

Colloquy

Volume 18

Spring 2024



A Journal of the Department of Communication Studies
California State University Los Angeles

Editorial Statement

Colloquy is a journal of the Department of Communication Studies at California State University Los Angeles. Colloquy aims to represent the variety of scholarship conducted in the department as well as representing different types and levels of academic thought. Writing style varies with students' experience with writing as a scholarly enterprise.

The editorial board is comprised of students and supervising members of the faculty. Typically, the editorial board members change with each issue. The editors ensure that essays appearing in the journal are checked for consistency in style and clarity in writing. The editors subscribe to an ethic of inclusiveness and endeavor to treat all essays with this ethic in mind.

In the past a number of essays in Colloquy have been presented at national and regional conferences, including at the International Communication Association (ICA) conference, the National Communication Association (NCA) convention, and the Western States Communication Association (WSCA) conference. Colloquy highlights the achievements of students in the Communication Studies department while providing a forum for scholarly discussion and innovation.

The editorial board wishes to thank all those who contributed to this volume, including the authors who submitted essays, the faculty members who solicited materials and mentored students, and members of the production staff.

Colloquy is permanently funded by a generous endowment made possible by the estate of Daniel Robert (Rob) DeChaine. Dr. DeChaine was a long-time faculty member in the Department of Communication Studies, a passionate supervising editor of the journal, and beloved by his fellow students and faculty.

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Colloquy
A Journal of the Department of Communication Studies
Special Issue on Neurodiversity
California State University, Los Angeles

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Neurodivergent Communication in the Neurotypical Classroom: Autoethnographic reflections of our journeys through an educational system not built for us

Sarah Black (Special Issue Editor)

My name is Sarah Black. I am a 47-year-old AuDHD (autism and ADHD) communication studies instructor. The first time I set foot in a college classroom was a winter psychology class at Glendale College 20 years ago. Like many autistic people, and late-diagnosed autistic women in particular, my journey through the educational system was a spiky terrain, with more valleys than peaks. As a twice-exceptional child (gifted and disabled), I was recognized early on for my gifts, though it took four more decades to be diagnosed with the autism and ADHD, that I'd been forced to navigate with no supports in place.

At eighteen months old, as my mother tells it, I picked up one of my father's jazz albums that had different colored letters all over it and was obsessed with learning every letter. When they would bring home a shopping bag, we passed a stop sign, or my grandmother was reading me a story, I HAD to know what everything said. By the age of two and a half, I could read fluently, a condition known as hyperlexia, which is prevalent in autism. Around other kids in preschool, I was quiet, but I was reading Judy Blume and Beverly Cleary books by kindergarten. I was the first child in the gifted program at my small Catholic school, where, once each week, I'd be bussed off to another school with other gifted children. Due to the fact that I was reading off the charts, the other four days each week, my desk was moved to the hallway during reading time, where I was given much more advanced work. This was awful for my social development, and being the weird kid who was blind in one eye and who didn't understand why you couldn't express yourself freely,

I was ostracized. My first-grade report card said ‘doesn’t follow directions.’ Family members would call me ‘space cadet’ or say ‘zero in listening,’ because I would hyperfocus on a potato bug, or, a tree, or a pattern on my grandmother’s very old 1960s multiple-times-reupholstered couch, and would fail to respond to others speaking to me. I would also refuse to eat food with texture I disliked (applesauce was the worst), to the point that my exasperated mother snapped one evening: ‘eat it or wear it,’ and when I defiantly (persistent drive for autonomy profile autism) said wear it, she dumped it in my lap, at which point, I ceremoniously arose from the table, and said: ‘good, now I don’t have to eat it,’ and retreated to my room to get changed. I also never believed in Santa Claus, argued with the nuns about making my first Holy Communion, because transubstantiation was too far-fetched for me to consider, and was obsessed with larger questions of ‘how and why we existed at all’. People erroneously thought I was being difficult on purpose, or I thought I was superior to them, which was very much untrue. Like many autistics, I have never been able to follow a rule or direction without that rule or direction making sense. Still, I mostly got along with my siblings, enjoyed reading and being alone, and was close with my grandmother, so I survived elementary school mostly unscathed.

Middle school was a whole other ballgame. Even though I still attended the same small Catholic school, my classmates had changed, while I had remained mostly the same. On the first day of seventh grade, I arrived to the playground line with girls wearing rolled-up skirts, makeup, jewelry, and using slang, with which I was entirely unfamiliar. I was wearing the same jumper and a crisp, white-collared shirt that I’d worn the year before. As the uncoordinated blind kid who stared out the window a lot, I was already different, but now I was very much physically different, too. I studied those girls and copied their dress, mannerisms, slangs, brought Tiger Beat to school, and pretended to love New Kids on the Block, when I preferred Pink Floyd. The one mainstream thing I did enjoy was Steelers football, but my classmates were mostly annoyed when I would insert myself into conversations, info dumping my analysis, play-by-play. I also tried to fit in by trying out for the basketball team, which, at 4’10” and half-blind, was as comical as you might imagine. I also tried out for cheerleading and was so humiliated when I was one of only two girls not selected that I lied the entire summer and said I was. The one team I made was bowling, because everybody did, and I proceeded to close out my season winning the most-improved player award, because I had started the season with a 16 average (yes, one, six), so there was nowhere to go, but up. However,

beyond the social aspects of school, most of the other kids had caught up academically. Reading an encyclopedia when you are three is a fun party-trick, and one my parents employed often, but when you are twelve, nearly everybody reads. My spelling and number math skills were fantastic. I had made it to the top four of the regional Scripps Howard bee twice in a row. I was always the person people asked ‘hey, what’s 30% off of this sweater’ or to calculate the restaurant tip, but I struggled with organization, missed 20-30 days of school each year, and would have horrific crying spells, or run out of the house, even once from school, without knowing why (nobody knew what an autistic meltdown looked like in a pre-teen girl). This led to me being labeled a ‘bad kid,’ who was always ‘mouthing off,’ and who worked far below my potential. Meanwhile, I was trying so hard. Trying to understand why I made my parents so angry, why, no matter how hard I studied the social dynamics at school, I could not fit in, and why I struggled academically. Was ‘smart’ not the one identity I had?

I was wholly unprepared for high school, moving from a small private school to a somewhat larger one in the city. I loved that Catholic high school. The teachers were phenomenal, I had learned to mask and copy social dynamics enough to get by as the fringe friend of many groups, and the classes were fun. I was still undiagnosed and hardcore struggling. I had learned that through boys I could gain the attention and validation I desperately craved. So, I went to parties, made out with lots of them, and began to fail all my classes. Even when I studied hard, the best grades I was managing to get were B/B+, which to my parents was akin to failing. Especially, since my grandmother was paying so much for me to attend this school, a sacrifice I was too young to appreciate. By April of my Freshman year, I mostly stopped attending and finished the year with five D’s and two F’s. I was asked to please not return. So, I did not. Instead, I transferred to the public school in my district, with the worst reputation. I was afraid and thought I would hate it. I did not. I felt at home there. I also felt at home with all the other misfits and outcasts and found more in common with them than the honors kids, so some semesters I would get A’s and B’s, and other semesters, I failed. I also worked a job after school and my mere existence seemed to make my parents angry, so I was very much present-focused rather than future-focused. At war with my brain, I chose whatever would lessen the pain. Sometimes, it was cutting class and smoking cigarettes outside with my friends, making out in the woods or some guy’s basement, or giving a 35-year-old woman, who was missing most of her teeth, a \$10 home perm at a house party. I had no thoughts of college, and by the end of my

senior year, I had applied to exactly zero. My parents had adjusted their expectations down from, ‘maybe, I could attend an ivy league,’ to ‘maybe, I could attend the University of Pittsburgh,’ to ‘maybe, I could register at the local community college.’ Instead, I finished the year begging my teachers to turn in late work, so I could eke out enough credits to graduate, and when I walked across the stage, I was still unsure if I had managed to pull it off. Thankfully, my real high school diploma did arrive in the mail a few weeks later. I chose moving into my own apartment two days after high school graduation, becoming pregnant quickly after that, and spending the next years navigating teenage motherhood and domestic violence, still having no diagnosis and no support.

After marrying (someone else) in my mid-20’s, I entered a period of stability, in which I began to think that I could try college, that I could get a better job, and provide a better life for my kids, than the tiny apartment we all shared, with me working six+ days each week. So, when I set foot in that psychology classroom, I felt a feeling that was wholly unfamiliar to me: hope. When I studied as hard as I could for weeks for my first exam and earned a B, I was so devastated. While the other students filed out sharing their grades with each other, I sat in my seat and cried. If I had worked as hard as I possibly could, and it still was not enough for the A, why was I there? Being undiagnosed and having a lot of past trauma meant that I viewed this as a failure instead of a win. I was working more than full-time, raising three kids, and after 10 years out of school, I had managed a B on my first exam with a notoriously difficult instructor. Yet, my thought was to run away and drop out. College was not for me. That notoriously difficult instructor was empathetic, he sat and listened to me cry and share why I was so devastated by my grade, and then he gave me tips on how to adjust my studying and test-taking skills to improve my score for next time. I did, earning A’s on his other exams, and completing the course with an A. I ended up taking even more difficult courses with him, like bio psych, which I also aced. He was my first mentor, and it is largely because of him that I will always take the time to listen to my students’ struggles, to encourage and believe in them.

I ended up earning my AA at Glendale College, my BA in English from Mount Saint Mary’s, and my Master’s in Communication Studies from Cal State Los Angeles, while working full-time and raising three children, all with a 4.0 GPA. Every step I took was riddled with self-doubt. I managed community college, but was I smart and strong

enough to complete a BA? When I earned a C on my first ever graduate school assignment, I cried in my car and considered dropping out, again. My passion and drive for teaching and wanting others to have positive educational experiences and at least one teacher who believed in them, no matter what their neurotype or past traumas, fueled me to continue. I paid a heavy price. Not just in immense guilt from how much time I spent away from my family, not just in student loans it feels like I will never pay off, but also in autistic burnout, so terrible after I graduated, I could barely get out of bed for the entire following year. I had to go on disability, was diagnosed with a plethora of mental illnesses, none of which fit, and unsuccessfully tried a series of medications that caused horrific side effects, like severe bloating and suicidal ideation. I was also in and out of hospitals, where mental health professionals kept guessing at what had caused my collapse, beyond exhaustion and anxiety and depression, none diagnosing me correctly, because none had the training in diagnosing adult autistic women with ADHD. So, once again, I had to pull myself up with no supports, and I did.

I worked so much and so often; I had less time to be at war with my brain. I LOVED teaching, and it became my special interest and my hyperfocus. Nearly every hour became dedicated to how to create and improve lesson plans, how to support struggling or disengaged students, and how to stay current in a rapidly changing field like communication studies. Working so much in a career requiring a ton of mental, emotional, and physical energy meant less time to be at war with my brain, which would fully melt down from an unrecognizable sound, or one minute too long at a social event. The uncoordinated blind girl was now walking a tightrope so precariously that one wrong move could send her crashing way, way down, once again. Most semesters, I would get ill at least once or twice, my body's way of forcing me to stay in bed for a few days to stay just on the functioning side of autistic burnout.

The worst part was still not understanding myself. Why I struggled to maintain friendships, to make it through an entire semester without imminent collapse, and how I could be so incredibly responsible and organized some of the time, while also being mortified at having to tell my division chair that I had lost a THIRD set of keys and would need a replacement. COVID changed things. Not only did the pandemic give me the time to be at home and care for my mental, emotional, and physical health, it also gave me the time to do a deep-dive in trying to diagnose and cure myself. When I fell down internet rabbit holes, read books, and spent time in online forums, I kept returning to the same path:

autism and ADHD. I did not want to believe it, not because of prejudice against autistic people, but because I felt like an impostor, trying on one more identity that maybe was not mine to claim. Having what many others do not, the privilege to seek out a formal diagnosis, I did so. Three full days of testing with a neuropsych, coupled with some at-home tests and loved one interviews, and weeks later my assessor (an autistic woman herself) got on zoom and said ‘Congratulations, you’re autistic! Your official diagnosis is Autism – Level 1 with ADHD traits [which later became a formal ADHD diagnosis]. I can see why other professionals missed this in the past, because of your decades of trauma (C-PTSD). Oh, and you scored the highest on many areas of the IQ test (not visuospatial though, haha) than anyone we’ve ever tested.’ And even though I find IQ tests problematic and not particularly important, I wept for joy, mostly for the diagnosis, and a little from the compliment. Then, she gave me a list of books to read and resources I mostly could not afford, and that was that.

Being diagnosed autistic is a rollercoaster of experiences. First, I was elated to have the answers to a question I would spent tens of thousands of hours and dollars trying to answer. Next, I reflected on my entire life through the lens of autism, and everything began to click into place. After, came a period of anger at having to spend four decades managing this heavy, heavy weight on my own, and being labeled a failure by my parents and schools when I struggled. I grieved all the time I had lost wandering around this dark forest alone, hating myself more than my parents or teachers or former friends ever could. Then I began working on self-acceptance, which I suspect will be a lifelong process.

Toward this goal of self-acceptance, I also began reflecting on how I teach communication, and how the field itself is taught mostly by neurotypicals from textbooks, written by neurotypical scholars, through the lens of neurotypicality. Grading students on eye contact in public speaking, teaching students in interpersonal communication that fidgeting (stimming to us autistics) is viewed as a sign of lying, or that telling stories about yourself when others are sharing their experiences with you (which we do to demonstrate understanding and empathy rather than one-upmanship) is rude. It is not that I want to change everything about how we teach communication, but rather include more experiences and perspectives. I have been working on contending with my own internalized ableism and how I bring this into a classroom setting, and how it can impact my students. There were times I have silently judged my students for things I was once judged for, such as equating absences

or tardiness with lack of investment in the class, or that glancing at their phone meant a lack of attention. I have made a comment like ‘this assignment should take you x amount of time,’ when we all work at different paces. This motivated me to apply for a sabbatical to create the first ever neurodivergent communication textbook, and to collect narratives from our neurodivergent students. I was overjoyed when I became the first Arts and Letters Lecturer to be awarded.

I know that this was a long-winded way (I no longer apologize for autistic info-dumping) to introduce the following brilliant, emotional, and insightful pieces of student writing, in which they share their own experiences, successes, and struggles within the educational system, especially in college and university settings. Throughout this process, my assistant, and most of the interviewees, asked if they could use pseudonyms rather than their real names, and while that is normally not protocol for work published in the Colloquy, anti-neurodivergent stigma is very real. There were cultural considerations as some students were afraid their parents would see their stories, making life at home uncomfortable, and others feared a future employer might find it negatively impacting their job prospects, highlighting how many roadblocks exist, preventing us from living unabashedly as ourselves. This needs to change.

In the meantime, I hope that you will read their stories with open minds and hearts, with empathy, and whether you are neurotypical or neurodivergent, might in some cases, relate. If you are a student reading this who knows you are neurodivergent, or who suspects you are, I hope this collection of essays makes you feel less alone. If you are an instructor reading this, I urge you to educate yourself by listening to your neurodivergent students and colleagues, and to question your own practices. Much gratitude to every contributor, whether using real names or pseudonyms, for giving freely of your most valuable resources, your time, thoughts, and feelings. Stories are powerful and drive connection, and story by story, we will make the world a more neuro-inclusive place, in our own words.

Burns Mercury

My name is Burns Mercury, and I am 25 years old. I am autistic and was diagnosed when I turned 22. My experience in high school was extremely difficult. I dropped out at the beginning of 11th grade, due to severe bullying, and partially due to my then-undiagnosed autism. I was very open about my special interests and struggles, making me a huge target. I also had a hard time handling the baggage of schoolwork. I took a long six-year gap between high school and college, so, starting to retake classes was difficult. I have a hard time maintaining large amounts of high-priority work, and accommodations are nearly impossible to take advantage of. Being a student that has several types of neurodivergence, including autism and dyslexia, I have never been granted additional time to take exams, never had assistance on reading long texts that could produce sensory overload or extreme migraines, and was never given grace when I asked for reasonable accommodations.

The OSD at my old school is stringent yet does next to nothing for disabled students. The professors I have also never want to help us, if I can somehow even get them to take me seriously. I enjoy talking and getting to know other people who are understanding and dedicated to a schedule. Still, I find college incredibly stressful and burdening due to everything I listed previously. My peers and family have never taken me seriously with my autism. Luckily, my friends are extremely kind and understanding, mainly because we are also neurodivergent.

In a college setting, a time that I found highly distressing was when the pandemic first started. Along with the heightened stress of COVID-19, the transitional change from physical classes to an online environment was highly stressful, due to the unprecedented nature of my education, and the additional reading I would have to do, while being dyslexic. I have difficulty self-motivating, so I am highly unmotivated to

do work, causing me to fall behind in coursework. I contacted OSD for extensions and guided help, but they claimed that “most students have an easier time with online classes, so you just need to try harder.” They were utterly misinformed that many autistic individuals are just like me, in the sense that they need more support, additional time, and grace to adjust to sudden changes in routine and expectations. They could educate themselves with modern studies and experiences of autism, but I lost hope reading the descriptions official school websites had on autism. Terms like “mental re---dation” are still in use on these pages, which added another layer of discomfort to me seeking help.

My family is entirely dismissive of my autism. They view me as “too high-functioning,” so, they not only believe that I am exaggerating my symptoms of autism, but that I am also completely fabricating my diagnosis. I have had many instances of my social meter diminishing, causing a breakdown caused by overstimulation and being overwhelmed, which results in being labeled as “dramatic” or “too much.” Drainage of my socialization battery is heightened and quicker during the holidays. I find that time of year the most stressful, due to more family get-togethers, loud decorations, and more expectations to mask. I believe the only member of my family, who has had a shift towards acceptance and progressive thinking, is my mother, mainly because she works in childcare, and works with a lot of autistic children. She, at first, was hesitant and dismissive, but soon started to connect the dots and came to terms with everything. She is much more understanding and kinder to me, especially, after I visited her recently and she saw how my actions align with autism. How she treats me now has made me feel more validated. Being receptive, understanding, and giving us more space to unwind, like my mom does, goes such a long way for us, as well as letting us unmask and be ourselves without judgment.

Unmasking in the comfort of my home by listening to music when stressed helps me stay more stable. Music is my primary source of comfort, and hosts most of my special interests. Music is an easily accessible source of media that I can indulge in, without bringing in distractions, especially while working. Music helps me stay level in a way that allows me to also be productive. Allowing music, phones, fidget toys, and quiet spaces to calm down should be accessible in school environments. These have been vital to me, and so many autistic individuals. They help us unmask, which is so essential to our well-being. Masking all day is mentally taxing, and we should not have to act differently all the time. Music helps me stay joyous and elevated daily,

and I will not lose passion for it. It is one of the only things that helps me cope and remain resilient. I want to disprove that autism has a particular “look” and “function;” after all, it is called Autism Spectrum Disorder. Autistic individuals are different and have varying experiences, but we all deserve patience, love, and support. We come in all looks, interests, and abilities. While we may need different accommodations compared to neurotypical individuals, we can succeed when given platforms to shamelessly ask for what we need and receive the necessary support. Ableist languages, stigmas, terms, and bigotry have painted us in such an awful light, making me and many others upset and hopeless. It is not hard to accommodate us and hear us out. That is why a lot of autistic individuals end up not being able to accomplish their college and workplace dreams. Just a little kindness and understanding goes a long way. I hope that more of us stand up to the normalized ableism that is far too common in this world. We are worthy and loved and deserve to feel it.

Jasmine O'Hara

My name is Jasmine O'Hara, and I am 21-year-old English major. I began attending college directly after graduating high school. I have autism, ADHD (Attention Deficit/Hyperactivity Disorder), OCD (Obsessive-Compulsive Disorder), and other conditions that have directly impacted my experience in organizational settings. I started university amid COVID-19 in 2020, which affected what I thought would be the college experience. As a neurodivergent student, especially after enduring a problematic experience throughout high school, I was so excited to get to college, because I thought it would be a different kind of opportunity. The idea of learning in an environment that promised more independence and freedom was thrilling, because I could get more into the areas of my interest.

When transitioning from high school to university, I felt relief entering college, but only after adjusting to being my own boss. Public high school is such a strict environment. You get used to that routine of showing up every day, doing the same thing for eight hours a day, going home to do homework, and doing it again the next day. However, college is vastly different as you decide what classes you are taking and are, virtually, alone.

As a result of having to build my routine, this transition produced a lot of issues, such as being absent from class, getting easily overwhelmed, and becoming overstimulated with how much there was to do and pay attention. One thing that aided this transition was the comfort of this new educational environment starting online. During the height of COVID, online classes made it easier to handle the workload assigned to me and to not have to worry so much about the social aspects of having to attend class every single day. As that has changed, and COVID took a back burner, my grades and attendance have gone down because the

transition has been completely overwhelming. I find myself often straying from my own routines I try and set up, just because I cannot really anticipate what is going to happen, when it comes to college classes and the environment.

With autism comes special interests and hyper fixations, directly linked to why I sought my chosen field. I am extremely interested in writing and music, so going to college to study those fields was a dream come true for me. However, with factors like the COVID-19 pandemic, and struggles with my issues pertaining to neurodivergence, I quickly learned that college is not what I expected it to be like. Making friends and social settings took a lot of work for me. The socialization aspect of college, especially forced group projects, has made the experience difficult.

I'm sure for neurotypical people, it is annoying to try to find people to get a group together for a project, or be thrown into a group of classmates, with whom you would not typically work. However, for someone like me, group projects and group activities extend far beyond the surface-level conflicts of annoyance and clashes in personality. In my experience, I clam up awfully when it comes to any sort of forced interaction, especially group projects and forced collaboration. Knowing people perceive me differently than how I view and would like to represent myself, and that how I communicate has been labeled erratic, is a lingering stressor. Most of my communication does not come across how I want or plan for. Having to mask makes it very difficult to collaborate with others, especially when I do not have the option to work alone or pick the peers I get to work with, because I ruin the experience of the group setting, and set the project behind. I also have trouble getting my work done and being productive, all because of forced collaboration and my inability to comprehend social cues.

Due to the self-diagnosis with many of the conditions I have, and the stigmatization of mental health where I live, it is difficult to talk to my peers for help or find community. While I could find temporary relief in sharing my struggles with my classmates, I do not have many peers with whom I would feel very comfortable sharing. As a neurodivergent person, I require an established connection with people to have the ability to be personal, and a lot of the time, I have found it tough. Maybe because of my school, but it is hard to find other neurodivergent people, who understand.

To elaborate, the biggest thing I struggle with being neurodivergent is pathological demand avoidance. Pathological demand avoidance causes me to skip classes for weeks at a time, avoid completing assignments promptly, I lack motivation, and avoid efficiently following directions. Professors and other campus authority figures have given me a hard time when I have tried to make up for my losses or provided unhelpful solutions. When a counselor reached out to me to offer resources due to my lack of attendance, many of the resources were student-led, for which was not what I was looking.

However, I did have an extremely positive experience with a professor who noticed I was struggling. While in a queer literature class last year, I had a bad habit of missing class, because it was early in the morning. While I would do the readings and all the work, I could not attend class no matter how hard I tried, due to pathological demand avoidance, and autistic meltdowns from overstimulation and being overwhelmed. I needed to show up since we were working on a big final project. At that point in time, I had missed class for probably a week or more, and once I came in again, my fantastic professor, one of the best I ever had, asked me what was going on, and if I was okay. After admitting that I was struggling a lot with meltdowns and getting easily overwhelmed, she told me not to worry about due dates anymore. She wanted the project to be finished and reiterated that if I did the work, and she knew about it, that is all that mattered. It made me feel validated, because I often feel insecure about asking for help in general, which is a common experience. Being neurodivergent and trying to maneuver a neurotypical world, points to all signs of not wanting to ask for help. If more professors and authority figures gave neurodivergent students the same grace, higher education would be a much easier experience.

Several things can be done to improve the education system and make it more accessible to students who perceive the world differently. Firstly, absences need to not be taken as strictly, because you do not know what people are going through. While it is important to be in class, it is equally important to understand there are other ways to get the learning and knowledge you seek. In many of my classes, anything above three absences drops your grade. There should be alternative options to completing work and partaking in class. Having more opportunities for online courses and other ways to get the knowledge you want would be great, because you are in school to learn. It is not that we, as neurodivergent people, are not interested or cannot pay attention, it is just overwhelming at times. Consequently, online classes would be a

great way for neurodivergent people to get an education. As long as you attend online classes and do the work, you will still get the same experience, in the comfort of your routine in life. Finding the motivation as a neurodivergent person can be very difficult. When a routine is established that works for us, especially in a space like our homes, where we can incorporate our interests into our education. We feel empowered.

Additionally, educating neurotypical individuals with modern information on neurodivergence and being literate in accommodating and adjusting to people different from you would transform many hostile environments. If more professors, and other figures who support our education, were celebrating our small wins, we would feel empowered. Verbiage such as “scholars” over “students” makes a huge difference. Having professors and people who take our education seriously is essential. Sometimes, it feels as if we get wrapped up in the Americanization of our education, since many students do not take it as seriously as they should. As someone who takes their education seriously, I want my professors to realize that and acknowledge that I am trying my best.

Of course, much of what students need is not entirely in the instructors’ control, especially with department regulations. Therefore, I think giving professors themselves more of a reign over the ability to be more flexible with class times, methods of conducting class, granting accommodations such as extended deadlines, options of the type of work to submit (for example, picking between three essay topics rather than one), and workarounds would be crucial and helpful. Being realistic in expectations would be another valuable point because the world is not as strict as we seem to make it out to be in an educational setting. Furthermore, assigning work that is not writing a paper or completing a project, but giving students the freedom to express their knowledge in their own way, would be an exciting way to learn. As neurodivergent students, we are here to learn, not here to adhere to these standards that the world has set for us. Writing papers about songs or music is healing and far more productive, than when an instructor assigns a forceful topic that can be negotiated or adjusted, or assignments where I have the freedom to make my education personal, rather than impersonal. The opportunity to write papers and poetry about my special interests and experiences provides me with the space to incorporate myself into my education, creating an environment where I feel heard. We are the next generation of people in the workforce, and to stifle that creativity, especially for neurodivergent people, is an injustice.

Lastly, partaking in extracurriculars is vital, especially for neurodivergent individuals. I participate in a radio show weekly, where a peer and I share our current favorite songs and talk about music. The radio show is a part of my routine that is very enjoyable that I am passionate about. It gives me opportunities to socialize as I talk about my show in class and even tell people to tune in. It is an excellent way to lessen that barrier that I often feel with people when creating community and making friends.

As a neurodivergent person, I want to show neurotypical people that we are not super weird, scary, stupid, or any of the negative connotations that often come with conditions like autism. Frequently, people expect you to be weird, quirky, or a manic, pixie dream girl, especially as a woman. Just knowing that we are people, knowing that we exist, acknowledging that and not trying to treat us any differently because of it or infantilizing us would make drastic changes to our day-to-day experiences.

We are just like everyone else. We just think differently. And that's okay.

Kristin Walker

My name is Kristin Walker. I am 30 years old, and I am a transfer student from Citrus College, currently in my senior year at Cal State LA. My current major is Communication Studies with the option of Organizational Communication. I believe that I have Attention Deficit/Hyperactivity Disorder (ADHD). I also have depression, anxiety, and mild Obsessive Compulsive Disorder, but ADHD is the main focus.

What makes my experience unique is that within the last year, I have been learning more about ADHD and concluded that I have ADHD, realizing that my brain works differently than people around me. As a result, I have not thoroughly investigated getting accommodations through the school, because I never felt I needed to. However, I still do not feel comfortable going into the office as someone with a self-diagnosis. I have also been learning more about what the school offers, as far as the Office for Students with Disabilities (OSD), for students who are neurodivergent. I have not disclosed this information to other professors. Still, regarding accommodation, I have been lucky enough to have professors who have been accommodating and understanding of most of my needs.

As someone who has recently figured out that they are neurodivergent, all my behaviors have started to make sense. Looking back at most of my college career and other settings, I have noticed that ADHD is partly the reason I had trouble keeping a schedule and adequate time-management skills. I have been very fortunate to have competent professors, but I can see the people who deal with more severe cases with less understanding in their lives, and I imagine it would be tough. Having heard from other students that professors are not as accommodating or understanding, I think there is a lack of knowledge, even for professors. Many neurodivergent students like me cannot complete work on time

and are immediately accused of not putting in enough time or effort when that could not be farther from the truth.

As a communication studies major, the professors have been more understanding and accommodating than in other fields I have taken classes. Taking marketing and managerial courses has made me realize that those professors have different classroom dynamics than in communication studies. I do not feel like they are as understanding or open to communication. In general, upon analyzing my communication classes versus the business classes, even communication among the students is different. The business classes are very quiet and not very interactive and feels uncomfortable at times. I had one professor who significantly pushed the importance of communication among classmates and participation. Because of that push, and the interaction in that class, I learned more in that class than I in any other business course.

As someone with ADHD, I realized communication is almost a perfect major for me. Communication allows me clarity, stability, and the comfort of asking for assistance when needed. Since our professors try to push the importance of communication between students and establish conversational classes, rather than being lecture heavy, I have learned far more. Interactive classroom settings, talkative classroom settings, and open communication between students and instructors make a huge difference in a learning environment. It allows students, especially neurodivergent students, to reach their full potential. Professors communicate instructions clearly, have a more transparent set of expectations, and encourage community, which is crucial for me and my ADHD.

At work, my boss sometimes gets irritated with me because I need her to explain things a couple of times, to fully grasp the concept or what she needs me to do. When I ask for further clarification, I am met with surprise and a tone of disbelief. This experience is highlighted in many organizational settings. As someone with ADHD, I am asking for extra explanations, because I did not understand the first time. I would not be asking had I understood it. My background in communication and knowing its importance has led to having patience with people. If more people, at the very least, understood the importance of communication, which includes understanding that not every person functions the same, the neurodivergent experience would be more effortless.

As an example, if I am speaking with someone who does not understand something, I try to do my best to explain, or I try to do things

in a different manner that might be more accommodating for that person. This all ties into people being embarrassed about asking questions in class because there is a stigma around misunderstanding. People feel they will be looked at differently, negatively, and they have a reason to believe that. A marketing professor that I had for two classes last semester gave us an assignment that my entire team, including myself, did not understand. It was unclear as to what the professor wanted. Since she was big on communication, I confronted her and asked for clarification. Her response was almost invalidating: “Well, how do you not understand it? I don’t know how else to explain it.”

Due to my age and being in college longer, I am less intimidated by professors, but many students do not feel this way. However, I have also learned that there is nothing wrong with asking for clarification or asking questions. For neurodivergent people, this is far more challenging because of the extra layers of issues we endure. Communication must be taught.

Many private schools do not even recognize communication as a major, which is a problem because of its importance. I work for a small business, and I am constantly watching small businesses fail, partly because of lack of communication. People are not taught the importance of communication outside of necessity. Still, they need to learn how to engage properly without the possibility of sounding condescending or coming off a certain way. As a neurodivergent person in communication, I have also learned that it is okay to have disagreements, and we do not have to engage in heated disagreements. To summarize, being educated on basic communication goes together with people being more understanding and accommodating.

Furthermore, professors have a lot of pressure on themselves, too, which can disrupt proper, clear communication. Communication needs to go beyond classes like Speech 101, where public speaking is taught. Public speaking is the stereotype of what good communication skills look like, but it does not precisely teach people the foundation of effective, two-sided communication. An idea for improving communication in the classroom is to offer courses that teach students how to feel more comfortable talking and asking for help, give students coping mechanisms and coping skills, teach mental wellness, and how to advocate for and accommodate themselves. Providing resources and examples on how to rephrase needs can increase comfort in the classroom, ensuring success in college.

Something I have noticed for myself and others with ADHD, that I am working on, is that I am constantly so hard on myself. On top of the pressure from our teachers and other outside factors, we also put a lot of pressure on ourselves to fit into a box. Trying to function like a neurotypical person is mentally and physically taxing, especially when it comes to scheduling and time management. A coping mechanism I have learned is giving myself a minute to feel what I need to feel and having more self-compassion. It is not easy for everybody, but I also do not think it is something taught to us. We are not conditioned from a young age to make time for ourselves, and we should.

The stigma of ADHD is also what makes education and awareness more complex, leading to a lack of acceptance. After learning I had ADHD, I found myself becoming even more compassionate and understanding of neurodivergent people than I already was. Explanations for our behaviors with ADHD are just that: explanations. They are not excuses, and our behaviors are not us being lazy, rebellious, and slow. However, when we often hear those traits assigned negatively to us, we start to believe them, even though they are not true. As a full-time college student who works and has other responsibilities outside of school, I have a million things going on at once. I tend to double-book events because I always feel like I am not doing enough. Most of the time, this leads many people with ADHD in my exact position to not only feel socially, but also physically and mentally exhausted, because we are just doing too much.

To cope with the stresses of having ADHD and other mental health challenges, I have indulged in my interests, which have saved me through a lot of things. One of the main things I found is line dancing, which has been my outlet for stress release. It grounds me every time, and it has been something that I enjoy. Finding an interest that makes you happy that you can use to ground yourself is extremely important. I feel that my interests help me mentally, clear my head, all around get my footing back with everything in my life. My interests have become a big part of my personality, with a place in my heart as a saving grace. I recommend it to everyone.

A.H. Brennan

My name is A.H. Brennan, and I am 19 years old. I am an English major with a professional/creative writing concentration. I am diagnosed with ADHD (Attention Deficit/Hyperactivity Disorder), and I suspect that I have undiagnosed autism. I started attending university right after high school, which was a rough transition. Higher education learning is a whole new level that I have struggled to get used to, since it is very fast-paced, and professors will not wait for you to catch up.

The pace and feeling of being left behind were one of the factors that made the transition especially hard, since I was not a good student in high school. I did not study and get good grades, and I graduated with a 2.7 GPA. Because of this, I did not want to go to college at first. I do not have studying skills, test-taking skills, or good sense of time-management skills, in general. What eventually ended up helping me was attending my school's learning center, and seeing a learning specialist, who helped me get back on track. He helped me organize my time and my assignments. I use what I have learned from him, which has been extremely helpful, like blocking out time to do assignments. I feel like in high school, a lot of the time, all teachers would say was, "Make sure you understand how you're studying and what works for you." However, the teachers were not prepared to offer many solutions that worked for neurodivergent students.

I questioned what worked for me, since I needed guidance and shared experiences about what form of studying benefited me. Many people just read over their notes or look over a Quizlet a few times, which is fine, but that does not work for me. My attention does not last, or I find the task too dull. As a result, test-taking is extremely difficult for me, especially in college. When I am surrounded by people taking a test, I get distracted by all the visual stimuli, and other forms of stimuli outside of my exam. I am a very slow test-taker, because when I am

trying to take exams, I cannot rush. So, if there is a time limit, I do very poorly because I feel very rushed. Luckily, some professors have been nice enough to see that I, and other students, often struggle with test-taking. I had a geology professor last semester who would let every student take as much time as they needed to complete their exam, even past class time, which I thought was excellent. You did not need any special written accommodations, which was very helpful. However, I have not had a professor do that since.

Most professors require you to collaborate with the Office for Students with Disabilities (OSD) at school to provide accommodations; without official paperwork, no professor is mandated to provide accommodations. This is highly inconvenient, especially for students like me. I have a unique situation in which I was diagnosed as a child, but I do not have the paperwork to prove it anymore. Because of this, I have not been able to file for any accommodations.

Alongside physical classes and coursework, I struggle a lot with online courses. The lack of discipline I need to get my work done lowered the quality of my work, alongside the lack of teacher reminders about deadlines. During the pandemic, when I was at home with my phone and the TV, all these distractions made it hard to focus on work. My grades were the worst they had ever been, which caused me to give up after a certain point. Aside from the difficulty of being isolated during quarantine and being introverted, my mental health was at a low point. With a struggling mental health state and ADHD, I noticed my schoolwork being continuously negatively impacted. With transitioning from in-person schooling to asynchronous, I found the change of returning to face-to-face courses even more challenging. Remote work and in-person work required different sets of discipline, which I was unprepared to handle so quickly.

Support from my family members for my ADHD is also inconsistent. A few family members have this idea that I have never had the disorder and that I am making it up. My dad is convinced I do not have it and that I have grown out of it. He has always been convinced, since I was a kid, that I would grow out of it. Contrary to his beliefs, my ADHD has worsened over time. Due to his mindset, he does not believe that. Other family members, like my grandmother, are anti-medication. She did not like the idea that I was on Adderall for the longest time, or anything else I took to ease my symptoms, which created a rift between me and some of my family members.

Conversely, my mom and my other grandma were respectful of acknowledging my ADHD. Even though they are not neurodivergent themselves, they are still very supportive and help me out a lot. Even with the positives, there are negatives. There is more they could have been supportive of, instead of growing frustrated with me for many things that I could not control. Though there is a generational gap in education as to how accepted mental illness is now, I believe the neurodivergent experience would be easier if people from older generations were more educated.

Similarly, some peers have made my experience difficult in school. In my sophomore year of high school, I had an incident with a girl in my technology class. While we were doing group work, she started arguing with me, claiming that I was not doing enough to help with the group. She was calling me lazy and a b--ch. I started crying because I did not know how to respond. For people with ADHD, what neurotypical people interpret as "laziness" is weaponized against us our whole lives. Her statement triggered me for that reason. With ADHD comes hypersensitivity, which has caused me to hate my automatic response to things. If people are being rude and ill-intentioned, I tend to cry uncontrollably. Because this was the response her comment had elicited, I had to get my friend to ask the teacher if I could go to the nurse's office to sit in a dark room and just cry. I just could not stop from crying; I could not even speak to the nurse. This caused her to call my counselor. Luckily, she was the kindest woman I had ever met. She was so accommodating and encouraged me to talk about what happened. After listening to what I had to say, she allowed me to stay in her room for the day, and I did not have to go back to the classroom, because I only had one more class after that. That was one of the most accommodating experiences, which led me to feel a lot better.

My counselor, being one of the most accommodating people I have ever met, has helped me understand what grounds me the most and what can be helpful for me, and other neurodivergent people, in the future. In general, whether at the workplace or school, there should be a designated area where we can rest and relax, because of how easy it is to get burnt out. If you are neurodivergent, it can be challenging to deal with our daily lives. Anything like a specific office or a place you can go to, even in college, like the student union building here, would help. I would love to have a place like that made explicitly for us, because I feel the way we react to things can be different, compared to neurotypical people. Having a space to feel our emotions, get it out of our system, and

ground ourselves would be very beneficial. Additionally, I like to practice self-care with what make me happy. One example is getting in the shower, which, for some reason, helps me cope. Some other examples include listening to music that makes me happy, watching a movie I love, watching a TV show, or reading a book.

The misconception I want to disprove about neurodivergent people is that we are all lazy, dumb, and slow. I feel like this relates more to ADHD. People treat me like I am dumb If I do not understand something immediately, calling me slow, and claiming the concept is too easy. It seems the same with autistic people, too, and I am tired of the same narrative being thrown around time and again. People will say, “Oh, I’m accepting of people with ADHD and autism.” But we all know in the back of their heads, they are judging us when we do not get something right away. It is something I would like to see change in the future.

Our brains are wired differently. The most put together I have felt is when I have control over what I am doing and how I approach life, when I have something that helps me cope and do better in school, and I have agency in how my studies are conducted. If neurodivergent people are given control, kindness, grace, and empathy, we will succeed and do well in life. Sometimes, all neurodivergent people need is to be actively heard. We know what we need, and if you let us tell you, everyone’s experience will be effortless.

Jack Stone

My name is Jack Stone, and I am a 22-year-old biology major, who took a hiatus of approximately three years between leaving high school and starting college. The neurodivergences that I live with are traumatic brain injury (TBI), dyspraxia, suspected Autism Spectrum Disorder (ASD), suspected Obsessive Compulsive Disorder (OCD), and Avoidant/Restrictive Food Intake Disorder (ARFID).

My experience transitioning from high school to higher education was challenging. I had spent a considerable amount of time out of education due to COVID restrictions, and the effect of a traumatic brain injury sustained in a hit-and-run accident in 2021. I found that university was extremely physically and mentally jarring. There was a lot to take on, and there was pressure to adhere to deadlines, commit to social events, register for classes, and such. Traveling to and from classes also presented additional physical and mental challenges, primarily concerning navigation.

As a result of wanting to make my experiences in higher education more manageable, I have had experiences with the Office for Students with Disabilities (OSD). They have been extremely accommodating and have put well-thought-out and tailored measures into place to ensure my exam needs are accommodated. All communication was presented clearly, with responses often received on the same day.

Additionally, professors and authority figures are fortunately very accommodating of my needs. I have received concerned emails when missing lectures. When I explained the nature of my condition to them, I received unanimous support and understanding. I have no complaints.

Similarly, my peers, family, and friends are accommodating to my needs for the most part. The biggest issue is that invisible issues are often forgotten about or overlooked. For instance, friends may be frustrated at having to repeat plans or specific timings because of the negative memory and cognitive impacts of having a brain injury. Yet, I have never felt stigmatized by my friends and family for having this condition. Some strangers have lacked understanding or empathy, however, usually stemming from a lack of education.

Higher education has been made far more enjoyable by having a solid social framework, varied lectures, and plenty of hands-on laboratory work. I have wholeheartedly engaged with extracurricular activities and have found that my tolerance for university increases a lot when I have space outside of lectures to enjoy being situated in a new environment. Conversely, unclear, or misleading expectations from coursework, overly complicated registration for classes, and physically uncomfortable classrooms have been some of the more difficult factors of university life. The physical environment we study and live in is crucial to our enjoyment of the course. Even an averagely neurotypical student is disrupted by fire alarm drills, intermittent timetabling issues, or physically uncomfortable seating, but this experience is made much more difficult for those of us who are neurodivergent.

One stigmatizing experience was having my experience and symptoms questioned by the legal team responsible for my case against the driver who injured me, which was a very mentally tricky process. I engaged with them fully, and I understand that they must ask difficult questions and probe my symptoms to mirror what the opposition would do to me, but it was very challenging. I have been made to feel as though my symptoms are less severe by the presence of pre-existing medical conditions, before the TBI. I know my injury has worsened many areas of my quality of life.

Family or friends are often overbearing because of concern for me and my health, with constant medication reminders despite not needing them, unsolicited advice for things that I have a good grasp on, and the repetition of commonly held misconceptions have been very frustrating. It leads to the feeling of lost independence that so many TBI sufferers feel. I feel and am fully capable of understanding what is needed to tackle TBI, but all these negatives can feel invalidating, infantilizing, and, at times, ill-intentioned.

On the contrary, although university life, like the society it inhabits, is not set up for neurodivergent people, the university staff I speak with take time to set up telephone calls and meetings to put concessions into place to make my time more manageable. They were patient and high-spirited. It did not seem like an inconvenience for them, rather, they seemed highly motivated to advocate for me, wherever they could. If I need assistance, I will ask for it, and that is when help is most useful for most neurodivergent people: when it is warranted. Furthermore, patience and understanding from those around me have elevated my experiences, especially when I feel that they are ready and willing to challenge those who would perpetuate myths about my condition or put me down for perceived interpersonal issues it causes me.

Socializing, engaging in my hobbies, periods of quiet reflection, or listening to music are, by and large, the most important and influential ways of keeping myself grounded. To me, that means avoiding issues taking up too much active cognitive thought, instead allowing just the emotions to remain. For instance, knowing that I have bills to pay causes physical anxiety symptoms. Still, grounding prevents spiraling cognitive thoughts such as, “If I don’t pay these bills, or if my payment doesn’t go through, I’ll lose my housing, which in turn will make me lose my place at university, which will...” When I ground myself, all my experiences become more manageable to handle.

The best way to create inclusive environments is to make clear that people can come forward and ask for help or know that their suggestions will be implemented, wherever possible, and not immediately dismissed. This can be as simple as drop-in meetings or suggestion boxes or as complicated as designated panels of neurodivergent students or meetings with heads of departments.

Connor Ray

My name is Connor Ray (they/he), and I am twenty-three years old. I am a queer, AFAB (Assigned Female At Birth), non-binary individual. I am self-diagnosed with ADHD (Attention Deficit Hyperactivity Disorder), ASD (Autistic Spectrum Disorder), and OCD (Obsessive Compulsive Disorder), and have been since around age twenty. These, along with other conditions, heavily impact my experiences in organizational settings.

After graduating high school in 2019, I moved here to Los Angeles to pursue a career in acting. It was only after the COVID-19 lockdowns forced me indoors for a year that I started coming to terms with the fact that I was neurodivergent. What started as me laughing off how much I related to trending TikTok videos on the topic of ADHD/OCD/ASD symptoms, soon led to hours upon hours of research on disabilities I never even thought I could have because “I can’t possibly have ADHD, I’m nothing like the rambunctious boys in my life who fit the hyperactive stereotype,” or “I can’t possibly be autistic, I’m too high-functioning,” or “my intrusive thoughts aren’t as bad as my partner’s, so they must not be coming from something as serious as OCD.”

All my life I had been made to believe that I cried and got overwhelmed easily because I was sensitive. My extreme discomfort in social situations and how I struggled to form and maintain friendships was simply dubbed as social anxiety. I was shy, an introvert, awkward, the ‘weird kid’, but certainly not autistic. My inability to start tasks was due to laziness, not because I was struggling with executive dysfunction. How could I possibly have a learning disability when I got straight A’s and was the perfect, well-behaved student?!

For the majority of 2020, I did not feel like I was allowed to claim the title of neurodivergent without a professional diagnosis. I had seen people get eaten alive online for self-diagnosing themselves with mental illnesses and disabilities, supposedly only doing so for attention. Because I was coming to terms with being neurodivergent during a time when they were seen as “trending topics”, I felt like a fraud, like I was just trying to feel special, and excuse what I grew up being told was simply laziness, anxiety, or depression. In fact, I was just desperate for a name to put to all the ways I had been silently struggling in my life without understanding or any help from the people around me. Only after I made an entire Google Slides presentation on all the ways I exhibited neurodivergent traits (yes, I am serious, it is over 50 slides long, plus an additional 20 slides just on OCD) did I start to accept that I was neurodivergent after all, and that I did not need a professional diagnosis to start seeking out help and accommodations.

Seeking aid in organizational settings is difficult because I can never assume the people around me are well-educated on my disabilities. This means oftentimes before I can even start the conversation of getting aid, I am put in a position of having to go through the emotional turmoil of whether I should try educating an authority figure on disabilities they might not even believe exist. I have had teachers tell me to my face that social anxiety and depression are not real. I have watched managers get repeatedly frustrated by employees who are simply exhibiting neurodivergent traits. I have been told to stop making excuses when trying to explain how symptoms of my disabilities make certain tasks difficult. I do not have nearly enough fingers to count the number of times I have been told “Oh everyone’s a little ADHD/OCD” by authority figures discrediting my struggles. Most of the hurdles neurodivergent people face in their day-to-day lives always lead back to the general population’s glaring lack of education and knowledge regarding disabilities.

One of the first times I felt truly seen and accommodated in an organizational setting was in 2021 when I worked as a sales associate for an alternative clothing store. I felt the most supported by the store manager (let’s call her L), another manager (let’s call him S), and a fellow sales associate (let’s call them M). What made working with them a positive experience was that they were all queer and/or neurodivergent and were, thus, already attuned to possible ways I might struggle in such a high-sensory, social interaction-heavy workplace.

When I was offered a promotion that would give me extra responsibilities, L took extra time to make it clear that it was my decision whether to accept or decline, reassuring me that I was more than capable of excelling in the offered position. If I struggled with grasping concepts, L never made me feel like a failure for it and instead encouraged me to seek guidance from other managers, like S, whose neurodivergence more closely resembled mine, and who was often able to explain new concepts in ways that worked better for my brain. If customers got particularly heated with me, and S could tell I was getting overwhelmed, he would step in or reassure me that it was okay to take time in the breakroom to decompress afterward. Even on the days when the only overstimulating thing I was dealing with was the blaring music, S was there to check on me and make sure I was not pushing myself needlessly. If I was already engaged in a task and M needed help, understanding that ADHD made it difficult for me to switch tasks, they would engage with me, but wait patiently until I came to them ready to tackle something different. One day, when perfectionism and heightened rejection sensitivity were making my numerous failed attempts to pitch loyalty accounts to customers frustrating to the point of tears, they simply took the piece of paper I was using to track my percentage. Through their small act of kindness, they reminded me that my mental health and emotional well-being would always be more important than some arbitrary statistics.

By understanding themselves and keeping a constantly open channel of communication, each of them was able to understand me, how my disabilities affected my ability to work, and what accommodations I needed. Each of them was able to provide a different kind of support that gave even the worst days a glimmer of hope and positivity, where I did not feel like my disabilities were just an inconvenience to everyone around me. They showed me how just a few small actions could make a substantial difference in my life and that accommodating my disabilities was not some impossibly taxing effort, like I had been led to believe. Oftentimes, doing so was ridiculously simple and easy.

The severely limited understanding I, and those around me, had of what ADHD, ASD, and OCD each entailed, kept me from getting help for the first 20 years of my life. Even now, I struggle to find accessible accommodations despite having a much broader understanding of myself and other neurodivergent people, due mostly in part to a general lack of education on the subject. This is why it is so necessary for curriculums, written specifically by neurodivergent people, to be made and taught on a universal scale. The goal is not to ‘cure’ the disabilities, but to instead

make what is a predominantly ableist, neurotypical world more accommodating and accessible to those who have them.

Myra Byrne

My name is Myra Byrne, and I am 19 years old. I am self-diagnosed with autism spectrum disorder, Attention Deficit/Hyperactivity Disorder (ADHD), and Obsessive Compulsive Disorder (OCD).

The first difference I notice in myself, compared to others, whether neurodivergent or neurotypical, is related to my in-person friend group setting. I often feel like I am behind my friends, because, while this year I managed to get my first actual job, my friends have had one for a while. Something else I have noticed is they have boyfriends, while I feel scared and unprepared for a relationship. My friends are so different from me, and I always feel out of place, especially since our thought processes are not in alignment. Even though they try to hear me out and understand my point of view, I do not think they can fully grasp my experience.

One example I can think of is explaining why I do not enjoy hanging out with their boyfriends, because I am unfamiliar with them, and I do not know what to say, or how to interact with people, if we do not have specific things in common. This is very typical for autistic people. Even though my friends promise not to bring their boyfriends along so I can spend time with them, they always end up doing so anyway, which causes me to feel unheard, isolated, and socially reclusive.

Conversely, online friends are people I have connected with through my special interests, which highlight all my positive skills, and talking about it brings me a lot of joy. Through fan pages I have crafted, I feel like I have a stronger connection with my online friends, because not only do we share that same special interest, but they are also usually neurodivergent just like me. They enjoy and express their happiness

about the artists we all love in a neurodivergent way. Instead of meeting someone in real life at a concert who is a casual fan and probably considers that the way we act is weird, uncomfortable, or unusual, being online brings me the safety of being myself. I benefit from screen time, whereas neurotypical people may not.

As a neurodivergent person, if you make fan pages or a space that allows for self-expression, there are many possibilities for making genuine connections that cannot be replicated in-person. It is very easy to find like-minded people, compared to real life. In my experience, neurodivergent people show their personality and honest thoughts online. For me, seeing these posts alleviates the stress of having to read people's tone or body language, especially when people are using emojis. It is easy for me to spot who to avoid online, due to their posts and overall profiles, which takes away the guessing game of meeting someone in person, who might be using a facade. Speaking for myself, I have always been my most authentic self online, always, no matter what. Even if I try putting on a different character, eventually, my true self just comes out, and I cannot hide it. As autistic people must mask around the clock to be accepted into society, being online allows me to be my most authentic self. This makes me happier, since I am able to rant about my interests on my story, make posts, and not have to worry about being annoying or weird. At worst, people will not like your post, and they can ignore it; it does not matter. In real life, however, the pressure of masking and conforming is a miserable experience because you see people's reactions in real time; you repeatedly tell yourself: "I need to stop being me. I'm being weird right now." Even if my real-life friends know of my interests and see my posts, I still feel like I have to hold back and mask.

One way a real-life friend has helped accommodate me and make me feel more included is by making sure I always feel heard. Knowing that I am not good with confrontation, she will allow me to talk to her about how I think, then approach my friends for me by rewording what I said to clarify my needs and feelings to them. She tries her best to organize my thoughts, which leads to sound compromises, to ensure I am included. If more people listened to their neurodivergent friends and offered help, social settings would be more accessible to us.

In school, group projects were always the bane of my existence. Even though I had friends, they were not in my class, which always discouraged me because I would end up in randomly assigned groups. The thought of talking to the other people in my class, that I do not have a connection with, always made group work more challenging and

distressing, especially since I did not have the option of working alone. My quietness would always lead to me being left out and taking on the responsibility of completing most of the project, because no one else was doing anything, and I was too anxious to get a failing grade. Although group work is essential for enrichment, for neurodivergent people working alone can have the same benefits, as we are, sometimes, physically incapable of functioning in a group setting. Teachers need to be more accommodating and offer the option of working alone, especially since I always felt like I had better quality of work on my own.

At work, I also feel accommodated. If I do not like a specific area that I am working in, I can stay in a zone I prefer. If there is heavy lifting to be done, I can always ask for help since I cannot do it on my own. If more organizations were structured this way, neurodivergent people would feel more comfortable. Work is also a good environment for me precisely because I enjoy the structure and process. Routine brings me comfort and stability, which allows me to know what to expect, practically for every shift.

On the other hand, social situations like outdoor parties, which tend to have no rigid structure, can be very overstimulating. If I need to go inside to take a break and step away to ground myself from overstimulation, everyone who is not my family member makes a big deal about it, asking me questions: “What are you doing? Why are you going inside?” Loudspeakers, people talking over the music, and strong visual stimuli are some examples of what affect my experience immensely. If I try and stay outside, I will use earphones to block sound out, which leads to more questioning from others: “Why do you have your AirPods in? Why are you not having a good time? Why are you ignoring us?”

As an autistic person, something that would help me is to do the exact opposite of what people at parties have interrogated me with: people need to stop making things a big deal and not take what autistic people do to feel more comfortable personally. My family is all neurodivergent, which makes my experience at home far more manageable. My family understands when I need to take a break or step away, which I am fortunate to have. I wish that outside my family, I could just do things, and people could let me do it and not make a big deal about it.

At home, my interests are highly encouraged, which brings me immense happiness. My interests are plastered all around my room through posters, pictures, figures, toys, and artwork. Additionally, looking at pictures of my interests, organizing my photos in folders on my phones, and engaging with content of my interests online positively stimulate my brain and bring joy to my daily life. Listening to music also always instantly helps ground me if I am having a bad day.

Overall, one tip I would like to give people is to eradicate judgment. Personally, I have dealt with highly distressing and negative experiences pertaining to my special interests and hyper fixations, because they are not ‘stereotypical’. Having a special interest in a celebrity is not an obsession the way neurotypical people view it. People always have the idea that I’m a crazy stalker or someone dangerous to be around, but my special interest does not go beyond just that: a special interest. I am human, like everyone else, and have the capability of humanizing my special interest.

Lastly, I wish people would remember that, like most things, neurodivergence is a spectrum, and not every neurodivergent person is the same. One autistic person will be completely different from the next. I have noticed that even other neurodivergent people will perpetuate stereotypes, claiming all neurodivergent people do one thing, or act a certain way. This leads to further isolation, and instead we need to enforce education on the spectrum aspect. Education on things like autism being a spectrum helps encourage the fact that different people need different accommodations, and stereotypical accommodations are not beneficial for *everyone*.

Shelton

My name is Shelton, and I am 28 years old, majored in Musical Theatre. I have Generalized Anxiety Disorder and Attention Deficit Hyperactivity Disorder (ADHD). I am also undiagnosed for autism, though my mental health professional and I highly suspect that is the case.

My experience in high school was difficult for many reasons. My behavior/anxiety issues were largely unaddressed by my school, beyond sticking me in the corner of an LRC (Learning Resource Center) classroom filled with fellow children who had issues more severe than mine and being left alone for test-taking and self-regulation. When discussing my IEP (Individualized Learning Plan) with both me and my parent, I was talked over and discouraged from contributing to the plan that dictated my needs. Luckily, my mother was my most prominent advocate (at school) and fought for what I asked. This trend continued into my community college, where I was actively rebuffed by the Office for Students with Disabilities there (though that is not what we called it at the time; I cannot remember the official title). In short, I was told and shown through action that it was not their responsibility to accommodate my disability, because I should have learned to overcome it on my own. This led to me completing my Associate Degree, but taking an extra year to do so, because of mismanaged class load, time, and lack of direction from the college advisors.

Because I was not offered a language course in High School (the LRC classes overrode my PE credits, health credits, and language credits, presumably, because the extra money my IEP brought into the school district was worth my education suffering), I ended up taking ASL (American Sign Language) at Seattle Central. It was there that I met the instructor, a very kind deaf woman. I would apologize to her

constantly in sign language because I felt that taking her time to address anxieties, when I could not communicate in a language she understood, must have been taxing on her. Eventually, I think she realized what was happening. She sat me down and very calmly explained that if she did not want to listen, she would simply have turned away from me, and that my desire to learn was worth the time. She ended up giving me more time to complete assignments and would help me come up with alternative assignments when I was not able to complete them due to my commuting situation (I was bus-bound and competing with a 6-hour daily commute and ferry boat schedules, as I lived on a small island). It was one of the first times I had not felt “othered” by a college professor.

My mother was very vocal about fighting for my needs when it came to a school setting, but at home, the support was lacking. I think she did not know how to address what my anxieties or ADHD actually meant in the home setting and would often get frustrated having to repeat herself. This often led to me being punished for “not paying attention.” I spent a great deal of my childhood “grounded.”

Higher education, specifically moving to Los Angeles while still having the structure of a school setting, made my world much more tolerable. For the first time in my life, I was able to do activities outside of the classroom at my own pace. If I did not want to do dishes or laundry right away, I was not scolded and shamed for it, which alleviated a great deal of *that* stress in my schooling.

I did not seek much institutional help, because I did not trust the administrative staff. I had transferred in with my core educational credits, so all I had to enroll in were performing classes. While those are stressful in an “I need to stand in front of my peers and take the meanest feedback about my art and body you’ve ever heard and not cry” kind of way, the academics were not challenging for me.

That said, there is something profoundly humiliating and overwhelming about being ripped apart by a teacher at 9 AM in front of a class with 20 people, who already dislike you because you are “weird.” I would say that socially, I was at my worst during this time. I jumped between erratic and depressed like a rubber ball hitting a wall. There was no balance, and I felt like I was spinning. This made performing well in school difficult. I withdrew from my classmates and threw myself into work. While my performances were fine, my ability to stay grounded enough to look someone in the eye during a scene was lacking. I was so afraid of connection, even fake connection, with my peers.

I had, and unfortunately still have, no sense of when to avoid an argument with something unfair or not factual. I had a professor throw an audition booklet at me in frustration when I told him that if I were auditioning for a set of shows and knew that I would not get anything but role of “the fat one,” I simply would not audition. I thought it was deeply unfair to be cast as simply “the overweight jolly one” when there were parts that I thought I could play better, not based on my weight. It was not the first nor the last time I had had issues with authority figures, when I decided to argue about the unfairness or lack of nuance in a task or assignment. I do not remember exactly how this particular instance played out. Still, I remember feeling unsatisfied and under-represented by the fact that my teacher could not accommodate or at least be receptive to my points.

Getting medical care is difficult for many reasons. I am overweight, physically a woman, and queer. These three things alone make medical care a toss-up between “lose some weight,” “you’re just hormonal,” or “it’s nothing, you’ll be fine.” Adding the anxiety and ADHD, making it hard to organize and coherently explain my thoughts, make it nearly impossible. I have lucked out now with doctors who make a point to listen, but the trial, trauma, and error have made the road long. I have seen no less than 10 general practitioners, while trying to establish care, and I have only had two that made me feel safe and who listened to my concerns in full.

I had a physician who, upon learning of my ADHD, gave me a work email to message them if I thought of anything I did not address in my appointments. When I emailed them, I was expecting them to ignore me or have me schedule another appointment. Instead, they took the time to respond. They addressed my concerns fully, and the outcome was reflected in my chart immediately. They were also queer and heavier set, so the usual comments I get in medical settings were not addressed beyond a “your bloodwork came back great, any weight you want to lose will be comfort or aesthetically based, medically, your weight is fine.” This created space where we could have conversations beyond that and address the actual problems I was having, without judgment.

I think as people get older and move out of institutions like colleges and universities, it can be easier to tailor your life to suit your needs. As I have not sought further education, my environment has been more in my control in many ways. I sought a low-stress job with an equally ADHD boss, who speaks the same language of “overcommunication” as I do. I live in a space of my own on my parent’s property and live

independently. I create routines based on my needs, and I regularly attend therapy. All this has created an environment where, while stressors do happen, I am able to address them in a manner that feels appropriate and mostly comfortable.

Education is the best tool when it comes to creating inclusivity and accommodation. Encouraging empowerment for staff of institutions to make changes or create spaces can be invaluable. Many times, my needs were not met because those who I was asking help from, did not know what they could or could not do, even though they might have wanted to.

I recognize patterns so I am not caught unaware when my mental health takes a nosedive, and my ADHD/Anxiety decides that I no longer have the energy to shower or do laundry regularly, and all I want is to lay in bed. For those times, I create lists. They are not long and taxing lists, but “did you shower today? Did you feed the cats? Have you taken your meds?” These allow me to complete one “regular” task or three, making me feel more human when I feel anything but. This also works during panic spikes. It was not easy to do this when I was young, but I think that as I get older, it becomes simpler.

I feel joy when I cross things off my lists. When I know I have finished a task, I am free to engage in hobbies because the “important” things are finished. This helps me maintain some balance, and I think I trick myself into liking my tasks, because it feels so good to cross them off.

I’d like to disprove the misconception that neurodivergence makes you incapable of taking care of yourself, or that you are lazy, or incapable of something, because the way your brain is wired holds you back. While sometimes these can be true, I think that is typical for most people and is not specifically a neurodivergent trait. It does a disservice to neurotypical and divergent people to treat it as less than or to “other” it.

Lily Prince

My name is Lily Prince, and I am a 21-year-old Cal State LA student. I am majoring in Mass Communication Studies, and I have Autism Spectrum Disorder (ASD), Attention Deficit Hyperactivity Disorder (ADHD), and Obsessive Compulsive Disorder (OCD). The comorbid nature of my neurodivergence has created an experience that I have put into the form of poetry, explicitly highlighting the loneliness that blossoms into thriving and happiness after understanding and acceptance.

A flower budding within the Earth,
My roots were strong and intertwined.
I was one with the force of nature but was different from birth;
My growth was accelerated, my colors still on a grayscale.
The other flowers in the garden had their distinct shades
Ranging from one end of the light spectrum to the other:
Prisms of sensical beauty, I could see their growth and brigades.
Why was I invisible?
Devoid of color and stripped of being the same as the others?
Why was I apparitional?
I could not understand.

For years, I grew, my petals and leaves still sprouting,

Yet still so varying to that of the garden.
Until I learned that not every flower is the same
Or species
Or shade of green;
There should be no shame.

Under diverse conditions, I soon found my colors:
Under different sunshine,
Beneath different water levels,
I flourished and grew alongside the other flowers.
I just needed grace, patience, and time,
Reframing, reshaping, allowing myself to thrive.
Enjoyment in a world not created for me was hard to find,
But I soon formed my own colors,
My own patterns and petals,
For I belonged in the garden the whole time.

The Pathologization of Asociality: The History of Autism and Nazism in the Twentieth Century

Kieran Black

Introduction

Seeing that ‘poor social skills’ are considered a primary identifying trait of autistic persons, the academic field of Communication Studies is directly confronted with the contemporary explosion of interest in Autism Spectrum Disorder (ASD) (Liu et al., 2015). When Cal State LA’s Department of Communication Studies began seeking articles concerning neurodivergence for publication in the *Colloquy*, I wondered how best to contribute as a neurodivergent History student. I concluded that the field’s literature might benefit from a historicized overview of ASD’s clinical pathologization.

Swiss psychiatrist Eugen Bleuler coined the term autism in 1911 (Evans, 2013). However, it was initially ascribed to individuals that would likely be considered schizophrenic in modern parlance. About a decade later, the Soviet child psychiatrist Grunya Sukhareva published the first mass-circulated diagnostic criteria for what would now be considered autism in 1925. Even so, the antiquated terminology remained. Persons meeting her schematics were deemed to be suffering from ‘schizoid psychopathy’ (Sher & Gibson, 2021). Moving into the 1930s and 1940s, Austrian physicians Leo Kanner and Hans Asperger grew into prominent positions under the American government and Nazi regimes, respectively. Kanner himself questioned the ability of words with the root ‘schizo’ to denote persons that would likely now be considered autistic. Thus, a conceptual shift started in mid-century

America via Kanner, but was not canonized until much later, when the DSM-III was published in 1980 (A.P.A., 1980).

During the mid-20th century in central Europe, before autism's clinical canonization, Dr. Hans Asperger attained ever more social, political, and medical influence under the Third Reich in Vienna. As a result of this career, various modern mentalities, conceptions, and feelings people have about Autism remain to be influenced by the Nazi ideology. Central is the fact that asociality, autism's supposed defining trait, became a persecutory category, alongside other demographic qualities and conditions in the Third Reich. Such categories infamously include various racial, sexual, and ethnic identities. Autism was supposedly a similar discrete demographic category that strayed from espoused 'Aryan' ideals of what human beings ought to be, according to Nazi psychology.

This article is organized chronologically, containing three main parts. These sections concern spacetimes before, during, and after the Third Reich's dominion over the city of Vienna, capital of Austria. Vienna is critical to this story because many of the world's leading psychologists, pediatricians, and physicians were practicing there during the early to mid-20th century. In fact, the Nazi regime's invasion of Vienna put an end to their burgeoning field of psychoanalysis. Major figures to contribute to the cities psychiatric infrastructure include Alfred Adler, Erik Erikson, Erich Fromm, Carl Jung, and Sigmund Freud. Freud himself promptly relocated to England following the German annexation of Austria in March of 1938. He passed away the following year (Pollak, 2015). This narrative will exemplify how the clinical diagnosis of autism was initially transformed, and continues to be influenced by the Third Reich. With these introductory matters stated, this paper will start with a discussion on relevant historical progressions occurring before Hitler's annexation of Vienna, Austria in 1938.

Before the Third Reich

To understand how autism would eventually be pathologized during the Third Reich's control of Austria, this paper provides a review of some preceding German philology, namely that surrounding the word *gemut*. A nuanced and highly situational term, it is infamously difficult to translate throughout centuries of German literature. In this case, however, the word became employed quite precisely by Nazified child psychiatrists. It contextually refers to an individual's innate proclivity to

form relationships. This quality was considered essential to the perpetuity of the German *Volk* (people) and nation-state.

As German is an agglutinative language, an enormous number of related words were clinicized containing *gemut* such as: *gemutskalt*, *gemutlos*, *gemutsarm*, *gemutsmangel*, (which took on increasingly negative connotations in Nazi physician rhetoric) and *gemutstiefe*, *gemutsreichtum*, *gemutsbegabung*, *gemutsleben*, *gemutspflege*, and *gemutsbildung*. The latter were considered favorable conditions. This vertiginous array of terminology took on increasingly important roles in Nazi diagnostic criteria. This was initially set in motion by a German judge and psychiatrist Paul Schroder and Dr. Heinze's 1932 publication *On the Phenomenology of Gemut* (Sheffer, 2018). With the necessary philology expounded, this paper will proceed to examine the history.

Before the Third Reich conquered Vienna, autism was a recognized yet not a pathologized condition, identified by medical professionals. This can be seen in the work of various pioneering psychologists and physicians such as Kanner, Frankl, and Weiss. Rather than making autism a sociopolitical category subject to 'medical' persecution, physicians like these essentially treated autism as they would any other physiological condition. To understand how and why this changed, the preexisting medical infrastructure of 1920s Vienna is significant to explore. Furthermore, examining the careers of Hans Asperger and Franz Hamburger, before the creation of the Third Reich in 1933, can provide additional insight.

During the 1920s, Vienna's socialist municipal government initiated an ambitious social welfare program (Gruber, 1991). This cultural movement inspired Erwin Lazar, a pediatrician at the University of Vienna Children's Hospital, to get involved. He was concerned with centralized governments haphazardly handling troubled youths. Within that newly created institution called the Curative Education Clinic, 'dissociability' was a leading diagnosis among youths, about 1/3rd having the term in their files (Gruber, 2018). So-called 'disciplinary disorders' were similarly prominent. The line between psychiatry and social engineering became increasingly muddled. Ironically, Lazar's positive intentions would go on to creating the horrific children's psychiatric clinic, the Curative Education Clinic at the University of Vienna Children's Hospital. Eventually Hans Asperger became the head of the same Clinic. One of the most important events occurring in pre-Nazified Vienna was the removal of many Jewish physicians and intellectuals who contributed heavily to the field's body. This was done

by Hamburger in 1929, following the death of Clemens von Pirquet, who had previously held Hamburger's post (Czech, 2020). Foremost among the replacements was Hans Asperger, a young man who had moved from the rural hamlet of Hausbrunn to metropolitan Vienna, in pursuit of an 'elite' medical education (Czech, 2020).

In 1931, having just completed his medical education, Hans Asperger was hired. He was rapidly promoted to become the head of the Curative Education Clinic in 1932. This was done because of his good standing with the Third Reich, rather than any specialized pediatric, psychiatric, or otherwise medical expertise, evidenced by the fact that there were many candidates with more robust qualifications vying for the position. Just as noteworthy was that Asperger's dissertation was on rote biochemistry (Pollak, 2015). Once Nazi sympathizers were in control of Vienna's medical infrastructure, the history of clinical autism was irrevocably altered.

During the Third Reich

The initial Nazification of Vienna was a five-year process that took place from 1933 to 1938. Once Adolf Hitler assumed leadership of Germany in 1933, the goal of Austrian unification became explicit (Shirer, 1976). The following year, Austrian Nazis, intending to forward that cause, assassinated then-Chancellor Engelbert Dollfuss. The momentum continued apace. In mid- to late 1930s an astounding three-quarters of all Viennese psychologists left the city, due to the dangerous political situation evolving around them (Sheffer, 2018). Finally in early 1938, the Third Reich held a faux referendum at gunpoint to ensure their geopolitical aims. Vienna remained Nazified until the Second World War ended in 1945.

The history of medicine was irrevocably altered. The increasingly Nazified medical industry in Vienna went on to promote physicians who were sympathetic to Hitler's radical ideologies. Following the preceding mass exodus of medical doctors from Vienna, approximately half of all physicians in Nazi-occupied Austria joined the National Socialist Party (Ash & Söllner, 2002). Perhaps the two most important were the aforementioned Franz Hamburger and Hans Asperger. The latter classified 'autism' as a form of psychopathy just a few months after the initial Nazification of Vienna. In a powerful exemplification of Foucault's 'discourses and power' theory of

‘historical epistemes,’ Asperger tailored the language of his medical studies to the increasingly powerful Third Reich.

Because the Third Reich was an extremely collectivistic society, the rapid cultural assimilation of minors was considered essential to its political success. The confluence of these two sociopolitical factors meant that the Nazis took the existence of dissident children’s groups or ‘gangs’ very seriously. In 1939, 98% of all children living in the Third Reich had become members of the Hitler Youth (Rempel, 2015). In addition to politically privileging particular physical characteristics, the Nazis also wanted to control the flow of ideology and social mentalities.

Perhaps the most harrowing instance of Nazism’s influence on autism’s legacy concerns their remarkably robust and comprehensive child ‘euthanasia’ program. The mass murder of children was Hitler’s first deadly eugenicist project. While initially intended only for ‘exceptionally deformed’ infants and children aged three and under, that limit rose all the way to age 16 and under (Browder, 1996). As a result, Nazi child ‘euthanasia’ programs led to the death of over 250,000 people (Friedlander, 2000).

Adolf Hitler initiated this child ‘euthanasia’ program in September of 1939. One principal arm of this campaign was Hamburger’s ‘Advising’ Program for Mothers. Between the following month, October 1939 and July of 1940, over 5000 persons aged 14 and under were considered ‘genetically unfit.’ Such youths found themselves in detention centers, sterilized like cattle, as well as in adult concentration camps, where they to pass their 18th birthday. Vienna’s Spiegelgrund clinic played a significant role. They began killing children in August of 1940 (Sheffer, 2018).

A Director of Spiegelgrund, Ernst Illing, would go on to say that the executions of children he oversaw did not weigh on his consciousness because “none of the children would, in my opinion, ever be remotely capable of education or work” (Weindling, 2017). This is perhaps the most unambiguous indication of the eugenicist nature and morally bankrupt ‘utilitarianism’ of pathologized autism. The Clinic was eventually flattened, like the Reich, as a result of massive bombing campaigns by The Allies in 1945. Despite this physical destruction, much of their psychological constructions remained influential.

During the same period as the Third Reich, a panoply of physicians, not associated with Germany, described the likely considerations of autistic persons in a far less dehumanizing manner.

Perhaps chief among these were Anni Weiss and Georg Frankl, Jewish physicians born in 1897. They eventually married, following their exile from the Third Reich. Weiss' 1935 article focused on Gottfried K., a nine-year-old boy having trouble acclimating himself to social environments, such as those at school (Weiss, 1995). Rather than dehumanizing people in their articles by describing them as 'autistic psychopaths,' Frankl and Weiss infantilized them, characterizing them as neurodevelopmentally handicapped. This attitude, while seemingly more appropriate for the physician, was hindered by the geopolitical aims of the Third Reich.

After the Third Reich

Asperger understandably distanced himself from both clinical autism and Nazism following the end of World War II. He did not publish a single piece of work on the former subject for 35 years, until 1979 (Frith, 1991). His work was still largely unknown in the English-speaking world when he died in 1980. Since 1943, the Anglosphere's primary conception of autism had been Leo Kanner's (1943), influenced by Frankl and Weiss, when he published his article in *The Nervous Child*. This remained true until British psychiatrist Lorna Wing started referencing Asperger's work in 1981 (Yoshida, 2013). Continuing in this direction, a decade later in 1991, German psychologist Uta Frith (1991), then working in London, translated Asperger's 1944 publication *Die Autistischen Psychopathen im Kindesalter* (*The 'Autistic Psychopaths' in Childhood*). The ramifications on clinical psychology in the English-speaking world were profound. According to America's Center for Disease Control (CDC), rates of autism increased fivefold domestically during 1985-1995 (Sheffer, 2018). This period coincides with the popularization of Asperger's clinical diagnostics.

Just three years later in 1994, the American Psychiatric Association (APA) (1994) opted to add Asperger's disorder to the new DSM-IV. After nearly two decades of resultant controversy, in 2013, Asperger's disorder was removed from the DSM-V (APA, 2022). In its place, Asperger's disorder and three other conditions were amalgamated into the new 'ASD' diagnosis. Even so, the diagnosis of 'Asperger's Syndrome' is used internationally due to its inclusion in the World Health Organization's (1992) standard text, the *International Classification of Diseases*. This point however is not raised to absolve the APA from the problematic implications of their ASD diagnosis. The

criteria put forth by the APA have echoed rhetorical similarities to various Nazi physicians. From 1994 to 2013, persons diagnosed with pervasive development disorder (PDD), which included both Autism and Asperger's, were often slotted into 'low,' 'middle,' and 'high' functioning categories by educational and medical professionals (Sheffer, 2018).

Conclusion

A cursory reading of early 20th century history shows the alarming extent to which persons of immense authority maintained eugenicist ideologies. One such area perturbed by this was the burgeoning of psychology, with Autism Spectrum Disorder being an increasingly important diagnosis within the field. Nazis exercised an unfortunately considerable influence on posterior conceptions of autism. The negative perceptions and ostracism of autistic persons are yet echoed by modern 'utilitarian' notions of autists being a burden on broader society.

The Information Sector of the economy has primarily pushed interest in the utility of autistic persons due to their contributions to computer sciences, economics, and other intellectual disciplines. Such discourse is eerily similar to prior problematic thinking surrounding Asperger's eponymous 'condition.' He similarly bifurcated 'autistic psychopaths' into those considered helpful to the state (described as engineering and scientific minds) and the so-called 'irremediable.'

The creation and dissemination of diagnostic criteria related to autism exemplify the extent to which medical definitions are informed by shifting sociopolitical currents. In addition,, Autism Spectrum Disorders are but some of the dozens of clinical diagnoses influenced by psychologists and physicians, happening to work within the historical paradigm of Nazi Germany. Thus, communication scholars and psychologists confronted with the contemporary explosion of interest in Autism Spectrum Disorders should bear in mind its nuanced and politicized history.

References

- American Psychiatric Association. (1980). Diagnostic and statistical manual of mental disorders (DSM-III).
- American Psychiatric Association. (1994). *Diagnostic and Statistical Manual of Mental Disorders: DSM-IV*. American Psychiatric Publishing.
- American Psychiatric Association. (2022). *Diagnostic and statistical manual of mental disorders*, 5.
<https://doi.org/10.1176/appi.books.9780890425787>
- Ash, M. G., & Söllner, A. (2002). Forced migration and scientific change: emigré German-speaking scientists and scholars after 1933. *Cambridge University Press*.
- Browder, G. C. (1996). Hitler's enforcers: the Gestapo and the SS security service in the Nazi revolution. *Oxford University Press*, USA.
- Czech, H. (2020). Hans Asperger und der ationalsozialismus: Konturen einer Kontroverse. *Monatsschrift Kinderheilkunde*, 168(3), pp. 163–175.
<https://doi.org/10.1007/s00112-020-00947-3>
- Evans, B. (2013). How autism became autism. *History of the Human Sciences*, 26(3), pp. 3–31. <https://doi.org/10.1177/0952695113484320>
- Friedlander, H. (2000). The origins of Nazi genocide: From euthanasia to the final solution. *University of North Carolina Press*.
- Frith, U. (1991). Autism and Asperger syndrome. *Cambridge University Press*.
- Gruber, H. (1991). Red Vienna: experiment in working-class culture, 1919-1934. *Oxford University Press*, USA.
- Kanner, L. (1943). Autistic disturbances of affective contact. *The Nervous Child*, 2, pp. 217–250. <http://ci.nii.ac.jp/naid/10018378330>
- Liu, Y., Moore, D. W., & Anderson, A. (2015). Improving social skills in a Child with Autism Spectrum Disorder through Self-Management Training. *Behaviour Change*, 32(4), 273–284.
<https://doi.org/10.1017/bec.2015.14>
- Pollak, A. (2015). Auf den Spuren Hans Aspergers: Fokus Asperger-Syndrom: Gestern, Heute, Morgen. *Schattauer Verlag*.

Rempel, G. (2015). Hitler's children: the Hitler youth and the SS. *UNC Press Books*.

Sheffer, E. (2018). *Asperger's Children: The Origins of Autism in Nazi Vienna*. W. W. Norton & Company, pp. 88-89.

Sher, D. A., & Gibson, J. L. (2021). Pioneering, prodigious and perspicacious: Grunya Efimovna Sukhareva's life and contribution to conceptualising autism and schizophrenia. *European Child & Adolescent Psychiatry*, 32(3), pp. 475–490. <https://doi.org/10.1007/s00787-021-01875-7>

Shirer, W. L. (1976). 20th century journey: the nightmare years, 1930-1940. *Boston: Little Brown & Company*.

Weindling, P. (2017). *From clinic to concentration camp: Reassessing Nazi Medical and Racial Research, 1933-1945*. Routledge.

Weiss, R. S. (1995). *Learning from strangers: The Art and Method of Qualitative Interview Studies*. Free Press.

World Health Organization. (1992). The ICD-10 classification of mental and behavioural disorders.

World Health Organization. (n.d.) Clinical descriptions and diagnostic guidelines.

Yoshida, Y. (2013). Disclosure of the autism spectrum. *PubMed*, 115(6), pp. 616–622. <https://pubmed.ncbi.nlm.nih.gov/23944119>

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