

Lesley University

DigitalCommons@Lesley

Expressive Therapies Capstone Theses

Graduate School of Arts and Social Sciences
(GSASS)

Spring 5-5-2024

Toward an Autism-Affirmative Art Therapy Practice: A Literature Review

Mariah Geiger
mgeiger3@lesley.edu

Follow this and additional works at: https://digitalcommons.lesley.edu/expressive_theses



Part of the [Social and Behavioral Sciences Commons](#)

Recommended Citation

Geiger, Mariah, "Toward an Autism-Affirmative Art Therapy Practice: A Literature Review" (2024).
Expressive Therapies Capstone Theses. 786.
https://digitalcommons.lesley.edu/expressive_theses/786

This Thesis is brought to you for free and open access by the Graduate School of Arts and Social Sciences (GSASS) at DigitalCommons@Lesley. It has been accepted for inclusion in Expressive Therapies Capstone Theses by an authorized administrator of DigitalCommons@Lesley. For more information, please contact digitalcommons@lesley.edu, cvrattos@lesley.edu.

Toward an Autism-Affirmative Art Therapy Practice: A Literature Review

Lesley University

Capstone Thesis

May 2024

Mariah Geiger

Art Therapy

Dr. Madoka Urhausen, PhD, LMFT, ATR-BC

Abstract

Recent research across disciplines has begun to explore the strengths associated with Autism, and the internal experiences of Autistic people. Advocates of the neurodiversity movement promote a nuanced view of Autism which celebrates unique strengths while supporting unique needs and understanding that these strengths and needs are often interconnected. The inclusion of Autistic perspectives in research has shown that compassionate adaptations to the social and sensory environment can often reduce difficulty with emotional regulation. This research has implications for the use of art therapy with Autistic populations. Art therapy has commonly been implemented from a deficit perspective with Autistic clients, seeking to improve social, communication, and emotion regulation skills. The practice of art therapy can become more effective and Autism-affirmative by incorporating Autistic strengths and acknowledging Autistic perspectives.

Keywords: autism, neurodiversity, art therapy, strengths-based, treatment of autism

This author identifies as a White, Autistic woman from New England.

Toward an Autism-Affirmative Art Therapy Practice: A Literature Review

Introduction

Much of the literature exploring the use of art therapy with Autistic populations aligns with the perspective of the medical model of disability, focusing on the efficacy of art therapy for reducing Autistic deficits (Abdulah et al., 2023; Schweizer et al., 2014; Tanaka et al., 2020). Therapeutic approaches regarding how to define and interact with Autistic clients have a direct impact on Autistic wellbeing and agency. This literature review will explore how various, sometimes opposing paradigms for understanding Autism are related to the ways art therapy is used with Autistic populations. Therapeutic approaches that incorporate Autistic perspectives are becoming more common, questioning certain behavioral approaches which aim to “fix” Autistic behaviors before understanding the client’s experience, the value of certain behaviors for coping, and what the client may be responding to in the environment (McCormack et al., 2023; Phung et al., 2021; Valderrama et al., 2023). The environment, physical and social, as a context for and influence of mental health comorbidities in Autistic individuals, is beginning to enter into society’s understanding of Autism (Arnold et al., 2023; Kapp et al., 2013; Turnock et al., 2022). When Autistic clients are given the chance to use their strengths and engage with their interests, rather than being made to work and socialize in a prescribed way, we will likely find that their mental health and subjective wellbeing improves (Bakan, 2014; Ben Shannon, 2020; Diener et al., 2016; Najeeb & Quadt, 2024).

This literature review will explore ways that Autistic strengths have been and could potentially be incorporated into art therapy interventions, and it will explore whether this approach can not only bolster strengths but successfully address support needs with Autistic clients. It seems that when Autistic preferences are honored, and supportive environmental accommodations are made, Autistic “problem behaviors” become less severe (Diener et al., 2016). Some Autistic strengths are related to increased perceptual capacity, unique creative expression, focused interests, and design abilities (Irvine et al., 2024; Woods & Estes, 2023;

Wright et al., 2022). This suggests that art therapy is in a unique position to become an Autism-affirmative therapeutic practice.

As an Autistic art therapy graduate student, I hope to elevate the voices of the Autistic community throughout this review, and advocate for the continued inclusion of Autistics in these conversations; “nothing about us without us” (Autistic Self-Advocacy Network, 2021). I also hope that by sharing my identity I will unsettle the expected hierarchy and power dynamic of the neurotypical (NT) clinician and Autistic client in therapeutic practice. I want to bring awareness to the ways Autistic individuals bring value to therapeutic and research settings through their personal understanding of disability and distinct lived experiences (Davies, 2022).

The paradigm through which Autistics are viewed has an impact on our mental health, and there is a long history of Autistics being treated as objects or problems to be intervened with, without being asked for our input (Milton, 2012; Milton & Bracher, 2013; Silberman, 2016). This calls for a mutual, compassionate approach which believes that Autistic clients are the experts of their own experiences, and whose perspectives are valued in therapy. I hope that by exploring Autistic strengths and unique support needs, a framework can be created for an Autism-affirmative art therapy practice that is truly collaborative and beneficial. In this way, Autism and neurodivergence might be seen not as “sites for intervention, but rather sites of invention” (Yergeau, 2018, p. 33). In art therapy practice, this would mean shifting away from therapy interventions targeting problems, and towards acknowledging the insights and creative solutions that can arise when involving Autistic perspectives.

Notes on Terminology

I have chosen to capitalize Autism throughout this review to highlight Autism as a valuable part of personal identity, with its own culture, history, and community; similar to the capitalization of Deaf by the Deaf community (Price, 2022). I have also chosen to use identity-first language, as in, “Autistic person” or “Autistics” rather than person-first language, as in, “person with Autism” as this reflects a shift within the Autistic community towards viewing

Autism as an identity rather than a disease (Brown, 2022). While there are differences in opinion within the Autistic community (Flowers et al., 2023), I have chosen to use identity-first language to bring awareness to the problems with understanding Autism through the lens of a medical/deficit model (Jaysane-Darr, 2020).

Additionally, I want to acknowledge that the term neurodiversity represents a range of diversity in human minds, including forms of neurodivergence like Autism, ADHD (attention-deficit hyperactivity disorder), and dyslexia (Walker, 2021). For the sake of simplicity in this review, I will refer to neurodiversity-affirmative practice and Autism-affirmative practice interchangeably.

Literature Review

Paradigms for Defining Autism

Defining Autism is and has historically been a contentious act, with political, social, and biological meanings, which have often been sorted into two opposing paradigms: the medical model and the social model of disability (Hogan, 2019; Silberman, 2016; Walker, 2021). In the Diagnostic and Statistical Manual of Disorders (DSM-5), Autism Spectrum Disorder is classified as a neurodevelopmental disorder and is characterized by “persistent deficits in social communication and social interaction,” and “restrictive, repetitive patterns of behavior, interests, or activities” (American Psychiatric Association, 2022). This labeling of Autism as a disorder has been challenged by advocates of the neurodiversity model (Price, 2022; Singer, 2017; Walker, 2021), who state that Autism as a form of “neurodiversity- the diversity among minds- [and] is a natural, healthy, and valuable form of human diversity” (Walker, 2021, p. 19). Many Autistics who advocate for the neurodiversity model define Autism not as a disorder but as a disability which may require support for daily living. The Autistic Self Advocacy Network (ASAN) defined Autism as “a developmental disability that affects how we experience the world around us. Autistic people are an important part of the world. Autism is a normal part of life, and makes us who we are” (Autistic Self Advocacy Network, 2009). ASAN also noted that

Autism can manifest in differences in thinking, sensory processing, moving, communicating, and socializing, when compared to neurotypical populations. Price (2022) described Autism as a developmental disability which is neurological, behavioral, associated with a deliberative, bottom-up processing style, which impacts each Autistic person uniquely and touches every area of their life.

The perspectives explored so far could be seen as proponents of either the medical model or the social model of disability. The medical model represents “the tendency of medicine to reduce disease and disability down to physiochemical factors” (Hogan, 2019, p. 16), and to provide therapy towards relative normativity. The social model defines disability as the result of an unaccommodating society, rather than an individual medical problem (Hogan, 2019). These two terms have been used to reveal differing views of disability and have been crucial parts of the debates regarding Autism. With the rise of the social model came the neurodiversity movement, and the introduction of the term “neurotypical.” Walker (2021) explained that this term means that one’s neurocognitive functioning falls within societal standards of “normal.” Identifying a category of people who would otherwise remain uncategorized as the default way of being was an empowering and important part of the neurodiversity movement, as it emphasized the reality that there are multiple ways of functioning, and one is not necessarily better than the next. This was similar to the identification of the term “heterosexual” alongside “homosexual” which challenged the idea of a “normal” or default sexuality. Walker (2021) also coined the term “neurominority” which further illustrated the reality (aligned with the social model of disability) that neurodivergent individuals often struggle as minorities in environments which are not accommodating, and are often disabled by excess stress from social stigmatization and other aspects of the social and physical environment (Botha & Frost, 2020; Turnock et al., 2022).

Internal Experiences of Autism

Research has emerged regarding the internal experiences of Autistic individuals, often in reaction to some of the stressors listed above (Buckle et al., 2021; Phung et al., 2021; Raymaker et al., 2020). Common experiences include burnout, inertia, meltdowns, and shutdowns (BIMS) (Phung et al., 2021). Many of the behaviors associated with BIMS have been targeted as therapeutic goals for emotional regulation or executive function, without understanding how to address these experiences first (Phung et al., 2021). Autistic burnout has been commonly described by Autistic adults and youth as chronic exhaustion, decreased tolerance to stimulus, and temporary loss of skills as a result of an increasing load of life stressors. It has serious potential consequences including negative health impacts, decreased quality of life, and suicidal behavior (Phung et al., 2021; Raymaker et al., 2020). Autistic individuals described Autistic inertia as an often-debilitating struggle to initiate tasks and act on their intentions, which should be viewed holistically through physical, emotional and cognitive factors (Buckle et al., 2021; Phung et al., 2021). Meltdown and shutdown have been described by Autistic adults and youth as embodied experiences as a response to stressors or triggers; meltdown as a terrifying out-of-control feeling, and shutdown as a feeling of sensory overload, anxiety, and paralysis (Belek, 2018; Phung et al., 2021). Phung et al. noted how the BIMS phenomena are sometimes connected or overlapping; for example, burnout may lead to or be preceded by meltdown. As researchers and art therapists seek to understand the inner experiences of Autistic clients, insight can be gained into the causes of behavioral dysregulation, and what the client needs.

Autism Interventions and Models of Disability

Much of the literature has explored the nuances between the social model and medical model of disability in regard to Autism, and implications of either approach (Kapp et al., 2013; Schuck et al., 2022; Turnock et al., 2022). The difference between celebrating Autism as a positive aspect of identity and seeking to find the causation of and cure for Autism as a disease seems like a stark binary. However, Kapp et al. (2013) explored nuances in this conversation which should not be ignored. They found that a “deficit-as-difference” conception of Autism

offered a view of Autism as “a valid expression of human diversity with no need for a cure,” while simultaneously acknowledging deficits associated with Autism and the need for “supportive interventions centered on subjective wellbeing rather than typical functioning.” Regarding supportive interventions, Jaysane-Darr (2020) conducted ethnographic research interviewing social workers and therapists about the conflict between regulating Autistic behavior and allowing for emotional diversity in therapeutic settings. Jaysane-Darr contextualized her use of the term *emotionally suspect* in regard to public and media responses to autistic behaviors, illustrating a general social impulse of fear and avoidance regarding autism (Jaysane-Darr, 2020). She found that even in therapeutic settings which were defined as neurodiversity-affirming, there were ways in which therapeutic strategies may have unintentionally defined Autistic clients’ behaviors as emotionally suspect. This often happens in therapy when the client’s conformity to neurotypical standards becomes more of a priority than trying to understand their perspective.

There has been much debate between neurodiversity advocates and proponents of behavioral therapy models, particularly, Applied Behavior Analysis (ABA) therapy (Kapp et al., 2013; McCormack et al., 2023; Schuck et al., 2022; Silberman, 2016). Behavioral-based therapeutic interventions with Autistic clients often aim to manage, and pathologize within the framework of the medical model, outward behaviors before seeking to understand the Autistic client’s internal experience. This type of therapy, popularized by Ole Ivar Lovaas has a history of physical and emotional abuse toward Autistic patients (Silberman, 2016). Yergeau (2018) theorized that behavioral interventions are often based on the premise that Autism is a condition defined by involuntary behaviors. For example, NTs (neurotypicals) might see Autistics’ repetitive movements and lack of normative sociality, and conclude that Autistics lack control, and therefore need to be controlled. The premise that Autistic bodies and minds behave involuntarily provides an excuse for behavioral interventions which enforce compliance. Yergeau (2018) stated,

“In these therapies, autism is...an ecology of joint and forcible prosthesis, an ecology in which the autistic is physically made to comply with the therapeutic and social demands of nonautistic publics. In other words, if involuntarity wasn’t ascribed to autistics on a genetic or neurological level, it is most certainly inscribed in the treatment enterprises that structure an autistic child’s life” (p. 10).

However, it should be noted that some supporters of behavioral therapy, Schuck et al. (2022) have made efforts to incorporate approaches which center the experiences of Autistic clients and their own ideas of wellbeing, rather than seeking to “normalize” Autistic behaviors. Schuck et al. argued for the use of behavioral intervention when it is delivered respectfully, teaches beneficial skills, and improves subjective quality of life. Schuck et al. promoted the use of Naturalistic Development Behavioral Interventions (NDBIs) in place of harmful or stigmatizing behavioral interventions, as a way to reconcile perspectives between the neurodiversity movement and the early intervention/behavioral movement. NDBI models focus on a child-led approach which allows the child’s strengths, interests, and motivations to shape their learning, as opposed to norm-driven interventions. The skill-building takes place in the child’s everyday environment, interspersed naturally throughout the day rather than in separate intervention sessions (Schuck et al., 2022).

Researchers Phung et al. (2021) addressed the need to understand the unique experiences of Autistic children, which often include burnout, inertia, meltdown, and shutdown (BIMS). Through interviews with Autistic youth, the researchers found BIMS to be described as experiences with emotional, cognitive, and physical facets which are commonly misunderstood by neurotypical adults and thereby inadequately supported. In fact, from the outside looking in, BIMS may present as emotion regulation issues and emotionally suspect behavior, key reasons why proponents of the medical model see a problem that needs to be fixed. Yes, Autistic individuals often experience emotional and physical dysregulation, yet in Phung et al.’s study (2021), the participants stated what they need in those moments, which looked different than

behavioral interventions. The participants described supportive strategies for BIMS that worked for them, including positive interactions, engaging in play or a fun activity, and mindfulness-based strategies. It was emphasized that supportive strategies should be highly individualized, depending on the preferences and needs of the Autistic person. The participants' responses raise questions as to whether there is something wrong with them, or if they could experience improvements with simple adjustments to social support and the environment. In the realm of supporting Autistic clients, the conversation between the social model and the medical model of disability reveals real consequences, and the necessity of listening to Autistic perspectives becomes apparent (Phung et al., 2021).

Impacts of Stigmatizing Research and Therapeutic Practice

Studies have emerged which revealed the ways in which stigmatizing research and therapeutic practices can negatively impact mental health outcomes for Autistic people (Arnold et al., 2023; Botha & Frost, 2020; Jaysane-Darr, 2020; Kaplan-Kahn & Caplan, 2023; McCormack et al., 2023; Milton & Bracher, 2013). A recent study by McCormack et al. (2023) investigated the experiences of Autistic adults who, as children, received behavioral interventions to “fix” their restricted and repetitive behaviors (under the category of which, repetitive motor movements and speech are referred to as self-stimulatory behaviors, or stimming). They discovered themes of internalized doubt, stigma, and negative emotional and social effects of being “fixed according to others.” Another theme that emerged among the participants was the positive impact of learning to embrace authenticity later in life. In 2014, Bakan set forth a different way of interpreting stimming behaviors through a case study with a 10-year-old Autistic girl who participated in the author's neurodiversity-affirmative music ensemble. He described his initial reaction to her stimming behaviors (flapping her hands, pacing, pulling at her fingers, and bending and straightening her legs repeatedly), thinking, “...why is she sitting there staring into space? Why is she not playing instruments like the other kids are? Why is she stimming all the time? What accounts for this apparent regression vis-à-vis

her autism...?" (Bakan, 2014, p. 143). Through discussion with the client and her mother, he found that stimming can be embraced as "productive, communicative, pleasurable, and even socially valuable for those who perform them as manifestations of difference, not symptoms of deficit" (Bakan, 2014, p. 133). This case study echoed sentiments described in research by Kapp et al., (2013) and Milton (2012), which defined Autism as a different yet valid way of being, which often consists of differences in communication. In the instructor's initial reaction, trying to quell or redirect the client's behaviors, he discovered that he had misunderstood the client and diminished her creative and social experience in the group. This is an example of how even nominally neurodiversity-affirming therapists may unintentionally define clients' behaviors as emotionally suspect and requiring intervention (Jaysane-Darr, 2020). Initial reactions like Bakan's are common and understandable. However, rather than resulting in a productive dialogue, they often compel the Autistic person to start masking. Autistics engage in masking when they feel the need to suppress their characteristic traits and compensate for their unique difficulties in social situations, often to the detriment of their mental health and well-being (Turnock et al., 2022). Stigmatizing research about Autism can perpetuate similar reactions and interventions by families and service providers. Kaplan-Kahn and Caplan (2023) identified that much of Autism research does not include or center Autistic people, leading to stigma, less valid interpretations, and harm from biased methods. They sought to remedy this by implementing a method for facilitating co-interviews with one Autistic and one non-Autistic research partner, with the hopes that this method would increase the validity of qualitative research with Autistic individuals, thereby increasing Autism-affirming attitudes and practices. They found that the benefits of following their co-interview research protocol included less chance of bias and greater comprehension in the interview questions, reduced risk of miscommunications during the interview, and allowed different perspectives for understanding important parts of the participants' answers. To explore the literature on the topic of Autistic well-being from a positive rather than a deficits perspective, Najeeb and Quadt performed a 2024 scoping review of

neurodiversity-affirmative scientific studies. They found that while neurodiversity-affirmative perspectives are gaining recognition as an important area of research, there is a need for more exploration into the biopsychosocial factors of Autistic well-being. Further research centering on Autistic voices and investigating Autistic health more comprehensively is needed to improve general attitudes and therapeutic practices with Autistic clients.

Uses of Art Therapy with Autistic Populations

Art therapy is a mental health service which seeks to improve the lives of clients through “active art-making, creative process, applied psychological theory, and human experience within a psychotherapeutic relationship” (American Art Therapy Association, 2014). Art therapy has been used as a therapeutic approach with Autistic clients, serving a variety of treatment goals, mainly the improvement of social, communication, and emotion regulation skills (Schweizer et al., 2014), often in the service of occupational therapy and behavioral therapy objectives (Bernier et al., 2022; Vanegas & Schenck, 2023). Most studies regarding the use of art therapy with Autistic clients come from the perspective of a NT clinician. It may be tempting to label the literature as supporting the medical model or the social model of disability, yet many studies are not so neatly categorized, containing gray areas and contradictions. For example, the same clinician may have engaged in person-centered therapeutic work, entering the client’s world through their interests, yet have also reported using the client’s interests as leverage in behavioral-based interventions (Stallings, 2022). Tanaka et al. (2020) explored the benefits of visual arts activities for improving social deficits in Autistic youth. They observed this through the measurement of oxytocin and cortisol levels in the saliva in Autistic and NT participants before and after the art intervention. They found the average salivary oxytocin levels in Autistic participants were higher after the art intervention, in comparison with the salivary oxytocin levels in the NT participants, who experienced a significant decrease in oxytocin levels. They did not find any significant changes in salivary cortisol levels before and after the intervention in either group. Tanaka et al. hypothesized that the difference in oxytocin levels between the

groups was due to the Autistic children finding more pleasure in the creative process or because of the positive social interactions. They hypothesized that since cortisol levels had not increased, then the increase in oxytocin levels was due to positive social activities rather than a stress response. While the study was approached from a deficit perspective, aiming to “fix” Autistic social deficits, they did acknowledge Autistic perspectives in their prioritization of sensory considerations, client autonomy, imagination, and free expression during the art activity, which ultimately worked with the strengths of the Autistic participants. These accommodations and attitudes will be discussed in the following sections. Another recent study (Abdulah et al., 2023) sought to find the efficacy of art therapy interventions for reducing Autistic symptomology and social deficits. Coming from the perspective of the medical model, Autistic strengths were not addressed in this study. The researchers implemented arts-based interventions for autistic children for two hours a day, three days a week, for the duration of a month. The art interventions were highly structured directives focused on cutting, pasting, matching, and coloring shapes. Symptom severity was measured one day before the start of the course and one week after completion, and there were no improvements found in any of the Autistic deficits and symptoms measured after the intervention. The researchers hypothesized that this was because they had included clients with higher support needs in their study, which had previously been less common in art therapy research. They postulated that these clients needed more structure and to have their materials chosen for them ahead of time. The authors concluded that even longer sessions may be necessary, and that future studies should include an art therapist. Wright (2023) shared findings from a study exploring the efficacy of an interactive art therapy intervention with an autistic adult with a learning disability, anxiety, and a sensory processing disorder. His approach was client-centered, and he conducted an arts-based narrative interview along with the therapy intervention to better understand the client’s perspective. Wright found that the art therapy intervention, through its interactive, spontaneous nature and sensory

qualities, helped facilitate opportunities for the client to develop communication skills and emotion regulation strategies.

A 2020 study by Chapman and Evans explored the use of art-based Acceptance and Commitment Therapy (ACT) interventions to address comorbid mental health conditions in Autistic youth from a person-centered perspective, focused on increasing engagement in activities aligned with the client's identified values. This study is relevant as art therapists often combine art therapy interventions with other therapeutic approaches. It is also valuable in its acknowledgment of the propensity for comorbid mental health conditions in Autistic populations (Arnold et al., 2023). The case study explored findings from an art-based ACT intervention with an Autistic teen with comorbid anxiety over eight weekly sessions which took place in her home. They found that the intervention increased measures of wellbeing, psychological flexibility, and engagement with the client's valued activities. However, although the client's chronic exhaustion was noted and did not improve after the intervention, it was not mentioned whether the client's success in the study may have been buoyed by masking, which is known to lead to burnout over time (Arnold et al., 2023). In the therapist's encouragement for the client to engage in activities, however valued by the client, this may have required the client to engage in masking. There may have been a need to acknowledge some of the environmental, sensory, and social factors underlying the client's anxiety and trepidation around these activities in the first place, unique to her Autistic experience of the world. In a section on "Complicating Factors," the authors, rather than recognizing the client's chronic exhaustion as a signal of masking or burnout, stated that the client had simply created a narrative in which she felt too tired to do things. The authors reported that the client's complaints did not improve, even after they provided her with general advice for managing her fatigue. Despite the beneficial therapeutic work described in the study, this point revealed a lack of education surrounding Autistic burnout, which requires a unique treatment approach (Arnold et al., 2023; Phung et al., 2021). This illustrates areas for growth within person-centered art therapy practices, which aim

to center the Autistic clients' values and wellbeing, but which would benefit from input from Autistic researchers and research centering Autistic lived experience. While it is difficult to neatly categorize the above art therapy approaches as aligning with the social model or the medical model of disability, it is apparent that many of them lean more towards the medical model, ultimately seeking to treat Autistic deficits within the familiar dynamic of the NT clinician and Autistic client. More research is needed to explore the efficacy of art therapy practices which center Autistic perspectives and operate from a strengths-based perspective, within the social model of disability.

Autistic Strengths

Despite Autism being defined by deficits (American Psychiatric Association, 2022), some researchers have chosen to focus on Autistic strengths, many of which have implications for an Autism-affirming art therapy practice (Woods & Estes, 2023; Wright et al., 2022). Woods and Estes, in a 2023 literature review, demonstrated the presence of Autistic strengths in "social communication, focused interests, stimming, sensory abilities, systems thinking, and cognition" (p. 1). Strengths in social communication, in particular, were described as willingness to go against the crowd and be direct and honest. It should also be noted that focused interests in Autistics are also known as *special interests* and may play an important role in quality of life and fulfilling relationships (Nowell et al., 2021; Price, 2022; Silberman, 2016; Woods & Estes, 2023), despite sometimes being labeled as a deficit, categorized under restricted, repetitive behaviors in the DSM-5 (American Psychiatric Association, 2022). Woods and Estes (2023) noted that sensory sensitivities, commonly described and even at times experienced as deficits, may be connected to increased perceptual capacity and attention to detail. Irvine et al. (2024) conducted a study comparing the perceptual capacities of Autistic, NT and ADHD participants, from their first-hand accounts. They found that neurodivergent participants (those who were Autistic and/or ADHD) reported an ambivalent relationship to their increased information processing, which was seen to lead to increased focus, a rich, creative inner world, and

awareness of high levels of detail. Conversely, their information processing capacities were also reported to lead to frequent anxiety, rumination, or feeling overwhelmed by the external environment. Similarly, Wright et al. (2022) explored the unique ways in which Autistics engage with material culture, specifically art and the environment. They found that Autistics often have increased perceptual focus, an interest in discerning details in objects or patterns in the environment, strong three-dimensional creative design skills, and differences in creative expression compared to NT populations. They also found that Autistics often have significant systemic thinking skills, logical cognitive processing, specific interests, and differences in sensory processing compared to NT populations. Many Autistic strengths identified in research have implications for themes which are relevant to art therapy practice including creative expression, special interests, cognitive style, periods of intense focus, perceptual capacity, and sensory experiences (Irvine et al., 2024; Woods & Estes, 2023; Wright et al., 2022).

Marginalization through Exoticization

Focusing on Autistic strengths requires walking a fine line of celebrating these strengths while offering support in areas of disability, rather than merely valuing Autistic clients for their impressive abilities or confining them with preconceived expectations. This conflict can be found in Outsider Art (also called Art Brut), a category for disabled artists which has been rejected by many Autistic artists (Wexler, 2020). Through an overview of the life and work of Autistic artist George Widener, Wexler explored how discarding the label of Outsider Art can lead to learning about the internal experiences of Autistic people without exoticizing them as “others” to collect, theorize, and control. A 2017 article by Barber-Stetson explored the rejection of the label of Art Brut and the challenging of stereotypes by Autistic artists, Jessica Park and Seth Chwast, whose artworks, exhibiting intimate connections with their environments, do not fit within Art Brut’s theoretical framework. Barber-Stetson noticed similarities in their aesthetics, namely, their focus on precision and patterns, and bold, non-representational colors. Despite their unique use of color, Barber-Stetson stated that both artists’ work reflected real

places and objects, challenging the stereotypical belief that Autistic art solely represents imaginary, private worlds. As many Autistics have become politically active self-advocates, Wexler (2020) suggested that more research is needed to examine if Outsider Art can be transformed into a political category challenging social norms, rather than a reductive label. Awareness of the problematic ways in which Autistic artists have been viewed is important for preventing these attitudes from entering the art therapy space. Art therapists should adopt attitudes which empower the Autistic client and invite their unique experiences, rather than attitudes which confine with expectations and stereotypes.

Social Differences as a Strength

Several studies have noted the benefits of integrating Autistic differences in sociality into the therapeutic environment, rather than pathologizing these differences (Ben Shannon, 2020; Davies, 2022; Diener et al., 2016; Valderrama et al., 2023). In 2012, Damien Milton coined the term the *double empathy problem*: a problem experienced in interactions between Autistics and NTs, in which “two differently disposed social actors” have difficulty communicating and interacting with one another. Unfortunately, in interactions like these, Autistics are commonly pathologized and stigmatized for failing to live up to normative social expectations (for example, maintaining normative eye contact, conversation patterns, and body movements). Through his development of the double empathy problem, Milton critiqued the common definition of Autism as a deficit in social interaction or a deficit in *theory of mind*, the ability to understand others’ motives, intentions, and emotions, even if they differ from one’s own. In fact, Crompton et al. (2020) demonstrated that communication and rapport between Autistics is as effective as communication between NTs, and more effective in comparison to communication and rapport in mixed Autistic and NT groups. This provides evidence for Milton’s double empathy problem, and suggests the need for more research exploring the unique strengths of Autistic sociality.

Implications for an Autism-Affirming Art Therapy Practice

A review of art therapy approaches with Autistic clients, whether from a person-centered or behavioral perspective, revealed the common dynamic of NT clinicians working with Autistic clients, using art therapy as a way to reduce perceived deficits, particularly in social skills and in restrictive and repetitive behaviors (Schweizer et al., 2022). In this review, it was noted that the researchers often noticed positive behavioral changes in their clients when tactile and visual sensory aspects were incorporated, or when special interests were included in social times. It didn't seem to be acknowledged that the reason for behavioral improvements was the fact that the clients' strengths and needs were momentarily prioritized. An art therapy practice centering the perspectives of Autistic clients, clinicians, and researchers, valuing Autistic strengths while understanding unique support needs, has the potential to foster Autistic wellbeing, connection, and self-esteem. Awareness of Autistic strengths in an art therapy practice would impact not only care for sensory sensitivities and structure of the session but would allow the client to express their unique experience of the world and draw upon their specific interests. Art therapy in practice may not even need to look very different from how it is being practiced now in person-centered approaches, but a fundamental perspective shift from the medical to the social model of disability would provide an even more humanizing perspective of the client. Autistic strengths and preferences to consider in an Autism-affirmative art therapy practice include social communication, special interests, leadership style, stimming, systems thinking, preferences, creative autonomy, and structure.

Autistic Sociality, Special Interests, and Leadership Preferences

In light of literature describing the double empathy problem and critiquing theory of mind (Milton, 2012; Crompton et al., 2020), a recent study (Valderrama et al., 2023) conducted interviews with key stakeholders to explore the potential of structured peer-to-peer Autistic support programs without the presence of service providers. This would involve social support from Autistics, for Autistics, providing emotional comfort, reassurance about skills and values,

tangible support, and informational support. This would be a change from typical peer support programs which assign a NT student to support an Autistic person. Valderrama et al. found that this proposed program was acceptable to the Autistic individuals and caregivers who were interviewed, yet some of the service providers expressed doubts about the level of support autistic people would be capable of offering. While further studies are necessary to promote this approach, there is evidence of Autistic peer-to-peer programs which have been effective with the presence of accommodating service providers. Diener et al. (2016) shared observations from an Autistic peer group centered around creative three-dimensional design. They noted strengths among the Autistic participants included special interests (particularly, in three-dimensional design) and social communication. Special interests were described as a “mediating interface” for social connections, a key factor of mental health. This use of a creative mediating interface is reminiscent of Edith Kramer’s (2001) writing about the art therapist’s “third hand” which interacts with the client and their art, guiding the creative process, never imposing meaning, yet “capable of conducting pictorial dialogues that complement or replace verbal exchange” (p. 48). Meaningful interactions between the mentor and peers centered around the creative design process, which demonstrated the unique role of the arts and technology as strengths-based therapeutic approaches when in line with the client’s interests. Diener et al. (2016) found that the students developed authentic peer relationships through humor, shared interests, and lighthearted competition. These observations do not fit within the group of social deficit signs typically associated with Autistics and provided evidence for Milton’s (2012) suggestion that Autistics have differences in sociality, rather than deficits. Additionally, Diener et al. (2016) found that in the peer program the students showed genuine interest in one another’s work, took ownership of their learning, and exhibited no attentional issues during 30 - 40 minutes of peer presentations. They reported that if students did act out during the program, they managed each other’s behaviors effectively without the intervention of adult staff. This study shows the value of peer support programs which make room for Autistic sociality rather than trying to

control behaviors. The mentor who was leading the program was not Autistic, yet his approach seemed to align with the preferences of the Autistic youth interviewed by Phung et al. (2021), who emphasized the importance of compassion and collaboration from trusted adults who avoid negative tone of voice, embarrassment, or isolation. The mentor, while providing basic rules and a consistent structure for the program, encouraged client autonomy, gave specific praise and constructive feedback, while emphasizing the philosophy that there is no right or wrong way to create a design (Diener et al., 2016). In a 2023 study, Fothering et al. worked with neurodivergent youth to co-design a peer support program for neurodivergent students attending mainstream high school. The youth involved in the study emphasized the importance of an attuned facilitator with an understanding of neurodivergence and ability to foster an inclusive environment. All of the participants involved in the co-design recognized the potential benefit of a peer support program for this population. Rather than seeking to normalize Autistic sociality through behavioral interventions, strengths-based therapeutic environments, which center Autistic perspectives and encourage peer engagement with special interests, seem to provide substantial support for social and emotional difficulties associated with Autism.

Stimming

Another autistic strength to be integrated into art therapy is stimming, despite the fact that it is a commonly pathologized trait. As noted earlier, Bakan (2014) discovered one client's stimming to be an integral part of her creative process during a music group. Ben Shannon (2020) also provided insights based on an inclusive music-research-creation project with neurodivergent youth. By providing opportunities for the youth to authentically participate in the arts, rather than using the arts as a tool to suppress their unique traits, he centered the project around the students' contributions and aesthetic values. He observed the unique creative possibilities that emerged in moments when the students were released from the social pressure to mask as neurotypical in creative arts activities. Ben Shannon described a moment when, while the group was recording their rehearsed composition, one of the participants broke in with

an impromptu six-note vocalization. The participant's LSA (Learning Support Assistant) rushed to take hold of her hand and relaxed when the client returned to the composition they had rehearsed. Ben Shannon, however, when reviewing the recording later on, noticed that the participant's vocalization "tuned perfectly" within the piece. This suggests that reflection may be needed among art therapists and those who support Autistic individuals, to consider when it is necessary to step in and when to allow the client freedom in their creative process. Allowing Autistic clients to authentically participate and use their strengths has the potential to improve the quality of their engagement and social connection during art therapy sessions, and their mental health overall.

Systems Thinking and Sensory Preferences

Woods & Estes (2023) noted that many Autistics took an interest in creating systems to help them adapt to their environment. Awareness of this is compatible with a strengths-based approach which could collaborate with clients to structure the therapy sessions in ways that work for them. The importance of considering the structure and setting for an Autism-affirming art therapy session is paramount and has been shown in a variety of studies (Chapman & Evans, 2020; Diener et al., 2016; Kaplan-Kahn & Caplan, 2023; Tanaka et al., 2020). Each Autistic client's sensory and interpersonal needs are unique, and while generalizations may be useful, it is imperative to defer to each client regarding what works best for them. In their 2020 study, Tanaka et al. were thoughtful about setting up the art space in a way that was conducive to the success of the participants. Along with providing a variety of materials that were accommodating to a variety of sensory preferences, the facilitators provided structure by explaining how to use each material at the start of the session. Tanaka et al. also noted that they prepared the tools and materials ahead of time, a type of order and organization which may have been comforting for autistic children drawn to systems (Woods & Estes, 2023). In future studies, it may be beneficial for the Autistic participants to be involved in how these systems are organized, and perhaps more feasible for individual than for group art therapy. Tanaka et al.

(2020) also noted that the art activities took place in a comfortable venue, which implies that sensory preferences were considered, yet more details are needed to be able to learn from them.

Creative Autonomy and Structure

Another note on structure involves the creative freedom and autonomy given to the participants, as many Autistics prefer to interact with the environment at their own pace. In particular, research is growing regarding a profile of Autism called Pervasive Drive for Autonomy or Pathological Demand Avoidance (PDA). Autistic clients with a PDA profile tend to experience high levels of anxiety and feelings of loss of control when they are presented with a demand, which can lead to demand avoidant behaviors, meltdowns, and shutdowns (O’Nions et al., 2018; Woods, 2021). Tanaka et al. (2020) emphasized the importance that the art projects and themes were completely participant-led. They stated that the goal of the project was to let the participants freely express themselves without feeling as if they were working on a task for school. Diener et al. (2016) cultivated the creative autonomy of participants within a predictable structure of time for work, breaks, and presentations. Each session began with a lesson by the facilitator regarding the design program they were using. The facilitator communicated openness to multiple ways of designing, and promoted agency and ownership of their work. He offered guidance as needed, and often the participants provided feedback and guidance to one another. The overall tone of the group was one of reduced hierarchies and increased participant agency within a predictable structure. More research is needed to explore whether this type of balance between autonomy and structure in an art therapy session would be beneficial for Autistic clients, particularly those with a PDA profile.

Discussion

This literature review examined how art therapy has been practiced with Autistic clients, and the potential for art therapy to become increasingly Autism-affirmative. Opposing paradigms of disability, the medical model and the social model, were reviewed, along with the implications of these paradigms for clinical practice (Hogan, 2019; Silberman, 2016; Walker,

2021). When viewed through the lens of the medical model, Autism is defined as a disease with many deficits which require treatment (American Psychiatric Association, 2022). When viewed through the lens of the social model, Autism is defined as a disability due to an unaccommodating society (Hogan, 2019). The concept of neurodiversity, and Autism as a form of neurodivergence, is aligned with the social model and encourages acceptance of Autism as a different, yet valid way of being in the world (Price, 2022; Singer, 2017; Walker, 2021; Yergeau, 2018). Advocates of the neurodiversity movement acknowledge Autistic strengths while supporting unique needs, without pressure to conform to neurotypical standards (Kapp et al., 2013; Price, 2022). The history and practice of behavioral therapy approaches with Autistic clients, commonly aligned with the medical model, have been observed as often harmful approaches which may not consider the Autistic client's internal experiences, and, rather, seek to change external behaviors (McCormack et al., 2023, Silberman, 2016; Yergeau, 2018). Therapy aimed at changing external, harmless behaviors in Autistic youth has been shown to increase internalized doubt and stigma as well as masking behaviors, and reduce ability to engage in creative processes and play (Bakan, 2014; McCormack et al., 2023; Phung et al., 2021). Research centering the internal experiences of Autistic participants has implications for therapeutic practice, in the description of BIMS: burnout, inertia, meltdown, and shutdown (Phung et al., 2021). These internal experiences can serve as mirrors and explanations for outward behaviors that therapists and educators may find troubling or confusing. It was suggested that by making individualized adjustments to the social and sensory environment, Autistics can experience greater emotional regulation, allowing their strengths to shine through (Phung et al., 2021). It was also found that therapeutic approaches often do not neatly fall into either category of the medical model or the social model of disability. There are researchers and practitioners bridging the gap between the neurodiversity movement and the behavioral movement (Schuck et al., 2022; Schweizer et al., 2022).

Art therapy has often been used with Autistic clients for the purposes of improving social, communication, and emotion regulation skills (Bernier et al., 2022; Schweizer et al., 2022; Vanegas & Schenck, 2023). Research describing the use of art therapy with Autistic clients has commonly come from the perspective of neurotypical clinicians and researchers, and, while leaning toward the medical model in its perspective, is difficult to categorize (Abdulah et al., 2023; Chapman & Evans, 2020; Tanaka et al., 2020). At times, the clinicians and researchers have shown evidence of considering the clients' perspectives and entering into their worlds through art, even if the stated goal of the art therapy is to reduce Autistic symptoms or normalize deficits (Schweizer et al., 2022; Stallings, 2022). Autistic perspectives and strengths were often compassionately acknowledged in terms of special interests and sensory preferences (Diener et al., 2016; Tanaka et al., 2020). One study cited spontaneity and sensory qualities in the art as instrumental in forming social, communication, and emotion regulation skills (Wright, 2023). Other studies, however, did not show evidence of a strengths-based perspective, and created highly controlled and structured spaces without much autonomy or voice for the clients (Abdulah et al., 2023; Schweizer et al., 2022). It has also been shown that art therapy can be combined with other therapeutic modalities in client-centered and strengths-based ways, such as with acceptance and commitment therapy (ACT) or occupational therapy (Bernier et al., 2022; Chapman & Evans, 2020). Even alongside the beneficial outcomes of these studies, it was shown that more education is needed to be able to understand Autistic perspectives and successfully incorporate them into treatment.

Researchers are beginning to explore strengths associated with Autism, in contrast to overwhelming research identifying deficits (Woods & Estes, 2023; Wright et al., 2022). It was found that Autism is associated with strengths in creative expression, focused interests, systemic and logical cognitive style, periods of intense focus, perceptual capacity, and sensory experiences (Irvine et al., 2024; Woods & Estes, 2023; Wright et al., 2022). It was also found that although social differences are apparent in Autistics, this does not necessarily imply a deficit (Milton,

2012). Autistics were found to be equally as effective in communication and rapport among groups of other Autistics, in comparison to neurotypical groups (Crompton et al., 2020). These unique ways of engaging with the world have implications for art therapy. Autistic strengths and preferences to consider in an Autism-affirmative art therapy practice include social communication, special interests, leadership style, stimming, systems thinking, creative autonomy, and structure. In addition, the potential benefit of peer-to-peer support groups was shown, as well as the benefit of an Autistic peer program centered around special interests (Diener et al., 2016; Fotheringham et al., 2023; Valderrama et al., 2023). Of note was the consistent structure of this program, led by an attuned facilitator (Diener et al., 2016). It has also been shown that stimming, when embraced as part of the creative process, allows for increased engagement and authentic participation in creative peer groups (Bakan, 2014; Ben Shannon, 2020). Along with a consistent structure, allowing for autonomy and agency has been shown to be crucial for engagement and increased emotion regulation for Autistic clients (Diener et al., 2016; O'Nions et al., 2018; Woods, 2021).

While Autism-affirming perspectives are beginning to gain recognition as an important area of research, there is a need for more exploration into Autistic perspectives and their implications for improving general attitudes and art therapy practices with Autistic clients. Even in person-centered art therapy practices, there is room for further clinician education regarding aspects of the Autistic lived experience such as burnout, inertia, meltdown, and shutdown, and how the phenomena are often misunderstood (Phung et al., 2021). More research is needed to explore the efficacy of art therapy practices which center Autistic strengths and perspectives (Najeeb & Quadt, 2024). In addition, more research is needed to focus on diverse intersections of the Autistic experience regarding age, sex and gender, level of support needs, modes of communication, ethnicity, geography, race, language, and socioeconomic status (Cascio et al., 2021). Mental health providers and educators seeking Autism-affirming support and perspectives should incorporate resources made available by Autistic mental health

professionals and doctors. For example, Dr. Megan A. Neff, a neurodivergent psychologist and educator, shares mental health and wellness resources on her website, Neurodivergent Insights (*Insights of a neurodivergent clinician*, n.d.). This website provides comprehensive written and visual resources for understanding the internal experiences of Autistic individuals, and could benefit mental health providers, caregivers, and other stakeholders. The more that Autistic perspectives and strengths are understood and centered in art therapy practice, the more Autistic needs will be met, and self-esteem will be fostered alongside wellbeing and connection. This calls for shifts in perspective toward a more humanizing view of Autistic clients, and more creative solutions for social and environmental accommodations.

References

- Abdulah, D. M., Abdulla, B. M. O., & Liamputtong, P. (2023). Impact of short and intensive art-based intervention on symptomatology and social interactions among children with autism spectrum disorder. *Clinical and Experimental Pediatrics*, 66(10), 447–454. <https://doi.org/10.3345/cep.2023.00640>
- American Art Therapy Association. (2014). *About Art Therapy*. American Art Therapy Association. <https://arttherapy.org/about-art-therapy/>
- American Psychiatric Association. (2022). Neurodevelopmental disorders. In *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.). <https://doi.org/10.1176/appi.books.9780890425596>
- Arnold, S. R., Higgins, J. M., Weise, J., Desai, A., Pellicano, E., & Trollor, J. N. (2023). Confirming the nature of autistic burnout. *Autism: The International Journal of Research & Practice*, 27(7), 1906–1918. <https://doi.org/10.1177/13623613221147410>
- Autistic Self Advocacy Network. (2009). *About Autism*. Autistic Self Advocacy Network. <https://autisticadvocacy.org/about-asan/about-autism/>
- Autistic Self Advocacy Network. (2021). *What We Believe*. Autistic Self Advocacy Network. <https://autisticadvocacy.org/about-asan/what-we-believe/>
- Bakan, M. B. (2014). The Musicality of Stimming: Promoting Neurodiversity in the Ethnomusicology of Autism. *MUSICultures*, 41(2), 133–XIII. Available at: <https://journals.lib.unb.ca/index.php/MC/article/view/22914>
- Barber-Stetson, C. (2017). A vibrant autistic aesthetic and the limits of art brut. *Journal of Literary & Cultural Disability Studies*, 11(2), 113–132. <https://doi.org/10.3828/jlcds.2017.10>
- Belek B. (2019). Articulating Sensory Sensitivity: From Bodies with Autism to Autistic Bodies. *Medical anthropology*, 38(1), 30–43. <https://doi.org/10.1080/01459740.2018.1460750>
- Ben Shannon, D. (2020). Neuroqueer(ing) Noise: Beyond “Mere Inclusion” in a Neurodiverse

- Early Childhood Classroom. *Canadian Journal of Disability Studies*, 9(5), 488–514.
<https://doi.org/10.15353/cjds.v9i5.706>
- Bernier, A., Ratcliff, K., Hilton, C., Fingerhut, P., & Li, C.-Y. (2022). Art Interventions for Children With Autism Spectrum Disorder: A Scoping Review. *American Journal of Occupational Therapy*, 76(5), 1–9. <https://doi.org/10.5014/ajot.2022.049320>
- Botha, M., & Frost, D. M. (2020). Extending the minority stress model to understand mental health problems experienced by the autistic population. *Society and mental health*, 10(1), 20-34. <https://www.jstor.org/stable/48683839>
- Brown, L. (2022). *Identity-First Language*. Autistic Self Advocacy Network.
<https://autisticadvocacy.org/about-asan/identity-first-language/>
- Buckle, K. L., Leadbitter, K., Poliakoff, E., & Gowen, E. (2021). “No Way Out Except From External Intervention”: First-Hand Accounts of Autistic Inertia. *Frontiers in Psychology*, 12. <https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2021.631596>
- Cascio, M. A., Weiss, J. A., & Racine, E. (2021). Making Autism Research Inclusive by Attending to Intersectionality: a Review of the Research Ethics Literature. *Review Journal of Autism and Developmental Disorders*, 8(1), 22-36. <https://doi.org/10.1007/s40489-020-00204-z>
- Chapman, R., & Evans, B. (2020). Using Art-Based Acceptance and Commitment Therapy (ACT) for an Adolescent With Anxiety and Autism. *Clinical Case Studies*, 19(6), 438–455. <https://doi.org/10.1177/1534650120950527>
- Crompton, C. J., Ropar, D., Evans-Williams, C. V., Flynn, E. G., & Fletcher-Watson, S. (2020). Autistic peer-to-peer information transfer is highly effective. *Autism: The International Journal of Research & Practice*, 24(7), 1704–1712.
<https://doi.org/10.1177/1362361320919286>
- Davies, H. (2022). ‘Autism is a way of being’: An ‘insider perspective’ on neurodiversity, music

- therapy and social justice. *British Journal of Music Therapy*, 36(1), 16–26.
<https://doi.org/10.1177/13594575221090182>
- Diener, M. L., Wright, C. A., Dunn, L., Wright, S. D., Anderson, L. L., & Smith, K. N. (2016). A Creative 3D Design Programme: Building on Interests and Social Engagement for Students with Autism Spectrum Disorder (ASD). *International Journal of Disability, Development & Education*, 63(2), 181–200.
<https://doi.org/10.1080/1034912X.2015.1053436>
- Flowers, J., Dawes, J., McCleary, D., & Marzolf, H. (2023). Words matter: Language preferences in a sample of autistic adults. *Neurodiversity*, 1, 27546330231216548.
<https://doi.org/10.1177/27546330231216548>
- Fotheringham, F., Cebula, K., Fletcher-Watson, S., Foley, S., & Crompton, C. J. (2023). Co-designing a neurodivergent student-led peer support programme for neurodivergent young people in mainstream high schools. *Neurodiversity*, 1.
<https://doi.org/10.1177/27546330231205770>
- Hogan, A. J. (2019). Social and medical models of disability and mental health: evolution and renewal. *Canadian Medical Association Journal*, 191(1), 16–18.
<https://doi.org/10.1503/cmaj.181008>
- Insights of a neurodivergent clinician*. (n.d.). Insights of a Neurodivergent Clinician.
<https://neurodivergentinsights.com/>
- Irvine, B., Elise, F., Brinkert, J., Poole, D., Farran, E., Scerif, G., Crane, L., & Remington, A. (2024). ‘A storm of post-it notes’: Experiences of perceptual capacity in autism and ADHD. *Neurodiversity*. <https://journals.sagepub.com/home/NDY>
- Jaysane-Darr, A. (2020). Enabling and disabling emotional diversity: Negotiating autism spectrum disorder in therapeutic encounters. *Children & Society*, 34(4), 261–275.
<https://doi.org/10.1111/chso.12374>
- Kaplan-Kahn, E. A., & Caplan, R. (2023). Combating stigma in autism research through

- centering autistic voices: A co-interview guide for qualitative research. *Frontiers in Psychiatry*, 1–7. <https://doi.org/10.3389/fpsy.2023.1248247>
- Kapp, S. K., Gillespie-Lynch, K., Sherman, L. E., & Hutman, T. (2013). Deficit, difference, or both? Autism and neurodiversity. *Developmental Psychology*, 49(1), 59–71. <https://doi.org/10.1037/a0028353>
- Kramer, E. (2001). *Art as Therapy*. Jessica Kingsley Publishers.
- McCormack, L., Wong, S. W., & Campbell, L. E. (2023). “If I don’t Do It, I’m Out of Rhythm and I Can’t Focus As Well”: Positive and Negative Adult Interpretations of Therapies Aimed at “Fixing” Their Restricted and Repetitive Behaviours in Childhood. *Journal of Autism & Developmental Disorders*, 53(9), 3435–3448. <https://doi.org/10.1007/s10803-022-05644-6>
- Milton, Damian E. M. (2012). On the ontological status of autism: The ‘double empathy problem.’ *Disability & Society*, 27(6), 883–887. <https://doi.org/10.1080/09687599.2012.710008>
- Milton, D., & Bracher, M. (2013). Autistics speak but are they heard. *Medical Sociology Online*, 7(2), 61-69.
- Najeeb, P., & Quadt, L. (2024). Autistic well-being: A scoping review of scientific studies from a neurodiversity-affirmative perspective. *Neurodiversity*, 2. <https://doi.org/10.1177/27546330241233088>
- Nowell, K. P., Bernardin, C. J., Brown, C., & Kanne, S. (2021). Characterization of Special Interests in Autism Spectrum Disorder: A Brief Review and Pilot Study Using the Special Interests Survey. *Journal of Autism & Developmental Disorders*, 51(8), 2711–2724. <https://doi.org/10.1007/s10803-020-04743-6>
- O’Nions, E., Viding, E., Quinlan, E., Pidgeon, C., Happé, F., Floyd, C., & Gould, J. (2018).

- Dimensions of difficulty in children reported to have an autism spectrum diagnosis and features of extreme/‘pathological’ demand avoidance. *Child & Adolescent Mental Health*, 23(3), 220–227. <https://doi.org/10.1111/camh.12242>
- Phung, J., Penner, M., Pirlot, C., & Welch, C. (2021). What I Wish You Knew: Insights on Burnout, Inertia, Meltdown, and Shutdown From Autistic Youth. *Frontiers in Psychology*, 12, 1–14. <https://doi.org/10.3389/fpsyg.2021.741421>
- Price, D. (2022). *Unmasking autism: discovering the new faces of neurodiversity* (First edition.). Harmony Books.
- Raymaker, D. M., Teo, A. R., Steckler, N. A., Lentz, B., Scharer, M., Delos Santos, A., Kapp, S. K., Hunter, M., Joyce, A., & Nicolaidis, C. (2020). “Having All of Your Internal Resources Exhausted Beyond Measure and Being Left with No Clean-Up Crew”: Defining Autistic Burnout. *Autism in Adulthood*, 2(2), 132–143. <https://doi.org/10.1089/aut.2019.0079>
- Schuck, R. K., Tagavi, D. M., Baiden, K. M. P., Dwyer, P., Williams, Z. J., Osuna, A., Ferguson, E. F., Jimenez Muñoz, M., Poyser, S. K., Johnson, J. F., & Vernon, T. W. (2022). Neurodiversity and Autism Intervention: Reconciling Perspectives Through a Naturalistic Developmental Behavioral Intervention Framework. *Journal of Autism & Developmental Disorders*, 52(10), 4625–4645. <https://doi.org/10.1007/s10803-021-05316-x>
- Silberman, S. (2016). *NeuroTribes*. Atlantic.
- Singer, J. (2017) *Neurodiversity: the birth of an idea*. Amazon.
- Stallings, J. W. (2022). Special Interest Connection Framework: Integrating Pop Culture Into Art Therapy With Autistic Individuals. *Art Therapy*, 39(3), 121–127. <https://doi.org/10.1080/07421656.2021.2013718>
- Schweizer, C., Knorth, E. J., & Spreen, M. (2014). Art therapy with children with Autism Spectrum Disorders: A review of clinical case descriptions on ‘what works.’ *The Arts in Psychotherapy*, 41(5), 577–593. <https://doi.org/10.1016/j.aip.2014.10.009>

- Tanaka, S., Komagome, A., Iguchi-Sherry, A., Nagasaka, A., Yuhi, T., Higashida, H., Rooksby, M., Kikuchi, M., Arai, O., Minami, K., Tsuji, T., & Tsuji, C. (2020). Participatory Art Activities Increase Salivary Oxytocin Secretion of ASD Children. *Brain Sciences*, 10(10), 680. <https://doi.org/10.3390/brainsci10100680>
- Turnock, A., Langley, K., & Jones, C. R. (2022). Understanding stigma in autism: A narrative review and theoretical model. *Autism in Adulthood*, 4(1), 76-91.
- Valderrama, A., Martinez, A., Charlebois, K., Guerrero, L., & Forgeot d'Arc, B. (2023). For autistic persons by autistic persons: Acceptability of a structured peer support service according to key stakeholders. *Health Expectations*, 26(1), 463-475. <https://doi.org/10.1111/hex.13680>
- Vanegas, Y., & Schenck, J. (2023, August 18). Art Therapy for Children with Autism Spectrum Disorder: Reviewing the Literature. *Sunfield Center*. <https://sunfieldcenter.com/art-therapy-for-children-with-autism-spectrum-disorder-reviewing-the-literature/>
- Walker, N. (2021). *Neuroqueer heresies: notes on the neurodiversity paradigm, autistic empowerment, and postnormal possibilities*. Autonomous Press.
- Wexler, A. (2020). Autism and outsiderism: The art of George Widener. *International Journal of Education through Art*, 16(1), 83-99. https://doi.org/10.1386/eta_00018_1
- Woods, R. (2021). *Pathological Demand Avoidance (PDA)*. Springer Science+Business Media. <https://search.credoreference.com/articles/Qm9vaoFydGljbGU6NDg3NDc4OQ==>
- Woods, S. E. O., & Estes, A. (2023). Toward a more comprehensive autism assessment: The survey of autistic strengths, skills, and interests. *Frontiers in Psychiatry*, 14, 1264516. <https://doi.org/10.3389/fpsyt.2023.1264516>
- Wright, A. C. (2023). Art therapy with an autistic person with learning disabilities: Communication and emotional regulation. *International Journal of Art Therapy*, 28(4), 154-166. <https://doi.org/10.1080/17454832.2023.2172439>
- Wright, B., Pearson, H., Spikins, P., Scott, C., & Schofield, J. (2022). Autism and engagement

with material culture. *Interdisciplinary Science Reviews*, 47(1), 18–39.

<https://doi.org/10.1080/03080188.2021.1951062>

Yergeau, M. (2018). *Authoring autism: on rhetoric and neurological queerness*. Duke University Press.

Author Acknowledgments

I would like to express my sincere gratitude for those who have played a role in the conceptualization and manifestation of this paper. Dr. Madoka Urhausen, for the enthusiasm, feedback, and support. The staff at CTDS, for lighting a fire and holding up a mirror. And Louis, who showed me what's possible.

THESIS APPROVAL FORM

**Lesley University
Graduate School of Arts & Social Sciences
Expressive Therapies Division
Master of Arts in Clinical Mental Health Counseling: Art Therapy, MA**

Student's Name: **Mariah Geiger**

Type of Project: Thesis

Date of Graduation: **May 18th, 2024**

In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

Thesis Advisor: **Madoka T. Urhausen**