

Autism, Neurodiversity, and Ableism: What Clinicians Need to Know

Part 3: Finding the Balance Between Support and Acceptance

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My Research


- How do neurodivergent children develop?
- Can we stop defining neurodivergent development as "lack of typicality"?
- What is neurodivergent development in its own right?

Dr. Vygotsky

"A child with a defect is not necessarily a defective child. A child whose development is impeded by a [disability] is not simply a child less developed than his peers but is a child who has developed differently... [Disabilities] foster creative, unendingly diverse...forms of development. What decides [the disabled child's] fate...is not the defect itself, but its social consequences..."


By understanding neurodivergent development, we can "discover the laws of diversity."

(Vygotsky, 2004)



Review

- How we define and respond to autism evolves over time and varies by culture
- Models of disability impact what we “do” about disability & disabled people
- Society has swung toward Social Model of Disability – accommodate
- Society is now swinging toward Neurodiversity Model of Disability – value diverse traits



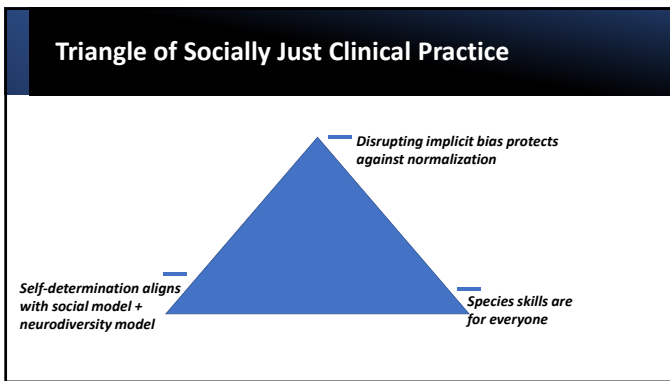
Questions

- What does “honoring the value of diverse traits” look like in young children?
- If we move away from normalization, what do we do in the clinic?
- Do we never shape a child’s behavior, or is all behavior modification “abusive”?
- How do we respect difference and include neurodivergent people in the life of society when this can be difficult to do practically speaking?

Overview of Today’s Presentation

Section 1: Explicit & Implicit Bias [what is it]
Section 2: Implicit Bias – Cases [recognizing it]
Section 3: How Implicit Bias Impacts Clinical Practice [harms]
Section 4: Self-Determination [importance]
Section 5: Species Skills [universal]

Conclusion: awareness of implicit bias; self-determination in the clinic; and “species skills” are the foundation of a just clinical practice



Section 1: Explicit & Implicit Bias

What is Bias?

Bias is another way to describe discrimination

- Explicit bias: We can see it.
- Implicit bias: We can't see it. It's inside of us, in our attitudes and reactions.

Bias is about *people*:

- You may not like mint ice cream or ranch dressing, but that's not bias.
- Bias happens because of who you are as a person.

Examples of Explicit Bias

- Until the 1960s, Black people/African-Americans could not eat in most restaurants and had to sit in the back of buses and train.
- Native Americans/members of First Nations communities were forbidden to speak indigenous languages.
- Many older buildings still do not have ramps or elevators, making it impossible for disabled people with mobility impairments and wheelchair users to access the activities inside.
- Well into the early 1900s, women were not allowed to attend most universities.

Undoing Explicit Bias

- Protest
- Civil disobedience
- Speeches, writing, media
- Anti-discrimination laws
- Education
- Advocacy

Activity ≈ 10 minutes & Discuss Results

- Open up a browser on your computer
- Go to <https://implicit.harvard.edu/implicit/takeatest.html>
- Scroll down until you see "I agree to proceed" and click that
- Click "DISABILITY IMPLICIT ASSOCIATION TEST (IAT)"
- Click "CONTINUE"
- Answer demographic questions
- Proceed to the actual IAT

Implicit Bias is Different Than Explicit Bias

- ❑ Implicit bias is an unconscious, involuntary cognitive process whereas explicit bias is intentional.
- ❑ Implicit bias does not always match what you believe: you could be very anti-racism, attend protests, and have friends from minority communities and yet you could still hold implicit, unseen biases about non-white people.
- ❑ Members of an identity group can have implicit biases about their own group (e.g. "internalized ableism")

Implicit Bias is Very Hard to Undo

- ❑ The human brain is designed to make judgments
- ❑ Judgment centers of our brain keep us alive as we sort things into dangerous/not dangerous, good to eat/bad to eat, etc.
- ❑ Unfortunately, the problem starts when we judge other groups of people.
- ❑ These judgements are *invisible, subconscious, and embedded in society*.
- ❑ You absorb implicit biases from growing up in society – everyone has them, no one is exempt!

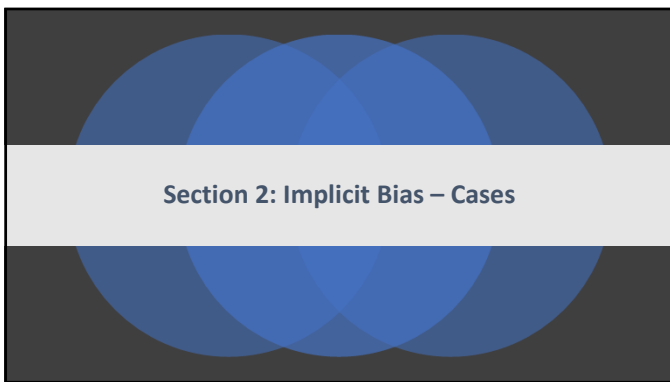
Dangers of Implicit Bias

- ❑ Implicit biases give rise to feelings and attitudes about other people based on identity characteristics (e.g., race, ethnicity, age, disability)
- ❑ Implicit biases can "favor" a group and overinflate positives, preventing authenticity
- ❑ Implicit biases maintain oppression: explicit bias may be reduced, but many people still do not have equal opportunities, encounter hostility, and are treated unfairly due to implicit biases

How to Reduce Implicit Bias

- ❑ **Consciously considering your implicit reactions, thoughts, & feelings so you can examine them openly – this requires effort, dedication, and tough conversations.**
- ❑ Meeting members of the group you have subconscious biases toward as equals – contact with them causes you to begin questioning those biases
- ❑ Encountering counter-stereotypical examples – when you meet someone or see images in the media that run counter to stereotypes, you can become more aware of implicit biases and begin detangling them.

(Allport, 1954; Wickline et al., 2016; Yaker & Hurley, 1987).



Section 2: Implicit Bias – Cases

Case 1: Where is the implicit bias?

- Kallyn had a new shower check-off chart. She was trying to shower every day, brush her hair, and put on clean clothes.
- Her Residence Supervisor was dismayed when Kallyn came downstairs looking unkempt in an old (though clean) sweatshirt. “Can’t you tie your hair back and put on something nice?” she asked Kallyn.

(Dickter et al., 2020)

Case 2: Where is the implicit bias?

- Jamar’s mother took him to the diagnostic appointment because Jamar’s teachers said he was having trouble staying seated, tended to repeat questions instead of answer them, lined up the math cubes instead of using them to add or subtract, and wandered on the playground instead of joining games with peers.
- After conducting a number of tests, the same tests conducted with all children, the clinicians told Jamar’s mother that Jamar had Conduct Disorder and suggested disciplinary techniques to correct his bad behavior.

(Kelly & Barnes-Holmes, 2013; Obeid et al., 2020)

Case 3: Where is the implicit bias?

- Lucy’s father was glad to get a referral to a pediatric dentist willing to see autistic children. Lucy had a tough time due to sensory issues and anxiety when he tried a “regular” dentist – they had left the office with Lucy in tears.
- When Lucy’s Dad called the autism-friendly dentist, the dentist said, “I know autism is a minefield. We can handle all the screaming, don’t worry.”

(Como et al., 2020)



Section 3: How Implicit Bias
Impacts Clinical Practice

Implicit Bias Can Reinforce Normalization

- Can cause internalized ableism
- Risk of not “teaching to the child”
- Out of step with society’s move to social model & neurodiversity model

Bias Impact Clinical Practice & Diagnosis

- Due to implicit biases about race, BIPOC children are more likely to be misdiagnosed; are diagnosed correctly later than white children; miss out on appropriate services, special education, and treatment; and are perceived as misbehaving instead of as in need of treatment
- Due to implicit biases about gender, girls are more likely to be misdiagnosed or diagnosed late or are perceived as having mental illness
- Due to implicit biases about sexuality and gender identity, non-binary/gender diverse children may be denied gender-related healthcare & are more likely to be diagnosed as mentally ill than as having a developmental condition

(Benevides et al., 2019; Blavier & Hadlock, 2019; Evans et al., 2018; Garlo, 1997; Haney, 2016; Hascheck, 2021; Imm et al., 2019; Obeld et al., 2020; Strang et al., 2018; Strang et al., 2020; Whitesell, 2017; Yingling et al., 2015)

Implicit Bias Harms the Family Around the Child

- Courtesy Stigma – family members are not disabled but come to feel stigmatized and discriminated against by association with their disabled child and/or experience discrimination because of the disability status of their child

(Como et al., 2020; Kelly & Barnes-Holmes, 2013; Nario-Redmond et al., 2019; Obeld et al., 2020)

Implicit Bias Harms Clinicians!

- ❑ Clinicians with high rates of implicit bias also have higher rates of “burnout”; career dissatisfaction; and stress

(Kelly & Barnes-Holmes, 2013)

Clinicians Change Society By Disrupting Implicit Bias

“Asking only autistic people to change how they socialize is like asking minorities to speak and dress more like white people in order to be accepted. That’s a really bad way to combat prejudice, racial or neurological.”
(Baillin, 2019, p. 4)

Reflect & Discuss

- ❑ What are some of your implicit biases about autism & autistic people?
- ❑ How might these implicit biases impact clinical moments?



Section 4: Self-Determination

Self-Determination: What Is It?

- Definition: The disabled person makes decisions about their life.
- Supported decision-making: The disabled person may receive support to make decisions, but ultimately the disabled person is the one making the choices.
- Correlated to motivation & efficacy: fundamental to human functioning
- Impacts outcomes: disabled people with high self-determination have better outcomes in all domains

(Cheak-Zamora et al., 2020; Friellink et al., 2018; Kim, 2019; Wehmeyer, 2005; White et al., 2018)

Can Everyone Do Self-Determination?

Q. A young adult on the autism spectrum is moving out of her parents' home and into the community. She has significant cognitive issues and limited use of speech. Can she self-determine a housing option?

Q. A child on the autism spectrum does not use speech and has been referred for SLP services. He has some pre-cognitive skills e.g. sorting shapes by color. He points to things he wants e.g. juice. Can he self-determine goals for SLP therapy?

Self-Determination as “Clinical Mandate”

- I can help disabled people reach their goals and make choices (even kids)
- I can help disabled people learn how to set goals (even kids)
- I can honor disabled people’s consent process (even kids)
- Self-determination is my “mandate” to help

Nexus of Implicit Bias + Self-Determination

- Checking our implicit biases prevents unconscious reinforcement of normalization and oppression
- Fostering self-determination at the youngest ages is our “license to treat” or the way we can help
- Self-determination aligns with the Social Model + Neurodiversity Model

Section 5: Species Skills

Humans Develop in Relationship

- We grow by interacting interpersonally from the first moments of life
- We learn how to be a person from relating to others

What Skills Do You See Here?

<https://www.youtube.com/watch?v=t3RvhJCTuds> (2021)
<https://www.youtube.com/watch?v=AY35eXTKVLV> (2019)

Comedian DJ Pryor and his son, Kingston

This is Specific to Humans / Primates / Mammals

Trailer: [Babies](#) (2010)

Human relationships are universal *and* mediated through culture

(Vygotsky, 2004)

Rich Interpersonal Relationships That Fuel Growth

- Looking & noticing
- Hearing & processing sound
- Copying
- Timing
- Affect
- Emotion signals
- Social cues
- Trust
- Warm bond

Numerous body and brain systems involved!

Disruptions to Foundational "Relationship Skills"

- Sensory processing challenges
- Motor planning issues / praxis
- Visual impairments
- Lack of response / delayed response
- Inability to process cues, words, sounds
- Cognitive confusion
- Fear / anxiety
- Slow speed

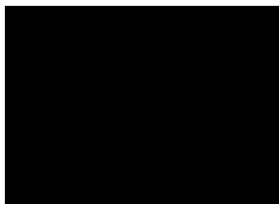
Disruptions Are Not Diagnostic Specific

- Neurodiversities
- Intellectual disability
- Physical disabilities
- Sensory disabilities
- Genetic disorders
- Malnutrition
- Brain trauma
- Nervous system differences
- Individual differences
- Parent differences too!

"Species Skills" Are For Everyone

- all of us are working on these skills all the time!
- those with differences / disruptions may need extra support but "species skills" viewpoint destigmatizes learning
- supporting development of "species skills" does not equal normalization
- individual and cultural differences can be honored

Taste of "Species Skills" In Practice



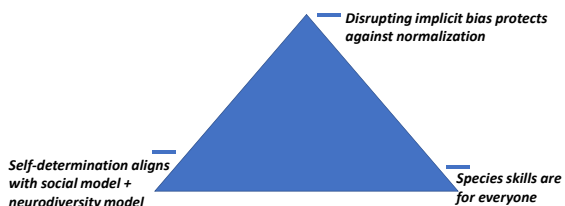


Conclusion

Summary

- ❑ Reality: Disabled people need support, therapies, treatments, skill development
- ❑ Self-advocates and allies have pushed back against normalization as oppressive and harmful
- ❑ Big changes in society e.g. civil rights movements support a sea change to social model & neurodiversity model
- ❑ This may leave clinicians wondering how to help in ways that are just

Triangle of Socially Just Clinical Practice 2



Three-Pronged Approach for Justice in Clinical Practice

1. Work on disrupting implicit bias to protect against normalization
2. Use a self-determination framework from earliest ages to facilitate social model accommodations & neurodiversity model valuing of diversity
3. Provide support for "species skills" to foster rich relationships needed for human growth while respecting individual & cultural differences

More to Explore

- [Aiyana Bailin: Clearing Up Some Misconceptions About Neurodiversity](#)
- ["Peanut Butter Falcon" Movie: Trailer](#)
- ["Babies" Movie: Trailer](#)
- [Jim Sinclair: Don't Mourn for Us](#)
- [Casey Rentz: Black and Latino Children Are Overlooked When It Comes to Autism](#)
- [The Website of Morenike Giwa Onaiwu: www.morenikego.com](#)
- [Catherine Pearson: Black Children Typically Experience Delay in Diagnosis](#)
- [United Nations World Autism Awareness Day 2018: How Ableism, Racism, & Sexism Intersect](#)
- [Autistic Women & Nonbinary Network: https://awnnetwork.org/](#)

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