

Ableist versus Neurodiversity-Affirming OT Practice with Transition-Aged Youth and Adults

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Key Assumptions

- ❖ Neurodivergent people are inherently worthy of dignity and acceptance, and deserve to flourish in the community as their most authentic selves.
- ❖ The goal of therapy should not be to help clients adjust to normative social systems, but to dismantle the ways in which those systems/conditions are oppressive and create barriers to desired participation.
- ❖ Neurodivergent people have the right to self-determination and self-advocacy, and thus should define what a “good outcome” or “quality life” means for them.
- ❖ A neurodiversity-affirming approach requires consideration of intersectionality and trauma in shaping one’s lived experience.
- ❖ The neurology of neurodivergent people may produce differences in behavior, communication, expression, or other needs/preferences that are equally valid to those of neurotypical people.
- ❖ Neurodivergence is a different, not lesser, way of being with its own unique cultural characteristics— for this reason, cultural humility should be a guiding framework for ethical practice with neurodivergent individuals.

Key Considerations

- ❖ Critically reflect upon your own privileged positionality as a therapist and work toward shifting the power differential to the client. As much as possible, the client should be actively involved in choosing which strategies/approach(es) feel best to them.
- ❖ Consistently ask yourself “Why am I doing this”? Is the intervention really for your client’s benefit, or the comfort of neurotypicals in alignment with socio-cultural and behavioral expectations?

Disclaimers

- ❖ Some of these targets are different from occupation-centered goals. Here, we are listing performance areas that often impact efforts towards occupation-centered goals.
- ❖ Use this chart to educate and inform rather than to make deterministic judgments on what is ableist versus neurodiversity-affirming— client and context specific nuance may exist in many of the strategies listed. See the OTPF and AOTA Code of Ethics for official practice guidance.



OTs for Neurodiversity



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Targets in therapy practice	Ableist approach(es)	Neurodiversity-affirming approach(es)	Resources for further information
Emotional regulation	<ul style="list-style-type: none"> -Planned ignoring -Redirection -Rewards, punishments -Preview behavioral ‘expectations’ -Reward driven behavioral contracts or token systems -Seclusion, suspension, “time out” -Over-correction (guided repetitive practice of replacement behaviors) -Reinforce ‘correct’ identification of emotion labels -Use language such as “aggressions,” “tantrums,” “maladaptive / challenging behaviors” -Maintain a surface-level view of behavior– Ignore underlying needs/ attempts to communicate or environmental/contextual factors -Label certain emotions as “good” or “bad” 	<ul style="list-style-type: none"> -Therapeutic use of self and co-regulation -Identify internal & external causes of distress and modify task/ environment to meet needs -Provide education on neuroception and interoception to facilitate proactive responses to dysregulation -Support use of sensory-motor based, metacognitive, and energy regulation tools/strategies -Teach self-advocacy for emotional regulation needs (i.e. requesting a break or change in the activity/environment) -Provide structure & teach how to use it for self-regulation (i.e. visual supports/ schedules, routines) -Facilitate client-directed problem solving, allowing space for natural consequences (dignity of risk) -Identify coping strategies for preventing Autistic burnout -Use language or metaphors that make sense to the individual to 	<p>Stephen Porges's Polyvagal Theory</p> <p>Autism Level UP– Energy Meter, All the Feelzzz App, When Words Fail</p> <p>Checklist for Identifying Sources of Aggression</p> <p>Therapist Neurodiversity Collective– Compilation of articles on self-harm or aggression</p> <p>Mood Meter</p> <p>The Intersection of Autism and Trauma</p> <p>The Trauma Geek</p> <p>Article on Meltdowns and Shutdowns</p> <p>Autistic Fatigue and Burnout</p> <p>Neuroception 101– How the mindbody scans and adapts for safety and danger</p> <p>Laurent, A.C. & Fede, J.H. (2021). Leveling up regulatory support through community collaboration. <i>Perspectives</i>, 6, 2, 288-305.</p>



		<p>describe their emotional state or energy arousal levels</p> <ul style="list-style-type: none"> -Validate the individual in experiencing the full range of their emotions / arousal levels -Create and support opportunities to experience connection, engagement, and belonging -Recognize the signs and impact of trauma on emotional regulation & utilize principles of trauma-informed care -Remain sensitive to distinctions in neurodivergent emotional responses (i.e. meltdown versus shutdown) -Trial our Daily Wellness Check-In tool 	<p>Prizant, B.M. & Laurent A.C. (2016) Emotional regulation and autism spectrum disorders. <i>Ehearsay</i>, 6,3, 34-40</p> <p>NeuroClastic— Alexithymia and Autism—What its like to not know how you feel</p> <p>SAMHSA's Concept of Trauma and Guidance for Trauma Informed Care</p>
Sensory processing	<ul style="list-style-type: none"> -Redirect sensory seeking to more 'desired' or 'on task' behavior -Promote "whole body listening," "quiet hands," or restrictive seating expectations -Set goals to reduce or replace non-harmful stims -Utilize protocol or norm-based sensory diets imposed on individual and/or sensory integration for the 	<ul style="list-style-type: none"> -Support client's exploration of the functional purpose of their stims as a means for self-regulation, enjoyment, information processing, etc. -If stimming serves as a sign of discomfort/overwhelm for the client → environmental modification and task demand reduction -If stimming is self-harming → identify/validate the unmet need and 	<p>Kapp, S. K., Steward, R., Crane, L., Elliott, D., Elphick, C., Pellicano, E., & Russell, G. (2019). 'People should be allowed to do what they like': Autistic adults' views and experiences of stimming. <i>Autism</i>, 23(7), 1782-1792.</p> <p>Fulton, R., Reardon, E., Kate, R., & Jones, R. (2020). Sensory Trauma: Autism, Sensory Difference and the Daily Experience of Fear. <i>Autism Wellbeing CIC</i>.</p> <p>Robledo, J., Donnellan, A. M., &</p>



	<p>purpose of altering autistic ways of sensory processing</p> <ul style="list-style-type: none"> -Isolate or restrain the individual in a “sensory room” during a meltdown -Force the individual into unaccommodating sensory environments -Assume higher levels of stimming correspond with ‘lower functioning’ of the individual or lower cognitive ability -Gatekeep when and where stimming is allowed to take place -Allow stimming as a ‘reward’ after therapist-directed activity -Restrict access to sensory tools (i.e. fidgets, headphones) -Frame sensory needs as “challenging behavior” -Shame or discourage “picky” eating -Use pathologizing language to describe client’s sensory patterns (i.e. overreaction, maladaptive response) 	<p>explore client chosen alternatives or preventative supports</p> <ul style="list-style-type: none"> -Provide and protect time and space needed for sensory regulation across settings -Support client to access and self advocate for sensory related accommodations in the classroom, community, or workplace -Educate client on their unique sensory profile -Environmental or task adaptation aligned with client’s sensory preferences (i.e dim lighting, added structure, reduced visual/auditory stimuli) -Support exploration and use of sensory tools/strategies for self regulation (i.e. movement/music breaks, echolalia, soothing habits/routines) -Educate others about autistic forms of processing sensory information, including signs of dysregulation 	<p>Strandt-Conroy, K. (2012). An exploration of sensory and movement differences from the perspective of individuals with autism. <i>Frontiers in integrative neuroscience</i>, 6, 107</p> <p>Autism Level UP– Sensory Strengths and Challenges Chart, The Regulator 2.0</p> <p>Greg Santucci, Occupational Therapist</p> <p>Sarah Selvaggi Hernandez, The Autistic OT</p> <p>Article– Making Sense of the Senses– Part 1– Sight, Sound, Smell, Touch, and Taste</p> <p>Article– Making Sense of the Senses–Part 2–The Secret Agents of Interoception and Proprioception</p>
Participation	<ul style="list-style-type: none"> -Use prompts and rewards (i.e. token system) to ensure compliance in 	<ul style="list-style-type: none"> -‘Buy-in’ based on individual enjoyment and meaningfulness 	<p>Alfie Kohn’s Book– “Punished by Rewards”</p>



	<ul style="list-style-type: none"> activities, particularly those 'non-preferred' -Withhold special interests or valued activities / objects (i.e. first-then charts) -Value task completion over the process of doing -Determine for the client what activities to participate in without their involvement in decision-making process -Decide for the client 'appropriate' methods of participating and for how long -Use language which limits choice/possibility (i.e. you should, let's do, next you will) 	<ul style="list-style-type: none"> -Adjust / discontinue therapy activities based on engagement -Facilitate discovery and exploration of special interests -Facilitate peer learning in natural environments -Allow flexibility in activities to embrace diverse ways of doing -Prioritize joy, well-being, and autonomy derived from participation -Re-frame non-compliance as self-advocacy -Use open, invitational language which solicits consent (i.e. do you still want to ____?) 	<p>Reframing Autism Article– Why Passions Aren't Rewards</p> <p>The Neurodivergent Teacher</p> <p>Autism Level UP– Person in Context Tool to holistically identify supports needed for participation, Solve Not Size: Problems with activities</p> <p>The SCERTS Model</p> <p>*Disclaimer there is potential for misapplication leading to ableist practices. Use our key assumptions and considerations to guide your judgment.</p> <p>National Autistic Society– Pathological Demand Avoidance</p> <p>Two Sides of the Spectrum Podcast Episode– Pathological Demand Avoidance and the Drive for Autonomy</p>
Social skills	<ul style="list-style-type: none"> -Encourage conformity to neurotypical expectations / social norms (i.e. Social Thinking curriculum, social stories that encourage masking) -Social skills 'training' -Encourage eye contact -Reinforce gender binaries for expected socialization -Devalue client's desire/preference to 	<ul style="list-style-type: none"> -Value autistic styles of social interaction + support access to all forms of desired participation (i.e. online forums, special interest focused groups, peripheral participation) -Facilitate access to community-based networks of social support -Provide education on masking and fawning ; support the client to unmask to a desired extent, while 	<p>Mandy, W. (2019). Social camouflaging in autism: Is it time to lose the mask?</p> <p>Williams, G. L., Wharton, T., & Jagoe, C. (2021). Mutual (Mis) understanding: Reframing Autistic Pragmatic "Impairments" Using Relevance Theory. <i>Frontiers in Psychology</i>, 12, 127</p> <p>NeuroClastic Article– Masking and Mental Health Implications</p> <p>Psychology Today Article– Authenticity and Autism</p>

	<p>be alone at times or not engage socially with others</p> <ul style="list-style-type: none"> -Uni-directional perspective taking -Make assumptions about the quantity and/or nature of friendships needed for a fulfilling social life 	<p>remaining sensitive to their emotional safety</p> <ul style="list-style-type: none"> -Bi-directional perspective taking (i.e. Educate both autistics and neurotypical peers about differences in social cultures and how to navigate when issues arise) -Collaborate w/ client to create individualized social scripts or stories that help them understand/ engage with their environment in desired ways -Teach self-advocacy and self-protection strategies for social situations -Use metaphors or strategies such as spoon theory to support social energy conservation 	<p>National Autistic Society– The Double Empathy Problem</p> <p>Therapist Neurodiversity Collective– Nothing about Social Skills Training is Neurodiversity Affirming. Absolutely Nothing. and Why perspective Taking and Neurodiversity Acceptance?</p> <p>Crompton, C. J., Ropar, D., Evans-Williams, C. V., Flynn, E. G., & Fletcher-Watson, S. (2020). Autistic peer-to-peer information transfer is highly effective. <i>Autism</i>, 24(7), 1704-1712.</p> <p>Laurent, A.C. & Rubin, E. (2018). Intervention to support social communication for functional participation of individuals with ASD. In R. Watling & S. Spitzer (Eds.), <i>Autism: A comprehensive occupational therapy approach (Fourth Edition)</i>. Bethesda, MD: AOTA Press.</p> <p>Kristy Forbes– Fawning</p>
Communication	<ul style="list-style-type: none"> -Prompt for speaking communication -Positively reinforce neurotypical patterns of communication (i.e. ‘back and forth’ vs. monologue) -Gatekeep access to AAC in order to ‘push’ for verbal communication or “prerequisite” skills -Reinforce hierarchies of 	<ul style="list-style-type: none"> -Value all forms of communication, both speaking and non-speaking (i.e. ASL, pictures, gestures, eye gaze, AAC, letter boards) -Affirm and educate self and others about differences in communication styles between autistic and neurotypical people -Provide unlimited access to 	<p>Donaldson, A. L., Corbin, E., & McCoy, J. (2021). “Everyone Deserves AAC”: Preliminary Study of the Experiences of Speaking Autistic Adults Who Use Augmentative and Alternative Communication. <i>Perspectives of the ASHA Special Interest Groups</i>, 1–12.</p> <p>Woodfield, C. & Ashby, C. (2015). The right path to equality: Supporting high school students with complex</p>



	<p>communication (i.e. insist on success with low tech before trialing high tech devices)</p> <ul style="list-style-type: none"> -Withhold AAC because the individual has verbal speech, despite struggling to communicate at times of distress -Limit functions of communication (i.e. facilitating and expecting communication for only wants and needs) -Restrict topics of communication to appropriate or age appropriate ; discourage sharing about special interests 	<p>communication devices and refer/collaborate with neurodiversity-affirming SLPs</p> <ul style="list-style-type: none"> -Present information in a variety of mediums (i.e. visual, text, objects, spoken, etc.) -Allow ample processing time -Utilize our cross-neurotype communication tips -Model and use multimodal communication to interact with clients (not just present for them to use, but actually interact in ways that are comfortable and reliable). *Use your own modality– avoid taking over their ‘voice’ to model! 	<p><u>communication needs.</u> <i>International Journal of Inclusive Education.</i></p> <p>Ashby, C.E. & Causton-Theoharis, J. (2012). <u>Moving quietly through the door of opportunity: Perspectives of college students who type to communicate.</u> <i>Equity and Excellence in Education</i>, 45(2), 261–282.</p> <p>Hillary, A. (202). Neurodiversity and cross-cultural communication. In H. Bertilsdotter Rosqvist, N. Chown, & A Stenning (Eds.), <i>Neurodiversity studies: A new critical paradigm</i>. London: Routledge.</p> <p>Ten Rules for Ensuring Miscommunication When Working With Autistic People and People with Learning Disabilities: ... and maybe what to do about it by Damion Milton</p> <p>NeuroClastic Article– Two Communication Styles Weavers and Concluders</p> <p>AAC Etiquette Essentials</p>
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Executive Functioning	<ul style="list-style-type: none"> -Frame executive functioning challenges as “challenging behavior” -Use reward/punishment charts to shape client’s performance, responses, feelings and actions related to attention, cognitive flexibility, and planning/organization -Use predetermined time-limits to threaten or pressure for compliance -Focus on isolated, rote skill-building without consideration of the occupational context and meaning -Use self-monitoring charts to promote adherence to neurotypical expectations -Use extensive verbal commands / prompting -Value remedial approaches to executive functioning over environmental adaptations for support -Make assumptions about what “balanced” time use looks like -Utilize overly simulated environments to practice executive functioning skills 	<ul style="list-style-type: none"> -Promote self-determination and self-reflection with goal-setting -Support incorporation of chosen organizational strategies into daily habits/routines (i.e. schedule, checklists, virtual assistant) -Utilize a coaching approach to guide clients in problem-solving and generating their own ideas -Build on client’s rituals, routines, and states of occupational “flow” to support executive functioning -Support transitions via visual/written supports/schedule, comfort object, allowing time/space as needed -Minimize verbal information→ structure the environment to convey instructions and promote occupational “flow” (i.e. reduce dysregulating sensory input or distractions, arrange tasks in order of completion) -Affirm the value of mistakes as part of learning -Support self-advocacy for executive functioning supports (i.e. requesting written copies of verbal instructions) -Facilitate self-exploration of learning 	<p>The Neurodiversity Podcast– episodes about Executive Functioning</p> <p>Planet Neurodivergent Article– Creativity Functioning Skills: Rethinking Executive Dysfunction</p> <p>NeuroClastic– A Guide to Understanding, Developing, and Applying Reasonable Accommodations for Autistic People</p> <p>Inventory of apps to support executive functioning</p> <p>NC State– Index of Learning Styles Questionnaire</p> <p>Neuroclastic– Brain Story Worksheet</p> <p>Tiimo App</p> <p>Murray, D., Lesser, M., & Lawson, W. (2005). Attention, monotropism and the diagnostic criteria for autism. <i>Autism : The International Journal of Research and Practice</i>, 9(2), 139-156.</p> <p>Cognitive Orientation to Daily Performance (CO-OP) Coaching Approach</p> <p>TEACCH Structured Teaching</p> <p>*Disclaimer– TEACCH strategies can be applied in both strengths-based/helpful and compliance oriented ways. Use our key assumptions and considerations to guide your judgment.</p>
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		<p>style and support needs</p> <ul style="list-style-type: none"> -Promote executive functioning skill development via naturalistic occupational engagement -Provide client with autonomy over the order of activities on schedule, and whenever possible, the activities themselves 	
Employment	<ul style="list-style-type: none"> -Focus on soft skills as defined by neurotypical norms (i.e. professional "behavior" or social niceties) -Measure success by capitalistic notions of economic productivity -Demonstrate bias toward one form of work over another (i.e. volunteering or freelance vs. traditional work settings, part time vs. full time) -Practice forced eye contact and social skills training during mock interviews -Focus on only motor planning for vocational tasks as opposed to other variables involved in completion of tasks -Goals focused on elimination of job supports 	<ul style="list-style-type: none"> -Advocate for and promote access to accommodations, modifications and supports in the workplace -Embed self-regulation breaks into client's work schedule as needed -Form relationships with local business owners and organizations in order to establish authentic community-based work experiences and understanding of neurodiversity -Withhold assumptions on the individual's employment trajectory and center the individual's ambitions/desires -Community-based work experience that aligns with client's interests, strengths, and skillsets -Prioritize satisfaction, fulfillment, and self-determination in the career 	<p>Gragoudas, Stelios. 'Preparing Students with Disabilities to Transition from School to Work through Self-determination Training'. 1 Jan. 2014: 407 – 411.</p> <p>Job Accommodation Network</p> <p>Career One Stop</p> <p>O*NET Interest Profiler</p> <p>Neurodiversity Network- Career Readiness</p> <p>Self Directed Employment Planning Modules</p> <p>Tomczak MT, Szulc JM, Szczerbska M. Inclusive Communication Model Supporting the Employment Cycle of Individuals with Autism Spectrum Disorders. <i>International Journal of Environmental Research and Public Health</i>. 2021; 18(9):4696.</p>



	<ul style="list-style-type: none"> -Remedial tasks as only offered job duties available at job sites -Pseudo work experiences that are classroom-based and rote -Frame work-readiness as independence in ADLs -Utilize vocational “tracking” without person-centered exploration of career possibilities 	<p>exploration process</p> <ul style="list-style-type: none"> -Ensure and recommend access to communication in the workplace -Employ a flexible, person-centered approach, acknowledging that career interests and opportunities may change over time -Promote the value of neurodiversity in the workplace (i.e. innovation, creativity, organizational culture) -Train co-workers to be natural supports 	<p>Brinzea, V.M. (2019). Encouraging neurodiversity in the evolving workforce: The next frontier to a diverse workplace. <i>Scientific Bulletin-Economic Sciences</i>, 18(3), 13-25.</p> <p>Forbes Article—The case for hiring neurodiverse candidates</p> <p>AOTA Fact Sheet—The Role of OT in Facilitating Employment</p> <p>Jobs for the Neurodivergent</p>
Higher Education/ Training	<ul style="list-style-type: none"> -Implement education-related goals with the sole aim/outcome of paid work -Value academic achievement outcomes over health/wellness, interpersonal relationships and emotional support needs during post-secondary schooling -Demonstrate bias toward one education trajectory over another via predetermined tracks (i.e. community college, university-inclusive, trades, tech, certificate programs, etc) -Target higher education goals without considering intersectionality 	<ul style="list-style-type: none"> -Involve student participation and input in identifying strengths and access needs to inform self-advocacy for academic accommodations -Facilitate understanding of disability rights and student's role in navigating self-disclosure to access disability services in postsecondary settings -Presume competence -Promote student-selected academic/learning goals -Support client participation using 	<p>Clouder, L., Karakus, M., Cinotti, A. et al. Neurodiversity in higher education: a narrative synthesis. <i>High Educ</i> 80, 757–778 (2020).</p> <p>Gillespie-Lynch, K., Bublitz, D. Donachie, A., Wong, V., Brooks, P.J. & D'Onofrio, J. (2017). “For a Long Time Our Voices have been Hushed”: Using Student Perspectives to Develop Supports for Neurodiverse College Students. <i>Frontiers in Psychology</i>, 8.</p> <p>Whitmer, Susan. (2021). Inclusive Campus Environments: An Untapped Resource for Fostering Learner Success. <i>Current Issues in Education</i>: Vol. 22 Issue 1, 1-11.</p> <p>Jonathan Vincent, Megan Potts, Daniel</p>



	<p>(i.e. socio-economic status, multiple disabilities, race, culture, gender and other identities)</p> <ul style="list-style-type: none"> -Put students in situations where they may be vulnerable to tokenization in the name of disability representation (i.e. photo ops with the football team, being used for DEI efforts without adequate support/true involvement) -Expectations of self-advocacy without appropriate, individualized levels of support given -Make assumptions about one's potential to attain and succeed in higher education based on the nature of their disability (i.e. non-speaking individuals or with visual impairment) 	<p>strengths-based, client-directed goals/outlook for and interest in post secondary education.</p> <ul style="list-style-type: none"> -Include exploration of postsecondary programs and informed decision making factors (i.e. living options, financial aid, campus life opportunities) -Provide experiences of authentic inclusion, visibility, and leadership in student life -Facilitate connections to other students with shared interests or identities (i.e. Neurodiversity club, LGBTQ+ alliance, recreational groups) -Consult with faculty on universal design for learning -Train peer supports on strengths-based approaches 	<p>Fletcher, Simon Hodges, Jenny Howells, Alex Mitchell, Brett Mallon & Thomas Ledger (2017) 'I think autism is like running on Windows while everyone else is a Mac': using a participatory action research approach with students on the autistic spectrum to rearticulate autism and the lived experience of university, <i>Educational Action Research</i>, 25:2, 300-315.</p> <p>Duerksen, K., Besney, R., Ames, M., & McMorris, C.A. (2021). Supporting Autistic Adults in Postsecondary Settings: A Systematic Review of Peer Mentorship Programs. <i>Autism in Adulthood</i>, 3(1), 85-99.</p> <p>Think College</p> <p>AOTA Fact Sheet - Students With Disabilities in Postsecondary Education Settings: How Occupational Therapy Can Help</p>
Independent Living	<ul style="list-style-type: none"> -Reinforce normative standards of independence as a value and goal of therapy (i.e. to be a successful adult, one must be able to do things by oneself or without help) -Create goals and expectations based solely on a client's biological age and presumed social standards 	<ul style="list-style-type: none"> -Embrace and normalize inter-dependence -Align therapy with client-directed goals and interests no matter their perceived relation to or alignment with their biological age -Collaborate with client to identify 	<p>National Council on Independent Living: Disability Pride Toolkit</p> <p>Mpofu, N., Machina, E. M., Dunbar-Krige, H., Mpofu, E., & Tansey, T. (2020). Effective Practices for Helping Students with Neurodiversity Transition to Independent Living. <i>Oxford Research Encyclopedia of Education</i>. Published.</p>



	<ul style="list-style-type: none"> -Ignore markers of the transition to adulthood like romantic or sexual relationships, gender/identity exploration, puberty, family/parenting and home ownership -Assume that living arrangements valued in Western culture (i.e. independent living) are preferred over other arrangements (i.e. living with family) -Use a checklist of skills to determine whether someone is “ready” to transition to another living arrangement, ignoring potential environmental adaptations/ supports that could make it possible -Use direct physical prompting which controls the clients motor movements for daily living tasks (i.e. hand over hand) -Reinforce inflexible, arbitrary “rules” for daily living tasks (i.e. darks and lights must be separated, must shower daily, teaching one method of loading dishwasher as ‘correct’) -Over-simplify learning/participation without accounting for natural variation in ability and existing knowledge among group 	<ul style="list-style-type: none"> areas of strengths and areas of support needed -Teach (and model) bodily autonomy and consent -Enable self-determination regarding living options and supports wanted/unwanted -Promote an understanding of health and community safety that is sensitive to neurodivergent lived experience, as well as its intersections with class, race, gender and sexual orientation -Facilitate exploration of roles and responsibilities for the client’s desired adult life goals -Introduce tools/strategies for maintaining occupational balance -Inform families on least restrictive guardianship options and refer to a trusted disability attorney -Support the individual to participate in / lead their own IEP or person-centered planning meeting (see our Holistic person-centered planning tool) 	<p>Dekker M. (2020) From Exclusion to Acceptance: Independent Living on the Autistic Spectrum. In: Kapp S. (eds) Autistic Community and the Neurodiversity Movement. Palgrave Macmillan, Singapore.</p> <p>Njelesani, J., Teachman, G., Durocher, E., Hamdani, Y., & Phelan, S. K. (2015). Thinking critically about client-centred practice and occupational possibilities across the life-span. <i>Scandinavian journal of occupational therapy</i>, 22(4), 252-259.</p> <p>Krempley, T., & Schmidt, E. K. (2021). Assessing Activity of Daily Living Task Performance Among Autistic Adults. <i>Autism in Adulthood</i>, 3(1), 37-51.</p> <p>The Autism Spectrum Guide to Sexuality and Relationships by Emma Goodall</p> <p>Sex Ed Led by Self-Advocates with IDD</p> <p>Video– Sex and Disability</p> <p>Healthcare Transition One Pager</p> <p>Supported Decision Making</p> <p>Accessible Chef</p>
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Community participation	<ul style="list-style-type: none"> -Reinforce biased perceptions of community occupations/activities (i.e. good occupations and bad occupations, normal ways and wrong ways of doing/being) -Define community participation based on traditional individual outcomes of employment, education and independent living as opposed to uplifting a broader definition of community visibility -Simulate/fabricate community-based participation -Focus goals on increasing independence and functionality as defined by social expectations -Failure to address participation across <i>multiple</i> communities -Define community participation as participation in programs exclusively designed for people with disabilities -Define community participation as participation solely in "inclusive" programs among people without disabilities -Narrowly define what community is and how it is experienced based off normative standards (i.e. dismissal of 	<ul style="list-style-type: none"> -Focus on meaning and quality of life as defined by client -Advocate for/with clients, centering their voice and listening to their genuine wants, needs, likes, dislikes -Advocate in the community with stakeholders, businesses, community members, etc, to promote equitable inclusion, access for and understanding of neurodiversity -Explore the interplay between personal, physical, cultural and social factors in order to enhance community mobility and access -Promote civic participation (i.e. voting, volunteering, signing petitions) -Support building of healthy relationships and social networks -Facilitate opportunities for belonging and positive interaction with peers -Support exploration of community roles and responsibilities -Expose the individual to positive representation of neurodivergent adults & connect them to mentors or 	<p><u>CPI - community participation indicators assessment</u></p> <p>Chang, F.-H., Coster, W. J., & Helfrich, C. A. (2013). Community Participation Measures for People With Disabilities: A Systematic Review of Content From an International Classification of Functioning, Disability and Health Perspective. <i>Archives of Physical Medicine and Rehabilitation</i>, 94(4), 771–781.</p> <p>Simplican, S. C., Leader, G., Kosciulek, J., & Leahy, M. (2015). Defining social inclusion of people with intellectual and developmental disabilities: An ecological model of social networks and community participation. <i>Research in Developmental Disabilities</i>, 38, 18–29.</p> <p>Logan, Jamie (2020) "Queer and Neurodivergent Identity Production within the Social Media Panopticon," the Macksey Journal: Vol.1, Article 177.</p> <p><u>Community Participation Indicators Autistic Advocate Article— What world are we preparing for?</u></p> <p>Autistic Self Advocacy Network— <u>A Self Advocate's Guide to Understanding the ADA</u></p> <p>AOTA Guide: <u>Recommending Rideshare Services</u></p>
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	online community or community experienced with family)	peers if desired (i.e. via social media, self-advocacy groups)	
Self Actualization	<ul style="list-style-type: none"> -Measure “success” by Western cultural standards -Deprive opportunities for finding disability community -Withhold education on disability rights and history -Presume “developmental unreadiness” to engage with complex concepts (i.e. gender/ sexuality, social justice issues, policy) -Equate worth with level of ability or support needed -Diminish dream goals for adult life as “unrealistic” -Refer to clients using language they do not identify with 	<ul style="list-style-type: none"> -Teach about the disability rights / policy protections, ableism, and the neurodiversity movement -Support identity exploration (i.e. personal strengths, needs, values, intersectionality) (see our Identity Workbook) -Facilitate opportunities for positive visibility & authentic representation in the community -Nurture special interests -Support the client to formulate their own way of understanding or describing their disability (to use when self-disclosure is desired or necessary) -Build confidence and self-esteem through leveraging strengths -Affirm and utilize the client’s language preferences (i.e. identity first or person-first, pronouns) -Validate dream goals for adult life—allow the individual to discover for themselves what is realistic or not. 	<p>Disability Visibility: First-Person Stories from the Twenty-First Century By Alice Wong</p> <p>Daugherty, M. W. (2013). <i>Redefining normal: The path to self-attainment for people with neurodiversities: How do people from the neurodiverse spectrum define self-fulfillment?</i></p> <p>The Awesome Autistic Go-To Guide: A Practical Handbook for Autistic Teens and Tweens By Yenn Purkis</p> <p>The Spectrum Girl’s Survival Guide: How to Grow Up Awesome and Autistic By Siena Castellon</p> <p>Neurodivergent Rebel— Autistic Neurodivergent and LGBTQIA+– Is there a connection?</p> <p>The Autistic Trans Guide to Life By Yenn Purkis</p> <p>Ema Loja, Maria Emilia Costa, Bill Hughes & Isabel Menezes (2013) Disability, embodiment and ableism: stories of resistance, <i>Disability & Society</i>, 28:2, 190-203.</p> <p>NeuroClastic Article– Identity First Language</p>



		<p>Regardless, there is value in the pursuit of any desired goal</p> <ul style="list-style-type: none"> -Support the development of self advocacy and (if desired) leadership skills -Utilize our holistic person centered planning tool 	<p>ASAN– Roadmap to Transition: A Handbook for Autistic Youth Transitioning to Adulthood</p> <p>Chalk, H. M., Barlett, C. P., & Barlett, N. D. (2020). Disability self-identification and well-being in emerging adults. <i>Emerging Adulthood</i>, 8(4), 306-316.</p> <p>Robertson, S. M. (2009). Neurodiversity, quality of life, and autistic adults: Shifting research and professional focuses onto real-life challenges. <i>Disability Studies Quarterly</i>, 30(1).</p> <p>Reframing Autism Article– The Importance of Identification</p> <p>Autistic Self Advocacy Network– Welcome to the Autistic Community Handbook</p>
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Check out the OTs for Neurodiversity [Teachers Pay Teachers store](#) for free and low cost neurodiversity-affirming intervention tools 

