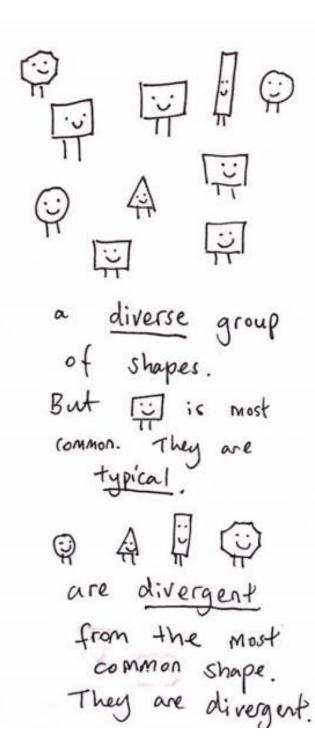
### Understanding neurodiversity





# Diversity Divergent Typical



Here is a family

of A. They are
all divergent from
the majority, who are

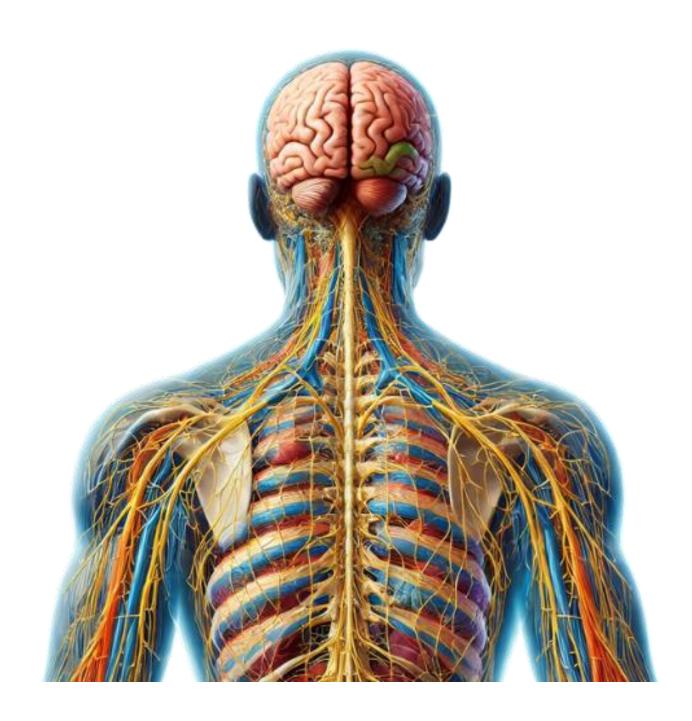
iff, but they are
not diverse in their
family group, as they
are the same.

is divergent from the average III, but (an't be diverse, as they are just one shape, not a group.

This family is diverse, with two divergent members, in a society where is most common. The is typical, but part of a diverse family.

@scrappapertiger





"neuro"
=
nerve

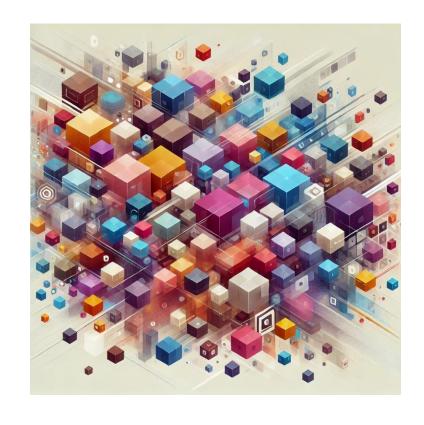
So neurodiversity is not just about differences in people's brains, but it is also about differences in our nervous systems and how we move our bodies.



#### Neurotype

A category used to group people who are similar to one another in the way their minds and nervous systems work.

Note: people who are categorized into the same neurotype are not all exactly the same – there's still considerable diversity within each category.







### Important not to stereotype!

"If you've met one person with autism, then you've met one person with autism". Dr Stephen Shore.

E.g. not all autistic people:

- Lack empathy
- Have super-computer like memories
- Struggle to communicate
- Stim / hand flap
- Have massive melt-downs in public



This is NOT what all (or even most) autistic people are like.



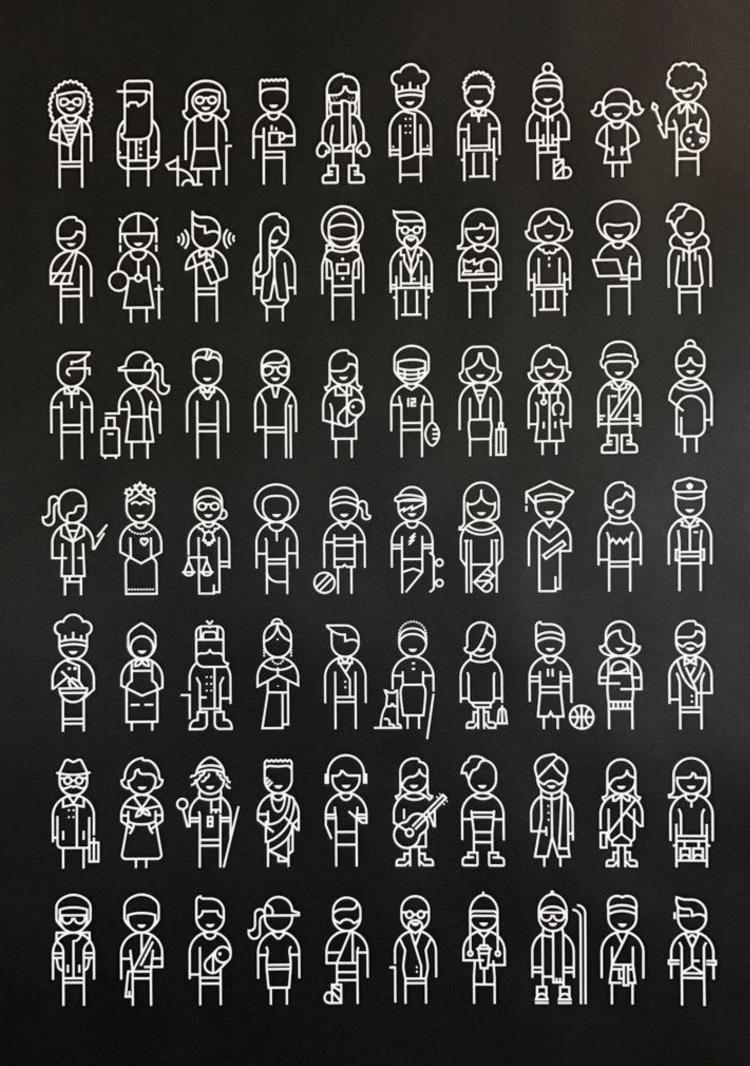
#### Neurotypical



A person who is described as neurotypical has a mind, nervous system and body that is similar to the majority of the people in the society in which they live. This means that they think, perceive, know, develop, process information and interact with the world in ways that most people perceive to be typical.

Sometimes called "allistic brain" (Dr Debra Bercovici).





There's no such thing as

#### NORMAL



#### Neurotypical # Normal

"When we say someone is neurotypical, we don't mean they were born with a specific type of brain, and that the type of brain they were born with is the "normal" type—because that's just nonsense... When we say someone is neurotypical, what we mean is that they live, act, and experience the world in a way that consistently falls ... within the boundaries of what the prevailing culture imagines a person with a "normal mind" to be like."

Nick Walker.



#### Pathology vs Diversity

#### Pathology:

- Neurodiversity is a "medical condition" that requires "treatment" and "accommodations".
- If you are neurodivergent there is Something Wrong With You.
- Neurodivergent people have a disability.
- Person first approach to remove emphasis on disability: "He is a person who has autism". (cf. "he suffers from homosexuality" and "he has negroism")

#### Diversity:

- Neurodiversity is normal. What makes it challenging is that the world is set up for a narrow group of people based on a set of arbitrary criteria assumed to be "typical".
- Neurodivergent people are disabled by society because it is set up in a way that only works easily for a narrow group of NT people.
- Identity based approach: "He is autistic." "He is gay", "He is black".

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#### Neurodiversity paradigm

"Maybe you function exactly as you ought to function, and that you just live in a society that isn't yet sufficiently enlightened to effectively accommodate and integrate people who function like you. And maybe the troubles in your life have not been the result of any inherent wrongness in you. And that your true potential is unknown and is yours to explore. And that maybe you are, in fact, a thing of beauty."

Walker, Nick. Neuroqueer Heresies: Notes on the Neurodiversity Paradigm, Autistic Empowerment, and Postnormal Possibilities (p. 25). (Function). Kindle Edition.





#### Neurodiversity

"Neurodiversity is the variation among minds (including embodied nervous systems). Each human being differs to some extent from every other human being, with respect to their neurocognitive functioning—how they think, perceive, know, and develop, how their minds process information and interact with the world. Neurodiversity is the name for this phenomenon."

Nick Walker



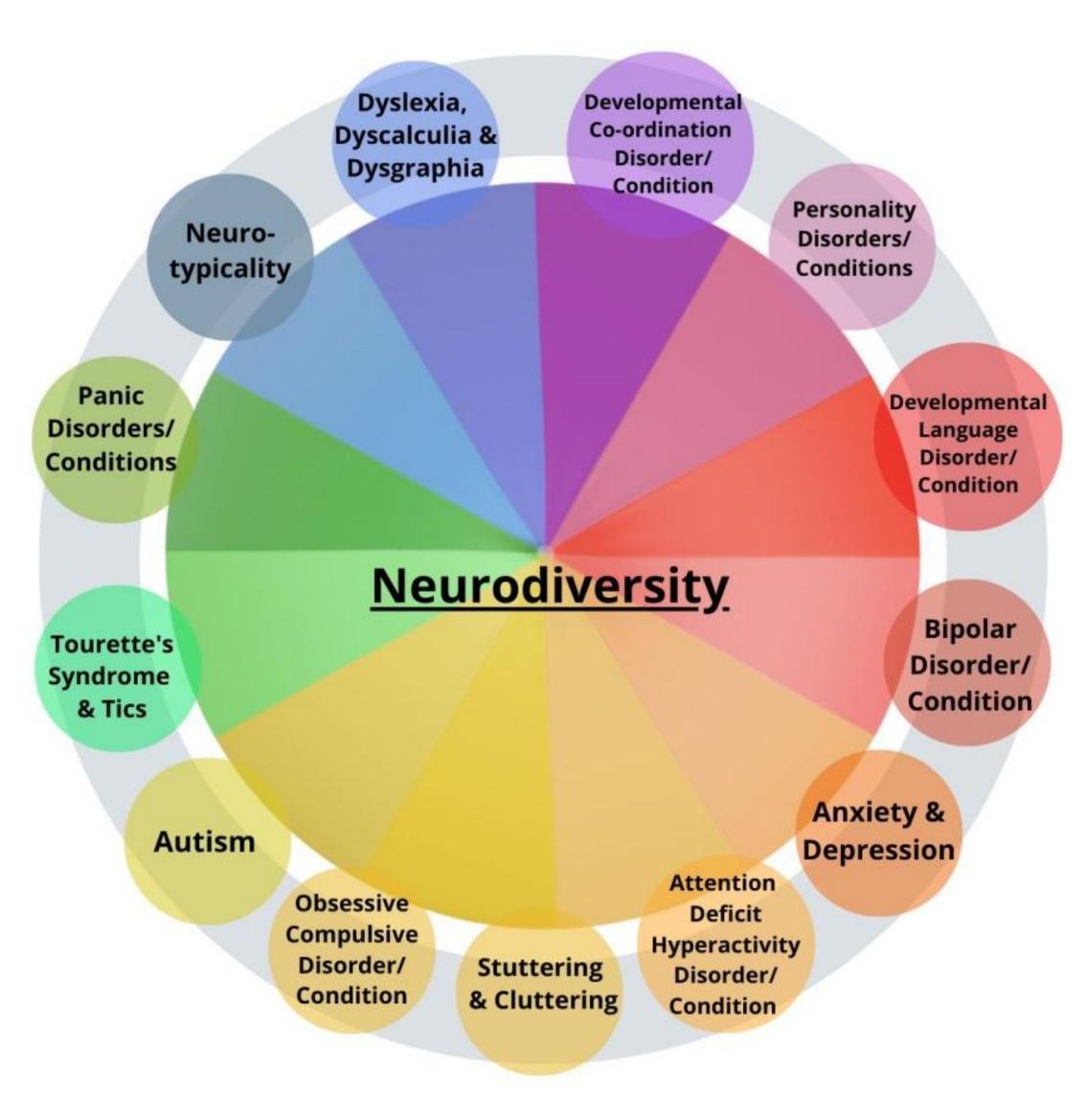


Image source: MetaArXiv Preprints | Bridging Neurodiversity and Open Scholarship: How Shared Values
Can Guide Best Practices for Research Integrity, Social Justice, and Principled Education

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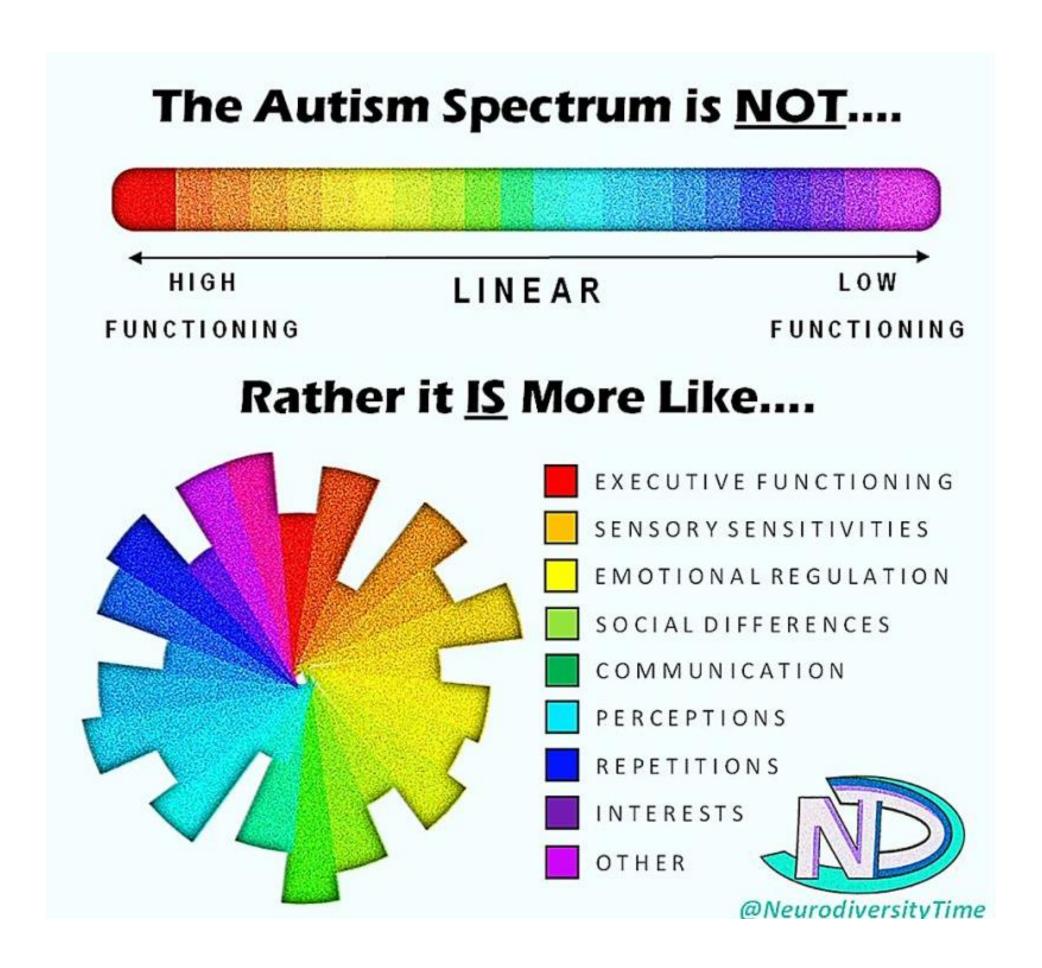
#### Neurodivergent

A person who is **neurodivergent** has a mind and nervous system that prompts them to experience the world and/or behave in ways that the dominant culture judges to be outside what is typical of the majority.

When we call someone neurodivergent, we don't mean that they aren't "normal," rather we mean that they aren't neurotypical, in that they don't match what the majority of people in a prevailing culture/society believes people should think and behave.



### It's not that kind of spectrum





## High functioning vs Low functioning

Compared to what? Who gets to decide?

In the pathology paradigm, the neurotypical mind is seen as the "normal" ideal against which all other types of minds are measured.

Low-functioning really means "far from passing for neurotypical, far from being able to do the things that neurotypicals think people should do, and far from being able to thrive in a society created by and for neurotypicals."

**High-functioning** means "closer to passing for neurotypical."

Walker, Nick. Neuroqueer Heresies: Notes on the Neurodiversity Paradigm, Autistic Empowerment, and Postnormal Possibilities (p. 24). (Function). Kindle Edition.

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#### Passing / masking

Many neurodivergent people can "pass" as neurotypical, in that while their internal world is different to the majority, they are able to convincingly behave in a way that is consistent with the standards of the majority. This behaviour is known as "masking" and people who can do this are sometimes referred to as 'highfunctioning'. However, continuously behaving in a way that doesn't come naturally to your neurotype' can often require a lot of energy and can lead to burnout.





### Are you a high functioning mediator?

"I'd like to propose that instead of rating human beings as "high-functioning" or "low-functioning," we apply the terms "high-functioning" and "low-functioning" to societies, rating the functioning of a society according to the degree to which it succeeds in supporting and furthering the well-being of all of its members—and the degree to which it can accommodate and integrate diversity, and employ diversity as a creative resource, without attempting to reduce or eliminate it and without establishing hierarchies of dominance and oppression."

Walker, Nick. Neuroqueer Heresies: Notes on the Neurodiversity Paradigm, Autistic Empowerment, and Postnormal Possibilities (p. 27). (Function). Kindle Edition.



#### ND and NT differences

- Different ways of processing information (sensory and other)
- Theory of mind
- Emotions / alexithymia
- Interoception
- Boundaries
- Self-care
- Executive functioning
- Language
- Non-verbal communication
- Social behaviour
- Decision making
- Level of dysregulation
- Timing
- Flexibility
- Ability to cope with criticism
- Focus



#### Theory of mind

Theory of mind includes abilities such as insight into other people's intentions, understanding of the underlying rules for interactions and social games, the reading of implicit body language, and understanding of pretence.

#### Theory of mind is not the same thing as emotion recognition or empathy.

Theory of mind may be divided into two parts:

- 1. A basic social perception component (immediate judgement of others' mental states on the basis of their appearance, voices, movement); and
- 2. A social-cognitive component (referring to more complex inferences, that require the integration of others' mental states across different events).

There are different interpretations of the term and what it includes, so care needs to be taken when examining research referring to this concept.



## How do we know what another person is thinking / feeling?

Cues we use to try to know what someone else is thinking or feeling:

- Facial expressions
- Body language
- Behaviour
- Vocal cues
- Words
- Others' responses
- Your own feelings
- Context

Neurodivergent individuals may not perceive these cues in the same way that neurotypical individuals do, and/or they may interpret those cues in different ways. This can lead to miscommunication and misunderstandings.



# Common autistic traits leading to low TOM (note much less of a problem with adults)

Bottom up thinking – compile all pieces of evidence or data, can't see big picture until have all the information. TOM requires assumptions based on incomplete or implied information. Difference between being able to "infer" a mental state with being able to "understand" a mental trait. Good at understanding, not so good at inference.

Consistency between actions and values (e.g. autistic people may assign blame where the other person had no intention of harm). Impact is more important than intention. All or nothing thinking.

**Expressions of empathy** – often try to show that they empathise by sharing their own experiences (can be seen as insensitive or making it about them).



## The double empathy problem – Damien Milton

When we find someone difficult to communicate with, we expect *them* to change.

"When our vision is no longer clouded by the illusion of "normal," we can recognize this double standard for what it is, recognize it as just another manifestation of the sort of privilege and power that dominant majorities so often wield over minorities of any sort."

Walker, Nick. Neuroqueer Heresies: Notes on the Neurodiversity Paradigm, Autistic Empowerment, and Postnormal Possibilities (p. 28). (Function). Kindle Edition.

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#### Neurotypical mediation 1

- Many mediations are conducted face-to-face;
- Mediations often take place in an environment that chosen by the mediator, and unfamiliar to the parties;
- A joint mediation session is typically conducted in a compressed timeline, with intense sessions often crammed into a few hours, assuming that participants can engage in communication, information processing and emotional regulation fairly quickly;
- Mediations tend to be process driven, with specific requirements about who can communicate, how, and about what at different stages in the process;
- Mediation (especially in the facilitative model) involves a series of transitions between stages with different 'rules' for what happens during those stages;



#### Neurotypical mediation 2

- Mediation tends to be very talk-focused, and there is an expectation that participants verbally communicate directly with the mediator and the other participants;
- Mediation assumes that parties can and will regulate their emotions throughout the process;
- Mediation assumes that people are capable of, and should engage in, perspective taking and/or imagining a variety of potential solutions;
- Many mediators have only a rudimentary understanding of neurodiversity and are not equipped to understand differences in communication styles and empathy between neurotypical and neurodivergent clients, they may have blind spots that prevent them from helping clients to bridge gaps in understanding.

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### Neurodivergence ≠ Lacking capacity

ND participants are disproportionately more likely to experience high levels of anxiety.

Where anxiety reaches levels where the nervous system is triggered into flight, flight or freeze the ability to engage in higher order thinking becomes reduced.

While this phenomenon can occur in both ND and NT people alike, the cumulative burden on ND people may disproportionately impact their meaningful participation.

This doesn't mean ND people do not have capacity – it means we may need to be flexible to create an environment in which they can effectively participate in their own way and their own time.



#### If you are a NT mediator

Neurodivergent individuals bring diverse perspectives and strengths to any setting, including mediation.

Care not to misinterpret challenging behaviours as resistance or noncompliance. This can lead to mediators losing their impartiality and even discriminating against neurodivergent individuals.

Care not to impose your communication and problem-solving style on others.

Remember that the NT way is not the only way (and ND people shouldn't have to be the only ones to try to be flexible).

Be open to designing processes around all participants' unique needs can lead to more successful outcomes.



## Common phrases I hear about neurodiversity in conflict situations

"He's obviously autistic" – blame other for not fitting your comfort zone – Compare: "I don't know how to effectively communicate with him."

"OMG, she was so incredibly inflexible!" – blame other for not changing – Compare: "I wonder what each party can do to accommodate each other's preferences."

"It was impossible to conduct the mediation between them as the ND person kept getting super upset."—blame other for not regulating emotions as expected, or within everyone else's comfort zone.

Compare: "How could we adapt the process to provide more opportunities for emotional regulation, and to increase everyone's comfort levels with displays of emotion?"





- A great overview of these concepts, with useful infographics can be found on the stimpunks website: <a href="https://stimpunks.org/glossary/neurodivergent/">https://stimpunks.org/glossary/neurodivergent/</a>
- Nick Walker, <u>Neuroqueer Heresies: Notes on the Neurodiversity Paradigm, Autistic Empowerment, and Postnormal Possibilities</u>
- Danielle Hutchinson's excellent blog about neurodiversity and conflict:
  - https://resolutionresources.com.au/tag/neurodiversity/
- Dan Berstein "Mental Health and Conflicts"

