

Episode 7: Neurodiversity (and Other Models), Part 1

Overview

In this episode Jeanne (she/her) introduces several common ways of viewing disability and differences, including the medical, social, neurodiversity, and deficit models, and highlights the pros and cons of each. The neurodiversity lens holds that neurological differences are a natural part of biodiversity and should not be thought of as inherently inferior to what is considered typical.

Key Points:

- The medical and social models are explicitly tied to understanding the wider disability community, while neurodiversity (though influenced by the social model) explicitly focuses on neurological differences.
- A common misunderstanding is that neurodiversity means not considering any difference as bad, when in actuality it merely means the difference must be examined in light of the person's goals and needs - what might be a useful difference in one person may be felt as a frustration for another. Neurodiversity is a way of viewing differences without automatic judgement.
- Time: 30:43

Quotes:

"Sometimes the medical perspective can be very helpful if the issue causing problems for someone can be improved through medications, surgery, or physical therapy, but it's important to acknowledge the very real harms that the medical model and medical establishments have done to a variety of marginalized populations through medical 'treatments' that included lobotomies, forced sterilizations, and more."

"The central premise [of neurodiversity] is that

different people have brains that function in different ways, and that this is a normal and expected subset of biodiversity - that different species do different things, and differences should not be assumed to be lesser."

"Framing these as differences without judgement can be huge and thinking of neurodivergent vs neurotypical allows us to acknowledge ways that neurological differences may impact someone without framing [the difference] as a deficit or something bad."

"There is a lot of shame that gets internalized with these conditions, with people never knowing if disclosing will mean a teacher or friend will suddenly judge or punish you for it."

"Once we break away from the idea that being 'normal' is a moral good and difference is a failing, which on top of being cruel is also straight up not effective, we can embrace neurodiversity and a student's neurodivergence, and find the best ways for that individual to work with their brain to achieve their goals, instead of trying to force everyone to try to think and act the same. It's so much more effective, and so many students suddenly thrive when given space to find their own best practices."

"Neurodiversity is not saying that our differences are all positive inherently - things like food issues or sensory overload definitely are frustrating. What it's saying is that we need to look at the specific differences an individual has without assuming that differences are bad, and center the person's wants rather than making assumptions about their goals."

"Literally the study found that autistics would not accept money for themselves if it meant hurting other people regardless of if they were being observed or not, while the non-autistics were more likely to only

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make the moral choice if others were watching. And yet the autistics are considered the disordered ones for this.”

“The problem is, when anything different is automatically treated as wrong we can justify anything in the pursuit of ‘fixing’ them, with often no regard for how it will actually impact the person, who usually is not given the option to consent. If autism is bad, then anything associated with autism is also bad, be it stimming, having focused interest, thinking in paragraphs, liking Kant; and all manners of harm can be justified to make us seem more ‘normal.’”

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“The Social Model of Disability” by Inclusion London <https://www.inclusionlondon.org.uk/disability-in-london/social-model/the-social-model-of-disability-and-the-cultural-model-of-deafness/>

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