highland NDhub

Quick-Start Guide: Social Communication

Carrie Watts
Carrie.Watts@ThrivingFamilies.org.uk
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Table of Contents

General Information

Social Communication encompasses the range of skills people use to interact with each other, including social understanding, language processing, and language expression. When discussed within the context of neurodivergence, focus is placed on ensuring neurodivergent people achieve 'appropriate' use and understanding of social communication.

The definition of 'appropriate,' though, is culturally specific and, invariably, prioritises the neurotypical style of social communication. The presumption is that 'good' or 'successful' social and communication skills are neurotypical ones. In reality, there are many different ways for people to interact with each other and no one style of social communication is more valid than another.

The Medical Model describes neurodivergent communication and social skills as being deficient because they are different to neurotypical ones. They are categorised as Communication Disorders and Social Skill Deficits. But this is like describing a cat as being deficient in its ability to be a dog.

NeuroWild beautifully illustrates this in her artwork:

Short video of infographic:
https://youtube.com/shorts/N1543t4USrE?feature=share

Neurodivergent people are only 'deficient' in social skills and communication when we measure them against a standard they can never achieve — being neurotypical.

Given its many shortcomings, therefore, this guide will not use Medical Model language. It will use neuro-affirming terminology to further the understanding of neurodivergent social and communication skills, identify strategies that can be helpful in supporting neurodivergent needs, and provide places to go to look for more information. Primarily, it will give clarity on how neurodivergent people have different communication and social skills, not deficient ones that need to be replaced.

Communication

The Basics

Communication development is the process of acquiring language and the understanding of how to use it. Communication allows us to:

Imagine	Influence others	Maintain friendships
Express needs	Build relationships	Live and work with others
Share experiences	Understand others	Empathise

The process includes developing **receptive** and **expressive** language, both of which are made up of verbal, visual, and vocal language.

Aspects of Communication
Receptive language: The ability to understand and comprehend spoken & written language (i.e., input).
Expressive language: The ability to communicate needs, wants, feelings, & thoughts through spoken, written, or body language (i.e., output).
Verbal language: Vocabulary; everything we express in words, both spoken & written
Visual language: Non-verbal; everything we transmit through gestures and movement
Vocal language: Pitch, tone, rate, volume, intonation, rhythm, non-word sounds

Neurotypical (NT) communication norms tend to focus on visual and vocal aspects, relying on things like interpreting facial expressions, making eye contact, altering pitch and tone, and so on.

Neurodivergent (ND) communication norms are different because ND people move and experience the world differently — they may need to move constantly to do their best thinking; or find eye contact to be intrusive and painful; or show they trust someone by info-dumping about their favourite subject. With ND communication, the content of the communication is prioritised over the means by which it is expressed.

It is important to note that, while different to NT communication, **ND communication is equally valid**. Social norms for communication are based in NT understanding and experience of the world, the presumption being that NT communication is the 'right' way to communicate. That is not true. There is **not** only one correct or 'appropriate' way to communicate.

It's critical to remember that communicating does not mean 'speaking with mouth words.' When we limit our understanding of communication, we limit our ability to see and 'hear' all the ways a person has for expressing themselves.

As a last point: a common refrain in the support world is *"Behaviour is Communication."* While the intent behind it is good — to listen in all the ways we can to understand the needs of another — there are many ways in which it can be problematic. For one, as it relates to non-speaking or situationally non-speaking ND people, those around them tend to assume what a specific behaviour is communicating; assumptions can be very wrong. Also, as it relates to apraxic people (people who have difficulty directing

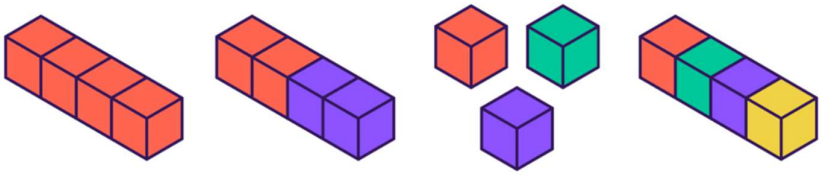
purposeful movement), the 'behaviour' seen is not necessarily communicating the actual intent behind it. In both these cases, our responsibility is to check our own assumptions and provide opportunities for independent, meaningful expression and interaction. As trusted adults around ND young people, our goal should only ever be to assist them in finding a communication system that works for them, to support them in using it, and to empower them with agency and autonomy.

In more detail...

There are two different ways that a child may develop their language:

Analytic Language Processing (ALP) **OR**
Gestalt Language Processing (GLP)

ALP "Parts to Whole" Language skills develop through:	**GLP "Whole to Parts" Language skills develop through:**
Six stages of development, advancing from one stage to the next	Acquiring large chunks (gestalts) of language as a whole
Interactions with caregivers	Breaking down gestalts into words
Exposure to language-rich environments	Building words back up into sentences with complex grammar
Natural curiosity & experimentation	Repeating entire phrases with intended specific meaning
Example first utterance: 'Moo!' (means MOO)	*Example first utterance:* 'What sound does it make? Moo!' (means COW)
Words are tied to their literal meaning	Words are tied to emotional experiences



Both ways of developing language will eventually lead to spontaneous language. Both are equally valid. Although they take different pathways, they both allow a child to reach the end goal — to understand and interact with others.

ND children are more likely to be Gestalt Language Processors, but that is not a hard and fast rule. We just need to be aware of which process is natural to a child so we can encourage and support it appropriately for them.

Echolalia — the repetition of a sound, words, or phrases, internally or externally — is historically given as an example of a 'communication deficit'. However, when we consider it within the context of GLP, we can see that it serves a specific purpose to the person saying it, even if the people around them don't know what that purpose may be. It isn't a deficit at all, it is a difference in language processing. This is an example of how neurotypical expectations are commonly and inappropriately applied to neurodivergent children, causing them harm.

In addition to experiencing differences in receptive language processing, ND people also tend to experience difference in expressive language. This often means that ND people prefer a different communication style to the neuronormative expectation.

Communication Styles
Asynchronous (delayed): Exchange of communication between two people without the expectation of immediate reply; allows for increased time to process and craft a response without time-bound pressures.
Synchronous (in-the-moment): Exchange of communication between two people in real time with the expectation of immediate response; characterised by back and forth 'volleying' of responses that are timebound.

ND people tend to prefer asynchronous communication because it allows for more time to process information, organise thoughts, and respond in a comprehensive fashion. Asynchronous communication also gives the speaker more control over the pace and extent of the replies they send. Examples of asynchronous communication include: email, texting, voice notes.

NT people tend to prefer synchronous communication, which is in-the-moment, rapid, back-and-forth communication. This communication style requires individuals to quickly process incoming information, organise their thoughts, and reply. It carries the pressure of being timebound. Examples of asynchronous communication include: face-to-face conversations, telephone calls, online video calls.

The Double Empathy Problem

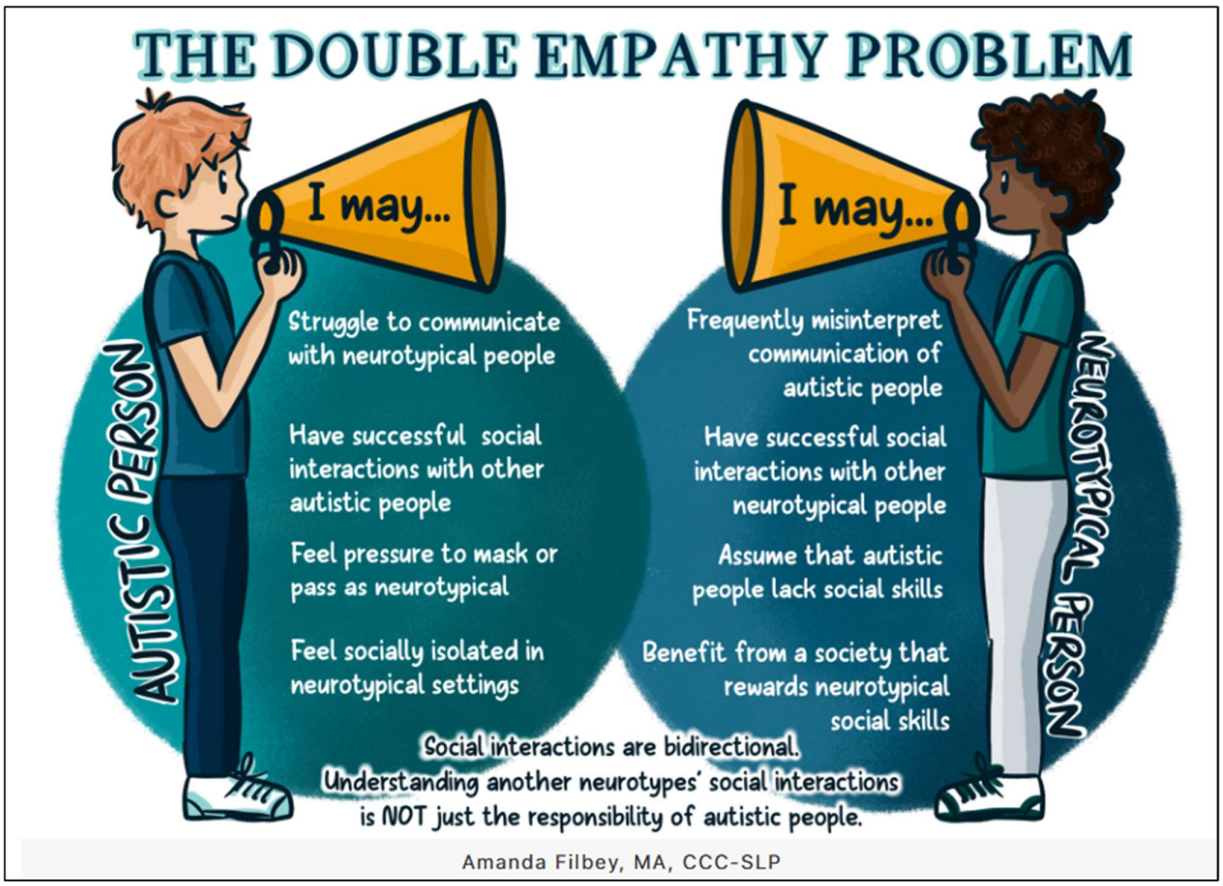
The difference in communications styles between NT and ND people can result in complications, misunderstandings, and frustrations. It is similar to two computer operating systems trying to 'speak' to each other — without a single, shared software program, the operating systems cannot effectively or meaningfully interact with one another. The same is true for cross-neurotype communication methods, styles, and expectations: the use of different software results complicates understanding.

Until relatively recently, this cross-neurotype communication difficulty has only ever been discussed through the Medical Model, where ND are characterised as being deficient in communicating 'correctly. This framing assumes that the NT way is the one and only 'correct' way; even more harmfully, it invalidates and belittles ND communication preferences and styles.

By placing full blame on ND people for being 'deficient communicators,' the medical model framing ignores that communication is a two-way street and that both people involved in a conversation have equal responsibility to be understood. This is neither fair nor logical.

A far more reasonable theory — one that addresses the failing to account for both parties in a conversation — is the **Double Empathy Problem**, developed in 2012 by autistic sociologist Dr. Damian Milton. Dr. Milton's Double Empathy Problem argues that a cross-neurotype communication misunderstanding is due to BOTH people, not just the neurodivergent person; it describes the disconnect as a mutual event, with both

parties experiencing difficulty in empathising with and understanding each other's communication styles.



This was evidenced in 2025 with an international study (see Sources) that examined how information is transferred between autistic and non-autistic people. In working with three groups (all autistic; all non-autistic; a combination of both), the researchers found three very noteworthy things:

1) It confirmed that "neurotype mismatches, rather than autism itself, degrade information sharing";
2) Mixed neurotype groups were the least effective of all group types in communicating; and, most importantly;
3) The all-autistic group was the *most effective* of all the groups.

This proves that, despite neuronormative assumptions, there is more than one 'right' way to communicate. And it proves that neurodivergent people are not the sole source of communication misunderstandings in cross-neurotype communications.

With it firmly established that neurodivergent communication is a difference, not a deficiency, we can look at the best ways to support development in children in ways that are right for them. Rather than telling them how or what to communicate, we should work to remove neurotypical communication expectations so that they are free to learn how to express themselves fully in their own style.

We do this by:

- Validating their internal experience
- Being strength-focused rather than "deficit-correcting" in our approach
- **Providing a consistent approach in all areas of the child's world**

NeuroWild's "Social Communication Goals for Neurotypical People" graphic provides clear directions to NT people on how that can hold up their end of the communication deal (to be understood) while also showing ND people that they are valued for their natural communication style.

Augmentative and Alternative Communication (AAC)

Communication is about interacting with others and expressing yourself. It does not require speaking (using mouth words) to do it, so supporting ND children in their communication development never requires forcing them to use mouth words. The aim is only to help them find their 'voice.' One way we can help them do that is by offering them Augmentative and Alternative Communication (AAC) tools, either to supplement or to use in place of speaking.

There are lots of different AAC tools available, from basic hand gestures to advanced technological options. There is no one right way to communicate, so we should be open to exploring all of them in pursuit of finding the right way for that individual child.

There are two access methods for AAC: Direct access (body movement is directly linked to the action); and Indirect Access (requires an interface)

An interface can be anything that connects a user to their communication system This includes: a communication partner; auditory scanning; eye pointing, and pieces of equipment (mouse, joystick, eye gaze).

The hallmarks of an affirming and effective AAC system are:

- It is personalised to the individual.
- There is a dynamic element so it can evolve with the individual's changing communication needs and preferences.
- It is comprehensive, not restrictive or conditional — the full range of an individual's self-expression are allowed for, including disagreements, in nuanced and complex ways.
- The AAC user has access to a reliable and supportive communication partner who is attuned to their wants and needs.

Unaided (no additional equipment) — Uses only own body			
Makaton	Sign language	Gesturing	Eye pointing

Aided (involving additional equipment) — Uses an external device			
Objects of Reference	**An object, or part of an object, used to represent an activity or event.** Ex., part of an identify badge used to indicate 'time for school'. Used to help predict what happens next and/or used for making choices.		
Paper Based (non-electric)	**Writing and/or drawing**	**Single photos and symbols** ex. Toilet	**Choice boards** A minimum of 2 photos/ symbols that can be used to develop choice making.
	Communication boards AKA Symbol Sheets, Communication Charts, and Aided Language Boards (ALB). Comprised of a single sheet with photos, pictures, and/or symbols displayed.	**Topic boards** Contains 'fringe' (less common) vocabulary options, such as for a school topic) to be used alongside a core vocabulary/primary communication system.	**Communication Book** Provides pages of symbols organised by category; bespoke to the individual. Ex., Clare Latham book; Look2Talk; Pragmatic Organisation Dynamic Display (PODD).
	Picture Exchange Communication System (PECS) A tool for ABA (Applied Behaviour Analysis), the aim of which is to force a child to exchange a specific symbol to be allowed what they want/need. It is limited and transactional; most importantly, the options are not determined by the child.		
Voice Output Communication Aids (VOCA)	**Multiple Message** A device that allows multiple words/short messages; often uses a paper overlay to display the photos/ symbols that represent the message, ex., Go Talk.	**Single Message** A device that allows short single messages to be recorded and played back when activated by the user, for example, BIGmack.	**Dynamic Screen** Software on an electronic device (for example, a tablet) that has the capacity to allow complex and multiple messages.

Access to dependable, accurate communication is a human right. More than that, it is critical to positive life outcomes. As the Scottish Government said: "Having a reliable and effective way of communicating, whether it is with speech or with AAC, can improve quality of life and bring more opportunities for education, work, relationships and independence" (2012). It is our responsibility, as the trusted adults around neurodivergent young people, to ensure they have that dependable access to their preferred communication system and that they feel confident in using it.

Support Strategies & Tools

The function of communication is to allow individuals to interact with others and express themselves. It does not require speaking (using mouth words) to do it.

Therefore, supporting ND people to develop their communication means working with them in ways that best support their self-identified goals to express themselves and to interact with others. Strategies should never be implemented with the intent of extinguishing neurodivergent communication traits to replace them with neuronormative ones. Affirming strategies should foster confidence, connection to self, and self-advocacy.

Neuro-affirming Communication Development Strategies		
Use literal, direct language	Meet them where they are	Differentiation
Think about what, why, & how you say something, i.e., is your intent clear?	**Use visuals to support understanding (technology included)**	Say what you mean, not the opposite, i.e., "Please walk" instead of "Don't run"
Provide clear, ordered instructions	Model language use (Words Up)	**Assess & address own assumptions**
Consider what other competing sensory inputs might be impacting capacity	**Give space and time for responding in the way and time that is right for them**	Ask, Accept, Develop (developed by Options Autism)
Curiosity & connection, not correction	Encourage and model self-awareness	Accept and join in with echolalia/repetition
Adults demonstrate they value all communication (incl. AAC) by using it with them and around them	**Only phrase questions as a question, i.e., "Put on your shoes" not "Do you want to get on your shoes?"**	Consistent, adaptable, and responsive approaches
Acknowledge & encourage acts of self-advocacy	Position yourself side-by-side rather than across from (i.e., non-confronting)	**Respect disagreements/ refusals as acts of autonomy**
Be clear about the purpose in specific instances of communication/interaction	**Remove neuronormative expectations, i.e. eye-contact; 'quiet hands'**	Be conscious of Rejection Sensitive Dysphoria & its impact on communication

Neuro-affirming Communication Development Tools		
Technology-integration	Flexible outcomes	Multi-sensory tools & aids
Project-based learning	**Scaffolding**	Graphic organisers
The Autism Toolbox, Communication Supports https://www.autismtoolbox.co.uk/resources/technology/communication-supports-aac/	The Autism Toolbox, Visual Supports & Tech https://www.autismtoolbox.co.uk/resources/technology/visual-supports-and-technology/	**NeuroWild, Autistic/ADHD Speech Pathologist https://www.neurowild.com.au/category/all-products**
Makaton https://makaton.org/	**Individually tailored support profiles**	Vocable (Speaking app) https://www.vocable.app
Emily Price, Autistic SLT https://www.autisticslt.com/professional-language	Tomlinson Model of Differentiation	Choice boards, task cards, learning menus

Social

The Basics

The Social area is important because it is the part that tells us how to act with family, friends, and in different places. All other areas of development contribute to social skill development.

Cognitive	**The part that lets us think, plan, and organize; one skill within this area is Executive Function**
Emotional	**The part that lets us know our own feelings, how other people feel, & how to help ourselves feel better**
Sensory	**The part that takes in information from all the senses (sight, sound, taste, smell, touch, balance, inside sensations, sense of body in space)**
Motor	**The part we need for moving (ex. picking things up, jumping, etc.)**
Communication	**The part that lets us speak (with and without words) with others**

'Social skills' are the ability to interact with others in meaningful ways. Social skills include communication, empathy, and self-awareness. They allow us to:

Achieve goals we set for ourselves
Build communities
Share our experiences
Maintain friendships
Live and work with others
Give and receive physical and emotional care

Conventional theory says that social skills must be learned, that they are not an innate part of us. However, that perspective doesn't account for internal experience of being in social situations, nor does it account for the Double Empathy Problem (the idea that communication is a two-way street and both sides have equal responsibility in understanding the other).

'Social skill development,' as a therapeutic process for ND people, has historically focused on replacing neurodivergent traits with 'appropriate' (i.e., neurotypical) social skills. This is the stated purpose of programmes such as Applied Behavioural Analysis (ABA) and Positive Behaviour Support (PBS). The harm of such practices can not be over emphasised. Rather than forcing ND people to distrust their natural skills for communication and interaction, it is far more helpful to validate their innate experience and encourage them to understand and honour their internal needs.

An individual's personal goals should always be prioritised over meeting neuronormative social skills expectations.

In more detail...

Social skills are generally organised into **5 Pillars of Social and Emotional Learning**.

Self Awareness
Identifying emotions, self-confidence, self-efficacy

Social Awareness
Empathy, respect for others

Self Management
Impulse control, self-discipline, self-motivation

Relationship Skills
Communication, social engagement, teamwork

Responsible Decision-Making: Identifying problems, analysing situations, reflecting

Support Strategies & Tools

Social skills allow individuals to build and maintain relationships, be aware of and manage their own emotions, and to reflect on social situations. ND social skills do all of those things, they just do them differently to neuronormative culture.

Non-affirming practice is the standard in "social skills training." Some examples of this include giving a ND individual social objectives they haven't chosen for themselves (i.e., going out regularly with peers); working to extinguish stimming; and forcing eye contact. They are framed as being done in the name of "social skills development," but they are really just attempts to extinguish ND traits, to make a ND person behave more neurotypically.

Affirming social skills practice is very different in focus and scope. It means working with a ND person to find *what works for them* and helping them to achieve their *own self-identified goals*, with tools and strategies that foster confidence, autonomy, and self-acceptance. Neuro-affirming support should also involve educating the people surrounding ND people, not just the ND individuals themselves — true neuro-affirmative practice aims to transform the social environment to create an inclusive and accepting space, one that values diverse communication styles and expressions.

Underpinning all affirming practice is this truth: there are many 'right' ways to socially interact; neurodivergent social skills differ from many cultural expectations of 'typical' behaviour, but they are real, recognisable, & reciprocated. They are valid.

Neuro-affirming Social Development Strategies		
Model self-awareness	Validate differences	Empower self-advocacy
Take 1 step at a time	**Authenticity over conformity**	Positive distraction
Teach consent & bodily autonomy	Build everyone's understanding of 2-way perspective-taking	**Centre the individual's voice and motivations**
Build in significant time for processing & response	**Explain healthy boundaries & how to keep them**	Build on self-understanding of emotional regulation

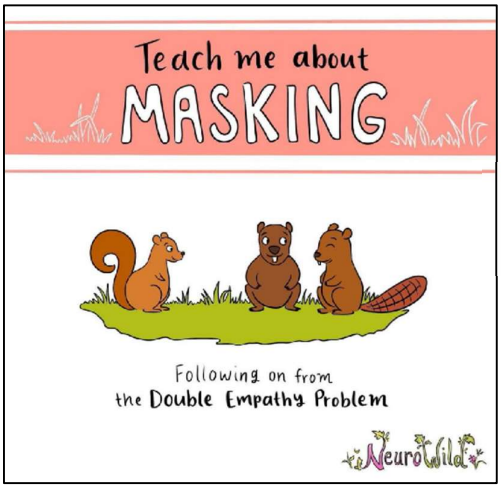
Strengthen awareness of sensory needs	Foster realistic perspectives on social interactions	Co-design the support approach
Non-ableist Pragmatic Language Therapy	**Be calm, compassionate, & curious**	Explore anxiety-management techniques
Contextualise 'skills'	Provide clear guidance for interactions in certain spaces (i.e., ball-playing field, etc.)	**Remove expectations of neuronormative behaviour**
Provide specific activities during unstructured times	**Adjust support to current capacity needs**	Extend and build upon interactions

Neuro-affirming Social Development Tools		
Scaffolding	Technology	Multi-sensory tools & aids
Fidgets	**Social Stories**	Clear & explicit language
Autism LevelUP Resources https://www.autismlevelup.com/#tools	NeuroWild Resources https://www.neurowild.com.au	**Quiet spaces for rest/ recovery**
Socialising Traffic Light System	**Social Battery Awareness**	Pacing/energy management

Dangers of Neuronormative Social Skills Practice

From very early in life, neurodivergent children internalize society's preference for neurotypical social behaviour. This, in addition to non-affirming social skills training, results in them learning to Mask.

Masking is when a neurodivergent person suppresses their natural way of being & projects an entirely alternate personality, or portions of an alternate personality, that feels more acceptable to others. Most often, this isn't a conscious choice; it is most akin to a trauma response rooted in continual implicit & explicit messaging that their innate social skills are "wrong."



The impact of masking is significant.

Relentless anxiety & stress

Distressed behaviour, including meltdowns & shutdowns

Poor mental health (increased risk of self-harm & suicidality)

Mental & physical exhaustion (leading to Burnout)

Increased vulnerability to abuse

Low self-esteem

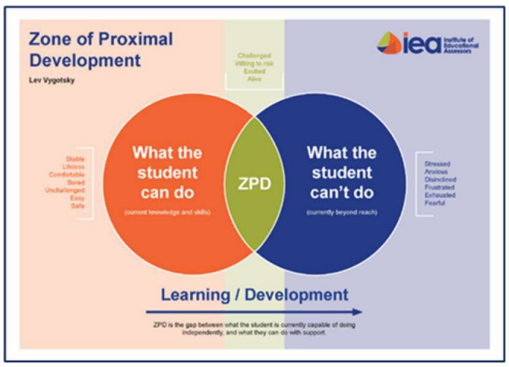
Short video of infographic: https://youtube.com/shorts/8u_C7mew9hc?feature=share

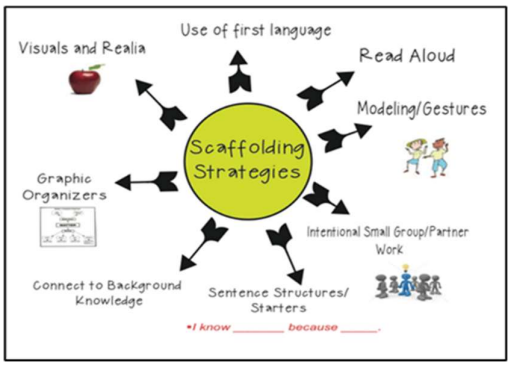
We mitigate these outcomes by implementing strategies that are affirming and that prioritise authenticity.

Specific Supports/Tools

Scaffolding

Scaffolding consists of an adult (or a more experienced peer) supporting a learner through activities, withdrawing that support slowly as the learner progresses in developing competency in a skill. It is based around the idea of Zones of Proximal Development (ZPD), which is a theory on learning developed by Soviet psychologist and social constructivist Lev Vygotsky (1896-1934). Vygotsky wanted to be able to measure both current abilities and potential for development in learners. The support provided by the adult/more experienced peer can take many different forms: guided practice; modeling; asking questions (Socratic method); think-aloud process (verbalizing the problem-solving thought process), etc.





Social Battery

Neuronormative culture describes certain behaviour as 'appropriate' for young people. This includes going out, having many friends, being involved in clubs and activities, and be recharged by spending time with others. But this behaviour is based in neurotypical experiences of what is fun, what drains someone, and what builds someone up.

That experience is very different for many neurodivergent people: ND people may have no interest in social interaction, at least not in typical ways; and if they do want to interact with others, the many demands of doing it (Double Empathy Problem; masking; pressures on capacity; uncertainty about what will happen) fully drain their batteries and wear down their capacity to do other things. For most ND people, recharging their battery happens only when they can rest in total social isolation.

This is why one of the most practical and meaningful tools available for affirming social skills support is the Social Battery. The Social Battery is a structured way to capture what activities and interactions drain a person, and which ones restore them. In this way, they are able to plan for all of the events they want to experience without sacrificing their mental wellbeing to do it.

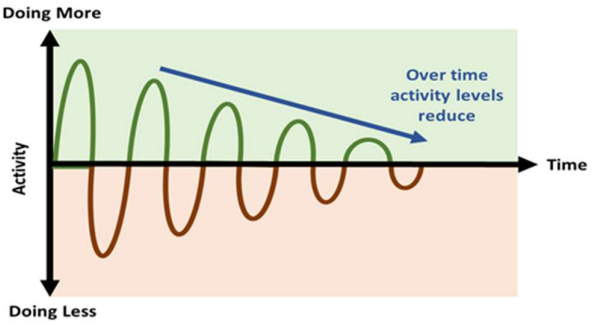
By being informed about an individual's social battery needs — and helping them to be aware — those around them can support them to engage in the social activities they want, in the ways that they want, while also managing the demands of their day-to-day lives. Very often, when a ND young person knows they have control over that, that they are prepared for it, they can confidently go into social experiences and positively navigate them.

Part of putting the Social Battery into practice is for the ND person to honest about what their needs are in a given situation and to share those needs with others around them. One way of doing this is use the **Socialising Traffic Light System**. In this system, Red means "Can't interact"; Amber means "Can interact with friends"; and Green means "Can interact with all people". This can be implemented via wearing little coloured stickers, bracelets, lanyards — anything that allows someone to visibly and noticeably indicate to others what their boundaries are in that situation.

And, as neurodivergent people experience fluctuating capacity, those boundaries can change! It is OK for someone to start on Green and then feel overwhelmed and change to Red.

It is always the responsibility of others to respect and abide by the boundaries that have been set.

Another aspect of managing one's Social Battery is to manage overall energy usage — this self-management technique is called **Energy Pacing**. As with Social Battery management, an individual can examine their day-to-day activities to identify those that Drain them, are Neutral, or Restore them.



The aim is to avoid the "boom and bust" cycle of overexertion, followed by exhaustion, that is so commonly experienced by ND people, who are trying to meet NT expectations for activity and engagement. That self-defeating cycle results in an ever-decreasing capacity to do the things that someone wants and has to do each day.

The main work in Pacing involves breaking down activities into smaller steps and identifying where to plan in rest breaks to avoid starting to feel tired. By proactively planning in this way, balance between activity and rest can be created, allowing an individual to conserve energy and build long-term capacity.

Social Stories

Social stories were created by Carol Gray.
The goal of a social story is to share with a ND person information that is accurate and clearly explains what to expect from a new or confusing situation or environment. The aim is to help a ND person to feel prepared and confident, not to 'correct' them;

social stories should not be used to shame or criticise a person's behaviour, and they should not be used to force someone into behaving more neurotypically.

A social story works best when it is:

- ❖ direct;
- ❖ as brief as possible (while still capturing the necessary detail); and
- ❖ is as personalised as possible to the person for whom it is being written.

There is enormous variety in the formats available for social stories to ensure that a ND person has one that works for them:

Visuals only
Text only
Comic strip
Visuals & text combined
Video clip
App-generated

Short video of infographic:
https://youtube.com/shorts/m-WKajMZrdw?feature=share

There are template social stories available online. Check out the Resources database for places to find them. If you need direct support in creating a social story, contact the Highland Council Speech & Language Therapy Service.

Visual Supports

Visual supports include a variety of different tools to help a ND person feel safe and prepared for the events happening to and around them, allowing them to confidently navigate their daily activities.

Visuals work for all people, not just ND people, because they:

Are permanent – spoken words disappear

Allow for extra processing time & double-checking

Prepare people for big & small transitions

Provide a picture of exactly what someone means

Are non-stigmatising when used with everyone

Encourage self-advocacy and sufficiency

Transferrable between places and people

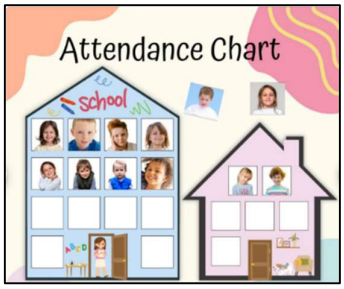
Are direct and avoid miscommunication

Reduce anxiety by providing reliable support

There are lots of different formats and layouts for visual supports. Whatever ones you use, be sure they are **neuro-affirming in both language and in practice**.

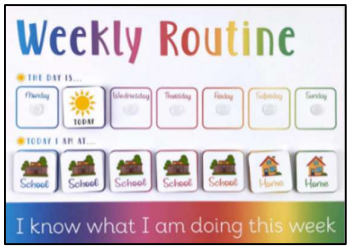
Visual Supports Examples

Attendance/ Check-in Boards



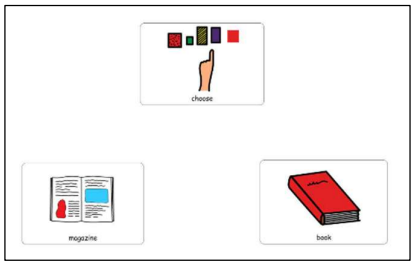
Routines

Calendars



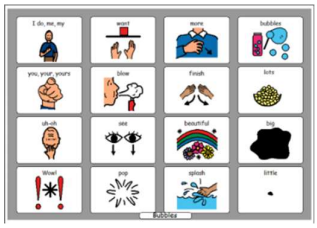
Schedules

Choosing Boards

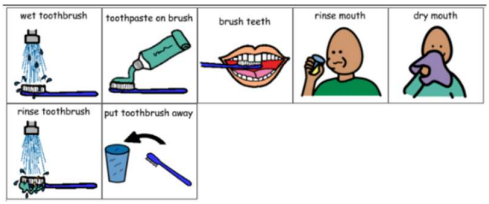


Social Stories

Communication Board



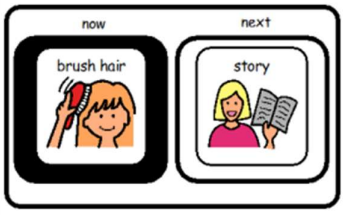
Task Guidance

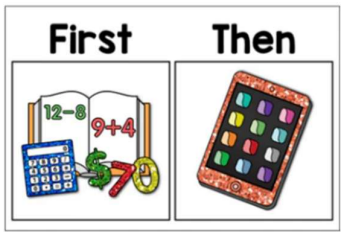


Emotional/ Energy Check-in

Weekly Timetables

First/Then (aka Now/Next) Boards





Workstation Set-Up

Sources & Resources:

Communication

AceCentre, Augmentative & Alternative Communication
https://acecentre.org.uk/resources

Crompton, C.J., Foster, S.J., Wilks, C.E.H. et al. "Information transfer within and between autistic and non-autistic people." *Nature Human Behaviour* 9, 1488–1500 (2025). https://doi.org/10.1038/s41562-025-02163-z

Deep Contemplation Blog, "How to Teach Pragmatic Language Without Being Ableist," https://deepcontemplationblog.wordpress.com/2019/07/29/how-to-teach-pragmatic-language-without-being-ableist/

Divergent Perspectives, https://www.divergentperspectives.co.uk/infographics

Filbey, Amanda (MA, CCC-SLP). The Double Empathy Problem graphic, https://www.theinformedslp.com/review/how-and-why-to-be-a-neurodiversity-friendly-slp

HC Speech & Language Therapy Service, SLTservicehighland@Highland.gov.uk

Makaton, https://makaton.org/

Melnyczuk, Tania. 'Behaviour is communication (or not),' 16 July 2019, https://tania.co.za/behaviour-is-communication/

NHS Kent Community Health – Children's Therapies, https://www.kentcht.nhs.uk/childrens-therapies-the-pod/speech-and-language-therapy/augmentative-and-alternative-communication-aac/

Price, Emily. Autistic Speech & Language Therapist, https://www.autisticslt.com/speech-language-therapy
https://www.autisticslt.com/nd-affirmingslt

Reframing Autism, https://reframingautism.org.au/miltons-double-empathy-problem-a-summary-for-non-academics/

Scottish Government, 'A Right to Speak: Supporting Individuals who use Augmentative and Alternative Communication,' April 2012. https://www.gov.scot/publications/right-speak-supporting-individuals-use-alternative-augmentative-communication/pages/1/

Speech & Language UK,
For families – https://speechandlanguage.org.uk/help-for-families/resource-library-for-families/
For professionals – https://speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/

TeachStarter, Differentiated Teaching Strategies, https://www.teachstarter.com/us/blog/differentiated-teaching-strategies/

Masking

Autism LevelUP, https://cdn.sanity.io/files/p6bm7moz/production/4de925ca8a61578a68a0a9bc506484fbdf1f9e27.pdf

Autistic Advocate (The), https://theautisticadvocate.com/autistic-masking/

Brain Charity, The. https://www.thebraincharity.org.uk/what-is-masking/

National Autistic Society, https://www.autism.org.uk/advice-and-guidance/topics/behaviour/masking

NeuroDirect, https://neurodirect.co.uk/unmasking-masking-the-impact-of-masking-in-neurodivergent-individuals/

NeuroWild, https://www.facebook.com/photo.php?fbid=620163690922651&set=pb.100087870753308.-2207520000&type=3
(Short video created from infographic)
https://youtube.com/shorts/8u_C7mew9hc?feature=share

Pavillion Publishing, Autistic Masking by Dr Amy Pearson and Kieran Rose, https://pavpub.com/health-and-social-care/health-autism/autistic-masking-understanding-identity-management

Neuro-affirming Practice

Kelly Mahler, Modern Emotion Regulation Supports for Neurodivergent Learners: Are you Keeping Up With the Times? https://www.kelly-mahler.com/resources/blog/modern-emotion-regulation-supports-for-neurodivergent-learners-are-you-keeping-with-the-times/

Neurodivergent Insights (Psychologist), https://neurodivergentinsights.com/

NeuroWild (Speech Pathologist), https://www.neurowild.com.au/
(short video made from infographic on Medical Model framing)
https://youtube.com/shorts/N1543t4USrE?feature=share

The Occuplaytional Therapist (Occupational Therapist), https://www.occuplaytional.com/

OneEducation, https://www.oneeducation.co.uk/neuro-affirming-practice-how-can-we-better-support-and-empower-neurodiverse-individuals/

Onwards & Upwards Psychology, https://www.onwardsandupwardspsychology.com.au/post/neurodiversity-affirming-resources

Options Autism:

Ask, Accept, Develop, https://www.optionsautism.co.uk/our-approach/ask-accept-develop/
"Neurodivergent Affirming Tools — Providing Vital Individualised Support Across Our Schools," https://www.optionsautism.co.uk/our-approach/ask-accept-develop/

Therapist Neurodiversity Collective, https://therapistndc.org/

Thriving Minds Education, https://thrivingmindseducation.com/

Scaffolding

https://angelaa-lee.medium.com/10-must-try-scaffolding-strategies-to-help-students-master-any-skill-in-the-modern-classroom-79b1433a7c51
https://www.educationcorner.com/scaffolding-education-guide/
https://helpfulprofessor.com/scaffolding-examples-in-education/
https://www.weareteachers.com/ways-to-scaffold-learning/
https://www.simplypsychology.org/zone-of-proximal-development.html

Social Battery/Energy Pacing

ADDitude, https://www.additudemag.com/social-battery-exhaustion-adhd-tips/?srsltid=AfmBOopmh83wx_PVQ2BBe2UDDbgjeOJBWBWa6jZfWSZ11-m3Esnm261n

Me Decoded, https://www.medecoded.com/tips-for-avoiding-social-overload

Medical News Today, https://www.medicalnewstoday.com/articles/social-battery#summary

Neff, M. A. (n.d.). *How to use pacing systems: Insights of a Neurodivergent Clinician*. "Neurodivergent Boom-or-Bust Cycle," https://neurodivergentinsights.com/blog/how-to-use-pacing-systems

Neurodiversity Empowerment Services. "Energy Pacing as Burnout Prevention Strategy," by Lauren Wallace and Emily Myers, https://www.ndempowerment.com/ndesblog/pacingresources

Social Communication

American Speech-Language-Hearing Association (ASHA), https://www.asha.org/practice-portal/clinical-topics/social-communication-disorder/components-of-social-communication/

Social Skills

Ability Innovations, https://www.abilityinnovations.com/blog/neurodiversity-and-social-interaction

AUsome Training, https://ausometraining.com/neuroaffirmative-social-skills/

Neurodivergent Rebel, https://neurodivergentrebel.com/2023/07/19/autism-social-skills-autistic-people-socialize-play-in-an-autistic-way/

Psych Central, https://psychcentral.com/autism/autism-social-skills#how-to-be-sensitive

Reframing Autism, https://reframingautism.org.au/what-traditional-social-skills-courses-get-wrong-and-what-an-affirming-social-skills-course-would-look-like/

Therapist NDC:
https://therapistndc.org/nothing-about-social-skills-training-is-neurodivergence-affirming/
https://therapistndc.org/therapy/social-skills-training/

Twinkl:
https://www.twinkl.co.uk/blog/neurodiversity-affirming-approaches-to-teaching-social-skills
https://www.twinkl.co.uk/search?q=social+skills+activities&c=246&r=parent&fco=14410

Very Well Mind, https://www.verywellmind.com/the-neurodivergent-guide-to-social-skills-7500818

Social Stories

And Next Comes L, https://www.andnextcomesl.com/2018/03/free-social-story-template.html
Carol Gray, https://carolgraysocialstories.com/

National Autistic Society, https://community.autism.org.uk/f/parents-and-carers/38793/templates-for-social-stories

NeuroWild,
https://www.facebook.com/photo?fbid=327308866874803&set=pcb.327309156874774
(short video made from infographic) https://youtube.com/shorts/m-WKajMZrdw?feature=share

Reachout ASC, https://reachoutasc.com/resources/downloadable-resources/

SEND Network, https://send-network.co.uk/discussions/do-you-find-social-stories-helpful

Storyboard That, https://www.storyboardthat.com/

Twinkl,
https://www.twinkl.co.uk/search?q=social+stories&c=246&ca=481&ct=tutor&r=parent&fco=14410

Visual Supports

The Autism Toolbox, https://www.autismtoolbox.co.uk/resources/technology/visual-supports-and-technology/

Speech & Language UK, https://speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/visual-supports/

Twinkl:
Now & Then Boards,
https://www.twinkl.co.uk/search?q=now%20next&c=246&ca=0&ct=&r=parent&fco=14410&view=list
Schedules,
https://www.twinkl.co.uk/search?q=visual+schedules&c=246&r=parent&fco=14410

Widgit, https://www.widgit.com/