

Supplemental Results

More fixation analysis

We next computed the percentage of the number of fixations in each ROI (**Fig. 3I**). Participants with ASD did not differ from controls in the eye (ASD: $28.5 \pm 19.2\%$, controls: $33.6 \pm 20.1\%$; $t(31)=0.74$, $P=0.46$, $g=0.25$, permutation $P=0.46$), mouth (ASD: $21.5 \pm 13.9\%$, controls: $19.3 \pm 13.9\%$; $t(31)=0.45$, $P=0.66$, $g=0.15$, permutation $P=0.64$), or center (ASD: $41.1 \pm 16.2\%$, controls: $42.3 \pm 13.2\%$; $t(31)=0.23$, $P=0.82$, $g=0.078$, permutation $P=0.84$) ROIs, nor the difference between the eye and mouth ROI (ASD: $7.08 \pm 31.4\%$, controls: $14.3 \pm 32.3\%$; $t(31)=0.65$, $P=0.52$, $g=0.22$, permutation $P=0.52$). Similar results were derived for the total fixation duration in each ROI (**Fig. 3J**; eye: ASD: 275 ± 220 ms, controls: 344 ± 226 ms; $t(31)=0.88$, $P=0.38$, $g=0.30$, permutation $P=0.38$; mouth: ASD: 229 ± 167 ms, controls: 221 ± 184 ms; $t(31)=0.14$, $P=0.89$, $g=0.048$, permutation $P=0.84$; center: ASD: 399 ± 180 ms, controls: 374 ± 142 ms; $t(31)=0.44$, $P=0.66$, $g=0.15$, permutation $P=0.61$; difference between eye and mouth: ASD: 45.7 ± 365 ms, controls: 123 ± 387 ms; $t(31)=0.59$, $P=0.56$, $g=0.20$, permutation $P=0.53$). Both results mirrored that of fixation density.

Furthermore, participants with ASD and controls showed similar orientation speed towards all ROIs (**Fig. 3K**; eye: ASD: 370 ± 177 ms, controls: 349 ± 169 ms; $t(31)=0.35$, $P=0.73$, $g=0.12$, permutation $P=0.72$; mouth: ASD: 376 ± 158 ms, controls: 435 ± 170 ms; $t(30)=1.02$, $P=0.32$, $g=0.35$, permutation $P=0.35$; center: ASD: 76.3 ± 66.6 ms, controls: 64.7 ± 89.4 ms; $t(31)=0.43$, $P=0.67$, $g=0.15$, permutation $P=0.73$; difference between eye and mouth: ASD: 11 ± 289 ms, controls: -85.6 ± 310 ms; $t(30)=0.91$, $P=0.37$, $g=0.32$, permutation $P=0.38$). Notably, both participants with ASD (two-tailed paired t-test; $t(16)=0.16$, $P=0.88$, $g=0.033$, permutation $P=0.93$) and controls ($t(14)=1.07$, $P=0.30$, $g=0.49$, permutation $P=0.18$) showed similar latency to first fixate on eyes and mouth. This was further confirmed by a two-way ANOVA (ASD vs. controls X eye vs. mouth) showing no difference between participant groups ($F(1,61)=0.20$, $P=0.66$, $\eta^2=0.0033$), ROI types ($F(1,61)=1.18$, $P=0.28$, $\eta^2=0.019$), nor interaction ($F(1,61)=0.91$, $P=0.34$, $\eta^2=0.014$).

Lastly, participants with ASD did not differ in mean fixation duration in each ROI from controls (**Fig. 3L**; eye: ASD: 270 ± 87.5 ms, controls: 267 ± 78.5 ms; $t(31)=0.12$, $P=0.91$, $g=0.041$, permutation $P=0.96$; mouth: ASD: 315 ± 133 ms, controls: 328 ± 137 ms; $t(30)=0.28$, $P=0.78$, $g=0.10$, permutation $P=0.77$; center: ASD: 299 ± 107 ms, controls: 269 ± 68.2 ms; $t(31)=0.92$, $P=0.37$, $g=0.31$, permutation $P=0.41$; difference between eye and mouth: ASD: -51.5 ± 153 ms, controls: -60.8 ± 204 ms; $t(30)=0.15$, $P=0.88$, $g=0.051$, permutation $P=0.86$).