



Western Michigan University
ScholarWorks at WMU

Honors Theses

Lee Honors College

12-11-2023

Honoring Neurodiversity as an Occupational Therapist

Haley Munson
Western Michigan University

Follow this and additional works at: https://scholarworks.wmich.edu/honors_theses



Part of the Occupational Therapy Commons

Recommended Citation

Munson, Haley, "Honoring Neurodiversity as an Occupational Therapist" (2023). *Honors Theses*. 3772.
https://scholarworks.wmich.edu/honors_theses/3772

This Honors Thesis-Open Access is brought to you for free and open access by the Lee Honors College at ScholarWorks at WMU. It has been accepted for inclusion in Honors Theses by an authorized administrator of ScholarWorks at WMU. For more information, please contact wmu-scholarworks@wmich.edu.



Honoring Neurodiversity as an Occupational Therapist Honors Thesis

Haley Munson

Michelle Suarez, PhD, OTRL and

Ben Atchison, PhD, OTRL, FAOTA

Western Michigan University

Department of Health and Human Services

Abstract

The purpose of this study is to discover if and how current occupational therapists use neurodiversity affirming practices through their work with clients that identify as neurodivergent. Neurodiversity refers to variations in cognitive functioning that are considered normal since no two brains function the same. Occupational Therapists (OTs) frequently work with clients that identify as neurodiverse, including with individuals with diagnoses such as autism, ADHD, dyslexia, and sensory processing disorder. This study uses a qualitative approach with a semi-structured interviews to gain insight into OT's integration of ND affirming principles into practice. Learning how OT's implement ND affirming practices will educate current and future generations of Occupational Therapists.

Background

Neurodiversity is defined as “the range of naturally occurring cognitive variations in humans, encompassing differences in thinking styles, processing modes, and neurological conditions. It represents a paradigm shift from perceiving these variations as pathologies or deficits to recognizing them as intrinsic aspects of human diversity” (Singer, 1999). Signer conducted research related to neurodiversity and published her thoughts and findings in 1999. This is where the movement first began. Her work followed the thesis she wrote based on her firsthand experience of being a woman on the autism spectrum. Since this publication, many view neurodiverse individuals as having differences rather than deficiencies or disabilities (Doyle, 2020). People who are neurodivergent often are given diagnoses of autism spectrum disorder (ASD), attention deficit hyperactivity disorder (ADHD), developmental coordination disorder (DCD), and dyslexia (Doyle 2020).

Occupational therapists frequently work with individuals who identify as neurodivergent. occupational therapy is a client- focused healthcare profession whose main concern is improving the client's health and well-being through occupation (AJOT, 2020, p.4). The main goal of occupational therapy is to support clients' everyday activities and enhance the client's ability to participate by adapting the environment to best support engagement (World Federation of Occupational Therapists, 2012). Since occupational therapists frequently collaborate with individuals who identify as neurodivergent, it is important to discover what this group of professionals knows about neurodivergence and how/if they incorporate neurodivergent honoring practices into their care for this population. By adapting a Neurodiversity perspective, an occupational therapist can assist their clients in achieving outcomes that are meaningful to them.

According to one prominent study, there are several key practices that facilitate the success and comfort of people with neurodivergence (Mills, 2020). This study identified six main practices. These six pillars are the importance of language, client strengths and cultural resources, collaboration and shared decision-making, demystifying therapy, learning events within therapy, and flexibility.

- The importance of language refers to the need to meet the client where they are and use language that fits their communication needs. Also, this theme reminds the therapist to use the client's preferred identity affirming description (Mills, 2020). For example, some individuals with autism prefer to be called "autistic" vs. a person with autism (Wooldridge, 2023).
- A client's strengths and cultural resources is a crucial part of the therapy process. It focuses on using the client's natural strengths and culture within the treatment sessions to show respect for values the client holds (Mills, 2020).

- Demystifying therapy is where the therapist is open with the client about what will be worked on and how it will be worked on during session and fosters an environment where the client has autonomy during treatment to give feedback during sessions (Mills, 2020).
- Collaboration and shared decision making- there is mutual respect among client and professional, the professional recognizes the client is bringing their own narrative to therapy with their own ideas of goals (Mills, 2020).
- Learning events within therapy provide opportunities or moments during sessions where the therapist and client see what is working or what needs to be changed (Mills, 2020).
- Lastly, flexibility is where the clients own narrative is honored when the therapist is creating practices for session (Mills,2020).

Neurodiversity affirming approaches shift the focus from on that looks at the client as disabled to instead adapting one's mindset to meet the client where they are on a social, cognitive, physical level. In a neurodivergent affirming approach, the focus is on helping the client use their own strengths to engage in the activities that are important to them. The purpose of this study is to gather information on whether or how current working occupational therapists practice neurodivergent affirming principles with their clients during their everyday work. This research is important because it illustrates what occupational therapist are doing to honor neurodiversity as well as any areas for growth.

Method

This qualitative interview study utilized a semi-structured interview to learn about if or how occupational therapists use neurodivergent honoring practices in their treatment.

Occupational therapists were included in this study if they are a licensed OT who have practiced for a minimum of two years and work with pediatrics and/or adolescents that are under the age of 24. Also, the occupational therapist had to must work with clients who identify as neurodiverse. A total of four interviews took take place over Webex and were recorded and transcribed. The Western Michigan University Human Subjects Institutional Review Board approved this study and informed consent was obtained before each interview.

Participants

Occupational Therapist were contacted by the student researcher to seek their interest participation, provide overview of study, and provide informed consent if they chose to participate in the study. All four participants were occupational therapist for more than two years and worked with neurodivergent children.

Data Collection

Semi-structured interviews were conducted over Webex. Interviews ranged from 25 to 90 minutes. All occupational therapist were interviewed once, and each interview was video, and audio recorded. The interviews consisted of open-ended questions. (See Table 1). Occupational Therapists were given the opportunity to share additional beliefs or ideas during the interview. All interviews were transcribed verbatim and edited for accuracy for analysis.

Tables 1

Semi-Structured Interview Questions

How long have you been working at an OT and what type of setting do you work in? -Tell me about the characteristics of clients who identify as ND on your case load.
What are the things you think about/ prioritize when working with a client that identifies as ND
Tell me how you think about your own use of language and labels when communicating with a client? -Is there a difference in the language you use when working with a client that identifies as ND vs a neurotypical client. Do you believe there's a difference in language used

when working with an ND client (ex. asking someone how they want to be addressed) Tell me what you think about the use of language.
How does a clients strengths influence your treatment plan? How do you go about incorporating this?
How does the client's culture influence your treatment. How do you go about incorporating the client's culture?
Do you feel your clients who are ND have an understanding of why they are coming to see you and what is involved in participating in OT? If yes, how do you know? If not, do you feel it is important for them to understand why they are in therapy and what therapy will involve? If yes, do you facilitate this understanding?
Is it important that clients who are ND actively collaborate with you about treatment activities and decisions? Can you give me an example of a time you collaborated with your client to make a therapy decision? How common of an occurrence is it for examples like this one to occur?
How does the client's response, feedback etc. influence the course of treatment within that session and overall? Could you give me an example of how a client's response or feedback influenced a session?
Is there anything we missed or didn't talk about related to providing OT for clients who are neurodivergent?

Analysis

Phenomenological qualitative analysis included creating a coding frame through the reading and re-reading of transcripts (Moustakas, 1994). After original coding was created, the honors student and committee members discussed codes, reread transcripts, and then worked together to revise codes to best reflect the data. Next, continuous comparison of codes were used to identify patterns that were made into themes. Verbatim exemplars were chosen to support the chosen themes.

Results

Two major themes emerged from the qualitative data analysis: genuine regard for clients and the natural reciprocity of OT.

Genuine Regard for Clients

Genuine regard for clients refers to the accepting, nonjudgmental, invested attitude that the occupational therapists in this study described. Within genuine regard for clients, occupational therapists give their clients independence, meet clients where they are, embrace their individuality, highlight their strengths, and emphasize valuing the client.

When discussing giving client's independence one participant stated they know their client is making progress "if they're showing independence within each one of these little steps towards their goal" (Participant 3).

Meeting a client where they are refers to the therapist meeting the client on their level of communication and physical capabilities, one therapist explained this idea by stating "we're just going to use what we've got and build on that" (Participant 1).

Another therapist explained that "if they [the client] don't have as much capacity to process language, my language would be different for them" (Participant 2).

The next aspect of genuine regard for clients is occupational therapists embracing the clients' individuality. In order to embrace individuality one OT said that they have to be "accepting that their [the client's] brain is different, and not seeing that as, some sort of deficit or a weakness within them and being able to see, some strengths within that" (Participant 2).

Another occupational therapist explained that "if you take over the session, you're taking away from the individualized treatment, and their identity and identity is extremely important for them" (Participant 3).

Highlighting a client's strengths was discovered as an important component of occupational therapy sessions. One OT found that when they used the clients' strengths, the client was more communicative with them and engaged in tasks with more motivation

(Participant 2). Another therapist explained that they “use their [the client] strengths as a vehicle to address their weaknesses and really capitalizing on their strengths” (Participant 4).

The last aspect of genuine regard for client is occupational therapist emphasize valuing the client. In order to value the client occupational therapist decided to “not view them as their label, because I think that there’s so much more to them” (Participant 4). Another OT explain that “I don’t see them as parts to fix; I’m looking to see who they are as a person” (Participant 1).

Natural reciprocity of OT

Natural reciprocity of OT focuses on the relationship between OT and client that is built through collaboration, understanding of one another, and felt safety. Occupational therapists find joy in client progression and often learn a great deal from clients. Occupational therapists want their clients to be motivated to engage in OT, while using strengths to drive a session.

Occupational therapist found joy in client progression by appreciating the voice their client’s brought into therapy and acknowledging that “as a therapist [OT] it’s not really about you, it’s about them [the client]” (Participant 4).

Occupational Therapist often learn from their clients during treatment one participant explained “when you collaborate with your clients and care about what they think and say, [you realize] how much they can teach you” (Participant 2).

Another participant gave they example of “a different way of trying to figure out what they’re trying to communicate because, you know, their rote speech, [they] may be telling me something other than what their rote speech is saying” (Participant 4). By learning the clients

rote speech is saying more than what their words are the OT learned to observe the clients behaviors and reactions to understand what they client was truly saying and needed.

In order for successful progression occupational therapist want their clients to be motivated to engage in OT. One participant explained its important to learn “what’s meaningful to them, meaning what they’re going to be motivated by” (Participant 1). Another therapist explained “why would they [the client] come if they didn’t feel invested in what they were working on?” (Participate 3).

The last aspect of natural reciprocity of OT involved the therapist using the client’s strengths to drive a session. Using a clients strengths allow for Occupational Therapist to plan treatment sessions best suited for the clients and to build a trusting relationship. “I think it helps clients feel more secure and safe with you when they’re able, to play on their strengths” (Participant 2).

Another therapist explained that “you want to play on their strengths to create that just right challenge in order to address their weaknesses and it helps with buy in” (Participant 4).

Discussion

The themes that emerged from the analysis indicated that the six pillars (Mills 2020) were identified by all participants when describing their practice with clients that identify as neurodivergent. The themes that emerged included genuine regard for clients and the natural reciprocity of OT. Both fit well with the Six Pillars identified by Mills (2020).

Both themes illustrate the habits and mindset that form the framework for Occupational Therapy (AJOT, 2020, p.4). The themes that merged fit well with key aspects of occupational therapy philosophy included in the Scope of Practice; “Participation in occupations that are

meaningful to the client involved emotional, psychosocial, cognitive, and physical aspects of performance.” (AJOT, 2021, p.2). The themes also fit into the framework of occupational therapy which explains what therapist are responsible for “establishing a therapeutic relationship with each client and designing a treatment plan based on knowledge about the client’s environment, values, goals, and desires.” (AJOT, 2020, p.4).

Limitations

This study had a few limitations. The first was that interviews were conducted virtually leading to technical difficulties such as Wi-Fi connections and mishaps with video and audio. Virtual interviews were the best course of action in terms of convenience and efficiency. The sample of this study was small. However, the occupational therapists interviewed provided comprehensive knowledge and experience.

Directions for Future Research

This study provides a foundation for future research to expand on this topic. For future research, a focus group with participants could be conducted to discuss and elaborate on the themes (e.g., what did we miss, what additional ideas might you have?). A future study could be repeated with a larger sample of participants to expand on the variety of settings and diversity of therapist.

Conclusion

In conclusion, the occupational therapy perspective fits well with the Six Pillars of honoring individuals that identify as neurodivergent. The two themes identified indicated that occupational therapists in this study fostered an adaptive environment, embraced the client for who they are, and value building relationships.

References

- American Occupational Therapy Association. (2020) Occupational therapy practice framework: Domain and process (4th ed). American Journal of Occupational Therapy, 74(Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- American Occupational Therapy Association. (2021). Occupational therapy scope of practice. American Journal of Occupational Therapy, 75(Suppl.3), 7513410030. <https://doi.org/10.5014/ajot.2021.75S3005>
- Doyle, N. (2020). Neurodiversity at work: A biopsychological model and the impact on working adults. British Medical Bulletin, 135(1), 108-125. <https://doi.org/10.1093/bmb/ldaa021>
- Mills, D. (2023). Applying a neurodiversity affirmative approach to the pluralistic framework. Counselling and Psychotherapy Research, 23, 627-637. <https://doi.org/10.1002/capr.12637>
- Singer, J. (1999). Why can't you be normal for once in your life? From a 'problem with no name' to the emergence of a new category of difference. In Corker M., French S. (Eds.), Disability discourse (pp.59-67). London, England: Open University Press
- World Federation of Occupational Therapists. (2012). Definition of Occupational Therapy. Retrieved from <https://www.wfot.org/resources/definition-of-occupational-therapy/>
- Hetherington, C. (2023) What Does It Mean to Be Neurodivergent?. Healthnews What Does It Mean to Be Neurodivergent? | HealthNews
- Kandola, A., (2020) What is a sensory processing disorder? MedicalNewsToday Sensory processing disorders: Definition, symptoms, and more (medicalnewstoday.com)
- Lockett, E. (2022) How Does ADHD Affect the Brain? Healthline <https://www.healthline.com/health/adhd-neurology>
- Moustakas, C. (1994). Phenomenological research methods. Thousand Oaks, CA: Sage.
- Rossi, C. (2022) The Autistic Brain. Psycom Autism Spectrum Disorder: Autistic Brains vs Non-Autistic Brains (psycom.net)
- Kornblau, B.L., & Robertson, S.M. (2021) Special Issue on Occupational Therapy With Neurodivergent People. American Journal of Occupational Therapy. 1;75(3):7503170010. doi:10.5014/ajot.2021.753001. <https://pubmed.ncbi.nlm.nih.gov/34781353/>
- Wooldridge, S. (2023) Writing Respectfully: Person-First and Identity- First Language. National Institutes of Health. <https://www.nih.gov/about-nih/what-we-do/science-health-public-trust/perspectives/writing-respectfully-person-first-identity-first-language#:~:text=Many%20people%20in%20the%20autism%20community%20also%20>

[prefer, respects%20neurodiversity.%20Some%20are%20firmly%20against%20person-first%20language.](#)