

Divergent Population: Reflections on Neurodivergence, Trauma, and Nature

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Author Note

This paper is a response to prompts paraphrased from the class final project rubric:

- *A review of the literature, summarizing three relevant sources beyond course readings*
- *Your angle on the topic: What original ideas do you have to offer the counseling field?*
- *Describe a nature-based therapy intervention that you design to address this population*

Presentation slides are available online:

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I'm passionate about particular populations that cross racial, ethnic, and cultural divides. In particular, I'm concerned with ushering in unlearning about the myths established by people who take default as their unconsidered birthright. As a reasonably well read autistic person I'm confident in making the assertion that where neurodivergence is concerned, the American Psychiatric Association has it all wrong (APA, 2022, pp. 56–76). Let's take this opportunity to step beyond our cisgender/heterosexual/white/neuro-normative conditioning for a moment:

Autism is a genetically based human neurological variant. ... the autistic mind tends to register more information, and the impact of each bit of information tends to be both stronger and less predictable. ... Autism produces distinctive, atypical ways of thinking, moving, interaction, and sensory and cognitive processing. ... autism has been frequently misconstrued as being essentially a set of 'social and communication deficits,' by those who are unaware that the social challenges faced by autistic individuals are just by-products of the intense and chaotic nature of autistic sensory and cognitive experience. ... to describe autism as a disorder represents a value judgment rather than a scientific fact. (Walker, 2021, pp. 85-87)

One key to right relationship with autistics is utilization of Neurodivergence-Informed Therapy:

- reconceptualization of dysfunction as relational rather than individual (supplanting pathology with neurodiversity perspectives)
- importance of neurodivergence acceptance and pride, disability community, and culture to emancipation from neuro-normativity
- need for a relational epistemic humility regarding different experiences of neurodivergence and disablement

(Chapman & Botha, 2022)

While very little of this literature review explicitly names trauma, distressing signs and symptoms may be readily recognized throughout. Autistic people were found to struggle with recognizing and reacting to abusive behavior (Douglas & Sedgewick 2023). Male and gender

queer autistic people are underrepresented in domestic violence research, rarely even mentioned are non-white or intellectually disabled people. Even less considered until recently, language frequently used throughout autism research remains problematic in various ways (Bottema-Beutel et al, 2020). Autistic people have been shown to register, just as well as allistic people, behavior that sets autistic traits apart from those specific to allistic behavior, “but unlike their [allistic] counterparts, these trait judgments are not perceived as an impediment to subsequent social interaction and are relatively consistent regardless of diagnostic disclosure” (DeBrabander et al, 2019). Non-human agents also play important roles in many autistic lives, where exploring anthropomorphic relationships helps to develop new relationships with neurotypical people (Negri, White, & Remington, 2019).

Allistics negatively described atypical prosody, valence, modulation, and control in autistic voices, though less so in autistic females (Gibson, Schmidt-Kassow, & Paulmann. 2023). One study of college students concluded that neurotypically presenting students need to be more accepting, affirming, and empathetic (Frost, Bailey, & Ingersoll, 2019). Another highlighted the need to reduce discrimination and stigma related to autism and disability as a way to reduce chronic exhaustion, loss of skills, and reduced stimulus tolerance in addition to negative impacts on health, capacity for independent living, quality of life, and suicidality (Raymaker et al, 2020). And, meta-analysis confirmed across multiple studies that perceived oddity in non-verbal aspects of communication (e.g., prosody, facial expression, and body posture) from autistic people resulted in reduced allistic willingness to engage in relationship (Sasson et al, 2017). These thin-slice judgments of exclusion did not change with education or increased exposure.

There are deeply entrenched views adopted by societies around the globe regarding neurodivergence as pathology. Autistic experience is “ruled by sensory impacts very seldom acknowledged as valid, and even less often held with care” (Larson, 2023e). Autistic reactions are proportionate to the harm suffered; arrival of a meltdown is rarely a surprise to experienced and knowledgeable observers. Consider higher levels of suicidality, even in children, and that “37% of autistic people, spanning ages from childhood to old age, [have a] co-occurring depression diagnosis” (Larson, 2023c). A focus on mediating impacts of insomnia, fatigue, and lacking social support is crucial to longevity in a population with lower average life spans than racial, ethnic, and cultural counterparts.

[Umagami] asserts that autistic adults *do* desire social relationships and that they encounter barriers to building those relationships. The autistic imperative to retreat from social interaction is a necessary way to manage navigating, and recovering from, social spaces. One notable mitigating factor against loneliness was self-acceptance of an autistic identity, including consideration of redefining what socially comfortable means to a newly diagnosed person. (Larson, 2023c)

[When embracing neurodivergent wisdom,] we must maintain a separation in our consideration of impairment (the ways our bodyminds differ from each other) and disability (the ways impaired people are excluded by society). The ways that people are disabled is due to choices made.... Disability does not pertain to any inherent ability of a given bodymind. (Larson, 2023a)

With a disability so closely related to executive function, implications of reduced difficulty due to episodic memory failures, not to mention decreased negatively perceived autistic behaviors in general, questions are raised about why generally lacking social service supports are not prescribed along with every new autism diagnosis. (Larson, 2023c)

Autistic rhetorician and professor Melanie Yergeau had this to say regarding a population whose needs are largely ignored:

... most autistics are adults, despite what autism charities might have us believe. ... Many insurance companies will not cover adult assessment, as most states' autism parity laws (if they even have them) only structure diagnostic coverage up to ages eighteen or twenty-one. ... county and state developmental disability agencies often require that one receive an official diagnosis prior to age twenty-one or twenty-two in order to receive vital services. (2018, pp. 163-165)

Access to diagnosis is a privilege, and as such self-identification as autistic is generally accepted among neurodivergent academics. Keeping this in mind, what I propose to bring into the clinical mental health counseling field is a profound cultural humility, developed through lived experience of marginalization and privilege at varying intersections, the epistemic privilege inherent to surviving oppressive environments long enough to learn the language that may embolden future self-advocates in continuing the work of building sustainable, mutually nourishing, neurocosmopolitan futures (Walker, 2021, pp. 72-79).

I am currently barely surviving the very same problems described throughout recent autistic-led research. I am doing so only by utilizing the wisdom autistic people are adding to the literature. "Autism is a culture unto itself, a culture that is not only socially created as a disability but is a countersocial way of being, communing, and communicating," every bit as valid and varied as neurotypically conforming cultures (Yergeau, 2018, p. 108).

Wellness is "a state of complete physical, emotional, mental, and social well-being and not merely the absence of disease or infirmity" (Haller, Kennedy, & Capra, 2019). The most clear examples of interventions from cohort studies and experientials matching to the wide

variety of needs commonly presenting in neurodivergent populations have come from our horticultural sessions. In a closed group, meeting weekly throughout the year, there would be an ample collection of garden maintenance tasks which would encourage the positive outcomes found in the literature. Haller, Kennedy, & Capra cite diverse health outcomes including alleviating symptoms of depression, anxiety, stress, and mood disturbances with access to enhanced quality of life, cognitive function, physical activity, and sense of community (2019, p. 256). Monthly one-on-one check-ins with each individual participant would allow for tracking and documenting progress toward self-declared therapeutic and/or life-skills goals.

Beginning as early as germination and seedling selection, participants may engage in anthropomorphic relationships and spend time in conversation with varying plants and animals. They will have opportunity to work in safer social settings, guided by neurodivergent people, as groups tend to regular weeding and watering, or split into functional subgroups focused on tending to specialized tasks like maintaining bee hives, collecting chicken eggs, preparing cut flowers for sale, or tending to point of sale at a public farm stand. As winter approaches, they might find themselves occupied as the cohort did on our recent visit to Good Enough Farm.

On one particularly frosty morning, we set about shoveling, moving, and spreading mulch and compost throughout the produce beds in preparation for winter. We had opportunity to interact with chickens pecking about the grounds, self-select from other tasks like pulling up dried annuals for composting, and harvesting rhizomes from perennials. We had the opportunity to offer moisture to old cottonwoods running along the south end of the farm. We watched as a hawk considered the odds of flying away with one of our chicken friends, before guiding them to safety within their coop. And we did all this from grounds much smaller than most city blocks.

With each subsequent meeting, groups would take on more self-management of the work anticipated. Each week might begin with a group check-in and intention setting. Each session might end with another circle devoted to acknowledging progress and anything else bubbling into the field of shared awareness. Keeping these rituals in a regular rhythm will model ways the participants might establish, or improve, systems built for consistency and self-regulation in their own private spaces. Throughout the entire program, facilitating a thread of embracing oddity, showing up authentically, community building, and social justice will continue to support and challenge participants in ways congruent with biophilia, ecopsychology, and neuroqueer theory.

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