

Therapist Neurodiversity Collective International

Does
your
Therapist?

• Therapy • Advocacy • Education •
Established January 2018



Collective Membership Commitment

- **Presume competence.**
- **Provide access to robust AAC without prerequisites.**
- **Respect and uphold self-determination for quality of life decisions.**
- **Support client needs first and foremost, including unrestricted access to the accommodations, modifications, and supports that work for them.**
- **Practice therapy models focused on building upon and expanding individual strengths.**
- **Advocate for equitable access and inclusion.**
- **Teach self-advocacy skills.**
- **Abject refusal of all ABA methodologies or ABA-derived therapy practices or programs.**
- **Refuse collaboration with BCBAs and RBTs to implement ABA goals.**
- **Reject neurotypical 'Social Skills Training' therapy models, materials, and commercial programs. (Clinical outcome objectives intended to mask autistic characteristics, e.g. changing behaviors such as stimming, forcing eye contact, or make autistic children or adolescents look 'less autistic.')**
- **Accept behavior as a possible communicative attempt, while working diligently towards understanding, rather than extinguishing or ignoring the behavior.**
- **Focus communication therapy on expanding the client's preferred manner of communication (e.g. Spoken, Robust AAC, Sign, Self-directed Spelling, Gestures, Actions, Body Language, Behavior).**
- **Respect body autonomy. (e.g. Will not physically manipulate client, without client consent. Use hand underhand and only with client consent, and only when necessary. Will not force-feed.)**
- **Never withhold access to emotional comfort, physical comfort, food, drinks, favorite items, activities, personal belongings as a way to manipulate or control.**
- **Commit to continued research/reading into the personal experiences of a wide range of Neurodivergent people.**
- **Commit to reading current research, and studying humane and trauma-informed best practices in my area of expertise, my provider setting, and population: Pediatric, Adult, Geriatric.**
- **Strive for Autistic children and adolescents to have a strong support base of Autistic peers and mentors.**
- **Use identity-first language, noting its consistency with the neurodiversity paradigm and preferences expressed within Autistic Culture.**
- **Refuse to collaborate with professional peers, clinics, schools, or facilities that use restraints, seclusion, coercion, manipulation, planned ignoring, punishments, or aversives.**
- **Promote Human Rights, respect Civil Liberties, uphold Human Dignity for all humans, especially including non-speaking, intellectually disabled, all neurodivergent people, marginalized neurodivergent populations, traumatically brain-injured, neurologically involved, and those with Mental Illness, Dementia, Alzheimer's, or otherwise disabled.**
- **Lead by my actions.**

