Neurotypical originated in the shared experiences of my family and the autistic community in western North Carolina. My father has worked in the field of autism for more than 20 years, initially as a therapist with the North Carolina TEACCH program. My mother is an artist who works in multiple media and across genres. Today, my parents design and manufacture ShoeboxTasks, innovative learning materials for children and adults with special needs. While I was growing up, our home was a site for “social group” gatherings—opportunities for autistic adults to socialize in a relaxed, supportive environment. I remember these childhood get-togethers vividly. I was initially impressed by what I perceived as differences in mannerisms and sensitivities in autistics. When I became a teenager, I began to notice sameness. Maybe the emotional highs and lows, the pleasures and pains of social interacting weren’t so different between “neurotypicals” and autistics after all.

Through high school and college, I continued to learn from individuals on the autism spectrum. What began to take shape was a kind of growing rebellion against what I saw as society’s double standard—either a pervasive need to make people into a rendition of something “normal,” or a tendency to sensationalize the extremes of autism. Documentaries at the time were either clinical, focused on cause and cure, or dramatic, looking at the “tragedy” of autism or the brilliance of the savant. A typical documentary followed a child’s journey and never gave a glimpse of autistic adulthood. I grew determined to make a film from the viewpoint of autistics, as storytellers of their own experiences.

As Neurotypical was my first film, I was mostly a one-man band. I operated the camera, sound and lights, while my father often did the interviewing. I worried about these limitations, but I came to realize that without the distractions of a crew or cumbersome equipment, a very comfortable setting and intimate rapport was being established. I had seen too many films that seemed bent on showing autistics falling apart. I was more interested in creating an environment where the subjects were my partners. I was sensitive to their preferences, arranging the equipment, the lighting and the microphones in ways that were accommodating.

Over the course of four years, between my gigs working as a video projection designer, I gathered stories from more than 30 people on the autism spectrum. These interviews featured individuals who could speak for themselves; however, autism is much bigger than this. I didn’t want to exclude those who were nonverbal or couldn’t advocate for themselves. Addressing this issue became a conceptual concern. During one of my family’s many conversations, the idea emerged to structure Neurotypical as a triptych, focusing on a child, an adolescent and an adult—each with different capacities for expressing his or her experiences. Thus, the stories of Violet, 4, absorbing the sensory world and learning ways to navigate through it; Nicholas, 14, coming to terms with his identity in society; and Paula, married with a child, embracing her diagnosis and advocating for others, became the threads around which I could weave the interviews.

Working closely with autistics of all ages and abilities has given me a profound respect and affection for this culture. Making Neurotypical provided a wonderful opportunity for me to explore more fully the richness of humanity and to bring the concept of neurodiversity into the mainstream.

Adam Larsen
Director/Cinematographer/Editor, Neurotypical
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Neurotypical is a 52-minute exploration of autism from the point of view of autistic people and their loved ones. The toddler Violet, teenager Nicholas and adult Paula occupy different positions on the autism spectrum. How they and the people around them work out their perceptual and behavioral differences becomes a remarkable reflection on the "neurotypical" (non-autistic) world — revealing inventive adaptations on each side and an emerging critique of both what it means to be normal and what it means to be human.

Like immigrants to a new culture, the people in the film look to balance the need to fit in with the need to preserve the essence of who they are. Their resulting insights offer a perceptive critique of restrictive definitions of “normal.” For viewers of all types, Neurotypical will open up conversations about conformity, creativity, and what it means to be human.
Neurotypical is well suited for use in a variety of settings and is especially recommended for use with:

- Your local PBS station
- Groups that have discussed previous PBS and POV films relating to autism, including Best Kept Secret, Bye, Refrigerator Mothers, No Pity and Q&A, one of the StoryCorps Shorts.
- Groups focused on any of the issues listed in the Key Issues section
- Mental health organizations, institutions and professionals
- High school students, youth groups and clubs
- Faith-based organizations and institutions
- Cultural, art and historical organizations, institutions and museums
- Civic, fraternal and community groups
- Academic departments and student groups at colleges, universities and high schools
- Community organizations with a mission to promote education and learning, such as local libraries

Neurotypical is an excellent tool for outreach and will be of special interest to people looking to explore the following topics:

- Asperger’s syndrome
- Autism spectrum disorder
- Autism
- Creativity
- Divergent thinking
- Education
- Mental health
- Neurodiversity
- Neurology
- Parenting
- Perception
- Psychology
- Self-advocacy
- Sensory input
- Special education

Using This Guide

This guide is an invitation to dialogue. It is based on a belief in the power of human connection, designed for people who want to use Neurotypical to engage family, friends, classmates, colleagues and communities. In contrast to initiatives that foster debates in which participants try to convince others that they are right, this document envisions conversations undertaken in a spirit of openness in which people try to understand one another and expand their thinking by sharing viewpoints and listening actively.

The discussion prompts are intentionally crafted to help a wide range of audiences think more deeply about the issues in the film. Rather than attempting to address them all, choose one or two that best meet your needs and interests. And be sure to leave time to consider taking action. Planning next steps can help people leave the room feeling energized and optimistic, even in instances when conversations have been difficult.

For more detailed event planning and facilitation tips, visit www.pbs.org/pov/outreach
A Note for Facilitators

When facilitating a discussion of autism spectrum disorder and other neurological diagnoses, please be sensitive to the fact that views on the appropriate use of terms and labels may vary depending on the group, individual and/or context. For instance, in many cases the phrase “a person with autism” (or “a person with Asperger’s” or another diagnosis) is considered politically correct, while in other settings the terms “autistics” or “Aspies” might be preferred. These terms, in addition to “neurotypical,” are also sometimes used satirically or derogatorily. You may want to take a moment to ask those in attendance if they feel strongly about which terms to use in your discussion.

Sources:

Neurotypical

In the film, “neurotypical” (both an adjective and a noun) is defined as “a term used to describe non-autistics by autistics.” Neurotypical can also be used more generally to describe those not diagnosed with any of a range of neurological conditions, including, but not limited to, autism spectrum disorder, dyslexia, attention deficit disorder, attention deficit hyperactivity disorder, dyspraxia, dyscalculia and Tourette’s syndrome. The term was coined by the autistic community and later adopted by the neurodiversity movement.

Sources
Neurodiversity

Neurodiversity is a concept akin to biodiversity or cultural diversity that recognizes neurological disorders as a natural human variation. Rather than looking for cures, neurodiversity advocates work to promote social support systems and spotlight the value of neurological differences, in the same vein as variations in learning styles or social tendencies like introversion and extroversion.

The neurodiversity movement was born out of the autistic civil rights movement in the 1990s and led by autistic writers and activists, including Jim Sinclair, Judy Singer and Kathleen Seidel. The Internet has been a crucial medium for the growth of the movement since it frequently eliminates the need for face-to-face social interaction, something that often makes individuals with autism uncomfortable. The movement is now largely led by bloggers on the autism spectrum.

Though autism advocacy existed prior to the 1990s, the neurodiversity movement marks a significant emergence of self-advocacy.

The goals of the movement include:

- recognition that people on the autism spectrum do not need to be cured;
- a shift away from the use of terms like “disease” and “disorder”;
- a revised concept of what constitutes “normal” or “acceptable” behavior;
- more control over if, when, how and why people with autism receive treatment or therapy.

According to neurodiversity advocates like Thomas Armstrong, executive director of the American Institute for Learning and Human Development, the line between a difference and a disability depends on perspective and social context. For example, testing software is an ideal job for someone with exceptional concentration, technological skills.
and an affinity for completing repetitive jobs with a high level of accuracy—characteristics that are common among individuals with autism. Some software companies even recruit employees with autism. Of the employees at the Danish software company Specialisterne, 75 percent have some form of autism.

Another goal of the neurodiversity movement is to provide individuals with neurological conditions a say in if, how, when and why they are given treatment. For example, a common behavior across the autism spectrum is self-stimulation, or “stimming,” which may include humming, rocking, tapping or fixating on an object. Some therapies work to reduce or eliminate self-stimulation and other behaviors, such as eye contact avoidance. But these behaviors can be a means to control sensory input, lower anxiety levels and improve information processing. For this reason, therapies that work to reduce stimming and force eye contact can be controversial among members of the autism community.

Detractors of the movement point out that broadening the definitions of neurological disorders could result in the loss of crucial government support services and may lead to serious psychological and physical needs of those on the far end of the autism spectrum being overlooked. According to the Centers for Disease Control and Prevention, 94 percent of children with autism require health or related services beyond those required by children not diagnosed with autism. Supporters of the neurodiversity movement believe that the movement does not delegitimize disorders and their accompanying mental, emotional and physical needs. Instead, they believe it advocates for deeper understanding, better social support systems, appropriate educational, governmental and private support programs and providing members of the community with a say in their own treatment.

**Sources:**
http://www.autreat.com/dont_mourn.html

Boundy, Kathryn. “‘Are You Sure, Sweetheart, That You Want to Be Well?’: An Exploration of the Neurodiversity Movement.” Radical Psychology 7 (2008).
http://radicalpsychology.org/vol7-1/boundy.html

http://www.cdc.gov/nchs/data/databriefs/db97.htm

http://autismdigest.com/neurodiversity/


Synapse. “Neurodiversity and the Autism Spectrum.”

The Autism Spectrum

Autism spectrum disorder (ASD), commonly referred to simply as autism, is a neurological and developmental variation that affects learning, communication and social interaction. Autism can be found across all racial, ethnic and social groups and is associated with a wide range of behaviors and characteristics which may include intense focus on a specific subject; unconventional means of learning and problem-solving; a strong need for routine and consistency; repetitive movement or self-stimulation, such as rocking or humming; difficulty with social interpretation and expression; and an under- or over-sensitivity to sensory experiences like sound, light and touch. Each individual on the autism spectrum is different, with a unique set of characteristics and behaviors that may change depending on stress or anxiety levels and sensory stimulation. Individuals on the far end of the autism spectrum may be non-verbal, harm themselves or depend heavily on support from family and professionals, while other adults with autism may live and work independ-
The exact cause of autism is unknown, though genetics and environmental conditions are thought to be possible factors.

Prior to May 2013, diagnosticians separated the varying degrees of autism spectrum disorder into subsets that included autism disorder, Asperger’s syndrome, pervasive development disorder not otherwise specified, Rett syndrome and childhood disintegrative disorder. Since these subsets are differentiated solely by behaviors, they were often difficult to determine. In an effort to provide more clarity and diagnostic precision, the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (the manual published by the American Psychiatric Association and used as the standard for classifying mental disorders), released in May 2013, eliminated these subsets and instead breaks down positions on the autism spectrum by levels (ex. Autism Spectrum Disorder, Level 1, Level 2 or Level 3).

As of March 2013, the Centers for Disease Control and Prevention estimate that one in 50 children are identified with autism spectrum disorder, compared to about 1 in 155 in 2002 and 1 in 88 in 2012. However, this rapid increase may be attributable more to greater awareness and more frequent diagnosis than to an actual increase in the incidence rate. Diagnosing autism accurately is not easy and, according to the Diagnostic and Statistical Manual of Mental Disorders, there are more than 600 different symptom combinations that meet the minimum criteria for diagnosing autism disorder—just one of the formerly used subsets of autism spectrum disorder. The Autism Diagnostic Observation Schedule (ASOD) and the Autism Diagnostic Interview, Revised (ADI-R) are the standard assessment tools used for diagnosis, but many other screening tests exist. Administering assessments that are accurate and comprehensive is a difficult task, as traits associated with autism exist on a continuum and may be observed among those not clinically diagnosed with a related disorder.

Though there is little conclusive neurological research on autism and other neurological disorders, scientists have
found variations in the size, function and development of various parts of the brain, such as the cerebellum, the hippocampus and the amygdala. The amygdala (two almond-shaped structures located in the temporal lobes of the brain) are used in processing emotions, social interaction, experiencing fear and exercising facial recognition. Some individuals with autism, anxiety disorders and other neurological disorders have been found to have overly large or small amygdala. There are also scientists who believe that autism may be linked to poor fiber tract connections to key areas in the brain. The range of physical and behavioral characteristics exhibited by individuals with autism, and flaws in scientific tests like neuroimaging (brain scans), make it difficult to prove these theories conclusively. Individuals not on the autism spectrum also exhibit variations in size and development of these areas of the brain. There is no one “typical” human brain that can be used as a baseline.

Sources:


Science Daily. “In Autism, Age at Diagnosis Depends On Specific Symptoms.”
Autism Myths and Misconceptions

- **The appearance of autism is relatively new.**
  
  Autism was first described by scientist Leo Kranner in 1943, but the earliest description of a child now known to have had autism was written in 1799.

- **Autism is caused by poor parenting or “refrigerator mothers”**
  
  In the 1950s, there was an assumption that autism was caused by emotionally distant or cold parents. Though the exact cause of autism has not been determined, it is now firmly established that autism has nothing to do with parenting.

- **Autism is caused by vaccines.**
  
  There is no evidence that childhood vaccination causes autism. A 1998 study linking autism with vaccines has since been retracted.

- **Individuals with autism are violent.**
  
  Though there have been recent news stories relating autism to violence, violent acts from autistic individuals usually arise from sensory overload or emotional distress, and it is unusual for individuals with autism to act violently out of malice or pose any danger to society.

- **Individuals with autism are unable or unwilling to form meaningful social relationships.**
  
  Though many individuals with autism have difficulty with social interaction, they can have close social relationships, fall in love and have children.

- **Therapies and programs for individuals with autism work across the board.**
  
  There is a wide range of symptoms and behaviors associated with autism, as well as opinions on when treatment is required. Since each individual is different, treatments and therapies that may be beneficial and effective for one person may not be for another.
• **All individuals with autism have savant abilities.**

While there is a higher prevalence of savant abilities among those with autism, only about 10 percent of individuals with autism exhibit savant abilities. Some have what are called “splinter skills,” meaning skills in one or two areas that are above their overall performance abilities.

• **All individuals with autism have mental disabilities.**

Individuals on the autism spectrum are unique, with a wide range of intellectual abilities that easily can be under- or over-estimated. Tests designed to include language and interpersonal analyses may misrepresent the intelligence of people with autism, who struggle with social skills, and individuals with autism may have difficulty with tasks considered simple, but quickly master complex tasks and concepts. Individuals on the autism spectrum have also earned college and graduate degrees and work in a variety of professions. Conversely, it may be assumed that an individual with autism has a higher level of understanding than they do, based on their behavior, language skills or high-level of ability in a specific area.

• **People with autism are cold and lack empathetic feelings.**

Individuals with autism feel as much, if not more, empathy than others, but they may express it in ways that are harder to recognize.

• **People who are not diagnosed with autism will never exhibit characteristics similar to the characteristics of those who have been diagnosed.**

Characteristics associated with autism exist on a continuum that includes those considered “normal” and can be exhibited to a lesser degree by those not diagnosed with autism.

Explore more myths about autism at www.pbs.org/pov/neurotypical.
Sources:

Autism Support Network. “Seven Myths About Autism.”

http://www.dosomething.org/tipsandtools/11-myths-about-autism

The Global and Regional Asperger Syndrome Partnership. “Myths.”
http://grasp.org/page/myths-1

http://www.mayoclinic.com/health/vaccines/CC00014


PBS. “History of Autism Blame.”
http://www.pbs.org/pov/refrigeratormothers/fridge.php

PBS. “What Is Autism?”
http://www.pbs.org/thisemotionallife/topic/autism/what-autism

Sager, Jean. “10 Biggest Myths About Autism From Moms Who Know.”
The Huffington Post, February 13, 2013.
http://www.huffingtonpost.com/the-stir/myths-about-autism_b_2672030.html
Did You Know…?

- The first person ever diagnosed with autism was Donald Gray Triplett of Forest, Mississippi. He was diagnosed in 1943. (Donvan, John and Caren Zucker. “Autism’s First Child.” The Atlantic, August 30, 2010.)


- Asperger's syndrome is named after Austrian psychiatrist Hans Asperger, who identified its characteristics in 1944. However, Asperger's was not added to the Diagnostic and Statistical Manual of Mental Disorders until 1994. (PBS. “History of Autism Blame.” http://www.pbs.org/pov/refrigeratormothers/fridge.php)


- Australian sociologist Judy Singer, who has both been diagnosed with Asperger’s syndrome herself and is the mother of a child with Asperger’s, is credited with coining the term “neurodiversity” in an article she wrote entitled “Why Can't You Be Normal for Once in Your Life?” From a Problem with No Name to the Emergence of a New Category of Difference.” (Dubin, Nick. “Neurodiversity: A Balanced Opinion.” Autism Asperger’s Digest, 2011. http://autismdigest.com/neurodiversity/)


- Temple Grandin is a world-renowned scientist who was born with autism. Though she didn’t speak until she was 4 years old, she is now famous for her work in both autism advocacy and animal welfare. She is also known for her invention of the “squeeze machine,” which exerts a kind of deep touch pressure that has a significant calming effect on animals and humans. (Grandin, Temple. “Calm Effects of Deep Touch Pressure in Patients with Autistic Disorder, College Students and Animals.” Journal of Child and Adolescent Psychopharmacology, 2, no. 1 (1992). http://www.grandin.com/inc/squeeze.html)

- Some individuals on the far end of the autism spectrum also suffer from physical conditions, such as seizures, sleep dysfunctions and chronic gastrointestinal problems. In turn, these may manifest behaviorally. Self-destructive behaviors like head-banging or biting oneself may stem from an inability to localize or communicate physical pain or emotional distress. (Marder, Jenny. “Autism 101 and Resources.” PBS NewsHour, April 22, 2011. http://www.pbs.org/newshour/updates/health/jan-jun11/autism101.html)

- Dr. William W. Henderson Inclusion Elementary in Massachusetts is an example of a “full-inclusion school.” One third of the school’s students have disabilities, and all are included in the regular classroom. (Armstrong, Thomas. The Power of Neurodiversity: Unleashing the Advantages of Your Differently Wired Brain. Cambridge: Da Capo Lifelong, 2011.)

- According to the National Institute of Mental Health, in any given year, more than one quarter of all adults suffer from a diagnosable mental disorder. (Armstrong, Thomas. The Power of Neurodiversity: Unleashing the Advantages of Your Differently Wired Brain. Cambridge: Da Capo Lifelong, 2011.)
Selected People Featured in *Neurotypical*
Selected People Featured in *Neurotypical*

Madeline “Maddi” Klein

Katie Miller

John Beck

John Engle

Kevin and Suzanne Nelson

Wolf Dunaway
Immediately after the film, you may want to give people a few quiet moments to reflect on what they have seen or pose a general question (examples below) and give people some time to themselves to jot down or think about their answers before opening the discussion:

• If you could ask anyone in the film a single question, whom would you ask and what would you ask him or her?
• What did you learn from this film? What insights did it provide?

• What is the significance of the film’s title?
• Describe a moment or scene in the film that you found particularly disturbing or moving. What was it about that scene that was especially compelling for you?
• Describe a moment in the film that made you smile. What were you thinking at that moment?
Understanding Autistic Minds

What did you learn from the film about autism that you didn’t know before? What did you learn about “neurotypicals”?

Wolf Dunaway explains that before age 8, he mimicked people but didn’t really learn from the imitation. He notes, “So you could teach me something but I didn’t have a place to store it. It wasn’t until I failed third grade that I realized you have to store this stuff, because when they teach it to you they expect you to be able to pull it back up.” How could this insight improve education for autistic children?

Wolf warns against using medication to stop tantrums, because, he says, “My tantrums gave my parents insights to how to help me—what things was I having trouble with.” Why is it hard for parents or teachers just to let tantrums happen?

The film shows a range of responses to dating. Nicholas Pope says that some girls “are nice but I just can’t relate to them. We don’t have much in common.” In contrast, John Beck has figured out how to interpret and respond to certain kinds of touches. Wolf Dunaway, on the other hand, doesn’t want to touch or be touched at all. What does this range reveal about autism and autistic people?

Wolf recognizes that romance is filled with innuendo and hints, but he finds this type of communication hard to read. He prefers direct communication. He observes, “If you want ice cream from me, you have to say, ‘Wolf, I’d like to have some ice cream.’” Think about your own communication. How often do you speak directly? How do you respond to people who speak in a very direct way?

Wolf speaks at length about learning to “build systems” that help him understand the world. He also describes how his family helped him hone those systems so he could function within societal norms. For example, he recalls learning that “when somebody makes you mad or when somebody blows one of your systems, when somebody does something you don’t expect, you can’t kick everybody in the face just because they touch you.” What systems are evident in the per-
spectives articulated by the people in the film? Can you think of systems you use to process the world?

Kevin Nelson asks, “What do they call the other side of the spectrum? Cause it’s a bell curve, and if we’re over here, who’s over here?” How would you answer him?

Challenging Normal

Is there any value in the concept of “normal”? What might be useful about the term and what are its limitations? Where, in your own life, do you see the term “normal” being used in a way that benefits people and where is it used in a way that hurts people (both intentionally and unintentionally)?

College freshman Maddi Klein says that looking at people’s eyes when she speaks with them is distracting. She says, “It’s something I actually had to be coached for a while to do. I remember it was a big thing, actually, and I felt a little bit miffed when I got to middle school, because half the time people talk to you without looking at you. I’ve kind of always felt like, if people are normal they are allowed to act however they want to to some extent socially, but if people have a syndrome everybody feels like they need to improve them.” Have you seen or experienced similar double standards? What did it feel like?
Maddi talks about initially being excited about the television show *Grey’s Anatomy* introducing a doctor with Asperger’s syndrome, but she has reservations because the character is “gonna be one of the only characters on the show who doesn’t end up having sex. And I felt like I wanted to barf when I heard that because I don’t want this doctor to teach them a bunch of lessons about how lucky they are or something trite like that. I want her to actually have experiences out of this, too. So I hope that the writers allow her to make mistakes and have, like, relationships. Cause it is possible for people with autism to be romantically involved with other people, you know. Just because Temple Grandin doesn’t do it, it doesn’t mean that it never happens.” What are the consequences of the ways that the mainstream media portrays or ignores people with autism? Why is it a problem for media to focus on a few famous people (like Temple Grandin) in lieu of presenting a diverse range of people and images? How is current media treatment of autistic people like or unlike portrayals of other minorities?

John Engle identifies oddness as a generator of cultural content. He uses as an example an Olympic diver, arguing that it is pretty odd “that that person’s life for years has been nothing but diving. But that’s how you get that good at diving. And that’s... that kind of obsession, compulsion, oddness, intensity—that results in cultural content.” What characterizes unusual behaviors that are admired and how are they different from odd behaviors that are deemed unacceptable? Why are certain types of oddness accepted or even admired, while others are not?
Rejecting Limits

Violet Owens’ mother, Vijay, observes, “Just because you can’t speak the way we’re speaking right now doesn’t mean you’re not thinking and that you don’t have ideas and opinions.” Why do you think she feels that this is an important thing to say?

The film gives viewers differing opinions on the value of getting a diagnosis. Violet Owens’ parents report that they didn’t care whether Violet “was autistic or not, so why bother with getting a diagnosis because that’s gonna just put a big stamp on her: autistic.” In contrast, Paula Durbin-Westby is thrilled, finally, to find a label that describes her. And Katie Miller didn’t get a diagnosis until she was 22. What are the benefits and drawbacks of being labeled autistic? What results from not having a diagnosis until adulthood?

John Beck says that his diagnosis made his relationships with women easier, because when things don’t go well or his partner gets frustrated, he says, “Having been diagnosed with Asperger’s syndrome, I know better than to try and change myself.” How many people do you know who “know better” than to try to change themselves? What difference does that self-awareness make?

At first, Charlie and Vijay Owens reject putting their 3-year-old on anti-depressants because the idea of medicating a child that young with such powerful drugs, as they put it, “just seemed crazy.” And Paula prefers a hug from her husband over medication because, as she says, “It works faster than prescription drugs for me. I feel so calm.” Wolf Dunaway is a bit more flexible, saying that “medication is fine as long as the medication is only trying to help the autistic person work better and work smarter. But if it’s just meant to be a chemical straitjacket, no.” Can you think of examples of medication being used as a straitjacket? What specific things differentiate those situations from circumstances in which drugs are helpful?
Divergent Thinking

Wolf Dunaway recalls his reaction to the animated film *The Jungle Book*: “I had been abused and hurt so much by people trying to make me normal that if, you know, that if he [Mowgli] went with them [the humans], I was like, ‘Oh, gosh. They’re gonna be trying to make you normal.’ . . . Everybody else saw that as a good thing. I saw that as the saddest movie I had ever seen.” What was your reaction to his interpretation? How did it compare with your own interpretation of the story?

Katie Miller says, “I thought that the reason people made small talk . . . was because they had nothing interesting to think about inside their heads. So, I thought that most of the rest of the world were a bunch of idiots with no thoughts . . . I just didn’t see the point in carrying on a conversation when this person was being really rude—interrupting my thought process. I had interesting things going on up here! You know, they wanna talk to me about the weather? What?” What was it about Miller’s father’s explanation using the examples of the plus signs above people’s heads in the game *The Sims* that helped Katie understand the small talk dynamic?

John Beck couldn’t pick up on non-verbal cues, so he learned alternative strategies for carrying on conversations. He explains, “What you do is first make sure you learn their name. A person’s own name is their favorite word in the whole wide world. Always remember that, so use it. And you can actually convince them that you’re listening if you all do is repeat the last three to four words of what they’re saying. It works like magic . . . They’ll go on for hours. And they will talk about you as if you were the greatest thing next to the iPhone.” How would you describe your level of awareness about your own conversation strategies or cues? How do you let people know you’re listening or assess whether or not someone is listening to you?

Nicholas Pope says, “I don’t know, sometimes I think, what if this person ruled the world? Would it be better or would it be worse? Would it be better than if I was in charge of the world or something?” How do you think the world would be different if it were ruled by some of the people in the film? Imagine a world ruled by Pope, Paula Durbin-Westby, Wolf Dunaway, Madeline Klein, John Engle or John Beck.

Additional media literacy questions are available at: www.pbs.org/pov/educators/media-literacy.php
Taking Action

• Engage your school district in a dialogue around services for students with autism and their families and around training for faculty, staff, administrators and students. Be careful not to put autistic people (or their families) on the spot to “represent,” explain or teach. Give them a forum in which to share their experiences if they choose. Otherwise, use clips from the film to educate students, teachers and administrators.

• Check with existing organizations (see Resources) to find out how you can support their work on research, advocacy or services for people with autism.

• Host a community film festival or book club featuring media by and about people with autism.

• Use clips from *Neurotypical* to provide informational sessions at Rotary Clubs, chambers of commerce and other business groups about hiring people with autism. Alternately, provide education for service professionals (such as social service workers, first responders and hospital staff).
FILMMAKER WEBSITE
www.neurotypical.com
The film’s official website provides information about the film and filmmaker.

Original Online Content on POV
To further enhance the broadcast, POV has produced an interactive website to enable viewers to explore the film in greater depth. The Neurotypical website—www.pbs.org/pov/Neurotypical—offers a streaming video trailer for the film; an interview with Adam Larsen; a list of related websites, articles and books; a downloadable discussion guide; and special features, including myths and facts, a timeline, and information about diagnosing autism.

What’s Your POV?
Share your thoughts about Neurotypical by posting a comment at http://www.pbs.org/pov/Neurotypical

AUTISM NOW
http://autismnow.org
Autism NOW is a clearinghouse for information and resources related to living with autism spectrum disorder. The website includes sections on employment, education, family life and community.

AUTISM NETWORK INTERNATIONAL
www.autreat.com
This advocacy network of people with autism runs an annual national gathering. Many of the resources on the site are dated, but the collection of perspectives on the definition of autism and history of self-advocacy is valuable.

AUTISM SOCIETY
www.autism-society.org
This grassroots organization provides support, advocacy and research for people living with autism. The site’s rich resources include clinical information, statistics and research reports, strategies for living with autism and family stories.

AUTISTIC SELF ADVOCACY NETWORK
www.autisticadvocacy.org
The website for this organization (mentioned in the film) run by and for autistic people offers a range of resources, including networking opportunities, policy briefs and a variety of projects that give voice to members.

GLOBAL AND REGIONAL ASPERGER SYNDROME PARTNERSHIP
www.grasp.org
This group provides a support network for adults and teens on the autism spectrum through education, community outreach and advocacy.

INSTITUTE FOR THE STUDY OF THE NEUROLOGICALLY TYPICAL
http://isnt.autistics.org
A person with autism designed this tongue-in-cheek website, which turns diagnostic language around and applies it to people who have “typical” brains.
NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE
This division of the federal government’s National Institutes of Health provides basic information about autism—what it is, what kinds of research are underway and where to find support for people with autism. The website includes an extensive set of links to organizations that focus on autism (on the Organizations page).

TEACCH AUTISM PROGRAM
www.teacch.com
This program bases its approach on working with the strengths and needs of individuals with autism.

WRONG PLANET
www.wrongplanet.net
Wrong Planet is an online community and discussion forum for individuals with autism spectrum disorder, attention deficit hyperactivity disorder and other neurological differences, as well as their friends and family members and professionals in the field.

Paula typing.
Photo courtesy of “Neurotypical”
HOW TO BUY THE FILM

To order **Neurotypical** for home or educational use, go to www.neurotypical.com.

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**American Documentary, Inc.** [www.amdoc.org](http://www.amdoc.org)

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Front cover: Violet at the river.

Photo courtesy of “Neurotypical”