Neurodiversity Affirming Language

Updating terminology, a quick guide:

Ableism: Pervasive, systematic and deeply embedded cultural values that marginalize the differently bodied; neurodivergent processors; those with mental wellness differences. Present in town planning, building design, policy, education design, language, socialization, health care provision and more. Sometimes referred to as "disability oppression", or the "normalization agenda". Results in continuous micro and macro aggressions of exclusion and discrimination. (See also Internalized Ableism below).

Accommodations: Alterations that allow those with disabilities to access environments and participate in meaningful activities.

Agency: An individual's capacity for intentionally causing change. The ability of an individual to make things happen, and to be the author of my own actions.

Allyship: An ally is typically a member of advantaged social groups who uses social power to take a stand against social injustice directed at targeted groups. An ally works to be an agent of social change rather than an agent of oppression. (See also Performative Allyship below).

Autonomy: An individual's ability to exert their free will and act on their own volition or on their own terms. Includes the ability to give and withdraw consent freely.

Behavior: Refers to any observable actions or reactions of an individual in response to external or internal stimuli. This encompasses a wide range of activities, from basic physical movements to complex social interactions. Behaviors are neutral and can serve various functions. However, this term has been co-opted to imply judgment about "behavior" rather than understanding the underlying reasons or contexts that contribute to it. Understanding behaviors in their entirety allows for a more compassionate and constructive approach, focusing on the context and the reasons behind them.

Behavioral Adaptation: The changes in behavior that organisms develop in response to environmental challenges to enhance their survival. Initially, these adaptations can be beneficial, helping navigate threats or resource scarcity. However, over time, certain behaviors can become maladaptive— meaning they no longer serve their original purpose and may even hinder quality of life.

STAR Institute

Belonging: The emotional experience of being accepted and valued within a group or community. A sense of belonging can enhance psychological well-being and occupational health, as it allows individuals to thrive by recognizing, celebrating, and supporting their unique strengths and perspectives.

Benevolent Ignorance: Describes situations where individuals act with good intentions but lack critical reflection, leading to negative consequences.

Burnout: (Neurodivergent burnout, autistic burnout, etc.). Refers to a state of physical, mental, and emotional exhaustion that many neurodivergent individuals experience, often as a result of prolonged stress, masking, or navigating a world that is not accommodating to their needs. It can manifest in various ways, including:

- **Fatigue:** Profound tiredness that is not alleviated by rest.
- **Decreased Functioning:** A noticeable decline in the ability to perform daily tasks, engage in social interactions, or maintain routines.
- **Sensory Overload:** Increased sensitivity to sensory input, leading to discomfort or distress.
- **Emotional Dysregulation:** Difficulty managing emotions, which can result in heightened anxiety, irritability, or sadness.
- **Withdrawal:** A tendency to withdraw from social situations or activities that were previously enjoyable.
- **Loss of identity:** A feeling of disconnect from one's autistic identity, often due to the pressure to conform to neurotypical standards.

Autistic burnout can be a significant challenge, and recognizing it is important for both individuals and those around them to provide the necessary support and understanding.

Camouflage: Behavioral adaptation to avoid social exclusion or navigate environments that are not designed for neurodivergent individuals, often at the expense of natural tendencies.

Communication Options: Alternatives to mouth words need to be available all the time: AAC, Text, Text-to-speech, emails, etc.

Compliance: The act of conforming to rules, standards, or requests, often in a way that aligns with societal expectations.

STAR Institute

Consent: (Also boundaries, protest). The client's ability to give and remove consent; to set personal boundaries, express dislike and displeasure. A human right. (See also Informed Consent below).

Core Deficit Approach: The core deficit approach to autism focuses on identifying and addressing specific deficits or challenges that autistic individuals may experience. Traditionally, this perspective emphasizes areas such as communication difficulties, social interaction challenges, and restricted or repetitive behaviors (see Triad of Impairment below).

Cross Cultural Skills (neurodivergent): Navigating neurotypical/neuromajority spaces on their own terms with awareness and intent.

Diagnostic Overshadowing: Occurs when a healthcare provider attributes new or different symptoms to a previously established diagnosis, often overlooking additional conditions. Can lead to misdiagnosis or inadequate treatment, particularly in individuals with complex presentations, where co-occurring mental health issues or other concerns may be dismissed.

Disclosure: In the context of disability, disclosure involves telling others about your status as a person with a disability (Lynch & Gussel, 1996).

Double Empathy: A term coined by Dr. Damian Milton to explain the phenomenon of mutual incomprehension between autistic and non-autistic communication partners. A "disjuncture in reciprocity between two differently disposed social actors" who hold different norms and expectations of each other, such as is common in Autistic to non-Autistic (Allistic) social interactions (Milton, 2012).

Empowerment: The practice of expanding power—from individuals to large communities—so that individuals and groups can take action to improve their circumstances (Jashinsky, 2008).

Frustration Saturation: A state where an individual—particularly those who expend significant energy just navigating mundane daily activities—experiences overwhelming feelings of frustration due to repeated challenges or failures in achieving their goals. This saturation point can lead to heightened emotional responses, such as anger or anxiety, and may result in withdrawal or explosive dysregulation, chronic stress and/or ultimately burnout.

Felt Safety: (Also Perceived Safety). Refers to an individual's subjective sense of safety in their environment, which can influence their nervous system state, regardless of actual safety conditions. It encompasses physical, emotional, and psychological comfort.

STAR Institute

Identity-First Language: Emphasizes an individual's identity by placing if before any condition they may have, such as saying "athletic person" instead of "person with athleticism". This approach is rooted in the belief that identity is an integral part of who someone is, rather than a separate or secondary aspect, and that neurodivergent identity is not something shameful.

Inertia: The difficulty some autistic individuals may experience in starting or stopping tasks and activities. A state of immobilization during transitions, where individuals may find it particularly challenging to initiate or shift between tasks. This can lead to feelings of being "stuck", making it hard to start new activities or move away from current ones, even if they recognize the need to do so.

Independence: Traditional therapy goals often prioritize independence, emphasizing self-sufficiency and the ability to manage one's own life without reliance on others. However, this focus may not be realistic or desirable for everyone.

Infantilization: Treating someone as if they are much younger than their actual age, often by assuming they are incapable of making decisions or taking care of themselves. Can manifest as using overly simplistic language, making decisions on behalf of the person without their input, or limiting autonomy.

Informed Consent: The process through which an individual voluntarily agrees to participate in a specific activity, such as a medical procedure or research study, after being fully informed of all relevant information. This includes details about the purpose, risks, benefits, and alternatives involved. Informed consent ensures that individuals have the capacity to understand this information and make a decision based on their values and preferences. It is a fundamental ethical and legal requirement, emphasizing respect for autonomy and the right to make informed choices about one's own body and life.

Interdependence: The mutual reliance between individuals, groups, or systems, where each party depends on the others for support, resources, or well-being. This concept highlights that no one exists in isolation; instead, relationships and connections are fundamental to human experience creating a balanced dynamic where both parties contribute to each other's well-being. Acknowledging our interconnectedness fosters a sense of community and belonging, reinforcing the idea that asking for help is a strength rather than a flaw.

Internalized Ableism: The process by which individuals adopt negative beliefs and stereotypes about themselves and their capabilities, often as a result of societal attitudes that devalue

STAR Institute

different abilities. This can lead to feelings of shame, self-doubt, and diminished self-worth, causing individuals to internalize the notion that they are less capable or deserving than their able-bodied peers. Internalized ableism can hinder personal growth, self-advocacy, and overall mental health, as individuals may struggle to embrace their identities and seek the support they need.

Intersectionality: A framework for understanding how various social identities—such as race, gender, sexuality, class, ability, and others—intersect and interact to shape individual experiences and systemic inequalities. People do not experience discrimination or privilege based solely on one aspect of their identity; instead, multiple identities can overlap, creating unique and often compounded experiences of oppression or advantage.

Least Dangerous Assumption: A term coined by Anne M. Donnellan. "In the absence of conclusive data educational decisions should be based on assumptions which, if incorrect, will have the least dangerous effect on the student" (Donnellan, 1984).

Masking: A behavioral adaptation/social strategy, often employed unconsciously, where neurodistinct individuals alter their behavior and mannerisms to conform to social expectations, often at the cost of natural identity.

Medical Model (of disability): The view of disability as primarily a deficiency within an individual, often focusing on physical or mental impairments. According to this model, disability is seen as a medical condition that requires treatment or intervention to "fix" or manage.

Meltdowns: Intense, body-based responses to overwhelm that look like extreme emotional dysregulation (i.e. crying, shouting, or other expressions of distress). During a meltdown, individuals may feel a loss of control over their feelings and actions, making it challenging to communicate or engage with those around them. After a meltdown, individuals often feel exhausted and may need time to recover and process their experience.

Monotropism: A term coined by Dr. Dinah Murray to describe the deep attentional pull of special interests for the autistic brain. This pull to immersive selective attention tends to monopolize resources rather than spreading them broadly on multiple things at once.

Moral Model (of disability): The view that disability is a consequence of sin or moral failing, often attributed to the individual/parent/close community's character or short comings. Often manifests in Hollywood through various portrayals and narratives that emphasize moral

STAR Institute

judgment; disabled individuals as inspirational; stereotypes and stigma; and disabled/disfigured villains and able-bodied saviors.

Neurodivergent: (Also, neurodistinct, neurounique, neurominority, neuro-oppressed, neuroatypical). A way of processing/experiencing life that is outside the bell curve. Neurodivergent diagnoses include ADHD, anxiety, autism, depression, dyscalculia, dyslexia, dyspraxia, FAS, gifted, learning differences, OCD, SPD, Tourette's, twice exceptional.

Neurodiversity: The belief that all brains are different and that divergent ways of processing and experiencing the world are natural and to be celebrated. **We are all neurodiverse.**

Neurodiversity Lite: Refers to deliberate use for personal gain AND/OR mis-informed good faith application. Intentional incorporation of language and concepts from the neurodiversity affirming movement to sell products. Capitalization or monetization of the neurodiversity affirming movement that does not directly benefit the neurodivergent community and is not led or co-led by neurodivergent individuals. This co-opting of neurodiversity affirming principles often occurs only partially or incorrectly, without dismantling ableism and internal bias.

Neuromajority: (Also neurotypical, neuro-privileged, allistic). The dominant neurological or cognitive functioning patterns that are considered typical or standard within society.

Neuronormative: Policies and practices intended to 'normalize' human behaviors.

Non-compliance: The refusal or failure to adhere to established rules, guidelines, or expectations. In various contexts—such as health care, education, or social behavior—it can manifest as individuals not following prescribed treatments, instructions, or societal norms.

Benefits of Non-Compliance as a Developmental Stage:

- **Critical Thinking:** When individuals question rules or norms, they engage in deeper analysis and understanding of the reasons behind expectations.
- **Autonomy and Independence:** Individuals learn to assert their preferences and make choices based on personal values rather than simply conforming to external pressures.
- **Identity Formation:** Allows individuals to explore their beliefs, values, and boundaries, contributing to a stronger sense of self (especially in adolescence).
- **Problem-Solving Skills:** Challenging the status quo encourages creative problem-solving, innovation, and adaptability.

STAR Institute

Non-Speaking: Individuals who do not use spoken language as their primary means of communication. This term recognizes that communication can take many forms and that non-speaking individuals may have rich inner lives and ways to express themselves that do not involve verbal speech.

Occupational Consciousness: Being aware of how societal structures and power dynamics influence occupational opportunities and participation.

Occupational Justice: The right of individuals and communities to engage in meaningful occupations that promote health, well-being, and quality of life *on their own terms*. A crucial aspect of occupational justice is that the meaning of occupations is defined by the individual, not dictated by external, oppressive systems. Occupational justice advocates for a shift away from a one-size-fits-all understanding of meaningful occupation, emphasizing the importance of individual agency and the right to define one's own path amidst societal constraints.

Performative Neurodiversity: Calculated appropriation of the neurodiversity affirming movement for profit, often (but not always) without the involvement or participation of the neurodivergent community. For example, the use of neurodiversity affirming terminology to market a book about autism despite the books obvious neuronormative and pathologizing stance. Commercialization of neurodiversity as a marketing strategy.

Performative Allyship: The view of disability as primarily a deficiency within an individual, often focusing on physical or mental impairments. According to this model, disability is seen as a medical condition that requires treatment or intervention to "fix" or manage.

Person-First Language: Emphasizes the individual by placing them before any characteristics or traits they may have. For example, saying "person with hypermobility" instead of "hypermobile person" highlights that the individual is a person first, with unique qualities and experiences that extend beyond any specific label.

Play Deprivation: The lack of opportunities for self-initiated, free play, which is crucial for the normal growth and development of children.

- **Primary Deprivation:** Directly related to the physical disability, such as a child with a visual impairment being unable to engage in play involving lights and colors.
- **Secondary Deprivation:** Arises from environmental, social, and personal barriers that limit play opportunities.

STAR Institute

Power: Power over and power with are two contrasting concepts that describe different dynamics of power and relationships, particularly in social, political, and organizational contexts.

- **Power over:** Power over refers to a hierarchical or dominating form of power where one individual or group exerts control or authority over another.
- **Power with:** Power with refers to a collaborative form of power that emphasizes shared authority and collective action.

Power Differentials:

- **Up-power:** the therapist's position of increased authority.
- **Down-power:** the client's position of lesser power and increased vulnerability within the therapeutic relationship.

Presuming Competence: The concept that individuals have boundless potential regardless of their physical or cognitive differences. Challenges assumptions about intellect based on motor outputs, speaking or non-speaking status, and erroneous guesses about "developmental age".

Resilience: The capability to not only endure and recover from stressful situations but also to flourish and grow, while acquiring skills that provide protection and enable the management of future challenges.

Retraumatization: Occurs when incidents activate brain-body memory that in turn triggers embodied stress reactions of similar magnitude to the original traumatic event.

Self-Advocacy: An active, reflective, and communal process where individuals assert their rights, needs, and preferences. Self-advocacy involves engaging with a supportive community, reflecting on personal growth and values, and taking action to create positive change (Hart, McConnell, Spielmann, In Press).

Self-Determination: An individual's ability to make choices, set goals, and take actions based on their own preferences, values, and interests. It is the capacity to have control over one's own life and make decisions that have an impact on personal well-being and fulfillment.

(The) Self-Organized Child: A term from Ayres Sensory Integration that refers to the child's ability to take initiative, make choices, and engage in learning through exploration and self-directed activities. This approach values the child's agency and recognizes that children can effectively organize their own learning experiences.

Social Mimicry: Imitating social interactions and expressions – a form of camouflage.

STAR Institute

Social Model of Disability: A framework that shifts the focus from individual limitations to the societal barriers that hinder individuals with impairments from fully participating in society.

Social Skills Training: A method focused on enabling individuals to adopt a culturally normative expression of humanity, emphasizing a singular approach to social interaction while remediating the image of those deemed deviant.

Theory of Mind: The ability to understand that others have their own thoughts, beliefs, desires, and intentions that may differ from one's own. It involves recognizing that people can have perspectives and emotions that influence their behavior, allowing for more effective social interactions and empathy (see Double Empathy above).

Triad of Impairments: Foundational in early conceptualizations of autism the 'triad' has shaped many interventions and educational strategies. However, as understanding of autism has evolved, there is recognition of the need to move beyond this archaic perspective. The triad traditionally includes:

- **Impaired Communication:** This refers to challenges in both verbal and non-verbal communication, which can include difficulties with expressive language, understanding others' speech, and interpreting gestures or facial expressions.
- **Impaired Social Skills:** This encompasses difficulties in engaging with others, understanding social norms, and forming relationships. Autistic individuals may struggle with initiating or maintaining conversations and recognizing social cues.
- **Restricted and Repetitive Behaviors:** This includes behaviors such as repetitive movements, strict adherence to routines, or intense focus on specific interests. These behaviors can provide comfort and predictability but may also be misunderstood by others.

Unreliably Speaking: Individuals may sometimes express themselves purposefully, while at other times, they might repeat phrases (echolalia and/or perseveration) or use disinhibited speech that doesn't reflect their intentions. Additionally, during moments of dysregulation, they might struggle with verbal communication altogether, leading to challenges in expressing thoughts and emotions consistently. This highlights the complexity of communication in neurodivergent individuals and the influence of emotional and sensory states on their ability to engage verbally.

STAR Institute

Functioning Labels

- Static labels are overly simplistic and disregard the person-environment-occupation intersection.
- Instead of high/medium/low functioning consider variability in function and support needs across time and space.
- How are immediate changes in circumstances impacting this individual? Are their physiological needs met? Do factors like barometric pressure, seasons, current events, or roadworks play a role?
- Identify and support co-occurring conditions like hyper-mobility / motor apraxia / motor disinhibition / developmental trauma etc.
- Low-functioning labels can discourage individuals and their families from seeking necessary support and interventions.
- Can perpetuate hierarchical thinking, i.e., some labels are "better" or more valued than others.

STAR Institute