

Understanding Autism



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(she/her)

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What is autism?

Autism Spectrum Condition (ASC)

Autism is not a learning disability

Autism is not a mental health condition

Autism is a developmental disability

Differences in learning / thinking





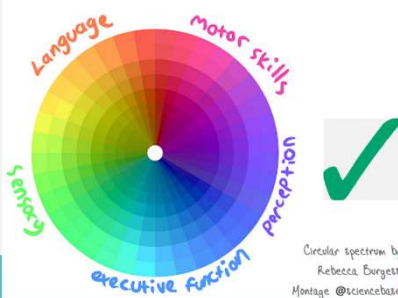
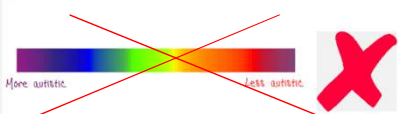
‘Person with autism’.. ‘person has autism’
(person-first language)



‘Autistic person’
(identity-first language)

Understanding the Spectrum

What does the autism spectrum look like?



“autism levels”

“Mild, moderate, severe”

“high functioning, low functioning”



A Medical Model

You have a person in the physical sense — they have hair, a nose and a mouth — but they are not people in the psychological sense” - Ivar Lovaas



- ⊗ Deficit / disorder / symptoms
- ⊗ Focuses on “what’s wrong with you”
- ⊗ Symptoms / impairments
- ⊗ Treating autism
- ⊗ Mainstream education



A neurodiversity model








- ✓ The person is valued
- ✓ Challenges ABLEISM
- ✓ Focuses on removing barriers in the environment
- ✓ Accommodations, adjustments, supports
- ✓ Autism Acceptance



SENSORY PROCESSING

Hypo sensitive
(Under-reactive)
SEEKING



-  Sight (Vision)
-  Hearing (Auditory)
-  Smell (Olfactory)
-  Taste (Gustatory)
-  Touch (Tactile)
-  Vestibular (Movement)
-  Proprioception (Body Position)

Hyper sensitive
(Over-reactive)
AVOIDING



“repetitive patterns of behaviour”

- Need for predictability
- Rule-based thinkers
- Intense interests ('special interests')
- Stimming and echolalia (more on this later)



MASKING



Common additional difficulties

- Anxiety
- Pathological Demand Avoidance (PDA)
- Depression
- Eating disorders
- Trauma (PTSD, complex PTSD)
- OCD
- Gender dysphoria
- Suicidal thoughts / self-harm / suicide
- Substance abuse
- Personality Disorders (often misdiagnosed)

- Selective Mutism
- Language delays / disorders
- Stammers
- Speech sound / phonological difficulties
- Dyslexia
- ADHD
- Dyspraxia
- Dyscalculia
- Hearing difficulties
- Motor difficulties
- Epilepsy
- Irlen Syndrome
- Gastrointestinal (digestion)

Autistic Communication

- DIVERSITY in methods of communication
- Social anxiety / **masking**
- Literal / direct communicators
- Our social skills look different
- Remembering spoken info
- Info-dumping / overlapping speech
- Eye-contact...

*Did I talk too much? Too little?
Make enough eye-contact?*



Stimming

Short for 'self-stimulatory behaviours'.

FUNCTIONS:

- Self-soothe
- Stimulate
- Express emotion
- Communicate
- Process information



Echolalia

- The repetition of phrases / sounds / words
- Can be immediate or delayed

Functions

To stim, to develop language, to self-soothe, to self-regulate, to process information, to communicate, to express a feeling



SENSORY OVERLOAD



- * A meltdown is **not** a tantrum
- * Sudden release of emotions
- * Build-up of anxiety
- * Result of **masking**
- * Overstimulation of the senses



Autism myths

Autistic people lack empathy



Autistic people have poor social skills



Punitive, medical approach	Empathic, neurodiversity approach
Treat autism, reduce deficits / symptoms	Autism Acceptance
Functioning labels, levels, person with autism	Describe strengths & needs, autistic person
Suppress stimming	Respect stimming / echolalia
Train social skills / masking	Respect autistic communication
Ignore sensory distress	Honour sensory needs
Assumptions about behaviour	Behaviour = communication
Rewards, withhold food / activities	Non-trauma inducing practices based on intrinsic motivation
Compliance	Teach self-advocacy, perspective-taking
Physically touch a child's body part without consent	Respect body autonomy



FINAL THOUGHTS...

How to be an ally

- Accept our sensory needs
- Check your unconscious biases
- Help us take off the mask
- Listen to autistic voices



QUESTIONS?

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USEFUL WEBSITES

Neuroclastic

<https://neuroclastic.com/>

Autistic Science Person

<https://autisticscienceperson.com/>

The Autistic Advocate

<https://theautisticadvocate.com/>

Therapist Neurodiversity Collective

<https://therapistndc.org/>