Academic Engagement of Students with Autism in General Education Settings. *Journal of Autism and Developmental Disorders, 44*, 883-893.

Minkler, M., & Wallerstein, N. (Eds.). (2010). *Community-Based Participatory Research for Health: From Process to Outcomes* (2nd ed.). San Francisco, CA: Jossey-Bass.

Mostafa, M. (2008). An architecture for autism: Concepts of design intervention for the autistic user. *International Journal of Architectural Research*, *2*(1), 189-211.

Nicolaidis, C., & Raymaker, D.M. (2015). Community based participatory research with communities defined by race, ethnicity, and disability: Translating theory to practice. In H. Bradbury (Ed.), *The SAGE Handbook of Action Research* (pp. 167-179). London, UK: SAGE.Nicolaidis, C., Raymaker, D., McDonald, K., Dern, S., Ashkenazy, E., Boisclair, C., …

Nicolaidis, C., Raymaker, D.M., Ashkenazy, E., McDonald, K.E., Dern, S., Baggs, A.E.V., … Boisclair, W.C. (2015a). "Respect the way I need to communicate with you": Healthcare experiences of adults on the autism spectrum. *Autism, 19*(7), 824-831.

Nicolaidis, C., Raymaker, D., Katz, M., Oschwald, M., Goe, R., Leotti, S., … Millin, M. (2015b). Community-based participatory research to adapt health measures for use by people with developmental disabilities. *Progress in Community Health Partnerships: Research, Education, and Action, 9*(2), 157-170.

Nicolaidis, C., Raymaker, D., Katz, M., Oschwald, M., Goe, R., Leotti, S., … Millin, M. (2015b). Community-based participatory research to adapt health measures for use by people with developmental disabilities. *Progress in Community Health Partnerships: Research, Education, and Action, 9*(2), 157-170.

Nicholas, D.B., Attridge, M., Zwaigenbaum, L., & Clarke, M. (2015) Vocational support approaches in autism spectrum disorder: a synthesis review of the literature. *Autism, 19*, 235-245.

Nicholas, D.B., Mitchell, W., Dudley, C., Clarke, M., & Zulla, R. (2018). An ecosystem approach to employment and autism spectrum disorder. *Journal of Autism and Developmental Disorders, 48*, 264-275.

Nooh, S., & Nooh, S. (2025). Improving Social Communication Level for Mildly Autistic Children Using Video Call-Based Mobile Application Game. *International Journal for Autism Challenges & Solution*, *2*(1), 12-20.

Parsons, S., Millen, L., Garib-Penna, S. & Cobb, S. (2011). Participatory design in the development of innovative technologies for children and young people on the autism spectrum: the COSPATIAL project. *Journal of Assistive Technologies, 5*(1), 29-34.

Pellicano, E., Lawson, W., Hall, G., Mahony, J., Lilley, R., Heyworth, M., … & Yudell, M. (2022). "I knew she'd get it and get me": Participants' perspectives of a participatory autism research project. *Autism in Adulthood*, *4*(2), 120-129.

Racadio, R., Rose, E.J., & Kolko, B.E. (2014). Research at the margin: Participatory design and community based participatory research. *ACM International Conference Proceeding Series, 2*, 49-52.

Raymaker, D.M., McDonald, K.E., Ashkenazy, E., Gerrity, M., Baggs, A.M., Kripke, C., & Nicolaidis, C. (2017). Barriers to healthcare: Instrument development and comparison betlen autistic adults and adults with and without other disabilities. *Autism*, *21*(8), 972-984.

Roux, A.M., Shattuck, P.T., Rast, J.E., Rava, J.A., & Anderson, K.A. (2015). *National Autism Indicators Report: Transition into Young Adulthood.* Philadelphia, PA: Life Course Outcomes Research Program, A.J. Drexel Autism Institute, Drexel University.

Shochet, I.M., Saggers, B.R., Carrington, S.B., Orr, J.A., Wurfl, A.M., Duncan, B.M., & Smith, C.L. (2016). The Cooperative Research Centre for Living with Autism (Autism CRC) conceptual model to promote mental health for adolescents with ASC. *Clinical Child and Family Psychology Review, 19*, 94-116.

Szatmari, P. (2018). Risk and resilience in autism spectrum disorder: A missed translational opportunity? *Developmental Medicine & Child Neurology, 60*, 225-229.

Tomczak, M. T., & Ziemiański, P. (2023). Autistic employees' technology-based workplace accommodation preferences survey—Preliminary findings. *International Journal of Environmental Research and Public Health*, *20*(10), 5773.

Tomczak, M. T., Mpofu, E., & Hutson, N. (2022). Remote work support needs of employees with Autism Spectrum Disorder in Poland: Perspectives of individuals with autism and their coworkers. *International journal of environmental research and public health*, *19*(17), 10982.

Tomczak, M. T. (2021). Employees with autism spectrum disorders in the digitized work environment: Perspectives for the future. *Journal of disability policy studies*, *31*(4), 195-205.

Tomczak, M. T., Szulc, J. M., & Szczerska, M. (2021). Inclusive communication model supporting the employment cycle of individuals with autism spectrum disorders. *International journal of environmental research and public health*, *18*(9), 4696.

Vincent, J., & Fabri, M. (2022). The ecosystem of competitive employment for university graduates with autism. *International Journal of Disability, Development and Education*, *69*(5), 1823-1839.

Waisman-Nitzan, M., Gal, E., & Schreuer, N. (2019). Employers' perspectives regarding reasonable accommodations for employees with autism spectrum disorder. *Journal of Management & Organization*, *25*(4), 481-498.

Weiss, J. A., Tint, A., Paquette-Smith, M., & Lunsky, Y. (2016). Perceived self-efficacy in parents of adolescents and adults with autism spectrum disorder. *Autism*, *20*(4), 425-434.

Wong, P. S., Donelly, M., Neck, P. A., & Boyd, B. (2018). Positive autism: Investigation of workplace characteristics leading to a strengths-based approach to employment of people with autism. *Revista de Management Comparat International*, *19*(1), 15-30.

Yan, C. O. (2025). Employment Discrimination Among Individuals with Autism Spectrum Disorders: A Systematic Review and Meta-Analysis. *International Journal of Interdisciplinary Social & Community Studies*, *20*(1).