

NEURODIVERSITY LINGO: *A POCKET GUIDE*

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Diving into the Neurodiversity-Affirming Movement meant entering a whole new world of ideas about Autism & ADHD. But navigating the jargon in blogs and forums? Not so easy.

Ever heard of "spoons" or "Neurotypical"? Yeah, I hadn't either! So, I made a Pocket Guide that I hope will decode the buzzwords you'll often find in Neurodiversity advocacy groups, books, and other helpful resources.



Ableism

Social prejudice against people with disabilities, based on the belief that typical abilities are normal or superior. Can involve discrimination through harmful stereotyping, misconceptions, and generalisations about people with disabilities. Ableism results in othering and leads to perceptions of disabled people being lesser in society. *Example: A teacher believes that Jack (an Autistic person) must be coached to make eye contact because this is a normative expectation for social development.*

Actually Autistic

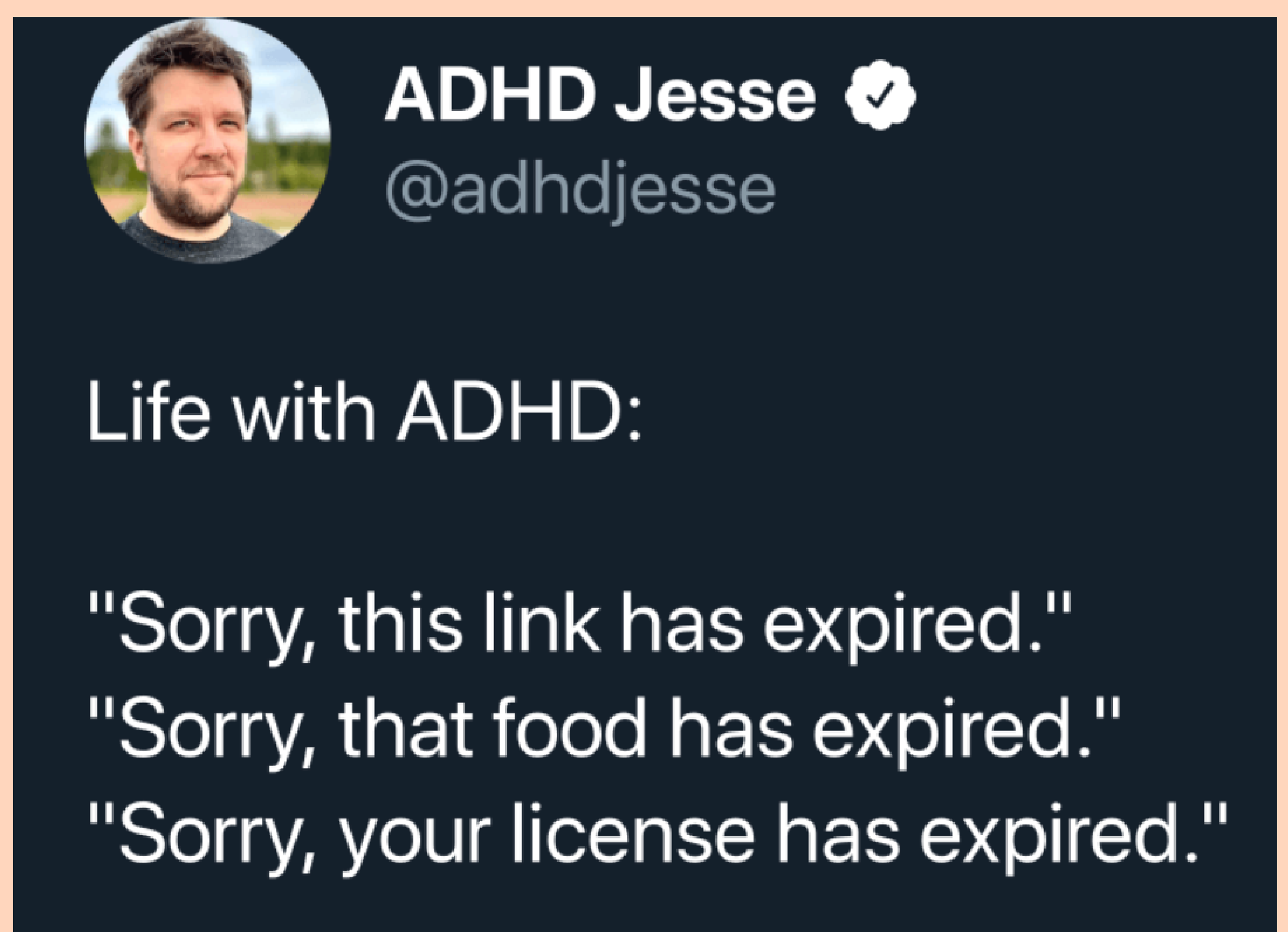
#ActuallyAutistic refers to the importance of Autistic people themselves being actively involved in conversations about Autism, including funding allocation, research, media representation, and more. The intent is to ensure that the voices of those with lived experience of Autism are heard. *Example: "Ashley is an 'Actually Autistic' researcher who will be presenting on their newest publication and their own lived experience".*

ADHDer

Shorthand for a person with ADHD. *Example: Sarah is an ADHDer*

ADHD Tax

The accumulated cost of living with ADHD. Inattentiveness, disorganisation, and other executive functioning challenges can lead to frequent late fees, replacing lost items (e.g., headphones), impulsive purchases, retaking tests due to failing initially (e.g., university), and much more. *Example: (depicted)*



ADHD Paralysis

Struggling to start or concentrate on tasks because of overwhelm, or challenges with organisation, prioritisation, and more may lead to avoiding tasks, procrastinating, or heightened anxiety, affecting one's ability to finish necessary activities. *Example: Jess postpones her assignment until final moment, relying on stress to help her focus*

Allistic

Refers to a non-Autistic person. Used to differentiate people who are Neurodivergent, but not Autistic. *Example: An ADHD individual would be classed as Allistic if there is no co-occurring diagnosis of Autism.*

AuDHD/er

Autism and ADHD commonly co-occur leading to dual diagnosis. People who are both Autistic and ADHD sometimes refer to themselves as AuDHD, or an AuDHDer, as shorthand. *Example: Anna is an AuDHDer*

Autistic burnout

An experience of intense physical, mental, or emotional exhaustion, often accompanied by a loss of skills (e.g., ability to work, verbal abilities). Autistic burnout results from the cumulative effect of navigating a world designed for Allistic/non-Autistic brains. *Example: Georgia is absent from work this week due to Autistic burnout"*

Dopamine references

Research into the role of Dopamine in ADHD is ongoing, but brain imaging studies have highlighted abnormalities of dopamine transmission. Therefore, ADHDers commonly make references to the perceived role of Dopamine in their lives. *Example: "The Dopamine ran out!" or "This activity is giving me ALLL the dopamine!"*

Hyperfixation

When an individual (particularly an ADHDer) becomes intensely engrossed in something. Hyperfixations are intense, but do not often endure as long as an Autistic Special Interest. They spark a flurry of interest and 'dopamine', often distracting the person from doing other important tasks. ADHD people are more likely to move between different areas of hyperfixation, rather than having one extended interest long term.

Hyperfocus

Highly focussed attention that lasts an extended period of time and is all engrossing. Can occur in conjunction with hyperfixation or Autistic special interest. However, during hyperfocus there is usually direction and goal focus. The entire world can become blocked out and the person may have extreme challenges transitioning to other activities because all their attention is being directed elsewhere at a chemical level. This can lead to difficulties completing usual routines and initiate subsequent conflict with others. However, when supported hyperfocus can be an extremely pleasurable state and an asset for an ADHDer.



Identity first vs person-first language

Debates within disability sector about preferred language. Essentially, the question is: should the person's name preface the disability, or should the disability preface the person. The case for both is presented here:

- **Identity-first language:** Puts a person's disability identity before reference to the person. Many people with disability prefer to use Identity-First language because they see their disability as a key part of who they are. Identity-First language is used to show connection to the disability community, demonstrate disability pride, and emphasise that it is society (not the disability itself) that is disabling. Examples: "Colin IS Autistic", "Rachel is disabled"
- **Person-first language:** puts the person before their disability. Person-first language was first used to emphasise a person's right to an identity beyond their disability. Examples: "Colin HAS Autism", "Rachel HAS disability",

Please note: Research highlights that the strong preference among Autistic adults is Identity-First language (Taboas et al., 2023). Example "Rachel IS Autistic".

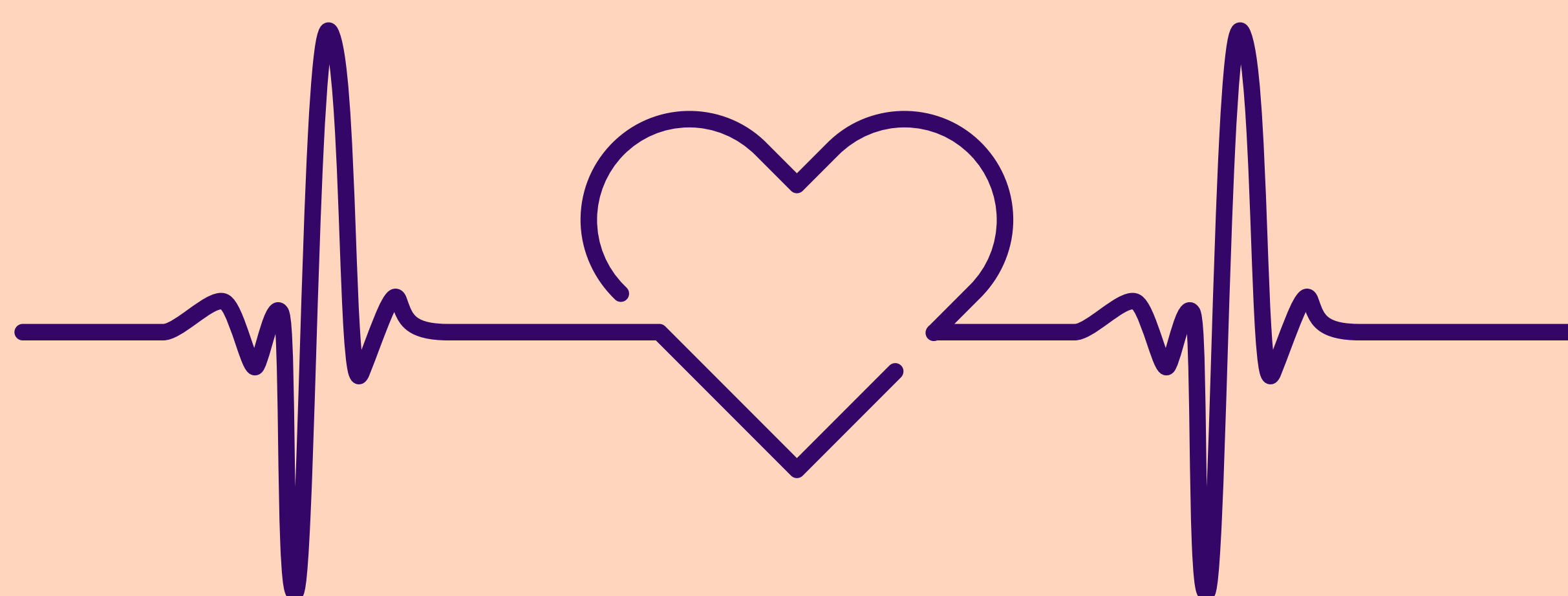
Infodumping

Autistic and ADHD people enjoy sharing their interests with others but often get so excited in the process that they may give too much information to the listener all at once (without drawing breath!). The intention is to help the other person feel as much joy about the subject as they do. However, it can be misinterpreted as monologuing and rudeness. This can be sad for Autistic/ADHD, contributing to hiding interests in future to avoid social rejection. *Example: Tom loves football and knows every stat! He excitedly tells a friend all about his favourite team, only to find his friend's eyes have glazed over due to Tom's infodumping...*



Interoception

Interoception refers to the sense of the internal state of one's body. It involves perceiving signals from organs and tissues, such as sensations of hunger, thirst, heartbeat, and proprioception (awareness of the body's position in space). All areas of interoception can be experienced differently for Neurodivergent people, requiring tailored supports. *Example: Charlie has low proprioceptive awareness, leading them to constantly bump into other people and objects in the room. They also struggle to notice toileting urges and have frequent accidents . They require interoceptive support.*



Lived Experience

Instead of relying solely on medical or diagnostic perspectives, lived experience places emphasis on the day-to-day realities, insights, and expertise of individuals who navigate the world as a Neurodivergent person. It promotes the idea their insights are valuable and should be considered in discussions about policies, accommodations, and societal attitudes toward Neurodiversity. Lived experience is a way of acknowledging the richness and diversity of individual experiences within the broader context of Neurodiversity.

Masking

Masking (AKA Camouflaging) refers to the learnt process whereby Autistic people mimic socially desirable behaviours, and suppress socially undesirable Autistic traits, due to fear of social rejection and desire to fit in. Masking is strongly associated with negative mental health outcomes including; 1) Burnout from energy required to constantly monitor and change social behaviour, 2) low self-esteem and challenges forming one's own identity, 3) suicidal ideation due to beliefs about being defective/different, and 4) isolation due to social connections being based on superficial structures rather than meaningful connection

Neurodivergent

A person whose mental or neurological function differs from what is considered typical or normal neurocognitive abilities

Neurodiversity

The range of differences in individual brain function and behavioural traits, regarded as part of normal variation in the human population.

Neurokin/Neurotribe

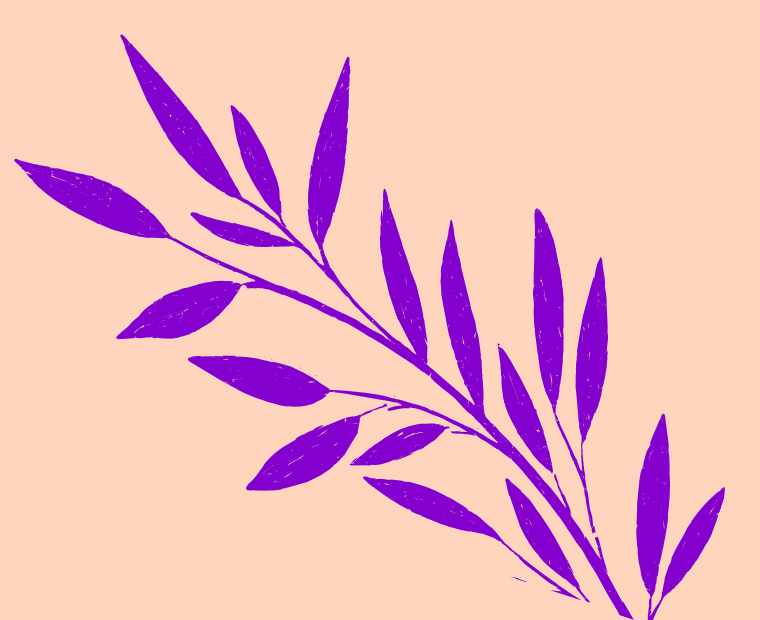
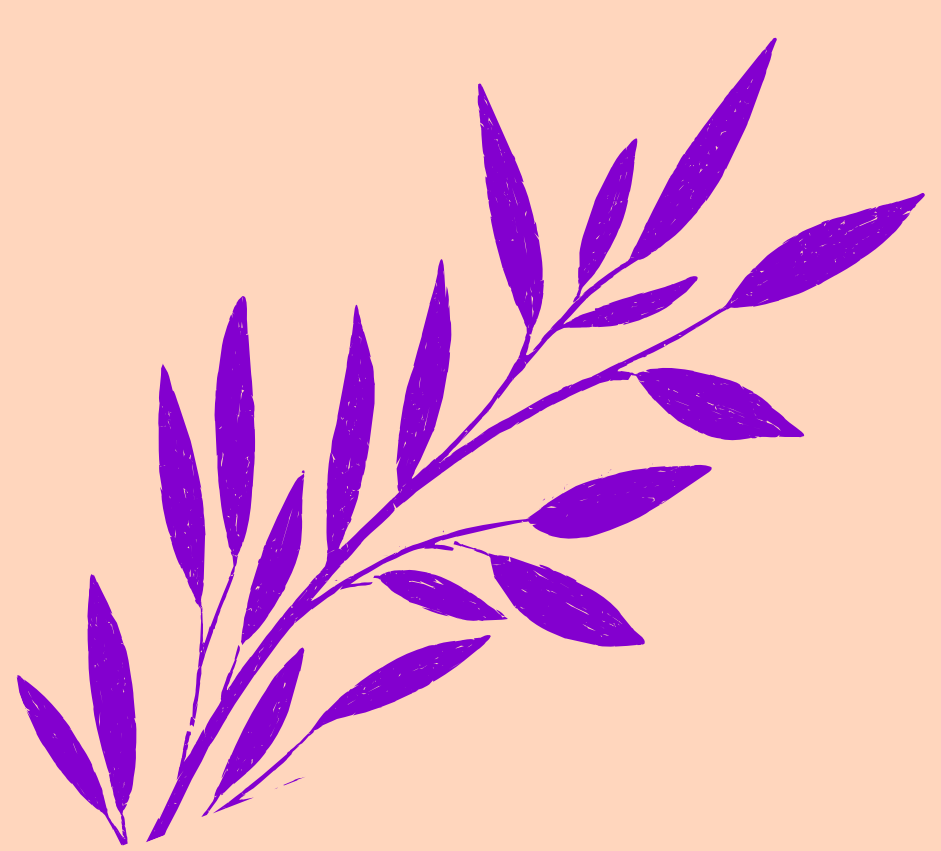
Commonly used to refer to groups of people who identify as having the same Neurotype (e.g., a group of people who all identify as Autistic).

Neurotype

A type of brain, in terms of how a person interprets and responds to social cues (e.g., Autism would be one Neurotype, ADHD another etc.)

Neurotypical

Not displaying or characterised by Autistic, ADHD, or other neurologically atypical patterns of thought or behaviour.



Nothing about us without us

Emphasises the importance of including the perspectives and voices of the affected individuals or communities in discussions and decisions that impact them. In the context of neurodiversity or disability rights, it means that policies, practices, and discussions should involve and consider the input of individuals with lived experiences of neurodivergence or disability. It's a call for inclusivity, respect, and genuine collaboration, recognizing that those directly affected by certain issues are the ones who best understand their needs and can contribute meaningfully to solutions.



On the Spectrum

Autism is known as a “spectrum” because there is wide variation in the type and impact of symptoms people experience. The term Spectrum continues to be largely used, although many advocates are pushing away from this language.

Rejection Sensitivity Dysphoria (RSD)

Experiencing severe emotional pain because of failure or feeling rejected by others. Very common among ADHD individuals who frequently receive negative feedback about themselves from others. RSD is not a diagnostic term – it is largely used as a shorthand within the community to refer to feelings of shame and social rejection. *Example: “My RSD is really strong today because my new boss told me I wasn’t working fast enough”.*

Sensory Overload

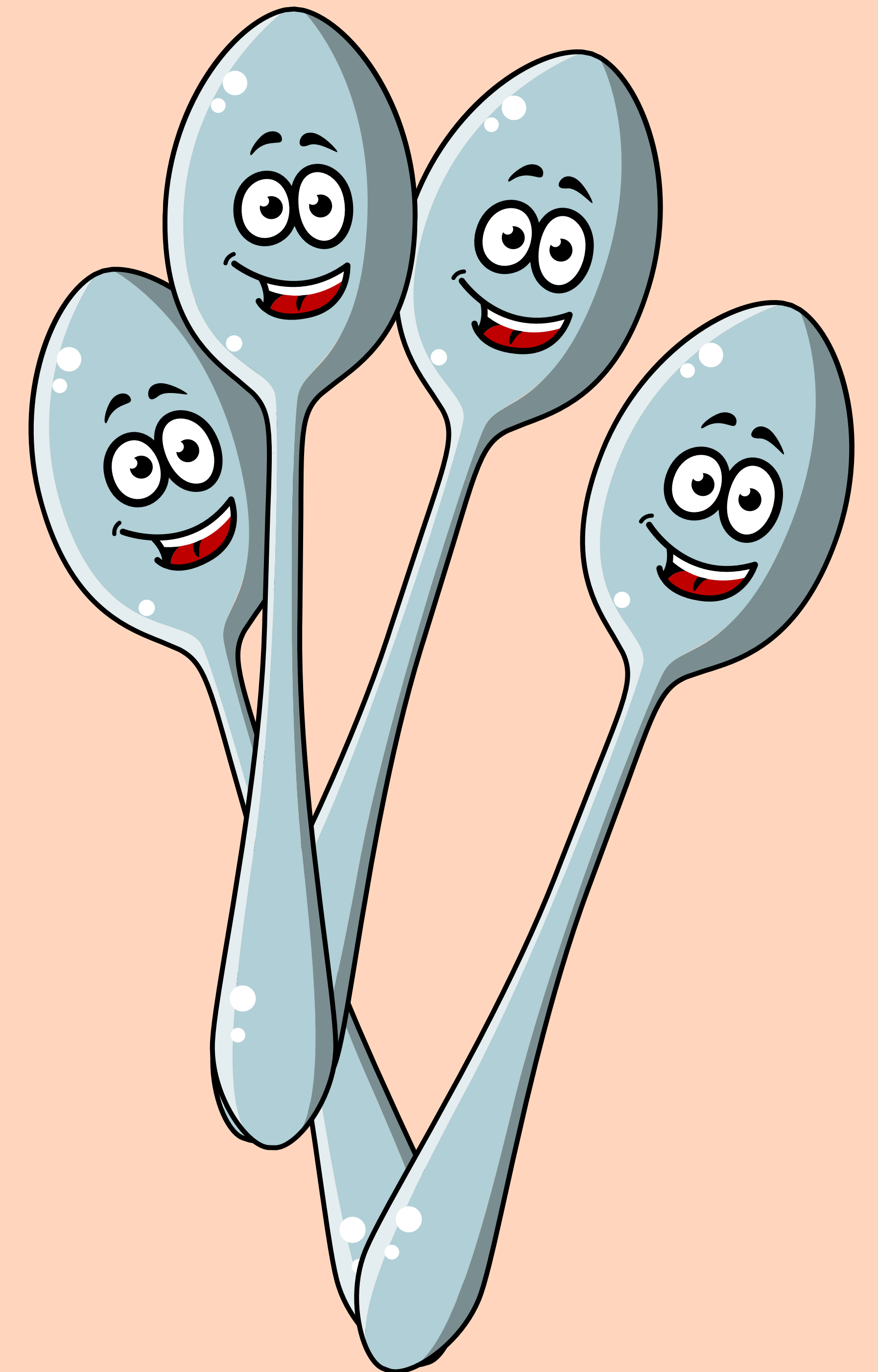
When you’re getting more input from your senses than your brain can sort through and process (very common among Autistic people). Can contribute to significant distress including shutdowns and meltdowns. *Example: Erica experienced sensory overload in the supermarket. She found the noises, smells, and lights overwhelming, on top of the need for social interaction. She had a panic attack in her car before driving home”.*

Special Interests (AKA Splns)

“Special Interest” is referred to in the DSM-V TR Autistic diagnostic criteria in a deficit focussed way, emphasising that Autistic people’s interests are ‘restricted, repetitive, atypical’. However, the term Special Interest (shortened to Spln) has been reclaimed by Autistic communities to celebrate their unusual interests and passions. Splns are highly focussed interests on a certain topic and are a source of life, passion, and more for Autistic people. Splns are ESSENTIAL to wellbeing for an Autistic person! Internationally, some Autistic people prefer the word “Passion”, but in Australia Spln is mostly preferred.

Spoons

A reference to “*Spoon Theory*” (developed by Christine Miserandino), it is a metaphor often used in the context of chronic illness or disability to explain the limited amount of energy or “spoons” that an individual has available for daily activities. Each morning, a person with a chronic illness or disability starts the day with a certain number of spoons, which symbolise the energy reserves for that day. Every activity, from getting out of bed to more demanding tasks, requires the expenditure of a certain number of spoons. The significance of the Spoon Theory lies in illustrating the finite nature of energy for individuals with chronic conditions. Once a person runs out of spoons, they may not have the energy to engage in additional activities, and they might need to rest or prioritize self-care to replenish their energy for the next day. *Example: “I have no spoons left for going to the party! I’ve used my last one and I’ll end up in Autistic burnout”.*



Stim/Stimming

Repetitive motor movements (including rocking, toe-walking, hand flapping, and more) that are self-regulating. Stimming is thought to provide a soothing rhythm which can support the body to regulate during periods of overstimulation (particularly due to sensory stimuli), overwhelm, and distress. Every human stims but AuDHD stims are often more noticeable.

OUTDATED LANGUAGE

A quick word on some outdated language/terms that are not longer in use:

- **Asperger’s Syndrome:** Originally, Autism diagnosis was separated into *Asperger’s Syndrome* or *Autism Spectrum Disorder*. However, all traits now fall under the umbrella term of Autism. Asperger’s Syndrome has not been a diagnostic label since the introduction of the DSM-V in 2013. Further, Hans Asperger has historical links to experimentation on children during WWII. Many Autistic people find being referred to as “Asperger’s” offensive for these reasons. However, Autistic people diagnosed before 2013 may still have attachment to the term “Aspie” or “Aspergers” and this also needs to be respected.
- **Functioning Labels:** *Low Functioning* and *High Functioning* labels for Autism were introduced in the 1980s as part of diagnostic criteria. It has been recognised these terms are embedded in ableism by comparing Autistic people against how well they pass as being ‘neurotypical’. Whilst no longer formally used, the terms remain in our lexicon. Advocates are working to re-educate people and ask for labelling of the person’s support needs, instead of themselves as a person.
 - Low functioning: Implies someone is ‘lesser’ as a human and can lead to their voice being minimised, needs being ignored, and risk of institutionalisation.
 - High functioning: Minimises the debilitating impacts of masking and daily fatigue/burnout. Increases the risk of support needs being unmet, and mental health crises and suicidal ideation going unnoticed.