Rewriting Normal: A Discourse Analysis of TEDx Speeches on Neurodiversity and Autism

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Abstract

Nearly 1 in 50 in the United States will be diagnosed with Autism Spectrum Disorder (ASD) (Dietz et al. 2020), while in Sweden, the statistics oscillate around 1.5% (Linnsand et al. 2021). Yet, not many are familiar with the concept of neurodiversity, an emerging social identity. The idea that mental disabilities may play a significant role in the development of the human race is not new but it does not gain enough attention from the general public. Because mental disabilities concern the brain, we feel a moral imperative to protect the well-being of the affected ones while simultaneously not giving credit to their own self-agency. However, this article presents the viewpoint on neurodiversity of three autistic women and by using Positive Discourse Analysis (PDA) examines the discursive strategies and main themes in three TEDx talks concerning autism. The results show that by nomination the autistic women advocated a redefinition of autism as an identity which gave them a sense of alternative normalcy. A two-fold depiction of autistic traits (features) as unique but also limiting shows the dichotomy in presenting struggles and challenges: on the one hand by mitigating their severity, and on the other by intensifying the hardships. Finally, by perspectivation they present their approach to the division into low and high-functioning autistic people and argue that this distinction is based on the neurotypical perception of ASD but has little to do with the severity of the syndrome one experiences. Finally, they argue that exposing non-stereotypical (female) traits can result in a delayed diagnosis.

Keywords: discursive strategies; autism; Autism Spectrum Disorder; ASD, Positive Discourse Analysis; Asperger’s syndrome

1. Introduction

The autistic ‘coming out’ of the world-renowned business visionary and self-made multibillionaire, Elon Musk, in May 2021 might have made few headlines or initiated a couple of discussions on breakfast television. At most, the event was followed by little-noticed social media content

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creators who on the wave of excitement revealed their neurodivergent identity. The societal shrug of shoulders was far from expressing acceptance or understanding. The fact that it is an autistic person who has restarted the Space Race—and with high likelihood will make the first step on Mars possible—seems to have slipped people's attention. It is not because autism has finally been normalized. After all, Elon Musk fits the stereotype of an eccentric inventor perfectly. In fact, it is another missed opportunity to debunk misconceptions surrounding autism and other mental disabilities. It is a failure to trigger an open discussion about social aversion, too rigid educational systems and violence against people on the spectrum. The problems with accessibility and acceptance are already faced by at least 1.5–2.2% of the population in the developed countries, as the number of people diagnosed with Autism Spectrum Disorder (ASD) is growing rapidly (Dietz et al. 2020; Linnsand et al. 2021).

Mental disabilities and illnesses are still the most stigmatizing medical conditions in Western culture (Corrigan and Watson 2002). For centuries, any psychiatric disorder has disqualified people from feeling an equal part of an abled-normative society (Corrigan and Watson 2002). In medicine, mental conditions were quickly separated from other health issues and it had drastic implications on the quality of treatment and patients' isolation (Latoo et al. 2021). Latoo et al. (2021: 2) argue that this distinction on physical and mental facilities alongside the lack of understanding of the cause and treatment contributed to 'mystify(ing) mental illness' and recognizing psychiatry as 'less scientific'. Moreover, the progress in medicine is not necessarily reflected in the change of social discourses concerning mental impairments. Having said that, the idea that mental disabilities may in fact play an important role in humans' natural brain diversity is controversial and extremely difficult to defend, especially when it potentially undermines the purpose of many studies in modern biomedicine, psychology, and psychiatry. However, it is exactly the conceptualization of mental disabilities and impairments the *neurodiversity* movement advocates want us to revise. The *neurodiversity* (the diversity of minds) viewpoint was introduced more than two decades ago (Hughes 2021; Ortega 2009; Kapp 2020; Singer 1999), but it encountered resistance in gaining attention and support since the very basic social assumption is that people with different from common intellectual capacities are not competent enough to act as an agent in their own case (see Jaarsma and Welin 2011; Jaarsma 2014). Thus, challenging the present discourses and debunking deficit perspectives seem to be extremely problematic.

The internet became a safe space for proclaiming those ‘controversial’ opinions and it has brought the matters of people with mental disabilities and illnesses into the public consciousness (Parsloe 2015: 340–341). Online groups and social network sites can positively affect disabled people’s well-being by giving them space to express their viewpoints, share useful information, and provide emotional support (Lee and Cho 2019). The growing number of internet content creators openly share their experiences as *neurodivergent* living in a *neurotypical* society (Parsloe 2015). A group that is especially active in this field are people with Autism Spectrum Disorder (ASD). On the other hand, ableism is still present in media and pop-culture which tend to portray autistic people in a stigmatizing way—usually as funny and lovable comic characters, as a stereotypical ‘nerdy TV Aspie’ (Parsloe 2015: 348), but this comicality deprives them of seriousness and in consequence, they are no longer of standard value. To illustrate, in the Netflix series, *Atypical*, the autistic main character’s love life and social interactions are presented in the form of a comedy plot whereas every side character leads a regular life full of ‘real’ problems and serious relationships.

In the field of linguistics and psycholinguistics, the majority of the studies naturally focus on the functional side of autism, namely, language development, language impairments, and communication deficits (see, e.g., Naigles 2017; Ramírez-Santana et al. 2019). Sadly, those with disabilities are not yet recognized as a social group in this context, and mental disorders are almost entirely omitted in textbooks in sociolinguistics, for example. Only recently was the discussion about the new conceptualization of autism opened by Hughes (2018). While laying out the principles of Positive Discourse Analysis (PDA), Hughes (2018: 194) analyzed blog posts by Amy Sequenzia, an autistic woman labeled as a low-functioning blogger in terms of ‘progressive social change’. In what way harmful stereotypes are replicated in the social discourse was the focus of Hamilton (2019), who examined the discourse of the three most popular British newspapers concerning autism. Hamilton (2019) concluded that even a newspaper like the Guardian ‘failed to both acknowledge and recognize human diversity and autistic people’s rights within the neuro-diversity movement’ (Hamilton 2019: 32).

Overall, the research on the discourse of neurodiversity is rather fragmental and to date, no study has been conducted to investigate discursive strategies of the neurodiversity movement's motivational and educational speeches. Therefore this study aims to investigate in what way the ideas of neurodiversity and intellectual ableism are conveyed in TEDx speeches by women diagnosed with high-functioning autism (formerly known as Asperger's syndrome) in their adulthood. This study will apply Positive Discourse Analysis (PDA, a complementary framework within Critical Discourse Analysis, CDA) (Stibbe 2017) to investigate discursive strategies used by the autistic self-advocates to construct their reality, groups, and identity.

In this study, I will argue that the main source of problems and discomforts experienced by autistic people is the society continuously disregarding needs and vulnerabilities of neurodivergent people. I will explore the main trends, themes, and rhetoric devices used by the neurodiversity self-advocates to reclaim their agency over the discussion on ASD. The article will address the following questions: What discursive strategies are used to challenge the existing conceptualization of a mentally disabled person? To what extent do the speakers question the medical model of disability placing the issue within the disabled person? In what way are the speakers reclaiming the agency over autism as a natural variation? I hope to shed more light on the arguments brought up by the autistic movements and give voices to those whose rationality has often been invalidated. Thus, this study contributes to the literature on the discursive construction of intellectual disability.

2. Previous research on neurodiversity

The term *neurodiversity*, coined by Judy Singer at the end of the 1990s, introduced a new paradigm of mental disorders by a reconceptualization of what was initially thought to be intellectual impairment as a natural variation of brain development (Hughes 2021; Ortega 2009; Kapp 2020; Singer 1999). This idea challenges the perpetuating stigma surrounding mental disabilities and objects to the binary division of desired normal and homogenized 'abnormal' (Parsloe 2015: 344–346). The movement emerged from the autistic communities, and today neurodiversity is often referred to as 'an umbrella term, including dyspraxia, dyslexia, attention deficit hyperactivity disorder, dyscalculia, autistic spectrum and Tourette syndrome' (Clouder et al. 2020: 757). The movement proposes a new approach to autism spectrum disorder (ASD) as ‘different wiring of the brain’ and depicts autistic people as a social minority within a *neurotypical* majority. Similarly to gender or race, neurological variation like autism should be understood as identity, not disease or impairment (Ocampo Gonzales 2018). Neurodivergent groups and communities adopt the social model of disability, positioning the source of their struggle within society and not in their psychomedical condition. As Peruzzo (2020) states:

> since the late 1970s, […] disabled activists refused the medical understanding of the experience of disability and divided the biological difference of the impairment from the social construct of disability. Disability became the product of social practices that did not allow for the participation of disabled people in society. (Peruzzo 2020: 33)

Furthermore, the autistic activists denounce the derogatory medical discourse which implies that their brains are deficient, malfunctioning or defective and in consequence places them in a position of victims of their own condition. They also quite often oppose the research concentrated on finding a cause or cure instead of creating proper ways of accommodating different needs of neurodivergent people (Lim 2015).

Since cognitive disabilities concern the brain, we automatically assume that affected people are not fully competent to decide on their own lives. It prevents many from attempting to conceptualize that what is believed to be a defective brain could be in fact a natural variation. This approach prevails in the discussions surrounding neurodiversity, especially in the field of bioethics and biomedicine. The mistrust in the rationality behind the concept of neurodiversity was expressed in many scientific papers, and their recurring argument against this concept was minimizing the needs of ‘low-functioning’ autistic people who often require assistance and understating the abilities of ‘high-functioning’ members of the community (Hughes 2021: 56). Even though in 2013, the fifth edition of *Diagnostic and Statistical Manual of Mental Disorders* (DSM) grouped Asperger’s syndrome, a high-functioning variant of autism, under the umbrella of ASD (Parsloe 2015; Parsloe and Babrow 2016), Jaarsma and Welin, while discussing eugenic practices, rejected all arguments brought up by the neurodiversity movement at first, and stated that only ‘mild autism *can* be valuable (Jaarsma and Welin 2011, 2013: 13). Later, Jaarsma (2014) concluded that only high-functioning autism could possibly be considered a natural variation, but also, Jaarsma and Welin (2015) criticized the idea of abandoning the search for treatment because accommodation can possibly only serve high-functioning groups. Jaarsma and Welin seem to be in line with what Hughes (2021: 56, 60) labeled as ‘the narrow conception of neurodiversity’ because ASD ‘sometimes has the intrinsically harmful character that is necessary for a condition to count as a disorder’. Wakefield et al. (2020) promoted a notion of ‘moderate neurodiversity’, an approach without ‘denying the reality of some forms of autistic disorder’. Another interesting point in the ideological dispute was brought up by Shields and Beversdorf (2020) who argued that denying ASD the status of a disorder may have negative implications in the case of legal actions taken against an autistic person. In response, Chapman (2021), adapting a future-based perspective, introduced a new concept of ‘an *ecological model* of mental functioning’ where neurological diversity may not be understood, appreciated or desired at present but this could change in the future. As an illustration of that future change, he brought up the pandemic and lockdown measures in 2020 which proved that autistic workers were managing to work remotely and deal with social isolation better than other groups (Chapman 2021: 6). It should be noted that a shared feature of similar articles is that they are highly theoretical and do not necessarily have an autistic minority in focus if they recognize that neurodivergent people are a minority at all (Jaarsma and Welin 2011). Finally, why does society position autistic people in a place where they have to prove their ‘usefulness’ and ‘resourcefulness’ in order to be considered equal?

The purpose of this article is not to settle this complex dispute or solve the problem of the philosophical and ethical nature surrounding the neurodiversity movement. On the other hand, it is impossible to discuss intellectual disabilities without explaining the concepts of the discourse of disability and ableism. The medical concept of disability involves derogatory vocabulary like ‘disfunction’, ‘disorder’, or ‘weakness’ and it implies some kind of inferiority of people on the spectrum (Parsloe 2015: 337) and positions them as people in need of assistance, unable to live their life without assistance, and concentrating the issue within the person’s medical condition and not the surrounding society. Ableism includes all discriminatory behaviors, prejudices, and biases against people based on the distinction between ‘normal’ and ‘disabled’, thus, the idea of normalcy can be considered exclusive and discriminating on its own. Intellectual ableism, underrepresented in the literature (Campbell 2021; Storr et al. 2021), is connected to a strong superiority belief justifying derogatory approaches to intellectually disabled people by a moral imperative to protect their well-being.

On the more practical side of the neurodiversity discussion, there are researchers who looked into the development of the neurodiversity communities and their impact on autistic people's lives. For instance, Parsloe (2015) investigated the positive effect of empowering online discourse on ASD online communities in regards to normalcy, agency and symptoms; however, she also shed some light on potentially negative phenomena, for instance, expressing superiority over the neurotypical society. Cooper et al.'s (2017) empirical study provides evidence that positive autistic identity created online may improve the overall well-being of autistic people, as well as significantly reduce their anxiety and other mental health issues caused by social ostracism. Furthermore, the medical professionals may still prefer to use person-first language (PFL, so 'a person with autism') since they perceive autism as a medical issue mainly, but the majority of the UK autistic community prefers identity-first language (IFL, 'an autistic person') (Kenny et al. 2016). Similar conclusions were reached by Shakes and Cashin (2020: 225), who analyzed Twitter discussions and concluded that there is a connection between the perception of autism and the usage of PFL and IFL, with IFL as a preferred option for those who understand autism as an identity.

Spreading awareness and a better understanding of what autism and neurodiversity are have already had positive implications on research concerning autism. For instance, Barnhart and Dierickx (2021) recommend including neurodiversity advocates in the discussions on the principles, aims, and ethics of autism and brain research. Labor market activation seems to be successful since there is an apparent interest in investigating how different neurodivergent groups contribute to a workplace, considering their traits and strengths, not deficits (Armstrong 2017). For instance, Moore et al. (2021) examined the relation of people with ADHD to what they call 'the entrepreneurial mindset', but Bury et al. (2020) overturned the well-known bias about autistic advantage in the workplace. Undoubtedly, the accommodation of neurodivergent students has also been the focus of pedagogical and psychological research. By ensuring equal access to education, neurodivergent people can overcome learning difficulties and succeed on their academic path. However, the most recent studies have shown that even the best accommodation techniques will not help much if neurodivergent students fear disclosing their learning difficulties and, in consequence, they still struggle with stigmatization and anxiety (Clouder 2020).

3. Autism in women and the default man issue

Since this paper analyzes three speeches of women on the spectrum (see section 5), I will touch upon the gender gap in medical care and medicine treating a man as the default. The default man issue starts with a presentation of the human body in textbooks always deprived of breast tissue, and ends with inadequate pain treatment, not recognizing a heart attack in females due to different symptoms, and obviously has very serious implications on how inaccessible or incorrect medical treatments for women can be (see Poon et al. 2012; Kolmes and Boerstler 2020; Spurgeon 2007). Autism is conventionally associated with boys and men because there are simply more boys and men affected by it. However, the lack of a proper definition of female autism, and depiction of female traits as less intense, affects females who are underdiagnosed and must create their own coping mechanisms to adapt to neurotypical society (see Hull et al. 2020). The reasons behind this state of affairs could be of a social nature (e.g., focusing on the default man, different social norms such as more or less rigorous upbringing making a woman compensate better for her traits) or strictly biological (e.g., Female Protective Effect, genetics causing a varied presentation of traits) (see Hull et al. 2020). Sadly, research on autism in nonbinary people is essentially inexistent. Thus, looking into the issue of autism as an emerging identity from the perspective of autistic women sheds more light on the gender gap in medicine.

4. Methodology: Positive Discourse Analysis and discursive strategies

Every text or speech is deeply embedded in the social context. Having in focus the oppressed groups, a social issue-driven Critical Discourse Analysis (CDA) methodology

> aims to systematically explore often opaque relationships of causality and determination between (a) discursive practices, events and texts, and (b) wider social and cultural structures, relations and processes; to investigate how such practices, events and texts arise out of and are ideologically shaped by relations of power and struggles over power. (Fairclough 1995: 132)

CDA has been an appropriate theoretical and analytical tool used by linguists and sociologists to analyze the ways abuse, discrimination, social inequalities, and injustice are formed, reproduced and eventually legitimized (van Dijk 1993; Wodak and Meyer 2009). Various CDA studies on media or political discourses have greatly contributed to uncovering manipulations, populism, and harmful practices towards oppressed and victimized groups in terms of racism (van Dijk 2016), gender equality (Wodak 1997), the discourse of disability (Liasidou 2016), etc. However, this study applies the Positive Discourse Analysis (PDA) approach. The term PDA was coined by Martin (2004) who noticed a lack of researchers' attention to

> understanding of how change happens, for the better, across a range of sites—how feminists re-make gender relations in our world, how Indigenous people overcome their colonial heritage, how migrants renovate their new environs and so on. (Martin 2004: 185)

As often underlined, PDA should be understood as a complementary framework within CDA, filling the gap in the research topics dealing with empowerment and emancipation. As Stibbe (2017: 168) states 'PDA was never intended as a replacement for Critical Discourse Analysis (CDA), but rather as an encouragement to extend the focus of CDA beyond texts which are implicated in oppression, exploitation and the abusive power relationships'. Bartlett (2017) calls PDA an orientation of CDA (Bartlett 2017: 135). After Martin (2004) laid out the principles of PDA, this framework did not gain much attention (Bartlett 2017), and only recently have there been more studies engaging this approach. Many linguists mentioned that the juxtaposition of *positive* and *critical* is in some way misleading since CDA does not entail negative perspectives (Bartlett 2017). Reisigl and Wodak (2009: 87) underlined that *critical* in CDA means 'gaining distance from the data (despite the fact that critique is mostly "situated critique")'. Thus, Hughes (2018: 198) proposed *progressive* as an alternative 'label that may enable researchers to grapple more critically with the question of what constitutes "positive" social change' and does not imply seeking for dominance and hegemony.

As one of the main differences between CDA and PDA, Stibbe (2017) provides the choice of analyzed materials. As CDA looks for patterns in the dominant oppressive discourses, 'PDA analysis will be searching for positive discourses outside of the mainstream which are not pervasive yet, but which could offer something valuable if they were promoted to become more pervasive' (Stibbe 2017: 175). In the case of PDA, the researcher acknowledges the meta-dimension of research works, replication and promotion of alternative discourses. PDA will be especially useful in the case of emerging positive ideologies like neurodiversity that have the potential to break into mainstream views.

Stibbe (2017: 175) underlines that in 'studies of racism, analysts rarely mention the values framework they are using to judge discourses against since it is treated as self-evident that racism is negative and needs to be eliminated'. Even though the potentially oppressive discourses surrounding mental health are self-evident, they are not well-defined. Nowadays, the neurodiversity movement does not challenge an ideology or deal with any particular counter-movement (e.g., as LGBTQ+ has to face the homophobic ideology). On the one hand, the medical field primarily provides knowledge and help; on the other, medical discourse creates a negative meaning of disabilities in general by drawing a clear distinction between normal and undesired abnormality. It should be noted that the relationship between medical and social discourses on the topic is bidirectional. The *neurodiversity* discourse is a counter-discourse to a multilayer perception of mental health and its variations in medicine and society at the same time.

This study recognizes *neurodiversity* as an emerging social identity. Following the framework of Sultan and Rapi (2020), it combines the PDA approach and discourse strategies defined by Wodak (2001) and Reisigl and Wodak (2009). Wodak (2001) lists predication, nomination, argumentation, perspectivation and intensification/mitigation as 'five types of discursive strategies, which are all involved in the positive self- and negative other presentation' and which concentrate on 'construction of "us" and "them" as the basic fundaments of discourses of identity and difference' (Wodak 2001: 10; Reisigl and Wodak 2009: 95; see Table 1).

Table 1. Discursive strategies (from Reisigl and Wodak 2009: 95)

Discursive Strategy	**Objectives**	**Questions**

Nomination	“discursive construction of social actors, objects, phenomena, events, processes, and actions”	In what way are the groups constructed, categorized, named and referred to?
Predication	“discursive qualification of social actors, objects, phenomena, events/ processes and actions (more or less positively or negatively)”	What negative or positive features are suggested or attributed to people with ASD or the neurotypical majority?
Argumentation	“justification and questioning of claims of truth and normative rightness”	How are arguments used to validate the right to agency and self-advocacy?
Perspectivation	“positioning speaker’s point of view and expressing involvement or distance”	From what perspective are these arguments expressed?
Intensification and mitigation	modifying (intensifying or mitigating) the illocutionary force and thus, the epistemic or deontic status of utterances	Are these arguments expressed overtly or covertly, what’s the speaker’s positioning?

I have adopted Mullet's (2018) 7 Stages of General Analytical Framework for CDA. In the first step, I identified the main discourses surrounding neurodiversity. In stage 2 ('Locate and Prepare Data Sources'), I have chosen three of the most popular TEDx talks about autism and neurodiversity given by females diagnosed with ASD in their adulthood. By analyzing the social context of mental disability discourse, I was able to examine the background of the speeches (stage 3) and thus, identify four major themes referring to autism as a minority (stage 4: re-defining autism as an identity, constructing the negative 'them', unfolding the reality of autism, and debunking the division on high- and low-functioning). The talks were transcribed and coded by myself in order to identify external and internal relations (stages 5 and 6). Stage 7 is to interpret the data (see section 6).

5. Materials

This study analyzes the video recordings of three TEDx speeches by females who represent the autism community and spread awareness about ASD to challenge our understanding of autism as a limitation, disability, or mental illness. TED is a non-profit organization helping to promote new social and scientific concepts. TED organizes local events, called TEDx, under the slogan 'Ideas Worth Spreading'. Many of their materials are later published online and are freely available in the public domain on the streaming platform, YouTube. The first speech '*How to be normal (and why not to be)'* was given at TEDxNewPlymouth, New Zealand, by the Māori writer, Jolene Stockman on 22 July 2018. On 18 May 2019, Tashi Baiguerra, an Australian actress and musician, spoke about her experience as a newly diagnosed autistic person in '*My brain isn't broken'*, during TEDxLondon. During TEDxSydney on 21 September 2019, Dr Jac den Houting, an openly autistic researcher in psychology presented her ideas in '*Why everything you know about autism is wrong*'. The speakers are of different backgrounds, but they share one element, a late diagnosis, meaning that they grew up unaware of their neurodivergency.

6. Results

The results of the study are presented in five subsections, each representing one or more of the discursive strategies identified in Table 1.

6.1 Re-defining autism as an identity: Nomination and argumentation

Autism is a known but misunderstood concept; thus, nominal discursive strategies can be used to establish language that will depict autism as a natural phenomenon not a disorder. In the three speeches, autism emerges as a distinctive feature of a social group. Neurodiversity is the key concept normalizing autism and introducing it as a biological feature:

> (1) The neurodiversity paradigm is an alternative way of thinking about autism. It describes autism as a part of the range of natural variation. (Jac)
>
> (2) Neurodiversity is the understanding that humans are diverse in their brain function. […] Autism is a way of processing the world, and I am exactly like that. (Jolene)

The speakers address the neurotypical majority and they nominate themselves as the others. They also use attributes such as ‘natural’ or ‘strength’ in reference to themselves to underline not only the otherness but also their potential. It contradicts the common assumptions that autism constitutes a medical or social problem.

Parsloe (2015: 349) states that ‘being labeled with Asperger’s syndrome is accompanied by denial, resistance, and resentment’. However, this may be the first fallacy society falls into when trying to understand autism, as all three speakers experienced a feeling of relief and liberation when they learned about their condition, for instance:

> (3) Finding out that I’m autistic brought me an overwhelming sense of relief. My whole life, up to that point, finally made sense. (Jac).

Jac describes a cognitive dissonance she underwent while being diagnosed with autism. Jac depicts this focal point as positive and bringing an entirely new perspective on her life:

> (4) My paradigm about myself shifted. I wasn’t a failed neurotypical person. I was a perfectly good autistic person. (Jac)

Simultaneously, Jac started learning about her ‘deficits’ pejoratively described in the biomedical discourse. Clearly, that is a reference to the disparity between the medical discouraging representation of autism and the actual implication of what autism really is. Tashi also admits that the diagnosis brought a new perspective:

> (5) All these things for which I'd always thought I was a failure, they were just traits of autism. (Tashi)

The diagnosis let them change their membership categorization from 'normal' to autistic-normal. It implies that a new set of rules and principles is now applicable to them. Those two paradigms do not overlap, and being assigned to the wrong biological group can cause distress and failure. What should be noted here is that the speakers seem to construct a clear division between the autistic in-group and the neurotypical out-group. The diagnosis helped them to re-categorize themselves, and the moment of diagnosis was a social advancement by releasing them from having to meet standards of the neurotypical out-group. Similarly, Jolene decided to embrace her 'different wiring' by saying that nowadays, she wants to be recognized as an autistic person 'because the label will come with freedom'. Jolene's diagnosis provided her with 'a new filter' and a release from having to fulfill the expectations of normalcy.

The speakers present their arguments from a position of a minority within a majority. Here, nomination is used differently from the radical or populistic discourses described by Wodak (2001). Even though firstly, the aim of constructing the autistic-normal is to create an image of a vulnerable and misunderstood social group, the secondary goal is to educate, spread awareness and mitigate exclusion. Thirdly, the objective is to re-nominate autism from a medical issue to a valuable and integral component of society. Using more scientific terms, Jac compares neurodiversity to biodiversity, directing on its potential 'to create a healthy and sustainable cognitive environment'. Similarly, Tashi sees neurodiversity as an opportunity to create a better future, as she says:

> (6) Our diversity, that's our strength, and with a world full of different kinds of brains all working together, we can achieve goals, as a race, that we never thought were possible, and we can make a future that is so beautiful, together. (Tashi)

Those statements reflect the ecological model of neurodiversity by Chapman (2021), as the speakers do not look at their potential only here and now, and by proving their resourcefulness, they can secure their position in society. Also, the implication here may be that erasing autism as if it was a disease may in practice destroy the natural balance needed for the healthy development of society.

Furthermore, the distinction between 'normal' and autistic-normal becomes somewhat blurred when Jolene points out society's inconsistent approach to normalcy. Namely, being normal is not generally aspired to, since it is nobody's goal to be average. However, she explains that we have a primary fear of being different because it equals either a failure now or a 'death' in the past. Jolene asks the rhetorical question 'Who decides what feelings are normal or appropriate? pointing out that no one has agency over normalcy. In this sense, she undermines the idea of normalcy as an abstract concept without a proper definition and detached from reality. Finally, she adds: 'There is no "normal". There is no "real world"; only the one we decide and the one we create' and 'Your existence, our existence rewrites normal'. She reclaims the concept of normalcy.

Only Jolene addresses the IFL (identity-first language) and PFL (person-first language) conventions directly by stating that:

(7) I don't have autism, I do not suffer from autism. I'm *tangata wai takiwatanga*,[1] an autistic person.

Then she also added that being autistic is in fact a matter of identity ('It's who I am; it's how I'm wired'). The two other speakers use IFL when referring to themselves or other people on the spectrum. Interestingly, in Jac's speech, the PHF phrase ('a person with a disability') is mentioned only to explain how disability should not be considered as an individual issue but a social concept. Also, Tashi implicitly refers to autism as her identity: 'I can't separate my Asperger's from myself, and I don't think I want to. Not anymore'. That is in line with previous studies on the topic that people supporting the neurodiversity movement will treat autism as identity using IFL (see Shakes and Cashin 2020, Hughes 2018: 202).

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[1] Meaning *an autistic person* in te reo Māori.

6.2 The negative 'them'—depicting ignorant society: Predication and mitigation

Wodak (2001) argues that the construction of a new social identity requires the construction of negative 'them'. As mentioned above, the speakers seem to share a similar clear distinction on the unspecified 'normal' and autistic-normal. Attribution of negative traits to the neurotypical majority is rather implicit and challenges neurotypical society's knowledge, perception or compassion, for instance:

(8) Everything we understand about this planet is grounded in the fundamental assumption that the Earth is round. But there was a time, not all that long ago, when we knew that the Earth was flat. (Jac)

The key word here is 'knew' (not, e.g., 'thought', 'assumed') showing how basic social truths may have little to do with reality. Also, the oppressive group is the entire society, as they actively ignore the needs of the neurodivergent group. Jac and Tashi identify the society as the cause of her disability:

(9) Disability is something that's being done to me. I'm actively being 'dis-abled' by the society around me. (Jac)

(10) Most autistic people don't actually suffer from our autism. We suffer from the way the world sees and treats our autism. (Tashi)

The speakers align with the social model of disability and point out how they cannot stop being autistic but that there are ways to stop disabling them. However, the speakers do not engage in a traditional blame game. Using the vague concept of *society* is a mitigation strategy, as the audience may not identify themselves as the bad agents. Similarly, by putting the focus on their problems, suffering and discomfort, they avoid a direct accusation of ableism. To put into perspective how oppressed the autistic community is, Tashi and Jac use argumentation strategies, for example, reporting on the dramatic consequences of lack of accessibility and inclusion of autistic people:

> (11) About 60% of autistic adults are under- or unemployed: 87% of us have mental illness. Autistic people are nine times more likely than the general population to die by suicide. We have an average life expectancy of just 54 years. (Jac)
>
> (12) People with intellectual disabilities, including autism, are seven times more likely to be sexually assaulted than those without disabilities. Young autistic people are 28 times more likely to attempt or commit suicide. (Tashi)

Those arguments are results of living in a neurotypical society and covertly frames the neurotypical majority not only as passive observers but also as the actively excluding and discriminating agents. Again, it is implied but not stated. In this context, Jolene mitigates the problem further by justification of exclusion as a natural strategy:

> (13) As humans, we look for sameness. Biologically, it's how we're designed. It's survival, because the opposite of normal is different (Jolene).

Because it is some 'higher power' (human nature or biology) to blame, Jolene creates an image of an unfortunate situation. This strategy is rather an invitation to start a dialogue between the groups than pointing a finger on neurotypicals. After all, their goal is not to build up more tension but to embrace equality.

Predicational discursive strategies are apparent in reference to researchers who are depicted as misinformed and unwilling to change. Jac indicates a resistance among neurotypical researchers to new ideas:

> (14) In 2012, an *autistic* researcher named Dr. Damian Milton proposed a new theory. He called it the 'double empathy problem'. And what he suggested was this: maybe autistic people don't actually have social deficits. Maybe we just get along better with other people who think like us. […] to the autistic community, this made perfect sense. But a lot of autism researchers weren't so keen. I guess maybe they didn't like the idea that the whole history of autism research could be based on flawed assumptions. (Jac)

Jac immediately supports this by referring to an empirical study that could confirm the accuracy of this theory. The juxtaposition of an autistic and autism researcher is symbolic here. By predication, Jac implies that autistic people are progressive and only they can understand the 'autistic problem', but a suggestion of a change evokes an immediate counteraction from old knowledge gatekeepers.

A very disturbing phenomenon observed by Parsloe (2015) is the existence of very radical views on attempts to treat autism or help autistic people to adjust to the rest of society. According to her observations, some autistic people compare it to Nazism, minority discrimination or colonialist approach to indigenous people. Indeed, it is hard to ignore the analogy to the strikingly similar situation of LGBTQ+ people whose identity was officially considered a mental health issue up until the end of the twentieth century (Mahler et al. 2018). Since the internet spaces allow very radical ideas to be expressed, a TEDx event is a formal event where speakers are not anonymous, and therefore no extreme ideas were presented.

6.3 Unfolding the reality of autism. Intensification/mitigation

There is a clear dichotomy in the depiction of autistic traits. Intensification strategies are recognizable in acknowledging the severity of issues with interpersonal relations, stimming, meltdowns or shutdowns as obstacles, hardships and sources of further problems:

(15) my strange intensity in social situations, my weird obsessions that never go away, my failed attempts at friendships, my tendency to cry and panic and hit myself, and stay non-functional for hours afterwards. (Tashi)

The speakers clearly identify a source of incompatibility within themselves. Jolene expresses her gratitude for the extra efforts and lifestyle changes of neurotypicals living with autistic people, implying that this lifestyle is not easy:

(16) They honor our sensitivities even though they don't feel them. They cut the scratchy tags out of clothes, they limit their activities, they lower their volume. You guys change hundreds of things about your lives so we can be in it. (Jolene)

Addressing the audience directly ('you guys') shortens the distance between the audience and the speaker, but here it happens only in a positive context of neurotypical people making adjustments to accommodate an autistic person. That contradicts Wakefield's et al. (2020) opinion that the neurodiversity movement is 'denying the reality' of their own condition.

The depiction of autistic traits, especially hypersensitivity, triggers the usage of animating prosody. For instance, Jolene's speaking pace increases while she lists all things making her sensory-overloaded, as if she tried to mimic what is happening in her head while she experiences regular activities. Similarly, Tashi overtly articulates words describing hardships that autistic people have to endure what evokes feelings of tension in the audience.

On the other hand, Jolene uses plenty of humor, anecdotes, comic language to describe her traits, for instance: 'As you can imagine, I am super fun to live with'. She uses mitigation strategies to play down the severity of negative events caused by her neurological condition. Metaphorically, she compares autism to

> (17) running on Windows when everyone else is on Mac. It's not bad; it's just different. (Jolene)

Some traits are assigned a significant positive value. For example, Jolene talks about her autistic 'superpowers' or 'giftedness', and Tashi mentions 'many individual and unique strengths' that autism comes along with and that her condition makes her 'insanely passionate' and 'brave enough'. Parsloe (2015: 345) pointed out that '[t]his sense of pride can easily shade into a sense of superiority'; however, none of the speeches contained any indication of autistic people being dominant over neurotypicals.

6.4 Debunking the division on high- and low-functioning: Argumentation and perspectivation

Wodak (2015: 8) says that the purpose of argumentation is '[j]ustification and questioning of claims of truth and normative rightness'. Argumentation and perspectivation strategies overlap in these contexts as perspectivation is used in the speeches not only to present a point of view from within the group but also to make an autistic person the primary knowledge source. All three speakers addressed the theories discussed in

Jaarsma (2014) and Wakefield et al. (2020) about the heterogeneity of ASD and the distinction between high- and low-functioning autistic people, and how the neurodiversity concept could be applicable to high-functioning autistic people only. Hughes (2018: 203, 204) calls it 'the hierarchy of impairment' and presents how this 'functioning discourse of presuming incompetence' is addressed by an autistic person labeled as 'low-functioning'.

To illustrate, Jac points out that phrases like 'equal treatment and respect' are reserved only for high-functioning autistic people just because their disability is not conspicuous, while common sense would require equality for everyone. Tashi and Jolene reveal that they are diagnosed as high-functioning and seem to consider the functioning labels as negative, and above all, highly inaccurate and based on a fallacy:

(18) You might say I have mild autism, but that's only because you experience me mildly. I don't experience my autism mildly. (Tashi)

That indicates that society applies labels of 'low-' and 'high-functioning' by their neurotypical standards and for their ableist convenience. Because Tashi's autistic traits are not visible or 'disturbing' and she is able to act within what neurotypicals consider to be the norm, society is more willing to grant her a membership in the 'almost-normal' group without any further insight into her own experience of autism. Similarly, Jolene places the labeling issue within the society and that the only way to be accepted is by adapting to the norms of neurotypicals:

(19) I can mimic normal, but my autism isn't gone; it's just no longer your problem (Jolene).

She compares having to act like neurotypicals to conversion camps for gay people. Furthermore, Jolene states that labeling her 'high-functioning' is belittling the immense effort she must make to camouflage autism:

(20) Saying I'm 'high-functioning' discounts my shutdowns. It ignores all the ways I've rigged up my life to cope with the stress. It totally overlooks the millions of little decisions and steps and techniques I used to survive by passing as normal. (Jolene)

Tashi puts emphasis on the uniqueness of an individual's autistic experience by using a metaphor of a color wheel on which 'each color represents a different trait or experience that is related to autism' and 'every autistic person, no matter how they appear, has their own unique plot of points across the wheel'. Unity in diversity leads to another strong argument—the right to agency and self-advocacy.

Overall, autistic self-advocates position themselves as experts in their own case by questioning the validity of neurotypical specialists. Jac plainly states what changes are needed to reclaim agency over the autistic discourse. Those arguments justify the above claims that autistic people leading research on autism is essential since they are experts in this matter. Likewise, Jac points out that the new ideas surrounding autism meet with resistance in the field because the assumption that autism is undesirable is a foundation for many studies. Jac states the idea of a paradigm shift with the example of a flat Earth assumption, possibly implying that a shift of a similar magnitude in the conceptualization of mental disabilities needs to happen to accept neurodiversity.

6.5 The autistic gender gap: Argumentation

Finally, argumentation strategies are used to explain the issue of the autistic gender gap in medicine. Both Jolene and Tashi bring up this important topic of understanding autism exclusively through the lens of a stereotypical male showing well-described traits. There are also references to the harmful stereotypes replicated in pop culture:

(21) We aren't Rain Man. We aren't Sheldon Cooper. We aren't doomed to a life in care, unable to function. And when we aren't these stereotypes, nobody sees us. Nobody saw me for 21 years. (Tashi)

In other words, the perpetuating stereotypes delayed Tashi's diagnosis (and implicitly denied her access to proper therapy and treatment). She even calls people diagnosed 'the lucky ones' because they 'haven't slipped through the cracks'. According to Tashi, the repetition of stereotypes that people on the spectrum are a homogenous group will only bring more harm. Jolene states that only one in ten diagnosed children is a girl, but that may not reflect the actual number:

(22) But we’re not rare; we’re hidden. Our ability to camouflage our symptoms and mimic normal makes us a challenge to identify and diagnose. Like me, many autistics are only diagnosed as adults, either due to their own child’s diagnosis or a crisis too big to camouflage. (Jolene)

Again, she is mitigating the issue by pointing out that females’ ability to compensate for autistic traits is the issue and so justifies the fact that the gap exists. Those statements can be interpreted as indirectly referring not only to the lack of proper diagnostic criteria for autistic women but also to the gender gap in medical care and medicine treating a man as the default human. Evidently, the gender research gap is a problem for the autistic community. Jolene argues that there are two totally different types of consequences caused by a delayed diagnosis of autism (or any other neurological impairment). One leads to severe self-blame, because without knowing what the cause of failure in social interactions is, people internalize those problems. Jolene tried to work harder to compensate for her deficits and that resulted in an autistic shutdown. On the other hand, she admitted that the late diagnosis allowed her to live without the burden of being stigmatized and labelled as a mentally disabled person.

7. Conclusions

To summarize, in the midst of criticism from the bioethical field, autistic self-advocates have an extremely challenging task to convince society that their differently wired brains are equally valuable. This article has analyzed the main themes and discursive strategies used by neurodiversity advocates. By applying Positive Discourse Analysis (PDA), on three TEDx speeches by autistic self-advocates, this study focuses on a positive social change by presenting a counter-discourse of an emerging social identity. The neurodiversity movement uses nomination strategies to promote the conceptualization of autistic as a separate heterogeneous identity in a neurotypical society. The moment of diagnosis for the autistic speakers was pivotal since it changed their perception of themselves and released them from self-blame for their inability to adjust. By listing the consequences of being excluded or overlooked by the majority, the self-advocates construct the negative social actor, neurotypicals, by predication. Even though they mitigate the conflict by focusing on their problems, discomforts and hardships, it is clear that the reason for those issues is the ignorant society. The division into high- and low-functioning is addressed twofold. Firstly, by putting a new perspective on how categorizing somebody as high-functioning is belittling to everyday challenges. Secondly, by argumentation that the understanding of the severity of autism is based on flawed conceptions created by the neurotypical majority and that 'low-functioning' autistic people deserve the same respect and equal treatment as any other person, regardless of how they are perceived. Also, the harmful stereotypes create an image of a homogeneous group, and the failure to understand the diversity within autism causes the diagnostic gap and a delay in receiving proper help. Finally, the implication for further research is to continue to analyze and report similar materials produced by neurodiversity advocates and self-advocates to promote and encourage positive societal changes. It seems to be especially important in academia, which still struggles to provide accessibility and flexibility in forms of transferring knowledge as well as assessing students' performance.

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