

TTAC Webinar: The 4 A's of Autism as a Guide for Promoting Success for Autistic, ADHD, and Otherwise Neurodivergent Individuals Through the Lifespan

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TTACNY Info: Good morning, and welcome to today's TTAC webinar, The Four A's of Autism as a Guide for Promoting Success for Autistic, ADHD, and Otherwise Neurodivergent Individuals Through the Lifespan. with Dr. Stephen Shore and Susan Chinitz. My name is Marcela Gomez, I'm a Senior Program Coordinator for TTAC, and I'm so happy to be joined by our presenters and you all today. A few logistics about today's session before we begin. Captions are available for this session, and you may turn them on or off using the toolbar at the bottom of your Zoom screen. LMSWs, LCSWs, LMHCs, LMFTs, LPs and psychologists are eligible to receive 1.5 CE's for attending this webinar. In order to be eligible for CE's, you must participate in the full duration of the webinar using your personalized Zoom link tied to your registration. If you're using a colleague's Zoom link or a link that doesn't match the email you registered with, please leave the session and rejoin using your correct Zoom link. If you experienced issues registering for the session, or need help finding the right link, please message the host in the chat, or email us at tac.info@nyu.edu right away. You'll request your CE's within the same system you used to register for the event, and you'll receive instructions on how to proceed via email. We'll be taking questions throughout the webinar via the chat, and have reserved time at the end to address them. Also, toward the end of the session, we'll be sending out a feedback survey in the chat box for you to complete. We appreciate you filling this out, as it allows us to understand your experience and enhance our future TTAC offerings. With that, I want to thank you again for joining us, and I'll hand it over to Evelyn Blanck, Executive Director at the New York Center for Child Development and Director of TTAC. She will walk us through a brief introduction before our presenters begin.

Evelyn Blanck: Thank you so much, Marcela, and if we go to the next slide, it's a brief overview of who we are. The New York City Perinatal and Early Childhood Mental Health Training and Technical Assistance Center is funded by the New York City Health Department. TTAC is a partnership between the New York Center for Child Development and the McSilver Institute for Poverty Policy and Research. New York Center for Child Development has been a major provider of early childhood mental health services in New York, and we have expertise in informing policy and supporting the field of early childhood mental health, and we do this both through training and direct practice. NYU McSilver Institute for Poverty Policy and Research houses the Community and Managed Care Technical Assistance Centers and the Center for Workforce Excellence. These TA centers offer clinic, business, and system transformation support statewide to all behavioral health care providers across New York State. TTAC is tasked with building the capacity and the competencies of mental health professionals and early childhood professionals and family-serving systems to identify and address the social-emotional needs of young children

and their families. So if we go to the next slide, this is just a screenshot of our website. We'd like to direct people there to see, to be able to access copies of previous webinars, both the recordings as well as the PowerPoint, as well as a host of other resources. So it's now my pleasure to turn it over to our clinical co-director, Dr. Susan Chinitz, who's going to facilitate today's webinar and presentation. Thank you so much.

Susan Chinitz: Good morning, everyone. It's a great pleasure to introduce our speaker today. Dr. Stephen Shore, who holds a doctorate in education, is an Associate Clinical Professor of Special Education at Adelphi University, and also teaches at Hofstra University and NYU. Dr. Shore is an invited speaker, both nationally and internationally. I know he recently returned from engagements in Australia and India, for example. He's been to Israel and many, many countries around the world. Where he teaches about autism, specifically focusing on best practices in supporting autistic people to lead fulfilling and productive lives, and talking about life on the autistic spectrum. Dr. Shore is also a consultant and author on lifespan issues related to education, relationships, employment, and self-advocacy for autistic and otherwise neurodivergent individuals. His most recent book, *College for Students with Disabilities* combines personal stories and research for promoting success in higher education. Dr. Shore is on the board of Autism Speaks, the organization for Autism Research, the Autism Society, and numerous other autism-related organizations, and is President Emeritus of the Association for Autism and Neurodiversity. Dr. Shore will review other aspects of his bio, including a description of his earlier years, as part of his presentation today. Following his formal presentation, Dr. Shore and I will engage in an exchange about parenting, specifically about parenting. And as this particular training was specifically requested by clinicians within the TTAC network, we strongly encourage you to engage with us with your questions about clients, about services, any of your other reflections, and to share whatever resources you are aware of. Okay, so with that, I'm gonna... it's my pleasure to turn this over to you, Dr. Shore.

Stephen Shore: All right, thank you very much. It's a pleasure to be in front of all of you, to share my experiences with autism. Being an autistic person, and And to place that in context with the greater term, neurodiversity, neurodivergence, and so on. So let's... Let us begin. with, my part... this part of the presentation, which is titled, *The Four A's of Autism*. And I like to think of this as a protocol, or a way of... Understanding autism, and we can generalize this to neurodivergency as well. to... Understand and build fulfilling and productive lives. For autistic and otherwise neurodivergent individuals, making it the rule rather than the exception.

So that first A, we've been at that, for... a couple of generations already. That's awareness. You may have heard a lot of autism awareness, organizations such as the Autism Society of America, Autism Speaks. As well as many local organizations and international ones, as well, such as the National Autism... Autistic Society of England, or Action for Autism in India. All promoting awareness, helping people recognize when autism is present. And in doing so, we've gone from a perceived Prevalence rate of Autism being a very rare psychiatric condition caused by poor parenting. With a prevalence rate of 1 in 10,000. And now... the Center for Disease Control and

Prevention has released a prevalence rate, I think about a year ago, of 1 in 31. That is a lot of autism. A little bit more than 3%. And what that means for educators, for example, is that if they do not have an autistic child. In this class, the numbers will catch up with them, and they'll have one in the next class. And as a society, we're now much better at recognizing autism at home, in education, in employment, in the community, and increasing numbers of autistic individuals Reading about it, Usually online, and doing a sort of, informal self-diagnosis. And perhaps getting that, validated by more formal means. And... My discussion about autism can be generalized to the other neurodivergent conditions as well, such as ADHD, dyslexia, Tourette's syndrome, and as well as others. Well, all of this awareness is great, and it builds a solid foundation for the next step.

And that next step is acceptance. And acceptance is where we say a turning away from trying to cure, trying to eliminate, trying to make the autistic or otherwise neurodivergent person or parent more like a non... Autistic or neurodivergent parent. And we now realize that the best we can do is, perhaps have someone who is a poor imitation of a non-autistic and non-neurodivergent person, but rather it's working with. So, we could take an example, perhaps we have a child who's having difficulty and has Little motivation to do math. And so the... The teacher or behavioral consultant does an interest inventory and learns that one thing that the child really lives for is using a computerized flight simulator. And commonly, A program will be set up. Where, if the child wants to continue accessing his favorite interest, or her favorite interest, they must meet their goals in mathematics. However, this is working against the characteristics of autism. And one of those characteristics being Highly focused and specialized interests. And with that, the skills that go along with it. So, this child, the teacher, hopes that access to this preferred activity, it provides the motivation to do the non-preferred activity, such as mathematics. And therefore, access to a computerized flight simulator is an extrinsic or outside reinforcer that has nothing to do with the activity itself. There are thousands of extrinsic reinforcers, everybody has them. Anybody who's worked a job that they'd rather not do, but do so because they need the money to do something else, well, that's an extrinsic reinforcer. However, we know that intrinsic reinforcers are more powerful. And an educator who's more aware of these things, and instead of working against this characteristic. We'll work with this characteristic. And recognize that there's plenty of mathematics involved in flying airplanes, and involving the use of the flight simulator in teaching mathematics will make math now intrinsically Reinforcing, because it relates to the person's focused interest. And at some point, perhaps the child will... Learn that they can use the flight simulator even better. Because they understand mathematics.

We then move to... The third step, which is appreciation. We're artistic and otherwise... Neurodivergent individuals are appreciated. For who we are, And what we can contribute to society. So, an example might be... of... I know of a fellow in Florida. Who is pretty significantly affected. He'd be considered at level 2 autism. He needs support in terms of communication, social interaction, managing a schedule, transportation, and many parts of his life. However, he has this curious interest. in pulling laundry out of a dryer and folding it. He loves to do that at

home. He races to the dryer, he watches the clothes tumble in the dryer, waits for it to end, pulls the clothes out, folds them with perfect creases. There must be a sense of order that he gets when the clothes are perfectly folded, and then he'll sort the laundry into piles. Shirts in one pile, pants in another. And so on. He just loves to do this. And I know many people who would like help with their laundry, too. I'm sure many of you in the audience. And in fact, I could call his mother on the phone right now and say, I've got some people up here in New York who would like help with their laundry. Guess who would be on the first JetBlue plane up to New York. To help you out. However, you'd have to pay him to do it, because that is his job. He, spends all day in a hot laundromat, folding and sorting perfect creases, better, faster, and with more enthusiasm than anybody else, because... That job is meaningful to him. And he's valued, he's appreciated for what he contributes to this laundromat.

And then there's the fourth A, which is action. Action represents all the efforts that you put into learning more about autism, and again, generalizing that to neurodivergences. So that you can better understand and support individuals who... are autistic, or otherwise neurodivergent.

So, what brings me here to talk about autism to you? We'll take it from the beginning. Things were pretty typical at first. At 24 hours of age, my wife says I looked like an egg. And then... Like what happens to about 30% of us autistic individuals, at 18 months, I was struck with the regressive autism bond. Where I lost functional communication, had meltdowns, withdrew from the environment, in a brief, I became a very autistic little kid. There was so little known about autism in those days. So little known that it took my parents... about a year to find a place for diagnosis. So, from 18 months to... No. to... no. A year and a half later. Until I'm, I guess about a year, two and a half. My parents have this child who was formerly interacting and... Warm and engaging with them to suddenly... Eschewing interaction, not wanting to be held, having meltdowns, and losing whatever interactive communication, that, that I had. And that's what happens to about 30% of us.

Finally, at two and a half, my parents find a place for diagnosis, and this is up in Boston. And the doctor said, well, we had never seen such a sick child. And the doctors recommended institutionalization to a place, very much like Willowbrook, that was on Staten Island. Fortunately, my parents, like, we see ever-increasing numbers of parents today around this country, around the world. They advocated on my behalf, and they convinced the school to take me in about a year. And it was during that year. That they implemented what we would today refer to as an intensive home-based early intervention program. And this was a program emphasizing music, movement, sensory integration, narration, imitation. And that's today's terminology. Because in those days, the concept of early intervention didn't even exist for autistic individuals, for individuals who were otherwise neurodivergent. And also, what about parents? Autistic and otherwise neurodivergent individuals grow up to be autistic and neurodivergent adults. And that is something that we're also going to explore today, how we can support parents who are also neurodivergent, and may or may not have neurodivergent children.

So, what did my parents do? Well, first they tried the time-honored technique. Of imitation. Trying to get me to imitate them. Imitation is a time-honored teaching strategy. Everybody's done it formally or informally, shown someone how to do it, okay, now you do it. But perhaps due to a difference in mirror neurons. That didn't work for me, it doesn't work for many other young autistic children. Some of my parents flipped it around. And then they imitated me. Once they did that, I became aware of them in my environment. And they were able to move me along. To a point where speech began to return at age 4. So, what are some of the key implications that my parents did when they flipped things around and started imitating me. If I flapped, so they flapped. If I... vocalized a sound that I heard from somewhere, so they did the same.

And the key is, They met me where I was. And that's the first step. You need to meet the individual where they are, whether they're autistic, otherwise neurodivergent, or actually just anybody. You start by meeting the person where they are. And then you develop a trusting relationship. And it's these two prerequisites that are necessary for doing meaningful work. And meaningfully supporting an autistic person, a... someone who's otherwise... Neurodivergent, and again, probably anybody else. Whatever the age is, whatever level of education. So, at age 4, Speech is beginning to return. I entered the school that initially rejected me. I got re-evaluated. And instead of being considered as psychotic and ready for an institution, I got upgraded to neurotic. So, things are moving up in the world. Know is we. as we think about the characteristics of autism. And I've also seen this in other neurodivergent conditions, especially ADHD. We have the characteristic of highly focused interest and skills. And... An example is that at age 4, I was found by my parents Taking apart a watch with a knife. I would pop open the back, I'd extract the motor, remove the gears, spin them around, and then put it all back together again. And the watch still worked. And there weren't any pieces left over. Now, my parents, upon noticing this, they didn't have the terminology, but... What they were subscribing to. Was an abilities-based approach. They soon provided all kinds of other devices to take apart and put together. Especially when they noticed that I could... Pop open the back of a watch, extract the motor, remove some of the gears, spin them around. And then put it all back together again, no pieces left over, it's still working, and I could do that with other devices as well. And this is important because... It's... is important to be looking at the skills and abilities, strengths, interests. of... Individuals when they're very young, because... They have potentially important implications. For later on in life. Perhaps as a hobby, perhaps as some sort of vocation. At that time, maybe it looked like I could have been a watchmaker or a watch repairman. I would have needed a lot of support in every other aspect of being an adult, is what it looked like at that time. And had my trajectory gone in a different direction, maybe that's what I was doing, and that would work pretty well.

So there's an interesting question that comes from this. And that is... If you think about the motor control needed to take apart a watch. Fine motor control, to be specific. Occupational therapists look at motor control divided into basically two categories. There's fine motor control, which is what helps you zip Your zipper, button your buttons, pick up a cup of coffee,

and make sure it ends up at your mouth, and you don't pour it into your ear. write, text on your phone, any of these small motions. And then there's a big body, a body on gross motor control, and that is what you use to... Walk to the front of your computer, sit in your chair, carry heavy objects, carry a bag of groceries home. And... with me, it appeared that I had a superabundance of Oof. Find motor controls to take apart a watch. But then the question is, where does that motor... where did that motor control go? When it came to penmanship. Penmanship, writing by hand. That was a complete disaster. Like, so many autistic... Kids with ADHD, and others who are neurodivergent. I was the slowest writer in the class. One of the worst experiences I could have in school, other than bullying, would be to walk into a room with a paragraph on the board. Because what that meant is that we were going to have to copy it down. And by the end of the period, I had gotten through a... Few words, and everybody had finished and gone to recess. So, I would encourage you to... Contact your favorite occupational therapist for some interesting neurological explanations for this. My fine motor control could work for one activity and not another.

What this is also an example of, and that we see, particularly in autism, but also in the other neurodivergent conditions, is this widely varying skill set. Which suggests that the things we're good at We can be incredibly good at. The things we're not so good at need support? We probably need a lot of support, and there often isn't that much in the middle, so we see this sort of bimodal distribution. of extreme strengths, and extreme challenges. Which can be confusing to those who support autistic and otherwise neurodivergent individuals, and even individuals themselves. How could we be so good at? but have such difficulty in this other thing. And that's an important characteristic of autism. That's not often mentioned in the diagnostic criteria.

Another example is I have a colleague, friend and colleague who is a senior research scientist at Drexel University, Research One University. Amazing skills when it comes to... Research, analyzing research, writing papers, presenting, and doing all those things you do when you're a scientist. At the same time, she's long ago given up any thought of balancing her checkbook. She and numbers just don't get along. And that's just another example of this incredibly widely varying skill set.

Well, then it was off to... Kindergarten. Grade school kindergarten. Where I was a social and academic catastrophe. Well, you know what happens to children who are different in grade school? Fortunately, school systems are beginning to realize that bullying is not a developmental phase that people need to go through. I was also about a grade behind in most of my subjects. I would spend most of my time in the back of the room. Reading books, on whatever I was interested in. So, my day would... mostly consist of going to the library, getting all the books on whatever I was interested in, and it ranged from music to space exploration, aviation. Earthquakes, dinosaurs, volcanoes, mechanics, cats, whatever it was. I'd read them, take notes, copy diagrams. And then when I was done with them, I'd put them away. And... get books on something else. Sometimes I'd even wonder, is there more to school than just reading my... Favorite subjects. Ed. I think the... I think what led to this was the teachers didn't quite know

how to reach me. But at the same time, since I wasn't a behavior problem. They just left me to my own devices. And that was probably for better. Rather than for worse. So in those days, I was the child that... No, it's probably considered as an FLK classification. Which stands for Funny Looking Kid. We don't know what to do with this kid. But I wasn't disruptive. These days, there's a lot more known about educating students who learn differently. And... they would engage. They would find a way to engage that highly focused interest. into whatever curriculum. Just like... yeah, just like with that math student. I mentioned earlier. So, let us take a look at what... Autism is, and... How that relates. to neurodivergence. And one way to look at it is to... Transition from taking of autism as a linear spectrum. Ranging from severe to light, for example. Which, in some ways can be helpful, but some ways it isn't. Because as we get back to the... widely varying skill set. I have, for example, have another Another friend who has a verbal IQ of over 200. Now, those of you familiar with IQ tests know they don't go that high. So it's just a guess. Now, she has amazing skills in giving presentations, writing, gymnastics, other areas. But at the same time, she has such challenges in... social interaction. With sensory issues, that she'll never be able to find a job.

Susan Chinitz: The way we think about finding and keeping a job.

Stephen Shore: On the other hand, I know many people with measured IQs that are perhaps the room temperature. Or maybe even freezing. Temperature. But somehow they're still communicating. Especially when you give them an augmentative, an assistive communication device, and they're pointing at pictures or typing, but they're just not neurologically set up to speak. And so, if we consider, perhaps, the autism wheel. And with the autism wheel, we can take a look at the various characteristics of autism. And consider how much of a challenge it is to that individual. And so, we can, for example, we could look at this person's profile. And, we see that this person, they're doing okay with digestion, and perhaps it isn't a problem, and we know many autistic people need to be in gluten and casein-free diets. And there are some challenges in communication. And the, the fewer... Segments that are colored. That suggests that there's a great challenge. And one challenge that this person has is masking. You've only got a tiny little color towards the center, and we're going to need a lot... to provide a lot of support for this person. This person also has challenges with sensory processing, and perhaps often gets overwhelmed by their environments. And they perhaps have a lot of focused interests, and the question is how... what could we do to Harness those focused interests. Into something that can provide You know, a fulfilling and productive life. later on. So, autism is... 1... One condition... One diagnostic criteria, whatever you want to call it. That is within neurodivergence. So... When we consider people who are neurodivergent. These are individuals who are diagnosed, perhaps, with One of these... one or more, because sometimes you can have more than one. of these characteristics. These are individuals who think, perhaps, a little bit more differently than the rest of the population. So, what is... Neurodiversity. How does that contrast with... Being neurodiverse, or neurodivergent.

So, let's take a look. The human race is... neurodiverse. Everybody in the audience, there's an amazing and wide difference in how all of you think. The human race is neurodiverse. Any classroom of students I have. are neurodiverse. And when we consider neurodivergency, or neurodiversity, that's the... That's just the natural, biological difference between human minds. From neurodivergent To neurotypical individuals. If we say that someone's neurodiverse, this is an individual. Roughly about 20% of the population. That represents the spectrum of neurodiversity and... With, neurodiverse individuals. Neurodivergent individuals. Within... and neurotypical. individuals. And then we get to neurodivergent. And now, these are the individuals that... may, may not have a formal diagnosis, but they may be autistic, have ADHD, have dyslexia, Tourette's syndrome. Various other conditions. And we diverge. Diverge. About 20% from what is typical.

So, when we talk about people who are Think differently. Then from others, the term is Neurodivergent. The person is neurodivergent. I am neurodivergent. Probably about 20% of you. are neurodivergent. And what is typical? This is someone whose mind falls within the... Societal standards of what's considered normal. So, I am neurodivergent. Any one of you. About 20% of you are also... neurodivergent

So, getting back to my situations as a neurodivergent in terms of being autistic, But... In my life. We move up to... Third grade. I started getting, interested in bicycles. I got it to a point where I could take a bicycle apart down to the ball bearings and put that back together again. Speech is pretty much typical. I'm still sitting in the back of the room. I remember about this time, I had a stack of astronomy books on my desk, and a teacher told me that I'd never learned how to do math. But somehow, I figured out juuust enough meth. To teach statistics at the university level. And the good news is that today, increasing numbers of educators would know this... notice this type of highly focused interest, and find a way to Find a way to, to teach the curriculum. Through that interest. Bicycles now being an interest. I would fix people's bicycles. Maybe the future would have me... Being a bicycle mechanic, working in a bicycle shop, maybe owning a bicycle shop. At this point, I... Wouldn't need much... Much support. Living life as an adult. More than most people, but... Most of it I could do on my own.

And so people's trajectories change over time, people develop over time. However, still, it's important to be... Focusing on what those interests and strengths are. So, moving on to middle and high school. You don't need to be autistic to have difficulties in middle and high school. But, for me, it was actually easier for two main reasons. One is. I realized that using words instead of sound effects from the environment really helped with social interaction. And then, too, I was able to engage in my highly focused interest of music. I joined the band. And now I had a structured activity in which to mediate my interactions with others. And I got so tied up in music, that it became a highly focused interest. Always was an interest, but even more so, kind of took off. To where I got it into my head that I needed to learn how to play all the musical instruments. And there I was, spending hours in that instrument closet. Hours just taking instruments apart. Sometimes assembling multiple instruments into these single contraptions

that never should have seen the light of day. And while I didn't learn them all, I did get it up to about 15 while I was in middle and high school. And then when I learned that a requirement for a degree in music education was that you had to learn all the instruments. Well, that just seemed to be the thing to do.

And so then it was off to college. College, which was a utopia. I had more friends. No more bullies. I was... Actually surprised, and almost, speechless when... I learned that... other students, my classmates, would talk to me, even though they didn't know me. Because that certainly didn't happen in high school. People... If you didn't know them, they wouldn't talk to you, but... In college, people seemed to be more interested in who you were. As opposed to how much you will like somebody else. So, college was a great time. College can be... A liberating time for many autistic people who have the capacity to... To manage, to be successful in the academics, and sometimes we'll need support in the other aspects of university life, and that's why we've seen a proliferation of programs, such as at Adelphi University, where I teach, called Bridges to Adelphi, Where autistic students Are supported so that they may be successful. at the college level. We have about 140 autistic students who are being supported here. Students, autistic or otherwise, apply, and... either get accepted or not accepted to Adelphi based on their credentials. And if they get accepted, and... they're autistic or otherwise neurodivergent, they can go over to the Bridges program and receive additional support. That will... Permit them. enable them to be successful.

So I had more friends in college. If I wanted to ride my bicycle at midnight, I could find someone just as strange as I was to also ride at... Midnight. Dating often occurs in college, that was something that I could never quite figure out. Still can't figure it out. I remember in my undergraduate days, my first encounter After spending a lot of time with this lady. She suddenly told me that she likes hugs and backups. And... what my thought was, well, gee, I've got this brand new friend, and as a deep pressure seeker, this is someone who can... Be a source of deep pressure. Perhaps like a Temple Grandin squeeze machine. And also, she's a friend. And that's as far as I took it. However, after a lot of conversation, I realized she wanted to be my girlfriend, and I wasn't really interested in dating at that time.

However, what that told me is that there was this whole area of communication. That we refer to as non-verbal. Nonverbal communication. And depending upon the sources you read and believe. Nonverbal communication makes up to 93% of the total interaction package. Where in autistic people, another characteristic can be difficulties in perceiving and decoding nonverbal communication, which means all we're left with is the words, maybe as little as 7% of the total package. And as a result, we're going to have to be. Interpret them literally. Sort of like when you're texting to someone. Most of the time it's just all text, and many times that text gets interpreted literally, which sometimes causes misunderstandings in text-based communication. Now we have emojis. And emojis can help, to some extent. But still, The full information isn't going through. So, what this experience taught me is that And got me... got me fascinated. in this whole non-verbal communication area, and I would spend hours reading books on body

language, dating for dummies, relationships. And that came in handy later on, because as... I move up to graduate school. Love it. now I'm spending a lot of time with this lady. Initially reviewing each other's homeworks. And then doing things socially, and then one day at a beach, very much like this, she suddenly gave me a hug, a kiss, and held my hand. And now I had the social story down. And it went something like this. If a woman hugs you, kisses you, and holds your hand all at about the same time, it probably means they want to be your girlfriend. And if that's the case... You better have an answer right away. And it could either be yes, it could be no. Or it could be further investigation, and analysis is indicated. Well, it seemed to be a good thing to do. And, well, we've been married now for 36 years. And if you want to find out what life is like on her side of the spectrum. married to an autistic person, then I encourage you to read her contributions to my autobiography, Beyond the Wall.

And now people may ask, what do I do now? Does autism still affect me? If so, How does it? So, autism still affects me. One example is... well, many of you may think this hat's a fashion statement. And, in many ways, it is. And it's also always good to support my university, Adelphi University, when I travel, wherever I speak. But in reality, it's really an accommodation. Because, for me, being under recessed lighting fixtures. It's probably like looking into a spotlight for... Most other people. For most of you. And this is a great accommodation. Tight clothing just provides too much sensory input, so my clothing tends to be rather loose. And floppy? Another area is that part of autism means that it's difficult for me to recognize faces. So, it takes me all semester to begin To recognize my students. So, as a result, I... as part of what I teach. And part of my introduction, I tell them all I'm autistic, and... It's hard for me to remember your faces, and... You could do these following things to help me remember who you are. Perhaps having a name tag on your desk if it's in person. If it's on Zoom, well, everybody's name is at the bottom of the little picture, and that's actually very, very helpful. And so, what do I do? Well, most of my time is right here at Adelphi University. either teaching, teaching and researching about issues related to autism and special education. My research is focused on... Participatory research into supporting mental health. For autistic individuals, that's a whole nother area, that's a whole other presentation. A whole area that we need to... Focus on, understudied Much more attention needs to be paid to it, and that is promoting good mental health for autistic individuals, and through my participatory research. What I've found, or actually what we've found, because I've done this with colleagues. Is that what is most on the minds of autistic people In terms of... Being challenged to... receive medical support for is access to mental health supports. And that's coming from the autistic community. It's so... We need to listen to the autistic community and do more research in there. In this subject. And when I'm not doing that, I'm traveling. As was mentioned in Susan's introduction, I travel extensively to talk about autism, so far to 58 countries, sometimes to as many as 2 countries a month. Recently, I was in Australia, and I combined that with a, more presentations in India. I figured India's on the way home, so I might as well drop by there. In March, there's... there'll be a couple more presentations, one in Thailand. Followed by one in. In Germany, so that will be another, literally, Around the world trip. And when I'm not doing that, or writing books or articles on autism, Nay. I give music lessons to autistic individuals.

And so now... As we close... I am now... Charging you with a responsibility. And that is, what actions are you going to climb these stairs? Of awareness, acceptance, and appreciation of autistic and other neurodivergent people in your lives. And if you happen to be autistic, or otherwise neurodivergent, what are you going to do? To become better aware of what your abilities and strengths are. To accept and work with them, as opposed to against. And so that you can appreciate them, and... Prepare, and build. this being part of building a fulfilling and productive life. So, some examples, might be... Someone who needs things to be in order. That's a common autistic, tendency. Well, that's the person who may keep their desk very, very neat. In school. Maybe need as an adult. The autistic youth who has Hearing sensitivities, hypersensitive hearing. That may be the individual who always plays in tune During, during band. Orchestra. Or it sings in tune in chorus. That might be the very same individual who harnesses their hearing sensitivity. to become an audio engineer. And I've seen autistic individuals, do that. So I want to thank you for your attention, I want to thank you all for The work that you're doing, in... Developing greater understanding. And promoting fulfilling and productive lives for autistic and otherwise neurodivergent individuals. In your lives, and making the success And productivity, the rule, rather than the exception. And now is a great time to transition to Susan's part of the... of today's session. Looking at what is known about parenting by autistic individuals.

Susan Chinitz: Well, thank you, Stephen, and before I go on, I just want to comment. We worked together in preparing this, but I... this is a brand new part of learning about you. This was... a really fascinating, very candid, and extremely helpful description of growing up with autism, and, just an inside perspective that I think we Rarely get the chance to hear as practitioners and providers, so... I just want to stop for a moment to thank you and acknowledge all that we learned from this so far. So we are going to transition to what is known about parenting by autistic individuals. I want to just say that Stephen previewed these comments for me, and I've invited him to, comment in any, at any point on that.

Okay, so, In terms of looking at the literature, while there is an abundance of research on the experiences of parents of autistic children, there is really relatively little literature on the experiences of parents who are autistic. Much of what's available are accounts by autistic parents who were diagnosed later in their life. Often after they've had a child who received an autism diagnosis, and they learned more about autism through their child's diagnostic process, and became aware of some of their own characteristics that were similar. So, some of these parents went on to have, yeah, I'll go back for a second. Some of these parents went on to have formal diagnoses, some were just self-diagnosed, and much of what is in the literature are anecdotal accounts in articles and blogs written by these parents. And much of what I'll share today has been gleaned by a review of many of these articles and blogs. There are some, but few, formal research articles on parenting and on the experiences of autistic individuals during pregnancy and the perinatal period. I've included some of those references in these slides. But still, more diverse accounts are needed, as no two autistic adults are the same, and there are other relevant variables that impact parenting, such as whether the autistic parent is raising an

autistic or neurotypical child. whether both parents have autism or one parent is more neurotypical. And also, most of the accounts that I was able to access are from women and mothers, and there's almost no information coming from or about fathers. Okay. Just to give you a sense of what is in the literature.

So there's a lot of discussion, about the strengths. That, an autism diagnosis constitutes for parenting. One that's mentioned is that reliance and preference for structure and routines is an asset in raising very young children. We all know that we encourage and support parents in developing structure and routine for their young children. That's considered a strength by people who are describing their own experiences parenting. They've also mentioned that some of their obsessive qualities result in positive, in positive outcomes, and that they get all that their children need. There's a high degree of focus and commitment to child and family well-being, and some parents feel like some of that has resulted from their obsessive qualities. They talk about a logic-based response to their children instead of an emotional response. And in problem solving, instead of dysregulated emotions as parents when problems emerge, and this was highlighted more around adolescence and all of the challenges that adolescent children pose for parents, and some of these parents discussed the benefits of having a logic-based response. To the issues children, present. Very importantly, and I think we can all relate to this, when a child is autistic, the parent's appreciation and acceptance of neurological differences result in less pressure on the child to conform or to be normal, and thereby less stress for the child. The child is more, You know, is more generally allowed to be him or herself. And then, you know, despite all of the... judgments and real-life struggles. Autistic parents say in these articles and blogs that they find themselves capable of growth, of adaptation. of self-awareness, of intentional compensation, and importantly, a lot of parental satisfaction, despite what they all describe as a lack of appropriate parenting resources developed specifically for autistic parents, so... Again, highlighting that this is often a very satisfying experience for parents.

And of course, there are, as Stephen alluded to, many, many challenges. First, social skills and social communication is being a parent is an inherently social undertaking. Teaching young children how to socialize with others, engaging with other parents. communication with children's teachers, health, and other professionals. These are all social skills which do pose a challenge. And the parents, who I write about said that pregnancy is often a difficult time. Because an autistic person may find it challenging to communicate their needs, preferences for delivery, even talk about their pain with their medical providers, and that these communication problems are, Both in the domain of expressive communication and in receptive, because they often have found that their... the information they request from providers, is not always adequate or appropriate information for them. Okay, the sensory experiences and sensory overload from the noise, mess, and chaos of children and family life. Infant crying, toddler tantrums, the smells, the touch, are all, challenging from a sensory perspective. Executive functioning, time management, organization, multitasking, prioritizing. Parents often talk about overload from their multiple responsibilities at home, and sometimes from work as well, and fatigue from managing all of these, different things. Issues of emotion regulation and managing

stress in the context of everything we've already just talked about. Being flexible. Adapting quickly to changing situations is often necessary, but disruption to routines may be stressful. We all know how flexible, we often have to be in parenting. Mental health. The anxiety, which is common among adults with autism, can be exacerbated by perinatal mood and anxiety disorders. That comes up a lot. I think, from what I've read, autistic individuals are more prone to perinatal mood and anxiety disorders, probably because of a tendency toward anxiety. Autistic adults are more likely to experience depression or anxiety during and following a pregnancy. Okay, social situations and demands. We've mentioned some of this, but Parents with autism may not have social networks, may be more socially isolated, may have difficulty or discomfort with the array of social communication that's part of everyday parenting, arranging play dates, chatting with other parents, attending children's parties, those kinds of things. Advocating. Advocating for their own child, especially for children with special needs, who often need strong advocacy. This is an area where parents with autism have indicated a need for more support. And then there's discussion about the gendered burden of parenting on women. Like non-autistic parents, most of the burden on parenting does fall on the woman and the mother. And, these parents discuss the intersectionality, of gender and disability, and some of the, You know, roadblocks that that... those multiple Identity issues pose for them in the world.

You know, the literature suggests that this is really a social justice issue. in terms of parenting on the autism spectrum, that autistic parents are left out of mainstream parenting support groups. There are not specific parenting resources for them, and even within autism-related services. parenting is rarely mentioned in discussions of independent living, and I can, vouch for that. In my literature search on supports. For autistic adults, there are now emerging supports across so many different domains. You know, college, as Stephen said, employment, relationships, but there's almost Nothing in that, array of supports for autistic adults that specifically address parenting. Okay, the other social justice issues that are raised is that parents often feel judged or misunderstood by professionals due to ableism, or their social communication difficulties, or both, and there are a lot of fears of being perceived as incompetent in their parenting role.

Recommendations that emerge from this group of parents who are authors and bloggers. are, of course, professional education to increase understanding of neurodivergent adults and to reduce judgment stigma. I think Stephen helped us go a long way with that today with his talk. Practical help and supports, all the kind of practical things that parents need to do that often result in overload for all of us. The need for respite, for mentoring, for structured coaching. Communicating with children's teachers and health professionals. And the day-to-day demands, like cooking, cleaning, grocery shopping, all of these things really, add up and cause, some degree of overload. In the absence of specialized parenting resources, which I think we all want to see, increase, parents say that just whatever parenting support they can have access to, and so I encourage our thinking about home visiting programs. And other playgroups that can provide support, for parents. Connection to other autistic parents is something that comes up all the time in this literature. And greater representation of autistic parents in mainstream parenting resources to promote knowledge and acceptance and to debunk discrimination.

We have a general resource list, but these are things I added. Some of the information that I gleaned and discussed with you today come from, these first couple of resources, the Autistic Women and Nonbinary Network. There's an ongoing newsletter. Cynthia Kim is the author. of many of these articles, and also the author of multiple books and articles. She has her own website. There are specific, articles, the two bullets on the bottom, which discuss, the needs of autistic individuals during pregnancy and childbirth. So just a few additional, resources.

And I think now we're going to turn this over to your questions, and we really encourage you to, You know, bring up anything that you've... that's been on your mind in terms of working with the clients that you're working with. I think Gil is gonna help us With the questions.

Well, I'll just get started, because I noticed some very early on. I'm very specific to your talk, Stephen. Somebody asked if you could describe what masking is.

Stephen Shore: Oh, there we go. Masking is something that everybody does. And masking involves the changes in Behavior in order to fit in in a particular situation. So, for example, almost everybody behaves differently at home. than they do at work. There are certain things, certain parts of your personality, that you display at work. And there's others that you kinda keep hidden. And for people who are autistic or otherwise neurodivergent. The difference between how that person is really feeling. And what their desires are can be very different. So, that is the autistic person, for example. I mean, I know I do it. If there's some sort of... Say, an office party. Or some sort of, meet and greet at an autism conference. I have to... things I have to mask include, perhaps not talking about some highly focused interest that I have, or some analysis of different Beethoven symphonies that I've been watching on YouTube, because people may not be interested in that. I have to mask... Visual sensitivities. Mmm... may or may not talk about why I'm wearing a hat, and maybe it just becomes a fashion statement for many other people. Now, these are examples of masking. And masking, which usually means not showing your true self. It can be very, cognitively and emotionally tiring. Masking is not inherently a bad thing. However, it can be bad if you don't know that you're doing it, and lose your sense of self. Or, if you feel forced, to do it. And I think what is important is to help Autistic and otherwise neurodivergent individuals understand what masking is, and then it becomes a choice. Is it worth masking? To the degree that's needed to go to this particular event. And I like to think of masking as a range from 0 to 100%. So, perhaps there'll be an event where I need to mask at 10%, which means very, very little, and it doesn't take that much energy. Where there may be other situations or events where the masking shoots up to 90%, and that can be... vary. very tiring. I also noticed another, another question, related to... neurodiversity, neurodivergences, somebody mentioned that intellectual disability was missing from that diagram. And you're absolutely right, it was missing. There are dozens of conditions that are neurodivergent. I only just put up... actually, I didn't. The person who developed this diagram listed those, but certainly, Anything, any condition that involves people thinking differently. It can be considered as a neurodivergent condition.

Susan Chinitz: I just want to add, related to that question I think you were referring to, Stephen, also to acknowledge in my description of parenting issues that I've been able to learn about, that these, you know, also to acknowledge that we're not... I did not include people who are autistic and also intellectually disabled in this presentation. It's really just because of the lack of literature on that population, I saw really nothing. And most of the literature that I did find, as I mentioned, were written by autistic individuals who, you know, certainly have a level of cognitive functioning where they can write and communicate at that level of publication. So, I'm acknowledging also that we've left out the duly diagnosed autistic individuals who also have an intellectual disability, and of course, the parenting supports that are required in those cases will be more significant. Okay, there are more questions about, Okay, before we go into more questions about parenting, there is another one. We talk about the autistic wheel, and I thank you for that, because it brings clarity and makes sense. However, you mentioned level 2 autism when describing your friend. How many levels exist?

Stephen Shore: Alright, that's a... that's a very good question. Until 2013, there were a number of subtypes to autism, sometimes referred to as Asperger's syndrome, mild autism, high-functioning autism, low-functioning autism, classical autism, PDD, which stood for, pervasive developmental disorder, not otherwise specified, sometimes also thought of as physician didn't decide, because it was sort of a... wastebasket diagnosis, The diagnostician wasn't sure, so they just put PDD. NOS. So all of that was wiped away. In favor of a single diagnostic label called Autism Spectrum. And instead of trying to subtype. the developers of the Diagnostic and Statistical Manual of Mental Disorders, and it's also another question. What is autism doing there? Autism's not a mental disorder, so why is it in a... Book about that. Same for, ADHD and many other conditions. But anyways, that's where it is. And Fave... and that was... all those subtypes were... Replaced in favor of... Descriptions of support needs. And that's where the levels come from, 1, 2, and 3. And so, rather than trying to box somebody into a label, Asperger's Syndrome, high-functioning autism, or whatever, now. The description, it now focuses on what supports do the person need... does the person need? So, looking at support. at Autism Needing Supports at Level 1. This is the individual who won't necessarily need support all the time, but there are key points in life where support is needed. And this is the individual who... Usually, manages to speak fairly well, and should they be so interested in, they likely have The cognitive ability to go to colleges and universities. And they will probably need support. So, all the students in at Adelphi University in our... Bridges to Adelphi program. They're at level 1. Now, what about Level 2? Level 2 is the individual who needs more support. In most parts of their lives. This is the person who may have difficulty in reliably communicating, may need support in managing their schedule or transportation and other aspects of life. And then there's level 3, where the person is going to need extensive continuous support. An important thing to keep in mind about these levels is that they are highly They're highly dependent on the environment. They're environmentally dependent. So what I mean by that is that in some situations, a person might be at Level 1. So, I'm at level 1 at... here at Adelphi University. I've pretty much got the place figured out. Sometimes I need support here and there. If I were to travel to Mongolia, there's... there is an organization in Mongolia that would like me to, come

and give a presentation. I'm probably going to be at a level 2 or 3, because I don't speak the language, and I'll need a lot of support in getting around. Various other aspects of life, well... I'm living there. And likewise for all of the autistic students at Adelphi who are at Level 1, other situations. They may be in need of more support. The important thing is that the, support levels are situationally dependent.

Susan Chinitz: Thank you. There's a question from Emily that says, under strength, that autistic It says under strengths that the autistic parent is good at getting their child's need met, but under challenges, it says that they have difficulty advocating for their children. What's the difference? Thank you for, pointing out... I knew as I was presenting it that there was that discrepancy, and it brings us back to, I think, Stephen's description of the autism wheel. And how people's, you know. abilities are so variable, adult to adult, so I think that we found that contradiction in the literature, because there were probably those different kinds of disparate strengths and weaknesses among parents. So again, people felt like their persistence, their obsessive focus, you know, helped them to obtain services for children and to advocate for their children, so there are people who have that strength. And then there are people who find their social communication difficulties, you know, an impediment. to getting what... to communicating appropriately or adequately to professionals and getting their kids' needs. So I think we're just talking about the variability of the profiles that Stephen so aptly represented with his autism wheel, and that, you know. These can constitute a strength or weakness for particular individuals, depending on how they show up in that wheel. I hope that answers... that's the best sense I can make of it.

Stephen Shore: Yeah, I see a really good question. Could somebody be high-functioning autism level 1 and nonverbal? And actually, I was thinking about that as I was talking about the levels. And, First is the, the term high-functioning autism, that's not being used now. But it's... instead, we're using the term Level 1, and that is where people who perhaps would have been diagnosed with Asperger's syndrome or high-functioning autism would now be placed. And then the term nonverbal. We're seeing an increasing use of the term non-speaking. Because non-speaking better describes the situation. If somebody's nonverbal, that suggests they don't understand what language is, and how it works, and what it's all about. However, there are many autistic people Who do communicate, even if they are unable to speak. Do they communicate by other means? So I'm thinking about one student right here at Adelphi University. Who is doing college-level work, has the capacity to do so, does well. And... He doesn't speak. He is non-speaking. He communicates through an AAC device. And so... Is he level 1? Yeah, he pretty... he pretty much is. And the challenge that we have with these levels is that They can be fluid, and they can be hard to pin down, so they're more generalities. And then specifics.

Susan Chinitz: Okay, here's a question. You mentioned that this is about your, description of your, development. Stephen, you mentioned that your parents mirrored your behavior. I think you used the word imitated. What did that look like, and how do you think it helped you regain language?

Stephen Shore: Well, the mirroring that my parents did, Often when you imitate someone, it makes them more aware of themselves. There's probably a bunch of psychological reasons for that, which I don't know, but it does happen. And I've used it with other And working with other autistic people as well. It develops a greater sense. the self-awareness. And once there is that better sense of self, Then it becomes possible To move on as you're able to Differentiate yourself from the environment. And this is theory that comes from... an approach known as the Miller Method, which is a developmental cognitive approach for autistic individuals. And in this method, practitioners ask the question, how does the autistic person perceive the world? And what can we do to provide support? And one thing that Miller practitioners, researchers and practitioners have identified is that autistic people tend to have difficulty with body-to-environmental relations. And that is, where does my body end, and where does the environment begin? And sometimes autistic people will fuse to the environment. And not know where one ends and one begins.

Susan Chinitz: I just want to comment that many of the questions are on autism. We wanted to have a bit of a focus on parenting, and so if we don't have as much time to talk about the parenting. We will, you know, we'll, we'll... dig in a little bit deeper at another time. Okay, but let's see. To what extent does ABA help nonverbal children? What is the current intervention treatment of choice? I don't know if you want to speak to that Stephen?

Stephen Shore: Now, that gets into the whole, question of different approaches.

Susan Chinitz: Right?

Stephen Shore: ABA is one of many approaches. And the key is to... Learn about different approaches, ABA, TEACH, Floor Time, Miller Method, Daily Life Therapy, RDI, and so on. Because... because of the great diversity that we find inside of autism, itself. That's going to suggest that... Different autistic people are going to be helped by different approaches. So another way to look at it is that not one approach fits all, and not all will be helped by one particular approach. And... When looking at these approaches, it's a question of, for example, ABA... Not always, but tends to be more... Adult, clinician, therapist, centered. So, there's a higher level of control, that's one way to look at it. Whereas, other approaches that may be more developmental in nature. Such as the Miller Method. Or... Or perhaps some RDI. They tend to be more child-centered. And there is a lower level of control. And there is more focus on What is interesting to the child? And that will get them to interact. So, for example, a floor time session, which is developmental relational, so how does the child relate to others? Those sessions often consist of Are often centered on an object, an activity. Or an area of interest to the child. The child is fascinated by bells, for example. Well, there'll be one or more bells in that session, probably on the floor, that's why they call it floor time. A lot of this stuff happens on the floor. And back-and-forth interaction will be... Developed right around that highly focused interest. So, which approach is the best approach? That's actually not the right question. The right question is, which approach is the best approach for my child at this time?

Susan Chinitz: Thank you, I think that's a really important answer, and I believe that Dr. Foley's going to be doing another webinar for us on autism, and we'll probably talk about the different intervention approaches in that presentation. Okay, trying to get in some more. I appreciate your sharing your story. Steven means so much to me as a mother raising two neurodivergent children. How do you help families of color accept diagnosis in order to receive supports and intervention when adding on another label can be so difficult?

Stephen Shore: And that's a big challenge. People of color, minorities, That's a whole, unfortunately, ignored area. And... There needs to be more education. And also understanding of... Different cultures. If you take it the, if you... Watch the video, Music, not Music, Autism in a Different Key. follows a number of autistic people and their parents and so on, and there is this one parent, a Black parent. Of a child, of an autistic child, who faced a lot of discrimination and a lot of difficulties just because she had more... has more melanin in her skin than most other people. And she did research. She ended up studying this at the doctoral level, and I think ended up becoming a professor. And what she found... In that research is that, for example, a a, black family came in. Talking about their autistic child. And they mentioned that, well, sometimes they need to give that child a warpin'. And... next thing you know, Child Protection Services are called. CPS. And then, another example, where a white family came in. And talked about sometimes needed to discipline their child using a spanking. Cps was not called. So, that's an example of... lack of understanding of different cultures. There's a lot of work that needs to be done in there. I wish I had an easy answer. Move. But we need to keep working at it.

Susan Chinitz: Yeah, and the issue of intersectionality.

Stephen Shore: Yeah, that's right.

Susan Chinitz: Let's see, as an adult, I am now at a loss for what kind of therapy can be helpful to me. The system keeps pointing me back to behavioral therapy. Which feels threatening to me.

Stephen Shore: Alright, that's a good question, because... and there's another question related to that, too. There's been research on behavioral therapy. ABA, to be specific. And ABA... As it was founded. By Eva Lovas. The goal was to make the child indistinguishable from their peers. So, in other words, make the child as non-autistic as possible. We now know that that's not possible. And there are... A number of ABA practitioners realize this, and applying ABA differently. challenge that we face with ABA is that It is the only approach. That's... has caused PTSD in autistic adults. And... I don't know whether that's ABA as it is, or perhaps it's misapplied ABA. But anyways, there aren't any other approaches where... Autistic people have reported being traumatized by the therapy. And I think the important thing is... to recognize that ABA is a tool. Which may, may not be appropriate, and that can be said for any other approach. And for adults, especially adults who... have the, self-awareness and the cognitive ability to realize, I need some help, and I need to get some therapy, or... Support of some sort. I'd be looking for someone who is... More focused on the developmental aspect. of things. And organizations such as... A-A-N-E dot org. Which stands for... Used to stand for Asperger's Association of New

England, and they changed the name a few times, so... It's hard to remember. It might be, Autism Association for Neurodiversity, I think that's what it's called now. But just remember, AANE.org. They have some great resources to help autistic adults. And if you're not in their area, they're right outside of Boston, Massachusetts. They likely have recommendations for where you can go. Wherever you happen to live.

Susan Chinitz: Yeah, I was going to mention that organization, too, and in partial response to that question, some of the organizations that support autistic adults may give you some insight into therapeutic, you know, modalities. So the one that Stephen just mentioned, I had also come across, the Association for Autism and Neurodiversity. There's also an organization called Autistic Adults New York City. There's ASPY's 4, Social Success, I believe it is, AFSS, so there are a number. When I did my literature search on supports for autistic adults, many organizations came up, and as I looked through their websites, there were a lot of, there was discussion of, you know, mental health support and approaches. Again, very little in any of these on parenting, so I think we have to keep working on that as a network. Okay, we probably have time for one more question. What do you think about the increase in number of children diagnosed with autism? Can we really consider an increase in autism, or... Lack of stimulation during a crucial developmental stage. What are your thoughts about the increase in diagnosis?

Stephen Shore: Yeah, I think a lot of it is that we've gotten better at recognizing it. So, many years ago, everybody who learned differently, especially slowly, and if people couldn't figure it out, they were just called mentally retarded. And they were considered either... Either, educable, trainable, or custodial. And then later on, there were levels, like, Profound, severe, moderate, and... and mild. However, as we look over time. And if you look at the research, published by the, well, I don't remember what the name of it is, but anyways, if you look at the research. You'll see that diagnoses of mental retardation, now it's called intellectual disability. Intellectual disability, the rate has been going down. But what has been going up is prevalence of other conditions. We've gotten so much better recognizing autism when we see it, ADHD, or various other neurodivergences, those have been going up. As we look at autism specifically, because of so much awareness. And because society is now better able to recognize autism. We've seen this incredible increase And recognizing all the autistic people who Actually, we're always there, but... We either didn't understand it, or we... Oh, they got mislabeled.

Susan Chinitz: Okay, I think... well, there is a couple of questions related to siblings. I don't know if you want to comment. We can make that the last question. How to support siblings. Did you have any siblings, Stephen?

Stephen Shore: Yeah, I did, and I still do. And I think the best, you know, my siblings, I'm the youngest of three. My brother is 2 years older than I am. And... He was diagnosed with mild to moderate retardation. As a young child. And... I think he has some autism thrown in for spice, because he's got some areas of highly focused interest as well, and is better at these things than I am, or that most other people are, but he's also got some significant challenges. So, whatever

he has, call it intellectual disability, call it autism, call it something else, whatever it is, it's... he needs more support. And, he would be in... considered as being in a Level 2 area. And then there's my older sister. She is 4 years older than I am. I used to think that she hogged all the neurotypical genes in the family. But... as we... I get into various discussions and learn about each other's perspectives. She's just as neurodivergent as the rest of us. I don't think it's autism, but there's definitely something there. And as for siblings, it's important for parents to... Make sure that their siblings feel special as they are. Have special time for them. all the siblings. You don't have to treat all the siblings equally. That's a trap that people fall into. But they all needed to be treated as fairly as possible. And also... Making sure to avoid the parentification of older siblings who become like... Little adults. caring for their younger sibling, and sometimes it's the other way around. The older sibling is... developmentally delayed. Then you kind of have a flip, and the younger sibling takes the role of the older sibling, and... becomes parentified, so that's something to... Watch out for, as well.

Susan Chinitz: Okay, and before we're totally out of time, I'm just gonna mention that AHRC has always had a very strong sibling support program, so I encourage the people who asked about siblings to see what AHRC may have to offer for your family. Steven, I have to thank you again. This was a really invaluable first-hand account that is such a rare perspective for providers. I think we've bought an incredible amount, and whatever we didn't get to answer, we will try to communicate with you those questions, and we'll see if we can get those questions answered for our participants. Thank you very much again. Just a wonderful webinar.