Neurodiversity-Affirming

3 Layers of Autism

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Three Layers of Autism

I like to conceptualize autism as comprised of three separate layers.

This idea came to me as I was recalling paging through my grandmother's encyclopedias when I was younger. I really liked the one about whales (because whales are awesome) and the one on human anatomy that contained the transparencies where you could overlay different parts from the skeleton to muscles to circulatory system to skin/clothes.

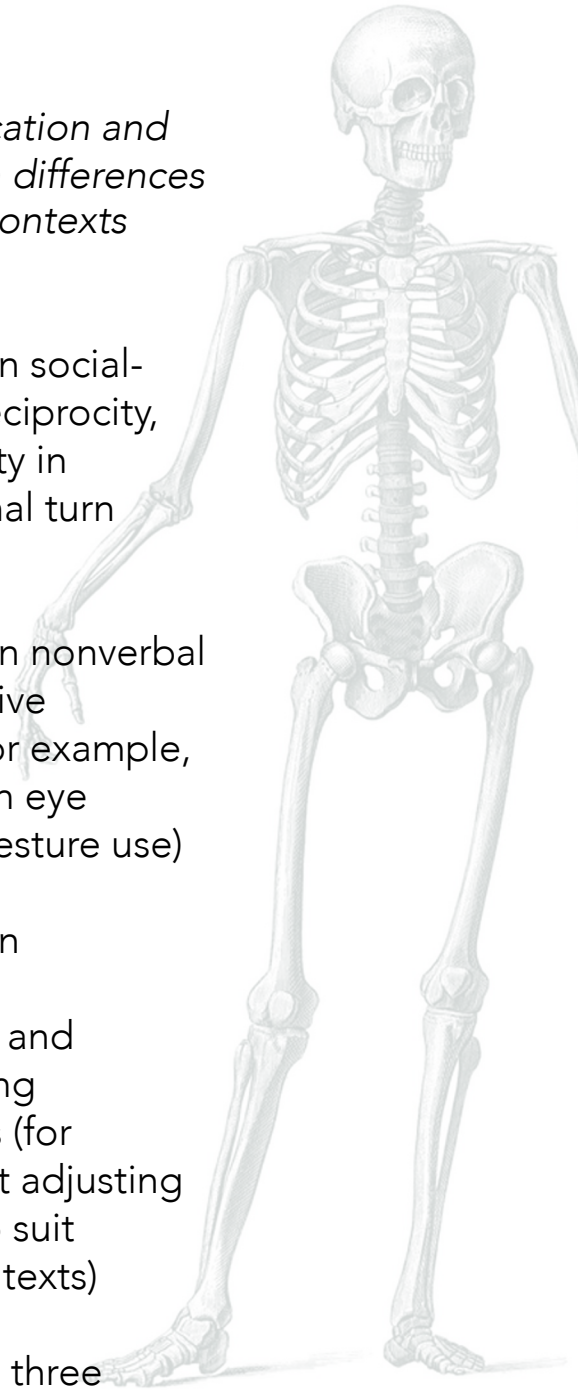
When I conceptualize autism, and neurodiversity more broadly, I think of it like those transparencies.

The skeleton is a metaphor for the diagnostic criteria as outlined in the Diagnostic and Statistical Manual (DSM).

You then overlay this with the musculature system, which includes the things that the person experiences that may or may not be a part of the DSM criteria.

Finally, the overlay with the skin and clothes represents the mask or the concept of self that one presents to the world.

Layer 1: The Skeleton of the DSM



Social communication and social interaction differences across multiple contexts which looks like:

1. Differences in social-emotional reciprocity, (e.g., difficulty in conversational turn taking)

2. Differences in nonverbal communicative behaviors (for example, differences in eye contact or gesture use)

3. Differences in developing, maintaining, and understanding relationships (for example, not adjusting behaviour to suit different contexts)

Need to meet all three criteria above

Restricted, repetitive patterns of behavior, interests, or activities which looks like:

1. Repetitive motor movements, use of objects, or speech (e.g., lining up objects)

2. Insistence on sameness, need for routines, or rituals (e.g., need to go to work using the same route each day)

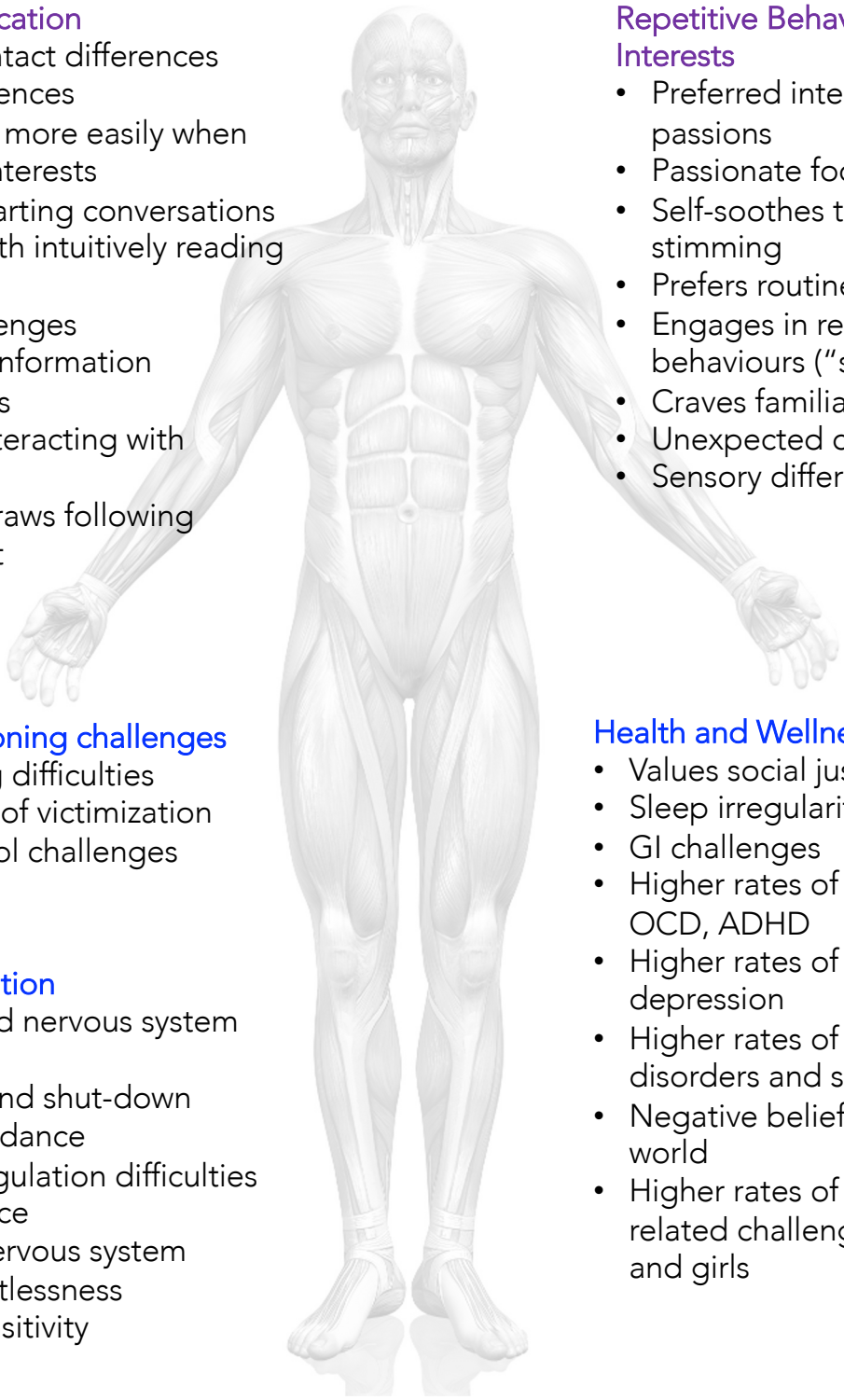
3. Preferred interests that are intense or focuses (e.g., a lot of knowledge on a specific topic)

4. Hyper- or hypo-reactivity to sensory input (e.g., aversion to certain textures)

Need to meet 2 or 4 above criteria

(APA, 2013)

Layer 2: Soft Tissue of Autism



Social Communication

- Gaze/ eye contact differences
- Gesture differences
- Makes friends more easily when have shared interests
- Differences starting conversations
- Challenges with intuitively reading social cues
- Intimacy challenges
- Over sharing information about interests
- Challenges interacting with strangers
- Socially withdraws following stress/burnout

Repetitive Behaviours and Interests

- Preferred interests and passions
- Passionate focus
- Self-soothes through stimming
- Prefers routines
- Engages in repetitive behaviours ("stimming"
- Craves familiarity & routine
- Unexpected changes stressful
- Sensory differences

Executive functioning challenges

- Task-switching difficulties
- Increased risk of victimization
- Impulse control challenges

Emotion Regulation

- Interest-based nervous system
- Dissociation
- Overwhelm and shut-down
- Demand avoidance
- Emotional regulation difficulties
- Hyper-vigilance
- Overactive nervous system
- Irritability, restlessness
- Rejection-sensitivity

Health and Wellness

- Values social justice
- Sleep irregularities
- GI challenges
- Higher rates of anxiety, bipolar, OCD, ADHD
- Higher rates of unaliving & depression
- Higher rates of eating disorders and substance abuse
- Negative belief of self and world
- Higher rates of hormone related challenges in women and girls

(Examples under each category - not an exhaustive list; with info from Neff, 2024)

Layer 3: The Mask of Autism

Compensation

- Copy other peoples' behaviours, body language, or expressions
- Research how to use social skills
- Create scripts to help navigate social situations
- Watch others (including on media) to learn or understand social skills
- Use behaviours learned from watching other people interact
- May repeat phrases exactly as others have said them
- Practice making facial expressions or using body language

Masking

- Focused on own facial expressions and body language in social situations
- Adjust facial expressions to appear relaxed and/or interested
- Adjust body language to appear relaxed and/or interested
- Feel need to make eye contact with others, even if they don't want to
- Thinking about the impression made to others
- Avoid talking about preferred interests
- Avoid stimming in public
- Go along with changes even if uncomfortable

Components of the Mask

1. Compensation: Mimicking neurotypical behaviours to navigate social interactions
2. Masking: Actively suppressing autistic traits
3. Assimilation: Push self to engage in behaviours that do not feel comfortable

Assimilation

- May feel conversation doesn't naturally flow
- May play a role versus being authentic in social situations
- May need support of others (e.g., partner, friend) to socialize
- Engage in small talk
- Make eye contact
- Feel a sense of "performance"

(With information from Hull et al. 2019)

About the author

Lori Sacrey is a registered psychologist in the province of Alberta, Canada. She focuses on helping her clients manage their perceived challenges from a neurodiversity-affirming lens.

Lori also has a PhD in neuroscience and works as a research associate at the University of Alberta, where she continues to engage in research and stay up to date with the latest findings.

References:

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