

Decolonizing Communication of Autism Inclusion: Interrogating Inherited Ableist Practices

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It is time to interrogate our practices related to autism inclusion (and exclusion). For instance, how can inclusive, anti-ableist practices be communicated within an ongoing, colonial, oppressive, and ableist framework? To this day, there are relics of the settler colonial mindset present in the framework of current understanding of disability that structurally undermine meaningful inclusion of autistic people. This paper utilizes the scholarship of Decolonial Theory and DisCrit to unpack and dismantle some of the commonly-accepted practices of ableism in communication and action that deserve a second closer look. This work will utilize the lens of Decolonial Theory and DisCrit to unpack historical and scholarly examples tracing the colonial past through the communication of autism inclusion. In order to look at the true effects of coloniality and eugenics, this paper addresses the much-needed decolonization of autism inclusion efforts in institutions through reexamination, reframing, historical examples, and addressing an unmet need. Decolonial Theory helps to address the communication autism exclusion at institutional levels, exploring the links to coloniality to the communication of autism oppression.

Keywords: Disability, Autism inclusion, Public Relations, Communication, Decolonial theory, DisCrit

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In the past work, the idea of “The Public Relations of Inclusion” (Nerren, 2021, p. 10) established a new vision of advocacy for disability inclusion in institutions using communication theory and practice and rooted in a critical world view. This new concept developed by studying communication of autism inclusion in teaching settings, educational and preparatory professional programs found that disability inclusion was regularly

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deprioritized in observable, yet previously unrecognized ways. At the time, the colonial driving factors behind the institutional downplaying were not further examined, rather the original study looked at how frames of exclusion or deficit manifested themselves, and if those frames could be changed. The findings showed this separation of education did indeed happen, and could in fact be changed through a process of reframing. However, upon reflection, questions remain regarding what led to the initial frames of exclusion. This is where decolonizing disability inclusion comes in as further reflection to a communication and education study, focusing on autism inclusion.

Cagulada (2024) reinforces the idea that coloniality is at play in communicating disability exclusion, when they found that disability was not only about the experience inside or outside the body of the disabled person. In their study of police communication of disability, they observed that deeply-rooted colonial practices played a role in communication and representation. Their findings showed that the communication of disability by institutions made profound differences in how disability was framed, perceived, and acted upon. They describe the process well in a recent paper framing differences of disability as situated very low in the colonial hierarchy.

There is a circuitous violence that emerges where the TPS calls the reader to join forces and do the work of a white settler colonial regime in policing embodied difference as useless-differences... [the] desire to police disabled and racialized lives is also a colonial desire to maintain hierarchies of thought that rely on stories of disability as useless. (Cagulada, 2024, pp. 65-67)

In their description of coloniality in communication practices, Cagulada mentions not only hierarchies of being but also the hierarchies of thought, namely that place disabled people in a certain, lower place within that colonial hierarchy. This type of ranking is also in keeping with eugenics, a now debunked pseudoscience that categorized traits in humans and an institutional effort to rank and elevate certain traits over others (Bonilla-Silva, 2006; Selden, 1999; Wilder, 2013).

In order to look at the true effects of coloniality and eugenics, this paper addresses the much-needed decolonization of autism inclusion efforts in institutions through reexamination, reframing, historical examples, and addressing an unmet need. Decolonial Theory helps to address autism exclusion at institutional levels, taking the work a step beyond other theories. The coloniality of autism oppression will be further explored below.

Definitions

First, to define a few terms: Decolonial Theory, ableism, and DisCrit. Decolonial Theory states that colonial ways of knowing are a root cause of the systems of power and oppression that create elements of our world including racism, classism, sexism, eugenics, ableism, and violence present in our world today. Established by Quijano and Ennis (2000) the theory states, "...the model of power that is globally hegemonic today presupposes an element of coloniality" (p. 532). Their quote means that structures of power and oppression are baked into the formation of our country and the formation of the modern world. Even in the original study (Nerren, 2021), measures were taken to decolonize the research practices drawing upon the scholarship from Indigenous Research Methods (Brown, Strega, & Strega, 2005; Wilson, 2008). Decolonizing research is talked about by Smith (2021) who talks about research as a dirty word in indigenous communities because of who it is done by and for and *on*. In a parallel with issues facing disabled and autistic communities, the lion's share of the research about autism is done on autistic people, not by and with and for disabled people, and valuable and equal contributors in the production of knowledge.

While the focus of Decolonial Theory is often on race and nationality, they also weave a net of all systems of oppression in the name of power. Quijano and Ennis call into question these multidimensional structures and interrogate practices that oppress by not applying to the unique individual, saying “Consequently, it is time to learn to free ourselves from the Eurocentric *mirror* where our image is always, necessarily, distorted. It is time, finally to cease being what we are not” (2000, p. 574).

The quote means that colonial thinking creates colonial distortions of reality, and Decolonial Theory provides space and opportunity for alternatives.

The important ideas of Decolonial Theory are echoed by Conlisk Gallegos as “the perverted logic of supremacy [that] is the logic of all of our current major institutions” (2018, p. 33). When the author says this, she is saying that because institutions are built on colonial ways of knowing, that colonial and hierarchical and oppressive supremacist practices are also visible in institutions. This idea of perverting the logic of supremacy perhaps can and should be extended to some observable examples of inclusion and exclusion for autistic people.

To draw that imagery into disability inclusion in institutional spaces including institutions of higher education, the *mirror* of the nondisabled population does not apply to disabled people. Similarly, a colonial mirror distorts and devalues their position because the lived experiences of disabled and nondisabled people are different. Disability inclusion lives outside the model of traditional hegemonic power. Disability rights activist Judy Heumann describes where disability is situated in power structures,

Right there was our catch-22: Because the country was so inaccessible, disabled people had a hard time getting out and doing things—which made us invisible. So we were easy to discount and ignore. Until institutions were forced to accommodate us we would remain locked out and invisible—and as long as we were locked out and invisible, no one would see our true force and would dismiss us. (Heumann & Joiner, 2020, p. 80)

What she describes is a process by which individuals with disabilities are systemically blamed for society’s institutional shortcomings. Valencia defines this process as deficit thinking, where the failings of the institution are assigned to the individual (Valencia, 2010; 1997).

The concept of a hierarchical racist and ableist power is consistent with the DisCrit tenet which acknowledges race and disability as forces of intertwined and multidimensional oppression present in our world (Annamma, Connor, & Ferri, 2012; Annamma & Handy, 2021; Annamma & Morrison, 2018). To define DisCrit, DisCrit is an emerging field of scholarship that theoretically seeks to combine aspects of Critical Race Theory (CRT) and disability studies (Annamma et al., 2012). In many ways, the seven tenets of DisCrit echo the informing theoretical framework of Decolonial Theory by troubling the notion of a singular identity and challenging the dominant narratives (Annamma et al., 2012). DisCrit has established an important theoretical bridge in supporting the need for a more complex multidisciplinary framework of justice for marginalized or multiply marginalized people.

When thinking about communicating disability inclusion and anti-ableism, it is time to interrogate the practices and implications of oppression and coloniality that continue to prop up ableism historically leading all the way up to present day. In the next section, I will unpack a few contexts where decolonization of autism inclusion is especially and critically important.

Interrogation

It is essential that the interrogations of potentially colonial practices as they relate to autism inclusion commence immediately and continue in an ongoing and reflective process. This activity shares things in common

with the process of reframing. Reframing takes place by examining a frame, creating space to possibly replace it with a new frame. In turn the replacement frame can lead to more optimal outcomes related to perception and behavior. Many times, framing and reframing have to do with opposing forces at play (Muhamad & Yang, 2017; Semetko & Valkenburg, 2000; Valentino, Buhr, & Beckmann, 2001). According to Kaufman and colleagues (2017), reframing can play a role in introducing ideas that do not divide and separate, but rather unite and strengthen. The concept of uniting rather than dividing is an idea also shared by Smith (2021), who discusses in decolonizing methodologies that colonial ways of knowing separate and pit ideas, fields of study, and world views against one another. Borderlands scholar Anzaldúa, Cantú, and Hurtado (2012) also reject the idea of polarizing ideas, instead helping to define liminal spaces as they pertain to decolonial ways of knowing and understanding.

In the spirit of decolonizing autism inclusion, below are historic examples of colonial relics of autism exclusion that carry forward to this day. These relics are often taken for granted, or forgotten altogether, but sometimes in everyday life there are examples right in front of people that can be extreme examples of coloniality, oppression, and segregation harming autistic people. These examples are shared in the effort to propose opportunities for continual decolonizing of autism inclusion in praxis.

The first example is the Vineland Adaptive Behavior Scale, a commonly used test in schools and community settings to understand the manifestations of disability and functional limitations under a medical model of disability. For instance, one of the co-authors of this paper has been tested on Vineland more than 20 times in his lifetime. Vineland is used as a starting point and a tool to assess and diagnose disability medically and educationally. Yet, there are some flaws which stem from the test's origin in coloniality and eugenics, which is also driven by coloniality. Today, the Vineland Adaptive Behavior Scale comes from a legacy of the Vineland Social Maturity Scale, first created in 1936, at a peak of eugenicist and supremacist sentiment in the United States. In this context, the Vineland Social Maturity Scale was a tool specifically developed to support the framework of forced institutionalization of disabled people (Price, Morris, & Costello, 2018). Vineland became the first tool to medically classify people as unable to care for themselves, strengthened the IQ classifications of *idiot*, *imbecile*, and *moron* (terms used for various institutionalizable levels of intellectual disability), and deemed people as disabled to the point of institutionalization.

The Vineland Social Maturity Scale performed exactly the function Judy Heumann discussed it physically removed many autistic people from being present in their communities. The effect of this was a dramatic playing out of the colloquialism *out of sight out of mind*, as the lack of community representation diluted the presence, power, and the perceived abilities of the population of disabled people. This was done under the framework of coloniality and eugenics. However, while many of the involuntary and voluntary institutionalizations Vineland supported have decreased, Vineland continues today in the form of the Vineland Adaptive Behavior Scale, which determines things like classroom placement, time in general education, and more. The authors identify some of the contradictions in this commonly accepted tool by saying Vineland measures adaptive behavior despite researchers' inability to agree on what exactly adaptive behavior is, only that Vineland is the tool to measure whatever it may be (Price et al., 2018; Jenkinson, 1996). It stands to reason that this is circular reasoning propping up only the mere existence of classifying people for the purposes of institutionalization. Vineland is an outdated tool coming from an outdated concept of separation, segregation, and oppression. Now, naturally we need tools to determine developmental and behavioral needs, but we also have alternatives to strengthening and propping up a tool and relic of eugenics.

Another profound example of physical settler coloniality present in disabled spaces is present in the history of the takeover of residential spaces for disabled people for the purposes of nondisabled people. For instance, at University of California Berkeley, Ed Roberts is commonly thought of as the first disabled student to attend university in 1962. That is partially true. He was the first physically disabled student (depending on the definition of physically disabled which is also itself problematized by Decolonial Theory and DisCrit (Annamma et al., 2012; Annamma & Handy, 2021; Annamma & Morrison, 2018)). It is correct that he indeed attended university and through his presence advanced a tremendous number of methods of disability inclusion, practice, and policy that changed history forever. Yet, there is more to the story. Berkeley identifies Newel Perry as the first disabled student who attended the university in 1892, ultimately getting his Ph.D. (UC Berkeley, 2023) and subsequently educating many other blind students to great success. He came from the California School for the Deaf and the California School for the Blind just a few blocks away. The neighboring deaf and blind school producing disabled scholars is relevant because simultaneously, UC Berkeley had designs on displacing the deaf and blind pipeline school. The university lobbied for 57 years to take over the space to annex it for predominantly. Berkeley was ultimately successful in 1980, moving the school and all the deaf and blind students to Fremont under the guise of “lack of safety”. However, the space, buildings, and resources were immediately divided for use among the City of Berkeley for their seniors and the University of Berkeley for their predominantly nondisabled student housing (UC Berkeley, 2023). Apparently, it was safe enough for aging populations and predominantly nondisabled students. This is a profound example of settler colonialism in higher education playing out exactly along the intersectionality of oppression.

To draw parallels with Annamma and Morrison’s DisCrit, the authors call this process the leaky and dysfunctional classroom ecology that demands educational reform (2018). What they mean is that educational ecologies prize and reinforce the traditional, colonial hierarchies when putting up outrageous (and swiftly forgotten about) results such as disability displacement along hierarchical lines. And Berkeley is not alone. California State University Channel Islands is woven into the history of eugenics, coloniality, whitewashing and involuntary institutionalization, worthy of its own individual paper (or book) in the future. In essence, the university stands on the grounds of a former State Hospital, where people with autism and other intellectual and developmental disabilities were institutionalized in childhood and without their input or consent (CSU Channel Islands, 2023; Conejo Valley Guide, 2022; Kennedy, 2012; Koval, 2020; Lieberman, Wallace, Tiegen, & Davis, 1974; Taylor & Holt, 2019). Sadly, instead of truly honoring or lifting up this history in the local community, the presence of the state hospital is now memorialized through the tongue-in-cheek references to the former state hospital’s farms and gardens, now called the “scary dairy” (Conejo Valley Guide, 2022, p. 1). With that terrible tongue-in-cheek moniker, the nondisabled downplay and erase some of the true atrocities that took place in state hospitals. As a tie in to the previous example with Vineland, the Camarillo State Hospital was built in the 1930s, around the same time Vineland was created, illustrating the web of supporting institutions of coloniality, eugenics, and oppression coming into being systemically in coordinated ways. In another instance related to Camarillo State Hospital, Lieberman et al. (1974) were among the primary researchers, where residents of research units were kept longer and given extreme negative reinforcements in ways that would no longer be permitted today, in service of generating dozens of publications for the researchers off the work of involuntarily institutionalized disabled people (Camarillo State Hospital, 1994). Ultimately, a present day understanding of Camarillo State Hospital was that it was a large facility that held many thousands of autistic and otherwise disabled people (Taylor & Holt, 2019). This housing (warehousing) of disabled people was a form of colonial “othering” that disembodied

and disempowered thousands of children and adults for the benefit of their doctors and the nondisabled people who did not perceive them as equal. As authors, a parent of an autistic adult child, and as a person with autism (preferred terminology), this is an affront.

As a final example, the spirit of coloniality is present in the establishment of Section 504, or our nation's first disability inclusion law itself. Originally enacted in 1973, the bill did not become law of the land until 1977, and it required the tremendous heavy lifting of disability advocates and allies to make it happen (Heumann & Joiner, 2020). The reason for the delay was because the implementers of oppression fought against its presence as law including schools, universities, public entities, and hospitals. They were the opposing side of the argument and they were the ones fighting against disability inclusion and the signing of Section 504 (LeBrecht & Newnan, 2020; Heumann & Joiner, 2020; UC Berkeley, 2023). How this plays out today is described by Mulderdink (2023), where disability support services create an environment for an unequal power dynamic and often-overwhelming intake process for disabled students, while misleadingly representing that their process is equal at all times to their disabled students. It is known that each person experiences a process (in a colonial institution) in varying and different ways, so an explanation of a frame by the more powerful player of all equal all the time is a logical fallacy. The fallacy of these types of explanations was proven (Johnson & Shaw, 2001; as cited by Mulderdink, 2023) because institutional explaining does as much to mask inequity as it does to achieve equity.

In all of instances described, higher education is entangled in a much more complex system that Anzaldúa and colleagues would describe as the *nepantla* or liminal spaces where opposing forces that do not belong together exist together anyways (2012). It is essential to understand how complex and organized the methods to which settler colonialism affects autistic people and to write this into the record of scholarly literature.

Conclusion

The world of disability inclusion needs an interrogation of practices because disability inclusion is a decolonial act. It can only be a decolonial act by separating itself from eugenicist and supremacist practices. Kafer (2013) describes a hopeful alternative.

Those who have been most vocal in imagining my future as ripe with opportunities have been other disabled people, who are themselves resisting negative interpretations [and colonial communication] of their futures. They tell stories of lives lived fully, and my future according to them, involves not isolation and pathos but community and possibility: I could write books, teach, travel, love and be loved; I might raise children or become a community organizer or make art; I could engage in activist struggles for the rights of disabled people or get involved in other movements for social justice...How one understands disability in the present determines how one imagines disability in the future. (p. 2)

Kafer describes the power of the communication of disabled people themselves in the describing of a decolonial system of autism inclusion that takes into account the true nature of the systems involved. One of the branches of classifying people as *less than* was through physical and mental abilities (Gibson, 2015). Because of this, autism inclusion is inexorably linked to coloniality, in the ways also described in DisCrit. In order to decolonize communication around disability and autism in truly inclusive ways, it is essential that we identify and understand the sources of coloniality, eugenics, and oppression present in our disabled and autistic spaces today, be it among individuals, families, schools, universities, service providers, and beyond.

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