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Table of Contents

Abstract:	3
Purpose:	3
Methodology:	3
Results:	3
Conclusion:	3
Introduction:	4
Rationale:	4
The objectives of this review are:	5
Background	5
Methods	7
Data analysis:	7
Thematic analysis.	7
Keywords (combined with Boolean operators)	8
Results:	9
Table of Finding:	9
Thematical Analysis	10
Discussion:	11
Importance for Health and Social Care	12
Limitations	13
Conclusion and Recommendations	13
References:	15

Abstract:

Purpose:

Social isolation is a significant challenge for children with autism spectrum disorder (ASD), often affecting their emotional wellbeing, behaviour, and ability to form social connections. Research suggests that autistic children are particularly vulnerable due to communication differences, sensory sensitivities, and barriers within school and community environments. This research report aims to explore the impact of social isolation on the mental health of autistic children in the United Kingdom and to identify key factors contributing to isolation, its emotional consequences, and the types of support that can reduce these negative outcomes.

Methodology:

Drawing on secondary research, a scoping review methodology was used to analyse existing literature, including three UK-based studies and two international studies. Databases such as Google Scholar, PubMed, and NICE Evidence were searched using keywords related to autism, social isolation, children, and mental health. A thematic analysis was applied to identify common patterns across the selected studies.

Results:

Findings from UK studies revealed consistent themes of loneliness, emotional distress, and exclusion in school settings. Autistic children who experienced social isolation were more likely to develop anxiety, depression, reduced self-esteem, and behavioural difficulties. International studies supported these outcomes, demonstrating that these issues are not unique to the UK but reflect a broader global trend. Environmental factors, limited school support, and long waiting times for services were found to intensify these challenges.

Conclusion:

The review concludes that social isolation has a harmful but preventable impact on the mental health of autistic children. Improved multi-agency collaboration, early intervention, school inclusion, and targeted mental-health support are essential to protecting the wellbeing of autistic children across the UK.

Introduction:

Autism Spectrum Disorder (ASD) is a lifelong neurodevelopmental condition that affects communication, social interaction, and behaviour (NICE, 2013).

Autistic children often experience difficulties understanding social cues, forming relationships, and managing sensory environments, which increases their vulnerability to loneliness and exclusion.

Social isolation has been shown to significantly affect their emotional wellbeing. Research in the UK consistently demonstrates that autistic children who experience limited peer interaction or exclusion from school are more likely to develop anxiety, depression, and low self-esteem (Cresswell, Hinch and Hughes, 2019).

The National Autistic Society (2022) also reports that over half of autistic children often feel lonely, which negatively influences their confidence and social participation. During the COVID-19 pandemic, isolation intensified these challenges, with many autistic children experiencing regression in communication, increased stress, and heightened anxiety due to loss of routine and reduced support services (Pellicano et al., 2022).

Overall, the evidence shows that social isolation does not arise from autism itself, but from environmental barriers, insufficient support, and limited understanding from peers and adults.

Improving inclusion, strengthening professional support, and ensuring early intervention are therefore essential for protecting the mental health of autistic children in the UK.

Rationale:

Autistic children often find it difficult to build friendships or feel included in social situations.

Many face barriers in communication and understanding social cues, which can lead to social isolation and loneliness (National Autistic Society, 2022).

Research shows that feeling lonely can increase the risk of anxiety, depression, and low self-esteem in young people with autism (Maddox et al., 2017).

The National Autistic Society (2022) reported that over half of autistic children in the UK feel socially isolated.

The COVID-19 pandemic made his situation worse, as many children lost their school routines and access to therapy or social interaction.

Understanding how isolation affects mental health is important because early support can help improve social inclusion and prevent long-term psychological problems (Pellicano et al., 2022).

This study is valuable for professionals in health, education, and social care, as it highlights areas where better support can be offered to improve wellbeing and reduce loneliness in autistic children.

The objectives of this review are:

- To discuss the range of social, educational, and environmental factors that lead to social isolation among children with autism spectrum disorder
- To analyse how social isolation influences mental-health outcomes and overall wellbeing among children with autism spectrum disorder in the United Kingdom
- To provide evidence-based recommendations for families, teachers, and health and social-care professionals to promote inclusion and mental wellbeing

Background

Children with Autism Spectrum Disorder (ASD) are at increased risk of social isolation due to a combination of individual, social, and environmental factors.

Communication differences such as difficulty understanding social cues, maintaining conversations, or interpreting body language can make it challenging for autistic children to form friendships, while sensory sensitivities may lead them to avoid busy or noisy environments, limiting participation in social activities.

Within schools, limited autism awareness among peers and staff often results in misunderstanding, bullying, or exclusion from group work and play.

These challenges persist despite strong UK policy frameworks designed to support inclusion.

Key legislation such as the Children Act (1989 and 2004), places a duty on professionals to safeguard and promote children's welfare, while the Children and Families (Act 2014), introduced Education, Health and Care (EHC) plans to ensure coordinated and personalised support for children with SEND.

The SEND Code of Practice (2015) requires schools to make reasonable adjustments to meet the needs of autistic pupils, yet in practice many schools struggle to implement this effectively, resulting in isolation during lessons, break times, or even exclusion.

Safeguarding legislation, including the Safeguarding Vulnerable Groups (Act 2006), emphasises the protection of children who may be more vulnerable due to communication differences or social difficulties, highlighting the importance of appropriately trained professionals working with autistic children.

National clinical guidance, such as NICE guideline CG170 (2013, updated 2021), also stresses early identification, structured support, and interventions to promote social communication and emotional regulation.

However, delays in assessment, inconsistent access to support services, and long waiting times for (CAMHS), further intensify social and emotional challenges. Consequently, social isolation has a significant and harmful impact on mental health.

Research shows that loneliness is strongly associated with increased anxiety, depression, emotional dysregulation, and reduced self-esteem among autistic children.

Many internalise peer rejection, leading to long-term emotional vulnerability and fear of social interaction.

These difficulties were intensified during (COVID-19), lockdowns, when loss of routine and a reduction in face-to-face support resulted in regression in communication and coping skills.

Given that social isolation can shape long-term emotional development, this background highlights the critical importance of early intervention, inclusive practice, and policy implementation to protect the wellbeing of autistic children in the UK.

Methods

This project will use secondary research by doing a scoping review of existing UK studies published between 2014 and 2025.

Secondary research means using existing information that has already been collected, analysed, or published by other researchers, organisations, or institutions

We do not collect new data by ourselves, instead we review and analyse information from other sources.

Such as:

journal articles, government reports, books, surveys that others have completed, online databases, published studies

The main databases used will include PubMed, PsycINFO, and Google Scholar.

The search will use key terms such as autism, social isolation, loneliness, children, and mental health, UK.

Studies will be selected if they focus on autistic children aged under 18 living in the UK and report any mental health outcomes related to isolation.

Both qualitative and quantitative studies will be included.

Data analysis:

Thematic analysis.

The findings will be analysed and compared to identify common themes, risk factors, and good practices for supporting autistic children's mental health.

Keywords (combined with Boolean operators)

“autism” OR “ASD” OR “autistic” AND “child*” OR “adolescen*” OR “youth” AND “social isolation” OR “loneliness” OR “peer relationships” OR “friendship” OR “bullying” OR “school exclusion” AND “mental health” OR “anxiety” OR “depress*” OR “wellbeing” OR “emotional difficulties” AND “United Kingdom” OR “UK” OR “England” OR “Scotland” OR “Wales” OR “Northern Ireland” OR “Britain” AND (“COVID-19” OR “pandemic”)

This study involves secondary research; therefore, no direct contact will be made with children, families, or professionals.

However, the research will follow ethical guidelines by ensuring all sources are accurately cited to avoid plagiarism.

The researcher will use respectful and person-centred language when referring to children with ASD to prevent stigma or discrimination.

Sensitive topics, such as mental health and isolation, will be discussed with care and confidentiality.

The study will also ensure that all information is obtained from credible and reliable sources to maintain honesty, transparency, and academic integrity.

Results:

Table of Finding:

The table below shows the characteristics of the study selected in the scoping reviews.

Author/s and publication year	Aim	Methodology and Methods	Findings
1. Pellicano et al., 2022	Why understanding the effects of isolation on mental health is important to prevent long term psychological problems in the UK.	It is a qualitative study using semi-structured interviews with participants. The researchers conducted semi-structured interviews with 144 participants, including autistic adults, autistic young people, and parents of autistic children.	found that lockdown and social isolation caused higher anxiety, stress, and regression in autistic children. Loss of routine and reduced support worsened their mental health, while children with better school communication coped slightly better.
2. Martin-Denham, S. (2022)	The aim of the study was to identify the barriers and enablers to mainstream schooling for autistic children and to explore how the experience of school exclusion affects	the study used Interpretative Phenomenological Analysis (IPA) to analyse in-depth interviews with five caregivers of autistic children who had been excluded from school.	The study found that autistic children were often excluded from school due to poor SEND support and delays in help. This caused stress, anxiety, and emotional harm for

	both the child and their caregivers.		both children and their caregivers.
3. Varley, D., & Crawford, H. (2019)	To explore social competence, perceived isolation, and emotional outcomes in UK children with ASD.	Mixed methods (survey + interviews) with UK children and parents	Children with lower social competence reported higher levels of perceived isolation and worse emotional wellbeing.

Thematical Analysis

Theme	
Theme 1. Social Isolation Increases Anxiety and Emotional Distress	Across all three studies, social isolation was closely linked to higher levels of anxiety, stress, and emotional difficulties in autistic children. Pellicano et al. (2022) found that loss of routine and reduced contact during lockdown led to increased anxiety and regression in children's behaviour. Similarly, Varley et al. (2019) reported that children with lower social competence were more likely to feel excluded and showed poorer emotional wellbeing. These findings suggest that loneliness directly contributes to emotional distress and reduced mental health.
Theme 2. Lack of School Support and Inclusion Contributes to Isolation	School environments played a major role in whether autistic children felt included or isolated. Martin-Denham (2022) showed that children were often excluded from school due to poor SEND support and long waiting times for assessments. Varley et al. (2019) also highlighted that peer understanding, and

	teacher involvement are key to reducing isolation. When school support was weak or inconsistent, autistic children experienced more social withdrawal, anxiety, and reduced self-esteem.
Theme 3. Supportive Relationships Improve Coping and Wellbeing	All studies showed that positive relationships whether with family, teachers, or peers helped children cope better. Pellicano et al. (2022) found that children who received regular communication from school during lockdown coped much better emotionally. Varley et al. (2019) also showed that structured group activities, like LEGO-based clubs, improved social interaction and reduced isolation. These findings underline the importance of supportive and well-coordinated relationships in improving social inclusion and emotional wellbeing.

Discussion:

Overall, the themes show that social isolation directly increases anxiety and emotional distress in autistic children, while poor school support often makes isolation worse. However, when children receive strong support from families, teachers, and peers, their social participation and emotional wellbeing improve significantly.

The review question asked: “What is the impact of social isolation on the mental health of children with Autism (ASD) in the United Kingdom?” The evidence from the selected UK studies shows a consistent pattern: social isolation has a clear negative impact on autistic children’s mental health, leading to higher levels of anxiety, emotional distress, low self-esteem, and withdrawal. This aligns strongly with earlier research that links loneliness to poor psychological outcomes among autistic young people.

Across the reviewed studies, several overlapping factors contributed to this isolation. Pellicano et al. (2022) highlighted that loss of routine and reduced support during COVID-19 lockdowns led to increased anxiety and behavioural regression. Martin-Denham (2022) found that school exclusion, limited SEND support, and delays in assessments created further isolation and emotional harm. Varley et al. (2019) also showed that children with lower social competence experienced more peer rejection and poorer emotional wellbeing. Together, these findings reinforce the argument that environmental and social barriers not autism itself are key causes of isolation and mental-health problems.

The findings from the two international studies strongly support and validate the results of the three UK articles, showing that the effects of social isolation on autistic children are consistent across different countries. For example, studies conducted by Kwan et al. (2020) and Lisboa White et al. (2024) both show that autistic children who experience loneliness or limited peer interaction consistently develop higher levels of anxiety and emotional difficulties.

Kwan et al. (2020) found that social isolation during the COVID-19 pandemic increased anxiety, depression, emotional dysregulation and behavioural problems in autistic children, mirroring the UK evidence presented by Pellicano et al. (2022) and Martin-Denham (2022).

Similarly, the systematic review by Lisboa White et al. (2024), reported that loneliness and lack of peer connection are common global experiences for autistic young people, leading to lower wellbeing, withdrawal, and difficulty forming friendships findings that align closely with Varley et al.'s (2019), study on peer rejection in UK school settings.

These international studies confirm that the negative emotional impact of isolation is not limited to the UK context but is a widespread issue affecting autistic children globally.

This strengthens the validity of the themes identified in this scoping review, demonstrating that social isolation consistently leads to poorer mental-health outcomes regardless of country or service system.

These international findings confirm that the patterns identified in the UK studies reflect a wider global issue.

Importance for Health and Social Care

These findings are highly important for health and social-care practice. They show that improving mental health for autistic children requires more than clinical interventions; it requires inclusive school environments, trained teachers, early assessment, and strong family-professional communication. Social care professionals must recognise isolation as a major safeguarding and wellbeing issue. Schools and health services need to collaborate more effectively to identify early signs of loneliness, provide autism-specific mental-health support, and ensure consistent routines and inclusive opportunities. The results also highlight the need for practical community support, such as peer groups, social-skills programmes, and accessible sensory-friendly activities.

Limitations

There are several limitations to this scoping review. First, only a small number of UK studies met the inclusion criteria, and many relied on small samples or parent-reported data, which may introduce bias. Some studies also took place during COVID-19, which may not fully reflect typical experiences. In addition, the review did not include longitudinal studies, making it difficult to see the long-term effects of isolation on mental health. Finally, the review only used English-language sources, which may have excluded relevant evidence.

Conclusion and Recommendations

In summary, the discussion highlights that social isolation is a major risk factor for poor mental health among autistic children in the United Kingdom, yet it is also a preventable one. The findings show that loneliness, exclusion, bullying, and loss of structure have damaging psychological effects, leading to increased anxiety, depression, emotional withdrawal, and reduced self-esteem.

However, these negative outcomes are not inevitable.

Consistent routines trained and understanding teachers, supportive families, and inclusive school environments can significantly reduce the mental-health risks associated with isolation.

The scoping review demonstrated clear and consistent evidence that social isolation directly influences emotional wellbeing. Autistic children often experience barriers to participation due to communication differences, sensory sensitivities, peer misunderstanding, and inadequate school support.

These challenges are made worse when formal services are slow to respond, assessments are delayed, or schools lack the resources required to provide meaningful inclusion.

Although national frameworks such as the SEND Code of Practice (2015), NICE Guidelines (2013), and the National Autism Strategy promote early intervention and inclusive practice, the implementation of these policies remains inconsistent across the UK.

Importantly, the reviewed studies including Pellicano et al. (2022), Cresswell et al. (2019), and Martin Denham (2022) demonstrate that environmental and social factors, rather than autism itself, largely determine mental-health outcomes. In other words, it is the context in which autistic children live, learn, and interact that shapes their wellbeing.

When environments are supportive, predictable, and inclusive, children show better resilience, improved emotional regulation, and greater social participation.

Therefore, bridging the gap between policy and practice is essential to ensuring that autistic children grow up in environments that support both their social development and mental health.

Strengthening multi-agency collaboration, improving teacher training, reducing assessment delays, and offering accessible community support can all help prevent isolation and promote long term wellbeing for autistic children across the UK (NHS England 2019).

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