

Neurodiversity & Gender-Diverse Youth:

An Affirming Approach to Care
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INTRODUCTION

What is Neurodiversity?

Neurodiversity refers to variations in social communication, learning, attention, and other brain functions. Neurodiverse people may have diagnoses such as autism spectrum disorder (ASD)¹ and attention deficit hyperactivity disorder (ADHD).² Many people, however, prefer the term neurodiverse over diagnostic labels because it does not pathologize or presume that a person has a deficit that needs to be “fixed.”³ Rather, neurodiversity describes people who have differences in thinking and have as much potential to make positive contributions to society as neurotypical people (i.e., people who have typical thinking and learning patterns). At the same time, neurodiverse people often experience challenges in a neurotypical world that does not always understand or accommodate them.

What is Gender Diversity?

Definitions of gender diversity vary. For this publication, gender diversity refers to people whose gender identity and sex assigned at birth do not correspond based on society’s expectations. Gender-diverse youth can include transgender girls/women, transgender boys/men, as well as youth who are gender fluid, genderqueer, non-binary, agender, etc.⁴

The Intersection of Neurodiversity, Gender Identity, and Sexual Orientation

Evidence suggests that neurodiverse people, particularly those on the autism spectrum, are more likely to be gender diverse and have a lesbian, gay, bisexual, queer, or asexual sexual orientation, compared to neurotypical people.^{5,6} The reasons why are not well understood. One possibility is that neurodiverse people tend to be less aware of, or less susceptible to, societal pressures and gender norms; therefore, they can express their gender identity or sexual orientation without concerns of being judged or fitting into certain roles.⁷ Although this may be the experience of some gender-diverse youth with autism, others report fears of coming out as transgender due to perceived discrimination.⁸

Some clinicians and researchers have considered gender diversity in autistic youth to be a “special interest” phase, rather than a persistent identity.^{4,5} Unfortunately, this interpretation has led many families and health care providers to mistakenly dismiss the child’s gender diversity as a “symptom” of autism.⁹

Qualitative research^{5,10} and clinical experience provide insight into the unique experience of gender-diverse, neurodiverse youth:

- These youth often experience a sense of urgency around affirming their gender identity.
- For some, gender identity is an area of active exploration and fluidity. These youth may fluctuate in how they define, and how strongly they emphasize, their gender identity.
- Non-binary experience is common; in clinical experience, many patients feel most comfortable with non-binary gender identification.




AN AFFIRMING CLINICAL APPROACH

A group of international clinicians and researchers with expertise in gender diversity and neurodiversity have published initial consensus guidelines for the assessment and care of adolescents with co-occurring autism and gender diversity.⁷ These guidelines are available online for free (see Resources below). For this publication, we present additional recommendations for guiding youth in exploring their gender identity development. These recommendations are based on clinical experience and align with those of the consensus group guidelines.

How to Support Gender Identity Exploration

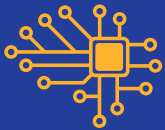
- 1 Remain open to each patient's perspective and lived experience; avoid using research findings to invalidate the patient's experience:
 - An example of an invalidating approach is: "I hear you saying that you have questions about your gender. But you also have autism, so it's possible that you believe you are gender-diverse because it's a special interest of yours."
 - An example of an affirming approach is: "I hear you saying that you have questions about your gender. This is important for us to talk about. Many young people find that they don't fit neatly into boxes, and that they don't feel the same about this every day. Tell me more about how you feel about this."
- 2 Seek to understand the patient's gender identity narrative:
 - Ask when the patient first thought about their gender, how this evolved over time, what their current experience is, and what goals they may have for next steps
 - Recognize that some neurodiverse youth will have difficulty fully articulating their thoughts and feelings about their gender identity
- 3 Explore additional perspectives with the patient:
 - Help the patient reflect on potential narratives of diverse gender roles and behaviors; patients may be encouraged to consider a variety of ways to be gendered in the world, and how others have successfully navigated this
 - Help reduce the patient's urgency around needing to ascribe 'meaning' to specific gender-stereotyped interests or behaviors; explain to them it is okay to have traditionally feminine or masculine stereotyped behavior without needing to make broader decisions around gender identity
 - Describe fluidity of gender identity, roles, and expression; if the patient struggles with abstract and flexible thinking, further validate the experience of having different feelings about one's gender from day to day
 - Suggest trying out different gender experiences to learn what feels most congruent

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- 4 Explore opportunities for community and peer support:
 - Clarify what sources are available for peer support in the autism and gender-diverse communities
 - Acknowledge that although gender diversity may provide access to additional supports, it may also increase social marginalization
 - 5 Provide guidance around ways gender can be explored further:
 - Do not try to change or test the patient's narrative; rather, help the patient further develop their identity, and anticipate positive and negative experiences
 - 6 Understand how the patient's gender identity exploration may be part of a broader endeavor of finding one's place in the world:
 - For example, is the patient trying to define their gender while also defining their goals for transition into adulthood? In these cases, affirmation of gender identity needs to be paired with active steps to support other aspects of the patient's development and identity formation
 - 7 Recognize that a diverse gender identity can be a source of strength:
 - Neurodiverse youth may see their diverse gender identity as one area of their life where they feel supported, in control, and are making progress
 - 8 Provide psychoeducational, navigation, and social support to patients and families:
 - Neurodiverse youth may experience challenges in advocating for gender-affirming interventions, navigating health care systems, and adhering to treatment protocols; therefore, these patients and their parents may benefit from tailored psychoeducation and social support resources⁷



SUMMARY

Increasingly, clinicians and researchers are seeing a correlation between gender diversity and neurodiversity among adolescents and young adults. To support these youth, providers can offer an affirming clinical approach that validates the patient's gender identity narrative, while guiding the patient to explore their gender identity in more depth and connecting them with peer groups. Gender identity exploration may involve helping the patient become more comfortable with fluidity in gender identities and roles, as well as placing gender identity development within the context of other aspects of adolescent development.



RESOURCES

Asperger/Autism Network (AANE): aane.org

See especially: Resources for Mental Health and Health Care Professionals

National LGBT Health Education Center: www.lgbthealtheducation.org

See especially: Youth Resources and Transgender Resources

Clinical guidelines: Strang JF, Meagher H, Kenworthy L, et al. Initial clinical guidelines for co-occurring autism spectrum disorder and gender dysphoria or incongruence in adolescents. *J Clin Child Adolesc Psychol.* 2018;47(1):105-115.

Book about lived experiences: Mendes E, Maroney M. *Gender Identity, Sexuality, and Autism: Voices from Across the Spectrum.* London: Jessica Kingsley Publishers; 2019.



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REFERENCES

1. Centers for Disease Control and Prevention. Autism Spectrum Disorder (ASD). Available at: www.cdc.gov/ncbddd/autism/facts.html.
2. Centers for Disease Control and Prevention. Attention-Deficit/ Hyperactivity Disorder (ADHD). Available at: www.cdc.gov/ncbddd/adhd/index.html.
3. Kapp SK, Gillespie-Lynch K, Sherman LE, Hutman T. Deficit, difference, or both? Autism and neurodiversity. *Dev Psychol.* 2013;49:59-71.
4. For definitions of these terms, see: [National LGBT Health Education Center. LGBTQIA+ Glossary of Terms for Health Care Teams; 2020.](#)
5. Glidden D, Bouman WP, Jones BA, Arcelus J. Gender dysphoria and autism spectrum disorder: a systematic review of the literature. *Sex Med Rev.* 2016;4:3-14.
6. George R, Stokes MA. Sexual orientation in autism spectrum disorder. *Autism Res.* 2018;11:133-141.
7. Ehrensaft D. Double Helix Rainbow Kids. *J Autism Dev Disord.* 2018;48:4079-4081.
8. Strang JF, Powers MD, Knauss M, et al. "They thought it was an obsession": trajectories and perspectives of autistic transgender and gender-diverse adolescents. *J Autism Dev Disord.* 2018;48:4039-4055.
9. Autistic Self Advocacy Network; National Center for Transgender Equality; National LGBTQ Task Force: Joint Statement on the Rights of Transgender and Gender Non-Conforming Autistic People; 2016.
10. Strang JF, Meagher H, Kenworthy L, et al. Initial clinical guidelines for co-occurring autism spectrum disorder and gender dysphoria or incongruence in adolescents. *J Clin Child Adolesc Psychol.* 2018;47:105-115.