

A neurodiversity-affirming approach doesn't "treat Autism". Autism is NOT a disease, a medical injury, a behavioral problem.



Presume Competence

Definition of Intervention

"Action taken to improve a situation, especially a medical disorder. An occasion on which a person with an addiction or other behavioral problem is confronted by a group of friends or family members in an attempt to persuade them to address the issue.

The Expert Knows What's Best

Neurodiversity Affirming

HUMAN RIGHTS, RESPECTFUL, EMPATHETIC, INFORMED

Neurodivergent-Affirming therapists don't treat autism (Autism Intervention).

Both, Autistic lived experiences and contemporary research tell us it's unethical to write goals with outcomes for "normalization" through teaching/training autistic people to hide their autistic traits.

(The Double Empathy Problem, Diversity in Social Intelligence, Monotropism, Autistic Masking & Camouflage)

Autistic people are capable of learning, growing, and developing, just like all people do when well-supported. *

Neurodivergent-Affirming Therapy Goals:

Improve quality of life as determined by client, not the therapist. Effective and robust communication, self-determination, self-advocacy, access to supports.

Informed consent and refusal of consent is provided at all times. Client's "no" is always respected and honored.

Autistic play is authentic play.
Autistic play is functional for autistic people.

Research and autistic lived experiences tell us that training Autistic people to perform with Neurotypical social skills

- Just doesn't work. (Research & Lived Experiences)
- Enforces masking, leading to depression, loss of identity, chronic anxiety, suicidal ideation.
- Is dehumanizing, demeaning, elitist, and ableist.

Goals:

Present neutral information for navigating social interactions, and interpreting social situations

Advocacy:

- Teach perspective taking about differences in social communication
- The Double Empathy Problem
- Validate Autistic social diversity
- Train Neurotypicals to accept Autistic social differences.

Neurodiversity Lite

PERFORMATIVE, APPROPRIATE NEURODIVERSITY FOR \$\$\$

Therapist "Autism Expert" who Treats Autism, performs Autism Intervention

Buy my expensive "Neurodiversity" master class, handbook, video training, CEU event on how to treat Autism, or Autism Intervention/Behaviors.

- Led by an allistic (non-autistic) therapist **who knows somebody who is autistic** - a child, family member, friend, etc. who will teach you how to understand autism.
- Uses **neurodiversity lingo & the buzzwords** although not always correctly.
- ABA is considered "controversial" (but not unethical, immoral, a violation of human rights)
- Compliance/behavioral based, **treating "autistic behaviors"**
- Trains/sells products for Social Skills training
- Therapy to reduce sensory responses through toleration, exposure, extinction.
- Therapy goals for play, socialization/social engagement, reduction/extinction of stimming, table "readiness"
- "Learning to learn" *

"We all have to do things we don't like."
"They have to function in the real world."

"Autistic play is authentic play," but... let's shape it and make it **functional, meaningful, purposeful, imaginative, social, "more fun"**.

"Respect neurodiversity", but...

Teach your autistic clients how "to have meaningful relationships, theory of mind, increase empathy, accept responsibility for and fix their communication breakdowns, their social awkwardness, socially engage *appropriately*, sit at a table or in a circle to learn, at even a young age. Reduce movement. Use their interests, hobbies, and activities as rewards for compliance or social skills training intervention. Modify/change autistic social communication traits to appear "normal", help them "blend".

Adapted from Autistic Self Advocacy Network's
"For Whose Benefit? Evidence, Ethics, and Effectiveness of
Autism Interventions" - 2021

<https://autisticadvocacy.org/policy/briefs/intervention-ethics/>