

ADVOCACY GROUPS

Below is a list of organizations interested in self-advocacy for people with autism and ASD. Rather than focus on a medical model of “curing” autism, these organizations support the creation of inclusive spaces, independent living, and community development.

ASAN: Autistic Self Advocacy Network
The Association for Autistic Community
Autism Women's Network
Association of Programs for Rural Independent Living
Autism National Committee
Asperger's Association of New England
National Council on Independent Living
National Coalition on Mental Health Recovery
Self-Advocates Becoming Empowered (SABE)
The Thinking Person's Guide to Autism
DREAM: Disability Rights, Education,
Activism, and Mentoring
Taishoff Center for Inclusive Higher Education
We Are Like Your Child
Autism Rights Group Highland



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ARTS & AUTISM

A Resource for University Instructors



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GLOSSARY

ableism: Discrimination against individuals with disabilities. Though ableism can refer to individual attitudes, it is, like racism and sexism, also systemic.

DSM-5: “The standard classification of mental disorders used by mental health professionals in the United States and contains a listing of diagnostic criteria for every psychiatric disorder recognized by the U.S. healthcare system” (American Psychiatric Association).

IEP: Short for Individualized Education Program. A plan for the provision of support and services for a student who qualifies for special services.

independent living: “Independent Living does not mean that we want to do everything by ourselves, do not need anybody or like to live in isolation. Independent Living means that we demand the same choices and control in our every-day lives that our non-disabled brothers and sisters, neighbors and friends take for granted” (Ratzka).

medical model: Rooted in medical culture and based on the idea that “disabled bodies should either be rehabilitated (normalized) or eliminated (either by being sequestered from sight in homes or institutions or by being allowed or encouraged to die)” (Straus).

multimodal composition: Texts that use more than just words and letters to communicate meaning. These *modes* may include video, audio, photography, verbal—essentially any sensory elements that are added to writing in meaningful ways.

neurodiversity: In relation to autism and ASD, neurodiversity “promotes social acceptance of neurological difference as part of the broad landscape of human diversity and seeks to bring about a world in which Autistic people enjoy the same access, rights, and opportunities as all other citizens. Acceptance of difference is essential to understanding, accepting, and benefiting from the contributions of everyone (Autistic Self Advocacy Network).

occupational therapy: A form of therapy available to people with disabilities that encourages rehabilitation and independence through the performance of activities required in daily life.

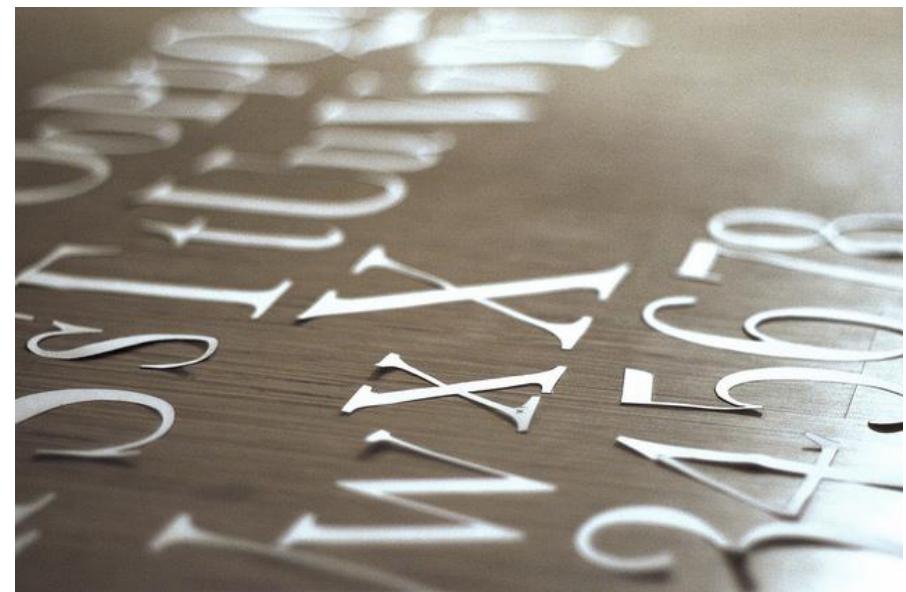
UDL: Short for Universal Design for Learning, UDL is an educational framework based on research in the learning sciences, including cognitive neuroscience, that guides the development of flexible learning environments that can accommodate individual learning styles. According to the Higher Education Opportunity Act 2008 (HEOA) the three principles of UDL are representation, expression, and engagement and emphasize reducing barriers with appropriate supports and challenges built into instruction (National Center on Universal Design of Learning).

social model: Suggests that “people are disabled by society and not by their bodies” (Shakespeare 218).

WHAT DOES THIS TOOLKIT PROVIDE?

We typically think of the writing classroom as a place just for print literacy. However, research in a number of humanities and education fields, as well as everyday educational practice, shows that visuals are integral to how many people learn to read and write. Indeed, elements of art and design are embedded in every aspect of written language, from font to layout and other visual design choices.

This Toolkit is an opportunity for writing instructors to think about how visual modes can positively influence the experiences of not only students with autism, but all students.



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MYTH: You can always tell when someone has a disability.

Fact: Many disabilities cannot be seen, and even if they can be seen can manifest in different ways. Never assume you understand someone because of their disability or that you are an authority in judging who does and doesn't have a disability.

ART CAN IMPACT A PERSON WITH AUTISM

Art can be used in the classroom in many ways, and we argue art is always already in use in a classroom even if it chooses to teach with only text. The way text is presented (e.g. through font, typeface, color, serif, etc.) has rhetorical effects over its reception. Composition classrooms can further use multimodal composition (multiple modes of expression of ideas) to equip students with a wider range of rhetorical options to convey their arguments through composition.

For people with disabilities such as autism, expression through text devoid of its artistic implications can be unmeaningful. Addressing the rhetorical impact of art and design in the classroom and allowing students to play with different artistic representations of their ideas (e.g. through non-traditional font and typeface, video, audio, photography, etc.) not only teaches more fully the range of rhetorical options students have in crafting arguments but also makes more accessible these myriad ways in which all artistic choices should be meaningful, rhetorical, and intentional.

SUGGESTIONS FOR INSTRUCTORS

1. **Utilize multimodal resources in as many ways possible.** A writing class does not have to abide to a model of pen to page/fingers to keys. Exploring a topic visually can be a huge asset to a student's ability to retain information or conceptualize a larger idea. Utilize audio clips, YouTube videos. Even having text on the projector can be useful to students.
2. **Everyone learns in different ways.** The lecture model, more traditionally used in a college writing classroom, does not work for every student. Depending on the size of your class and classroom, you might have students participate in exercises that have them moving throughout the room.
3. **Practice compassionate teaching.** When some writing instructors are teaching three or four classes, it can be difficult to support a student's emotional well-being in addition to their growth as writers. It's important to note, with students with a diagnosed disability, most are coming from educational environments where they had a developed plan in place to help them succeed in the classroom. This plan might involve parents, teachers, occupational or speech therapists, school psychologists or paraprofessionals. Particularly for first year students, this can be a time of tremendous transition. If you find a student is missing class or can't make deadlines, check in before assuming the worst. Have the number for student counseling services easily accessible. They might be able to provide resources that you, as an educator, cannot.
4. **If you have been notified about a student's disability through your college's Disability Services organization, you MUST adhere to their accommodations.** Period.

MYTH: People with disabilities are happiest when with other people with similar disabilities.

Fact: While forming meaningful community is important to anyone, that community can take many forms. In the past, grouping people with disabilities in separate schools and institutions reinforced this misconception. Today, many people with disabilities take advantage of new opportunities to join mainstream society.

TEACHING RESOURCES

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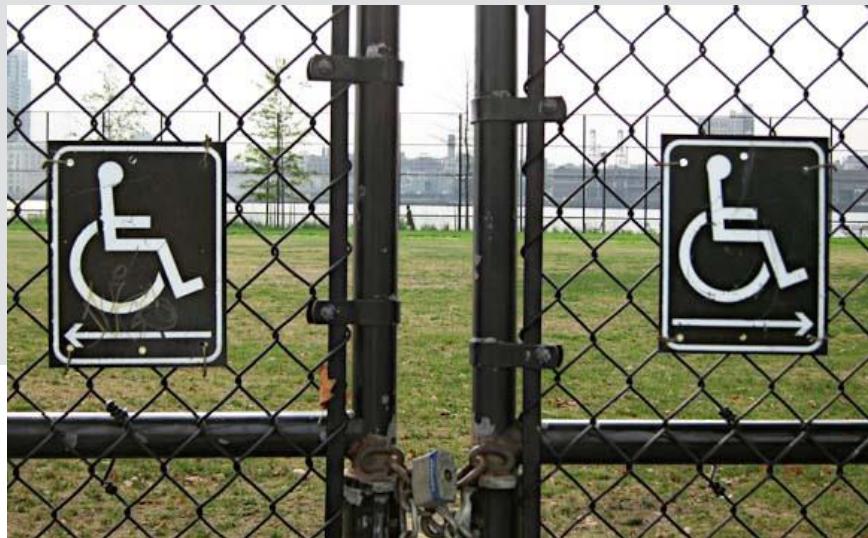
MYTH: All people with X disability will/should/need to do Y.

Fact: Chances are you are neither knowledgeable nor qualified enough to make judgments about other people's lives, and even if you are, the final decision over a person's life remains with that individual. Instead of attempting to dictate how people live their lives, ask questions about why people with disabilities are not empowered to make the same independent decisions afforded to the able-bodied.

What is Autism?

Autism is defined in the DSM-5 as a neurodevelopmental disorder. In medical discourse and practice, it is commonly associated with impaired communication, impaired social interaction, and restrictive and repetitive interests and behaviors. Of course, impairments -- and along with them, abilities -- are not stable, as they can only be measured relative to dominant social and cultural norms. Autism is thus a fluid category that attempts to group individuals based on observed behavioral differences. A popular saying in the autistic community -- “If you’ve met one person with autism, you’ve met one person with autism” -- reflects the cultural, economic, and biological diversity of persons labeled under this category.

Historically, educational environments in the United States have been ableist -- that is, designed to suit the learning needs of able-bodied learners, and not the needs of people with disabilities, including autism. Writing classrooms that do not attend to learning differences, including visual learning styles, risk excluding those who may struggle to process or comprehend verbal lectures and written texts.



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COMMON CHARACTERISTICS

People with autism may (or may not) display any of the following characteristics, as outlined in the DSM-5:

- Differences in social-emotional reciprocity
- Differences in nonverbal communicative behaviors used for social interaction
- Differences in developing, maintaining, and understanding relationships
- Difficulty speaking
- Repetitive behaviors
- Heightened sensitivity to light, sound, and/or touch

While the DSM-5 uses the term “deficits” to describe many of these characteristics, we prefer the non-normative alternative “differences.” We hope that this rhetorical move better respects the unique characteristics of learners with autism while not assigning greater value to people who learn or process “normally.”

Many people with autism are thought to be visual learners, though this is not always the case. Use of art and other visuals, for teaching demos and composing activities, can therefore be an effective way to help students understand and synthesize abstract concepts. For others, auditory and kinesthetic modes may be preferred. Besides stimulating learning, these techniques can open a space for neurodiverse learners to contribute meaningfully to other students’ understanding of interpreting and creating artifacts.



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CAUSES

While the majority of the medical community classifies autism as a neurodevelopmental disorder, there are many theories of autism’s underlying causes. In our opinion, the specifics of these theories, though potentially of interest, are largely irrelevant to educational practice. Like all manifestations of human bodily difference, autism is both social and biological nature. What gets marked as different or “abnormal” changes across cultures and classrooms. While there is biology underlying behavior, writing educators will largely be concerned with behavior -- specifically, how people think, learn, write, and speak. We will therefore leave biological theories of autism -- not our specialty to begin with -- aside, and focus on how our educational spaces can better accommodate all learners, regardless of their biology.