

Chapter 13

Neurodiversity and Non-Verbal Norms in a World Designed for the Majority

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EXECUTIVE SUMMARY

Neurodivergent people experience constant systemic oppression and discrimination that causes trauma. Our current neuro-normative society benefits those who are considered “normal” and harms those who are considered “abnormal.” Neurodivergent counselors also experience discrimination within the world of counselor education. This chapter highlights the importance of increasing neurodiversity-affirming counselor education and provides concrete strategies to do so. Actionable steps include counselor educators' self-reflection on biases, putting neurodiversity-affirming strategies into practice in the classroom, and reassessing the criteria used to evaluate counselor-in-training performance. Specific examples are demonstrated in a case study of a neurodivergent counselor-in-training providing services for a neurodivergent client. A paradigm shift to be neurodiversity-affirming in counselor education practices is crucial for promoting trauma-informed gatekeeping in the counseling world.

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INTRODUCTION

Sasha K., a neurodivergent counselor-in-training, sat across from Dr. Johnson, his practicum instructor. The room was quiet, but Sasha could sense the weight of the upcoming conversation. Dr. Johnson looked sympathetic as she began to explain the reason for their meeting. While Sasha's supervisors and peers often commented on how strong his conceptualization skills are, his supervisors had also raised concerns about Sasha's nonverbal communication in client sessions. Specifically, clients had reported discomfort and described Sasha's lack of eye contact and limited emotional mirroring as signs of disengagement and disinterest. During their conversation, Dr. Johnson was firm but professional, emphasizing that nonverbal communication plays a vital part in establishing a therapeutic relationship and ensuring clients are comfortable, and she would not be able to overlook this issue if it persisted.

Sasha listened carefully as he knew this topic would come up eventually. He had been aware that his communication style did not often align with neurotypical expectations, and he had been putting intentional effort into compensating for this fact in the classroom and in his counseling sessions. He felt an overwhelming sense of defeat and shame as he listened to Dr. Johnson describe others' negative perceptions of his behavior. For a moment, Sasha considered whether to share this internal struggle with his professor. But the more Dr. Johnson described Sasha's behavior as a potential barrier to his success in the field, the more guarded Sasha became during their conversation. Instead of opening up to Dr. Johnson, Sasha was mentally replaying previous conversations with peers where he had also failed to effectively build a connection with them. Not for the first time, Sasha grew frustrated at his inability to be himself and still effectively foster meaningful relationships with others. The conversation with Dr. Johnson ended with Sasha agreeing to complete additional practice sessions with the intention that Sasha practice adjusting how he presents in counseling sessions. Sasha left the conversation feeling disheartened and questioning whether he could meet the rigid expectations of the profession.

Somewhat paradoxically, while counselors-in-training are taught to identify and accommodate their clients' unique communication differences, the same consideration and flexibility is not always given to the communication differences of neurodivergent students (Brown, 2017). Many common standardized evaluations used to assess students' dispositions and clinical abilities include items such as "presents professionally" or "uses appropriate eye contact and nonverbal skills." However, the adverse impacts of intentional and unintentional discrimination due to ambiguous definitions of professionalism and appropriate workplace communication have been a recurring topic in social justice literature (Sue et al., 2024). This lack of specificity in student evaluations, coupled with the historical dearth of training on developmental disabilities in counselor education programs (Atkins et

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