



### AutPlay® Therapy Neurodiversity Affirming Constructs

1. Neurodiversity means there is no such thing as a normal brain. Variation in neurology is natural, and none is more right or wrong than another. Remember the phrase “I’m not going to work with you on changing who you are, I’m going to work with you on how to help you get what you want or need.”
2. Neurodivergent children (autistic, sensory differences, ADHD, etc.) are not in play therapy because they are neurodivergent. They are in therapy because they have needs such as anxiety, regulation challenges, trauma issues, social needs, parent/child relationship issues, etc. Being neurodivergent is understood as awareness of the child which may require different methods of implementing play therapy to match the child’s neurotype.
3. Understand the child’s play preferences and special interests. All neurodivergent children play and there are multiple types and ways to play. Each child’s play preferences should be respected and neurodivergent children should not be forced to play a specific way.
4. Children’s voices should be heard and valued in deciding on processes, needs, and goals. Children should have a say in what needs they want to address.
5. Avoid play interventions that promote masking and code switching. Instead, focus on strengths and helping children recognize what they already do well; help them utilize their strengths to address their needs.
6. Different is okay, different is not bad, wrong, or a problem, navigating differently is supported. The focus is never on trying to change a neurodivergent child to “look” like a neurotypical standard.
7. Relationship development is a core process in AutPlay Therapy. Therapeutic relationship is key to working with neurodivergent children and their families and should begin with first contact and continue until termination.
8. Play is the natural language of children. The therapeutic powers of play are a grounding principle in AutPlay Therapy. Play is the change agent and not a manipulative to get to a change agent. Play is not withheld or used as a reward to gain compliance.
9. The play therapy process may involve addressing self-worth struggles, understanding identity, the social model of disability, and self-advocacy development.
10. The play therapy process may involve nondirective methods, directive methods, or an integrative or prescriptive approach. The therapy approach and process should be individualized to the unique neurotype of each child understanding their spectrum of presentation.