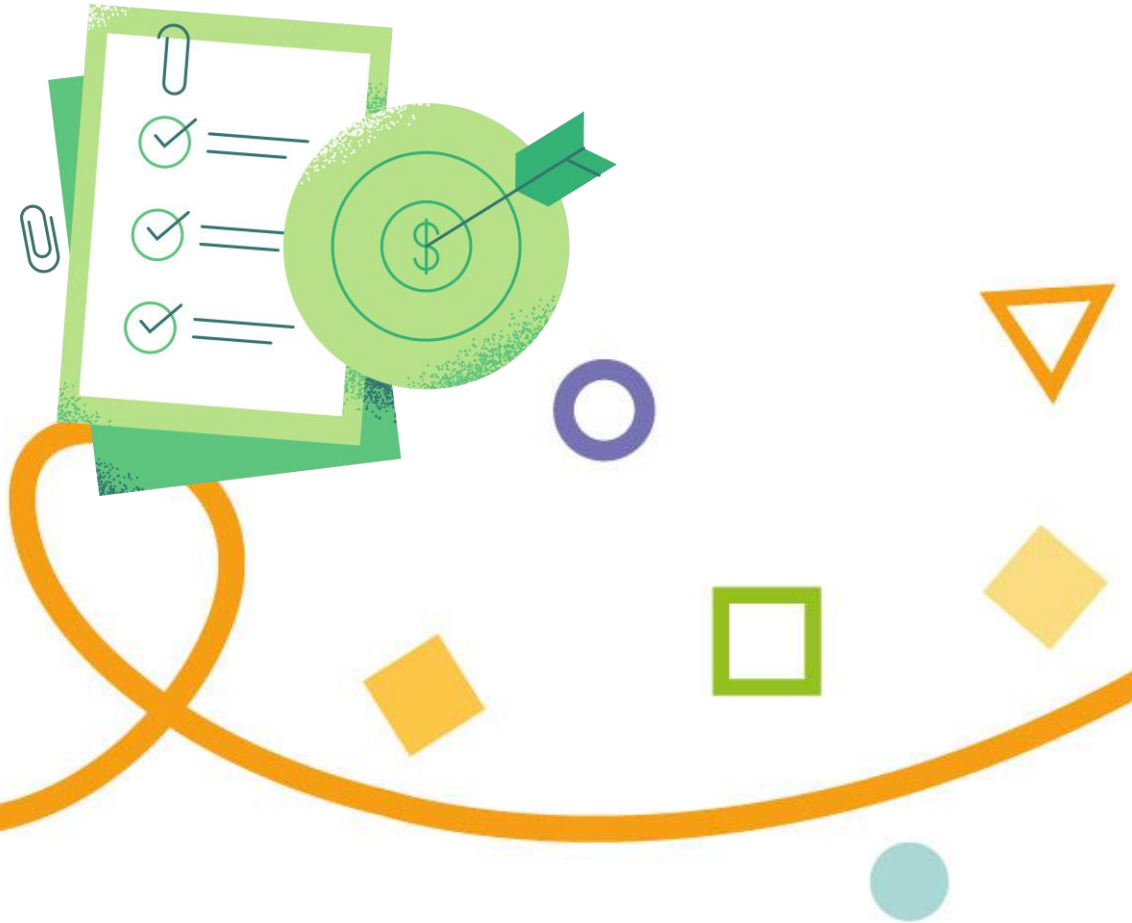


An experience of Neurodiversity and Neurodivergent Sensory Trauma

Harriet Richardson & Jayne Clarkson

Aims

1. Be aware of how to work ethically by respecting the right of our neurodivergent voices.
2. Develop insight into masking and the implications on our outcomes.
3. Reflect on how to work within the Neurodiversity Paradigm and be an affirming practitioner.
4. Understand sensory trauma and the impact it has on neurodivergent people.



Introductions



Harriet Richardson

Neurodivergent Speech &
Language Therapist



Jayne Clarkson

Therapist

Ableism

Prejudice and discrimination against people with disabilities.

Founded by the belief that disabled people are less than non disabled individuals.



Ableism



Internalised Ableism

The process of a disabled person discriminating against themselves. The belief that one's disability is something to be ashamed of and that they are less worthy than non-disabled individuals.



I should be
able to work
full time.

It's embarrassing
I need help from
my parents.

I need to stop
crying, I'm just
overreacting.

Internalised ableism

I can't ask for
support, my disability
isn't that bad.

If I ask them to
repeat themselves
I'll look stupid.

NEURODIVERGENT LISTENING

MAKING EYE CONTACT DISTRACTS ME

IT'S NOT ALWAYS COMFORTABLE FOR ME TO FACE YOU

I MIGHT USE FIDGETS WHILST WE TALK TO HELP ME LISTEN

I MIGHT INTERRUPT BECAUSE I CAN'T REMEMBER WHAT I NEED TO RESPOND

I MIGHT MOVE AROUND TO KEEP MY BRAIN ENGAGED



@HAT.TALKS.UK

Whole Body Listening!

Larry wants to remind you to listen with your entire body



Eyes = Look at the person talking to you



Ears = Both ears ready to hear



Mouth = Quiet- no talking, humming or making sounds



Hands = Quiet in lap, pockets or by your side



Feet = Quiet on the floor



Body = Faces the speaker



Brain = Thinking about what is being said



Heart = Caring about what the other person is saying

Underneath the Mask

Trauma

Shutdown

Fatigue

Anxiety

Pain

Distress

Discomfort

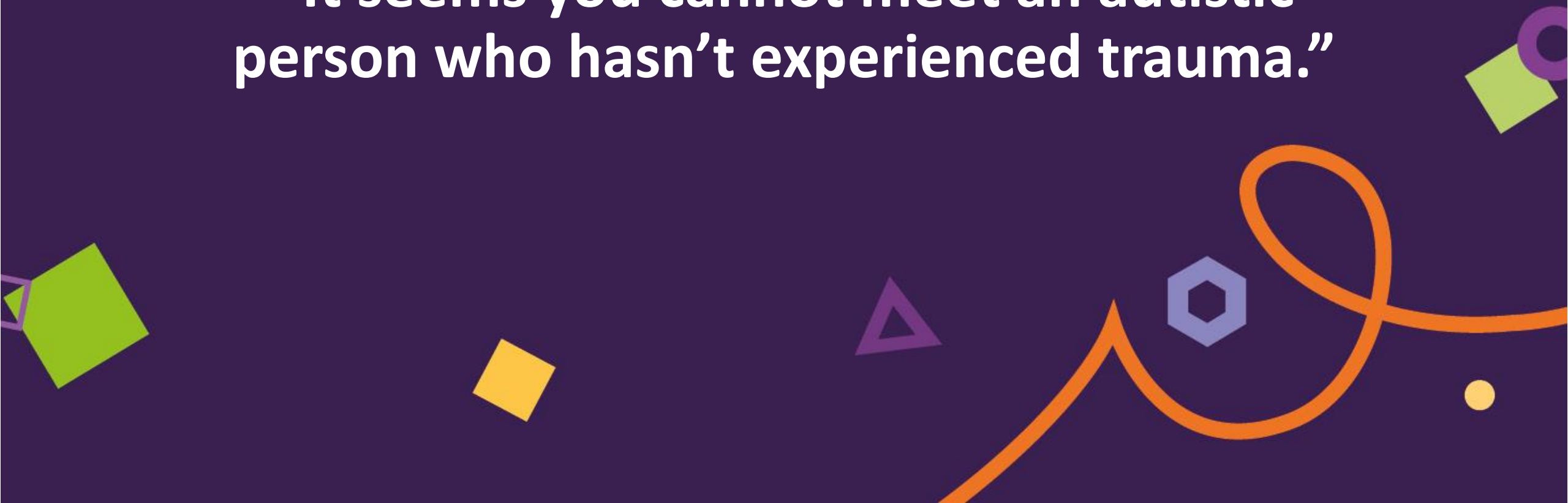
Emotional
dysregulation

Low quality
of life

Depression



“It seems you cannot meet an autistic person who hasn’t experienced trauma.”

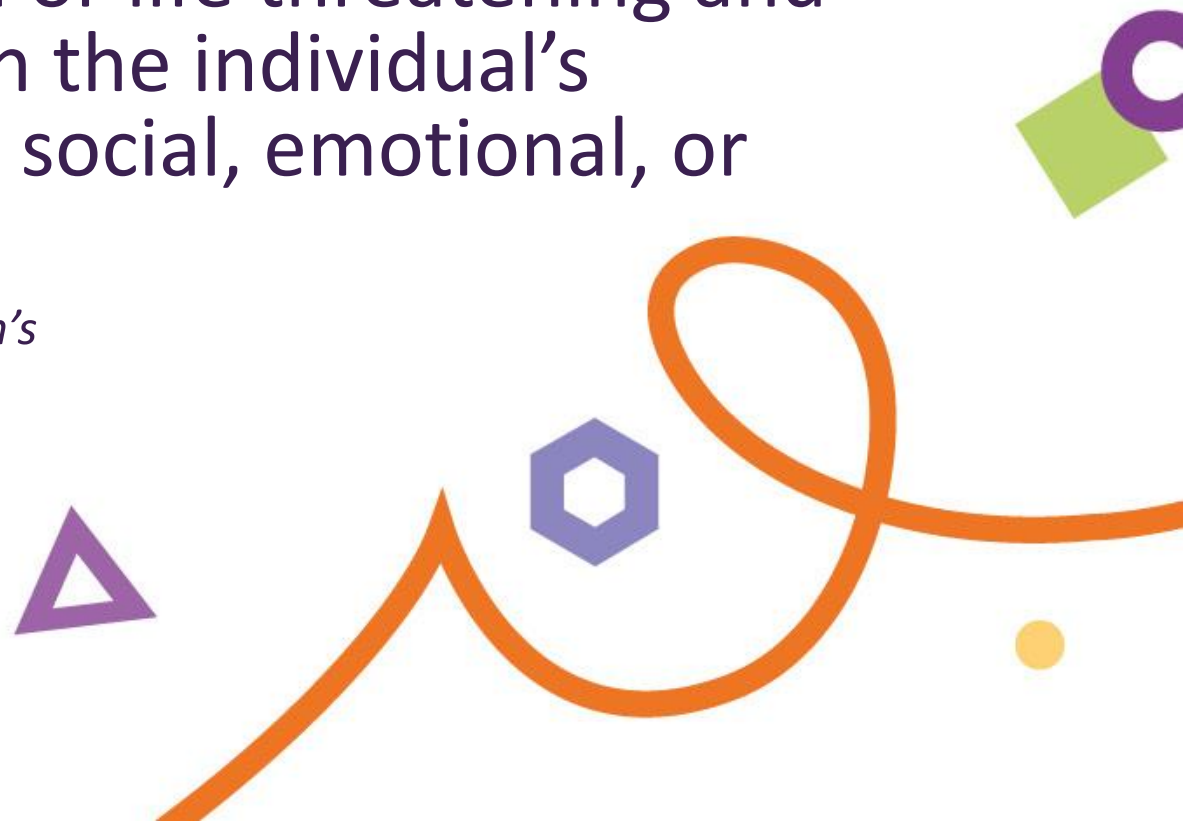


What Is Trauma?

‘Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being’

*Substance Abuse & Mental Health Services Administration’s
Concept of Trauma and Guidance for a Trauma-Informed
Approach*

*Prepared by SAMHSA’s Trauma and Justice Strategic
Initiative July 2014*



The Stress Response

- When a person feels unsafe/under threat /in danger, the parasympathetic nervous system (PNS) is activated-“Fight-flight-freeze-shutdown” response kicks in)
- The body floods with hormones (e.g. cortisol, adrenalin)
- The pre-frontal cortex of the brain goes off line
- Person can feel intense fear, horror and/or helplessness

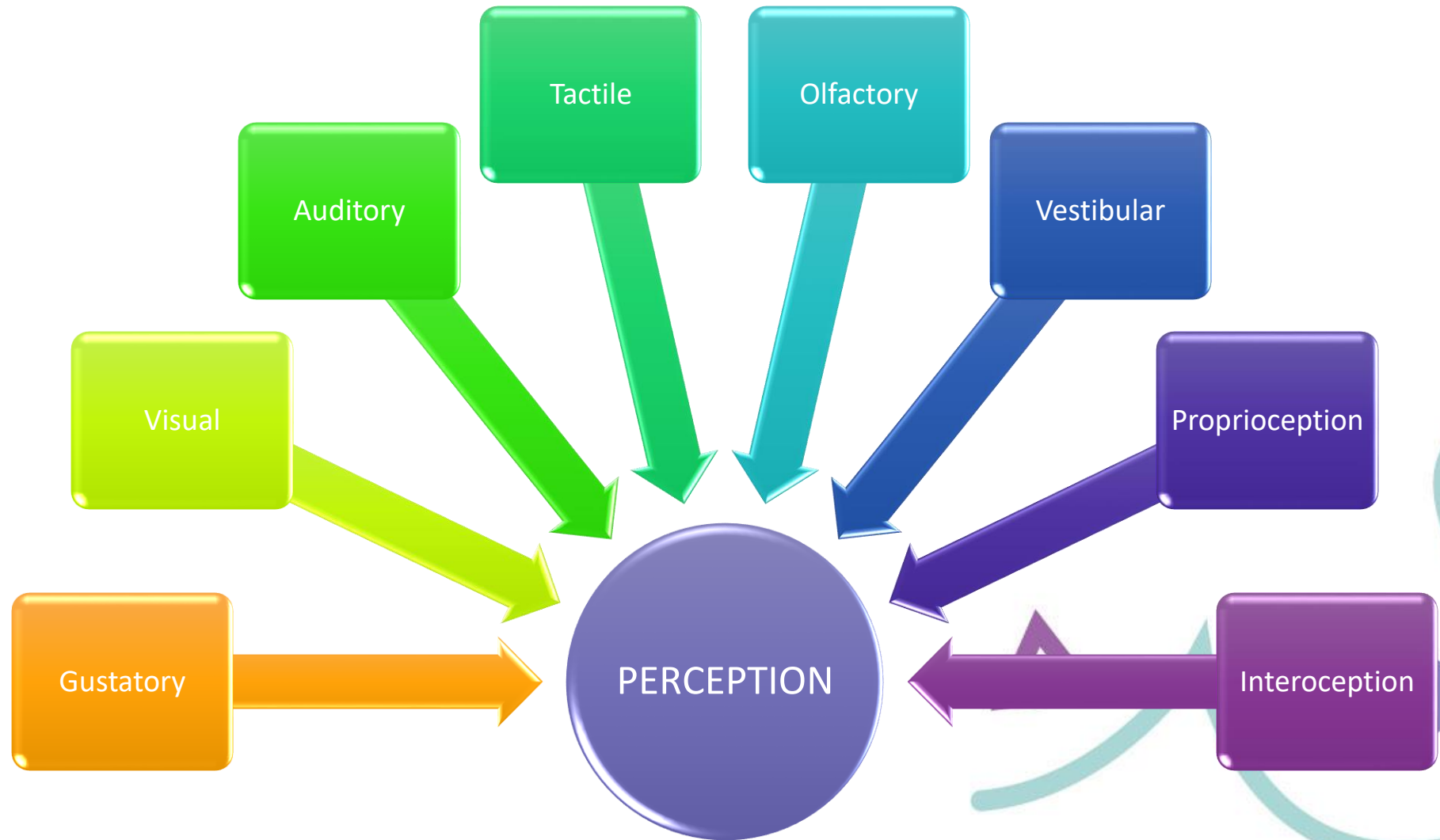


Sensory Perception

Our senses provide our central nervous system with information to ensure our survival.



Sensory Systems



Sensory Processing

‘Is the body's ability to receive sensory information into the nervous system, process it and then allow the body to respond appropriately’

Image or information courtesy of Beacon House Therapeutic Services & Trauma Team | 2022 | www.beaconhouse.org.uk

DAILY SENSORY THINGS THAT ARE HARD TO HANDLE

@21andsensory



Autistic Young People Describing their Sensory Traumas

I don't like alarm clocks; the sound **hurts** my ears. I feel scared when it goes off.

I hate brushing my hair it's so painful.

I hate wearing my uniform. I refuse to fasten the top button on my shirt. It feels like it's choking me

Being at school is exhausting because I feel scared all the time. It makes learning really hard and I can't think when I am scared

I can't sit in the back of a car 'cos I can't cope with the car moving forward and the outside world looking like it is moving backwards really fast. I feel like I'm going to die

I have to check the weather to see if it's going to rain. Rain really hurts my skin

The lights at school burn my eyes. I get headaches and I feel sick. I'm not allowed to wear sunglasses

I am really worried that I will never learn anything and get my exams and that I'll let everyone down.
I get really down about it and that's when I self-harm.

My big coat and hood is all I have to protect me at school. I need to wear it when I don't feel safe

I do need to leave the classroom a lot. The noise hurts my head and I don't feel safe. I want my teachers to understand that I don't 'CHOOSE' to leave, I have to leave



‘Sensory Trauma: autism, sensory difference and the daily experience of fear’ (Fulton et al 2020)

- An interesting position paper which explores how the sensory differences of autistic people are often viewed through the lens of impairments and deficits
- Explores how ordinary everyday experiences can be traumatising for autistic people with sensory differences
- The paper discusses how autism professionals write about and discuss sensory differences
- The paper invites us to listen to, affirm and validate an autistic person’s sensory trauma experiences



Differences in Sensory Writing

AUTISTIC PEOPLE

Write about themselves and describe the relationship between their individual bodies and the world

Nuanced, reflective, shockingly graphic

Full of sensory detail

AUTISM PROFESSIONALS

Clinical

Academic

Scientific

'Neurocentric' and tends to exclude the persons body/world relationship

Neurocentric Sensory Writing

- The 'Medical Model' implies there is something 'wrong' with the autistic person's body

Terminology used includes:

- Sensory Processing Disorder
- Abnormal Sensory Response
- Sensory Dysfunction/Sensitivity
- Unusual Sensory Behaviours

Different patterns/styles of sensory processing are described as

- Hyper or hypo reactive to sensory input
- Sensory over or under responsivity to environment
- Unusual interest in sensory aspects of environment

Final Thoughts

- Sensory trauma is real and it is experienced every day
- Change our mind set and shift from the impairment and deficit view to validating sensory differences and trauma
- Consider how we discuss and write about and validate a young person's sensory differences-let the young person lead!
- Support and scaffold autistic young people to self-advocate-to tell us what they need or what they don't
- Continually strive to improve the environments in our schools and homes to accommodate sensory differences. Ask our young people for their views and ideas and get them involved
- Remember that feeling safe is a prerequisite to learning



Autistic Trauma Can Look Like:

@littlepuddins.ie

Being taught that your autistic traits are deficits and need "fixing"

Sensory Gaslighting - being told you don't have sensory sensitivities and to get on with it.

No
Autonomy

Communication Invalidation every time you try to communicate with others.

Being judged because of misunderstandings and misinterpretations.

Perceived social ineptitude



Lack of /disregard of accommodations

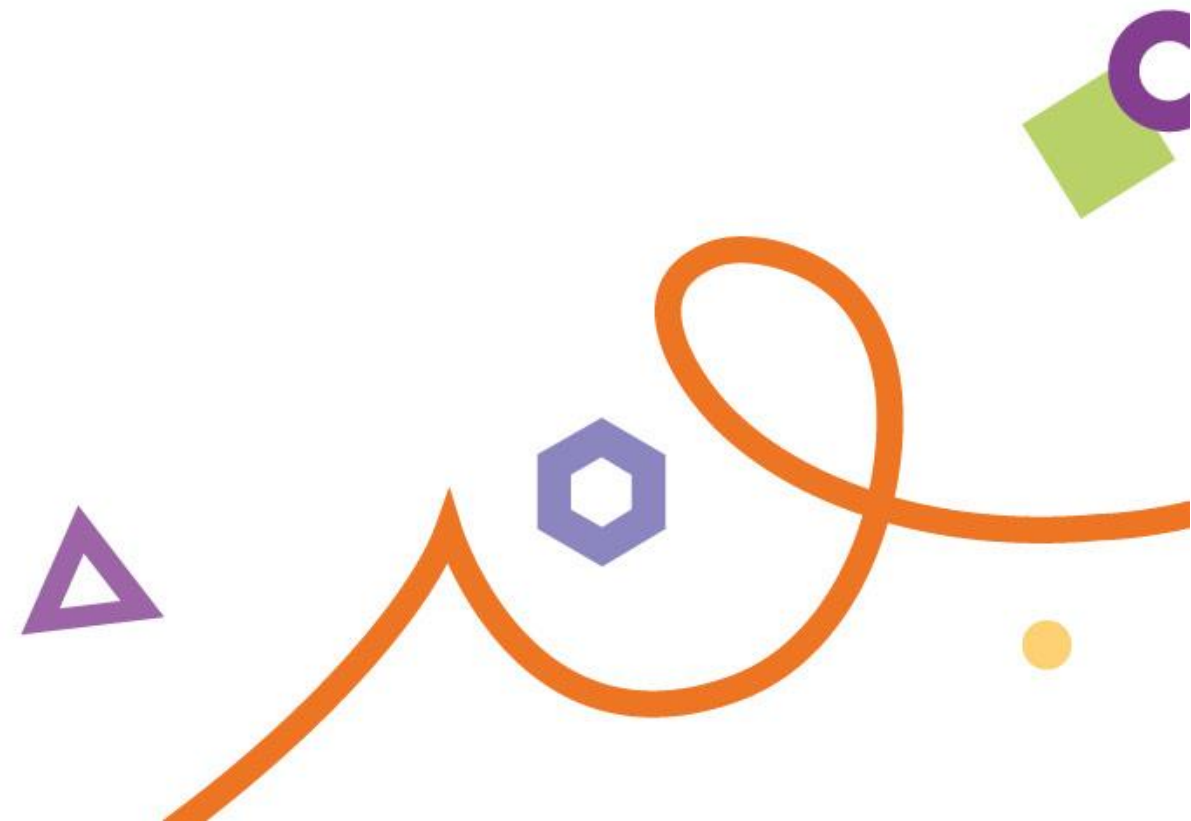
Pressured to socially engage

Bullying

Dehumanizing "interventions"

Autistic Experience Invalidation





Target Writing

Targets are written for the person not in collaboration with.



Person-centred not person-led.

Assumes we know what is best for the individual.

Values independence over autonomy.



Who's calling the shots?



Clothing choices

Reducing the visibility of the disability by blending in.



Life decisions

Moving house, higher education.



Relationship choices

Friendships and romantic partners.



Financial choices

What to spend money on, what to save.

Medical Model

What is
wrong
with the
person?

Needs support from others

Can't communicate

Behaviour needs managing

Research into a cure

Needs intervention



Social Model

What
are the
barriers to
disability?

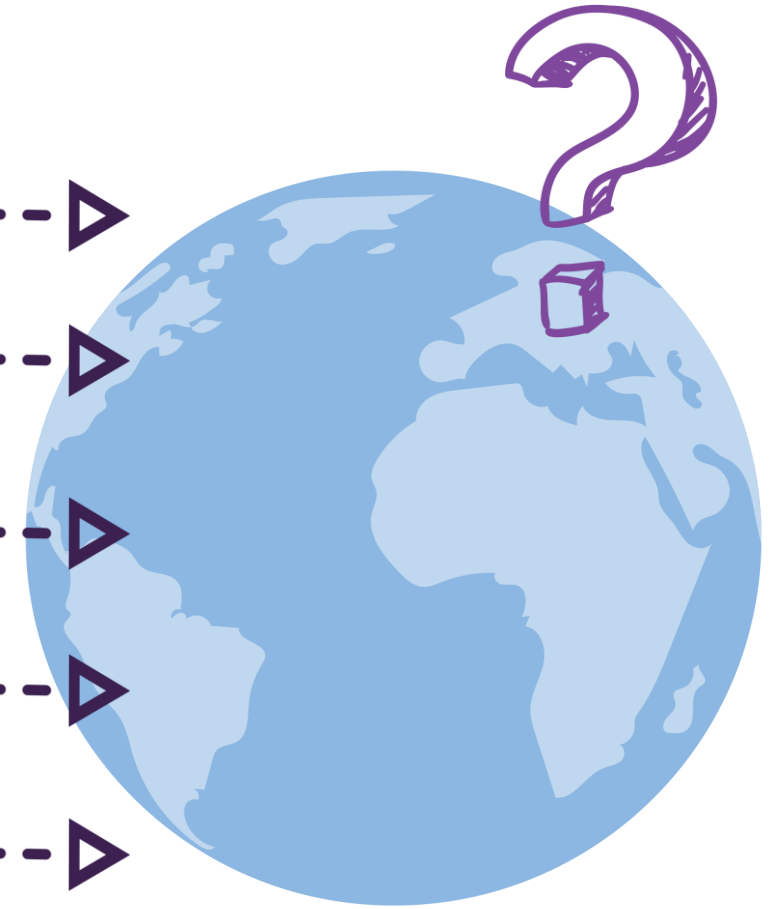
Environmental barriers

Organisational barriers

Communication barriers

Social barriers

Cultural barriers



Shifting Terminology

Low/high functioning



Lower/higher support needs

Person-first language



Identity-first language

Symptoms and difficulties



Traits and differences

Challenging behaviour



Distress communication

Non-verbal



Non-speaking/semi-speaking

How to be a Neurodiversity-Affirming Practitioner

Gains informed consent

Writes targets collaboratively

Unrestricted access to aids

Respect body autonomy

Strengths-based approach

Low sensory space

Encourages self-advocacy

Prioritises person's voice

Validates emotions

Celebrates difference

Presumes competence

Researches approaches



Resources

Social media accounts:

@littlepuddings.ie

@21andsensory

@hat.talks.uk

Podcasts:

Two sides of the Spectrum - OT

The Neurodivergent Woman Podcast

The Square Peg Podcast

Books:

Unmasking Autism - Dr Devon Price

We are not Broken - Eric Garcia

Unbroken - Alexis Quinn

Can You See Me? - Libby Scott & Rebecca Westcroft

Safeguarding Autistic Girls – Carly Jones MBE

The Body Keeps the Score - Bessel Van Der Kolk



Questions



Please email any further questions to:

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