



## Reframing Neurodivergence: How Digital Neuroqueer Communities Resist Pathologizing Discourses and Generate Counter-hegemonic Narratives. A Critical Discourse Analysis of Neuroqueer Counter-Narratives

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*This study examines how autistic queer and trans communities within US-based English-language digital platforms mobilize collective discourse practices to resist pathologizing narratives and construct alternative frameworks for understanding neuroqueer experience. Neuroqueer, following Walker (2021), designates here both an identity and a critical practice: the active destabilization of normative assumptions about neurological differences, gender, and sexuality through their mutual entanglement. Drawing on neuroqueer theory (Walker and Raymaker 2021; Yergeau 2018), Fricker's (2007) framework of epistemic injustice, and critical discourse analysis (Fairclough 1995) extended through multimodal analysis (Kress and Van Leeuwen 2006), this study analyzed 6,568 Reddit posts and 23,993 community responses across 64 neurodivergent and queer digital communities over a six-month period in 2024. The analysis reveals counter-discursive practices through which neuroqueer communities challenge pathologizing narratives via linguistic reappropriation, the creation of new identity categories, environmental reframing of functional difficulties, and multimodal cultural production. These findings contribute to neuroqueer theory by demonstrating how digital communities perform the “/” between disability studies and gender/queer studies in lived practice, destabilizing categorical boundaries while generating alternative epistemologies that center experiential knowledge over clinical authority through language use.*

### Introduction

Within the United States, recent legislative developments have intensified the weaponization of autism diagnoses within anti-trans discourse, challenging the autonomy and self-determination of neuroqueer communities. This weaponization manifests concretely through legislative attempts to restrict gender-affirming care based on spurious associations between autism and gender variance. The 2024 Saving Adolescents from Experimentation (SAFE) Act exemplifies this convergence by mandating autism screening as a prerequisite for accessing gender-affirming healthcare, effectively institutionalizing the premise that neurodivergence disqualifies individuals from authentic gender self-determination (Barnett 2024). Such legislation constructs autistic individuals as passive subjects incapable of making informed decisions about their own bodies and identities, reinforcing what Nick Walker and Dora Raymaker (2021) identify as a broader pattern in which “the pathologization of neurominorities—the framing of autism, for instance, as a ‘mental disorder’ or a medical ‘condition’—is no more valid and no less oppressive than the framing of homosexuality as a ‘mental disorder’” (6). These



developments extend beyond neoliberal governance; they operate within overtly fascist political formations that seek to constrain expression of gender and sexuality diversity while mobilizing disability as a disciplinary tool (Stryker 2008, Yergeau 2018).

These legislative exclusions build upon decades of clinical discourse that positions autism and gender variance as mutually incompatible categories. Central to this exclusionary logic is the distortion of concepts originally developed to challenge deficit-based frameworks. Damian Milton's (2012) "double empathy problem" identifies communicative difficulties between autistic and non-autistic people as "a disjuncture in reciprocity between two differently disposed social actors" rather than a unilateral neurodivergent deficit (884), yet this concept has been misappropriated to argue that autistic individuals cannot reliably articulate gender experiences or make informed decisions about transition (Shapira and Granek 2019). Clinical frameworks systematically deflate the credibility of neuroqueer testimony on the basis of identity prejudice, enacting what Miranda Fricker (2007) terms testimonial injustice, while positioning medical professionals as sole arbiters of identity validity. These patterns of epistemic exclusion create what Mylène Legault et. al (2021) conceptualize as cognitive injustice: a form of marginalization that operates through the systematic exclusion of neurodivergent ways of knowing from legitimate knowledge production.

These very mechanisms of pathologization, however, generate the conditions for resistance. As Michel Foucault (1978) argues, "where there is power, there is resistance, and yet, or rather consequently, this resistance is never in a position of exteriority in relation to power" (95). Community resistance strategies documented within autistic digital culture (Davidson 2008, Rauchberg et al. 2023) emerge not despite but through engagement with pathologizing frameworks, reappropriating their terms and destabilizing their logics. Digital platforms have become sites of this resistance, enabling what Arseli Dokumaci (2023) calls "activist affordances": capabilities for pseudonymous participation, multimedia content creation, and community-controlled moderation that allow neuroqueer individuals to experiment with identity expression, build supportive networks, and challenge dominant narratives in ways that would face significant barriers within traditional institutional settings. As Julia Bascom's (2012) documentation of autistic self-advocacy demonstrates, these communities function as autonomous sites of knowledge production where experiential expertise, shared through personal narratives and peer support, challenges professional authority over the definition of autistic experience.

Neuroqueer theory has emerged as a necessary framework for understanding these dynamics. Originating primarily from digital community discourse (rather than academic institutions), the concept of neuroqueer rests on the insight that "neuronormativity and heteronormativity are fundamentally entwined with one another, and therefore any significant queering of neuronormativity is also inevitably a queering of heteronormativity" (Walker 2021, 92). This mutual entanglement means that neurodivergence and queerness are not separate identity categories that occasionally intersect but co-constitutive dimensions of lived experience that resist categorical separation. Nevertheless, despite growing documentation of neurogender identities and linguistic innovation within these communities (Barnett 2024), significant gaps remain in understanding how digital platforms enable grassroots challenges to pathologizing narratives through collective meaning-making processes, and how these discursive practices relate to broader questions of epistemic justice and the destabilization of disciplinary boundaries between disability studies, queer theory, and gender studies. These gaps extend to Gender and Language Studies and Queer Linguistics, where the foundational insight that identity is interactionally accomplished in lieu of pre-given (Eckert 2006, West and



Zimmerman 1987,) has not yet been brought to bear on neuroqueer community discourse, and where the field's attention to how speakers negotiate identity through language has not yet confronted communities in which neurological difference and gender refuse the categorical separation.

Responding to these gaps, this investigation asks: how do autistic queer and trans communities mobilize digital platforms to resist pathologizing discourses and construct alternative frameworks for understanding neuroqueer experience? Subsidiary questions examine the specific linguistic strategies through which neuroqueer counter-narratives operate and how community-generated discourse challenges medical authority while constructing alternative epistemologies.

To address these questions, the study analyzes discourse patterns across 6,568 Reddit posts and 23,993 community responses spanning 64 neurodivergent and queer digital communities, employing critical discourse analysis (Fairclough 1995) extended through multimodal analysis (Kress and van Leeuwen 2006) to account for the visual dimensions of community meaning-making. The investigation positions itself at the intersection of neuroqueer theory (Walker 2021, Walker & Raymaker 2021, Yergeau 2018), crip theory (Kafer 2013, McRuer 2006), and feminist epistemology (Fricker 2007, Haraway 1988), offering a community-centered approach that prioritizes neuroqueer voices while rejecting deficit-based frameworks in favor of analytical perspectives that recognize community expertise and epistemic agency.

The paper proceeds as follows. Section 2 develops the theoretical framework, elaborating neuroqueer theory through sustained engagement with M. Remi Yergeau's (2018) work on rhetoric and neurological queerness, introducing Foucault's analytics of productive power, and extending Fairclough's CDA (critical discourse analysis) through multimodal discourse analysis. Section 3 outlines the methodology, including a fuller account of the researcher's situated positionality. Section 4 presents findings and discussion in integrated form, analyzing community discourse through the theoretical apparatus developed in Section 2. Section 5 concludes by articulating the paper's contribution to what Evelien Geerts et al. (2022) term the productive work of the "/" between gender studies and critical disability studies: a destabilization of disciplinary and categorical boundaries that neuroqueer digital communities enact through everyday discursive practice.

## Theoretical Framework

### *Neuroqueer Theory as Analytical Lens*

Neuroqueer theory provides the primary analytical lens for this investigation. To understand its ontological claim, that neurological difference, gender, and sexuality are co-constituted (and not just co-occurring), it is necessary to have an account of how co-constitution operates at the level of discourse and rhetoric, which Yergeau's (2018) *Authoring Autism* provides. Yergeau begins from a diagnostic observation about how autism is constituted in dominant discourse: as that which contrasts with "language, humanness, empathy, self-knowledge, understanding, and rhetoricity" (2), rendering autistic people as "unknowable, as utterly abject and isolated and tragic" (3). This construction is not incidental to pathologization: the denial of rhetoricity, Yergeau demonstrates, is the mechanism through which autistic individuals are denied both their communicative agency and their standing as subjects capable of self-determination. Autism is configured, in clinical and popular discourse alike, as the condition of the person who



cannot mean, cannot author, cannot be trusted to narrate their own experience. In addition to describing this incapacity, the diagnostic apparatus performs it, producing autistic individuals as subjects whose self-reports are structurally disqualified from counting as knowledge.

Against this, Yergeau develops the concept of “demi-rhetoricity” with a characteristic double move: first naming the assumption embedded in dominant discourse (that autistic people possess a not-quite rhetoricity, a partial and unreliable communicative capacity), and then demonstrating that this partiality is not a deficit but a refusal, a resistance to the rhetorical norms that define full rhetoricity in terms of neurotypical intention, diplomacy, and purposeful self-presentation. Neurodivergent communication does not fail to meet the standard; it calls the standard into question. From this foundation, Yergeau theorizes rhetorical sovereignty: the assertion of neurodivergent communities’ right to define their own experiences and produce knowledge about themselves without external mediation or interpretive override. Rhetorical sovereignty is not aspirational but practiced: it is exercised when neuroqueer communities create new identity categories, reappropriate clinical terminology, and construct alternative accounts of their own experience that refuse the deficit frameworks clinical authority imposes.

Jessica Barnett’s (2024) concept of the “doing” of neuroqueer identity extends Yergeau’s rhetorical account into the domain of performative identity construction. Neuroqueer identity, on this account, is not a fixed category to be diagnosed or assigned from outside but an ongoing process of becoming, enacted through community discourse, interaction, and cultural production. The performative account directs analytical attention toward discursive practice as the site where neuroqueer identity is both produced and contested: identity is not prior to discourse but constituted through it.

Barnett’s account extends a lineage that goes from Harvey Sacks’s (1984) demonstration that identity categories are achievements of talk-in-interaction, through Candace West and Don Zimmerman’s (1987) argument that gender is something people “do” in a sustained practice. What neuroqueer “doing” adds to this lineage is that the identity accomplished through community discourse refuses to separate neurological difference from gender, pressing against the premise of discrete identity dimensions that even the “doing gender” framework tends to presuppose.

### *Epistemic Injustice and Feminist Epistemology*

The denial of rhetoricity that Yergeau (2018) theorizes has a specific epistemic consequence that Fricker (2007) makes legible. The diagnostic apparatus that positions autistic individuals as unreliable authors of their own experience does not only strip rhetorical agency; it also generates a credibility economy in which autistic testimony about gender experience is systematically deflated on the circular basis of the diagnosis itself. The diagnosis functions as a credibility-reducing identity marker, and the testimony it discredits is used to confirm the deficit that the diagnosis names. This circularity makes testimonial injustice more than an occasional bias: it becomes a structural feature of the clinical encounter. What Yergeau’s account provides is the mechanism through which autistic subjects are produced as non-authors; what Fricker’s provides is the epistemic consequence of that production, the systematic deflation of credibility that follows from it.

Hermeneutical injustice operates alongside testimonial injustice but at the level of available conceptual resources. The absence of adequate frameworks for understanding the co-constitution of neurodivergence and queerness is a structural condition that makes it harder for neuroqueer individuals to articulate, recognize, and communicate their own experience. Community-generated terms such as “neurogender” and “autigender” are responses to this gap,



filling it not with academic language but with categories that emerge from and serve the experiential reality they name. That these terms originate in community discourse (instead of academic or clinical contexts) marks community knowledge production as prior to, rather than derivative of, institutional recognition.

Legault et. al's (2021) concept of cognitive injustice extends this analysis to the institutional scale. Where testimonial injustice names what happens in specific encounters (credibility deflated, testimony dismissed) and hermeneutical injustice names what happens at the level of conceptual resources (gaps that prevent articulation), cognitive injustice names the structural exclusion of neurodivergent communities from the epistemic practices through which authoritative knowledge about neurodivergence is produced. The three operate at different scales of the same exclusionary logic: subject production, encounter, institution. Epistemic resistance, in Fricker's terms, is the response: the active construction of alternative knowledge systems in which experiential authority is recognized, community-generated expertise is validated independently of clinical credentialing, and the terms through which neurodivergent experience is understood are collectively renegotiated. Such resistance constitutes a challenge to the epistemic conditions under which authoritative speech about neurodivergence is permitted.

#### *Intersectionality, Crip Theory, and the "/" Intervention*

The intersectional dimensions of neuroqueer experience require a framework that moves beyond additive models of identity. Austin Oswald et. al (2022) document the multiplicative minority stress that emerges at the intersection of neurodivergence with gender and sexual identity, demonstrating that these forms of oppression produce effects that cannot be understood as the sum of separate injuries. Yet even multiplicative models presuppose discrete categories that then interact, a presupposition that neuroqueer experience presses against. What is needed is a framework for identities that refuse decomposition: experiences in which neurological difference and gender are not separate dimensions that happen to co-occur but aspects of the same lived reality that lose their intelligibility when pulled apart.

Robert McRuer's (2006) analysis of compulsory able-bodiedness and Alison Kafer's (2013) account of crip time provide the structural context within which this refusal operates. McRuer reveals how able-bodiedness functions as a presumed default that structures not only physical spaces but the communicative norms governing participation in public discourse; in digital contexts, this operates through platform architectures that privilege synchronous interaction, rapid response, and neurotypical conventions of coherence and tone. Kafer's crip time provides the counterpoint: a reorientation of temporal norms that treats asynchronous, non-linear, and variable-paced participation not as failed synchrony but as a legitimate mode of engagement. Together, these frameworks direct analytical attention to how the communities in this study construct communicative spaces that operate under alternative temporal and participatory norms, and to the friction that arises when platform affordances designed around compulsory able-bodiedness encounter those norms.

This is what Geerts et. al(2022) name through the "/": a refusal of categorical separation in which disability and ability, gender and normativity, queerness and neurological difference are understood as co-constituting. As an analytical tool, the "/" directs attention to discursive practices that resist decomposition: moments in community discourse where neurological difference and gender are not narrated as separate stories but are enacted as inseparable. Where the multiplicative model captures the intensification of minority stress at identity intersections, the "/" captures practices that refuse the premise of discrete categories



available for multiplication in the first place. This distinction is analytically consequential for the data under examination, in which community members routinely produce identity categories, linguistic innovations, and visual rhetoric that presuppose the inseparability of neurodivergence and queerness rather than arguing for it.

### *Critical Discourse Analysis and Multimodal Extension*

Norman Fairclough's (1995) three-dimensional model of critical discourse analysis provides the methodological framework for this work. Fairclough analyzes discourse simultaneously at the level of text (lexical choices, grammatical structures, semantic patterns), discursive practice (how texts are produced, distributed, and consumed), and social practice (the broader political and cultural contexts that shape and are shaped by discourse). This framework enables analysis of community language as cultural and political work through which alternative knowledge systems are constructed and maintained against hegemonic pressure.

Since 34.6% of posts in the dataset contain visual elements, however, a methodological extension is required. Gunther Kress and Theo van Leeuwen's (2006) framework for multimodal discourse analysis demonstrates that visual communication operates through its own grammar of meaning-making and that discourse cannot be fully accounted for by attending to language alone. Extending Fairclough through them allows the visual and linguistic dimensions of community discourse to be treated as parts of a unified semiotic field, rather than relegating the visual to supplementary or illustrative status. Memetic communication presents the clearest case for this extension: as Shifman (2013) defines it, internet memes are "a group of digital items sharing common characteristics of content, form, and/or stance, that were created with awareness of each other, and were circulated, imitated, and/or transformed via the Internet by many users" (41). Memes generate meaning through repetition-with-variation, the appropriation of familiar cultural forms to introduce subversive content, where the gap between original and transformed version is itself the political act. Attending to this requires multimodal analysis, not linguistic analysis alone.

This unified semiotic field is not politically neutral; it is contested terrain. Semiotic resistance, as this investigation uses the term, refers to the strategic deployment and transformation of sign-systems, both linguistic and visual, to challenge dominant meaning-making frameworks. The concept names what becomes analytically visible when Fairclough's attention to discourse as social practice is extended through multimodal analysis: communities do not merely communicate through available sign-systems but actively rework them, reappropriating clinical terminology, generating identity categories that exceed existing classificatory structures, and subverting institutional aesthetics through memetic form. These are not separate practices that happen to co-occur but expressions of the same contestatory logic operating across semiotic registers. Linguistic reappropriation and visual subversion constitute a single discursive practice precisely because they draw on the same unified semiotic field that Kress and van Leeuwen's framework makes legible.

### Methodology

This investigation employs critical discourse analysis (Fairclough 1995) extended through multimodal analysis (Kress & van Leeuwen 2006), applied to a computationally constructed corpus of neuroqueer digital community discourse. The design integrates computational data collection and preprocessing with qualitative discourse analysis, enabling systematic examination of resistance strategies across a dataset of sufficient scale to identify patterns that



close reading alone could not establish while maintaining the interpretive depth that computational methods alone cannot provide. The methodological commitments developed in Section 2 shape the analytical stance throughout: community-generated discourse is treated as primary source material produced by knowledgeable agents rather than as raw data requiring external interpretation, and analytical categories are drawn from community practice rather than imposed from clinical or institutional frameworks. This orientation reflects the ethical imperative to avoid reproducing the extractive research dynamics that neurodivergent and LGBTQ+ communities have historically experienced (Walker and Raymaker 2021), though the methods themselves (corpus construction, computational preprocessing, qualitative analysis) are standard research tools rather than methodological innovations.

Platform selection focused on Reddit due to its specific affordances for pseudonymous participation, community self-governance through subreddit moderation structures, and sustained discourse development through threaded conversation architecture. Reddit's subreddit structure creates distinct community spaces with specialized discourse norms while enabling the cross-community participation that reflects the intersectional identity navigation central to this investigation. Pseudonymous participation is particularly significant in neuroqueer contexts, where identity exploration and vulnerable disclosure about diagnosis, gender, and sexuality would face significant barriers in identifiable settings. These platform affordances align with the recognition, now well established in digital discourse research (Addeo et al. 2019, Kozinets and Gambetti 2020), that online communities constitute legitimate sites of cultural production and knowledge formation whose discourse merits analytical attention on its own terms. The platform's predominantly North American, English-language user base aligns with the US legislative context framing the study, though this also constitutes a limitation: findings cannot be generalized to neuroqueer communities operating in other linguistic, cultural, or political contexts. The platform-specific focus on Reddit similarly limits understanding of resistance practices on platforms with different affordances, such as TikTok's visual culture or Discord's real-time interaction, where distinct forms of neuroqueer community formation may operate.

Data collection utilized a Python-based framework employing the PRAW (Python Reddit API Wrapper) library to gather publicly available posts and community responses across 64 targeted subreddits over a six-month period in 2024. The sampling strategy employed keyword-based filtering designed to identify neuroqueer content while maintaining sensitivity to community-specific terminology and cultural references that may not appear in clinical or academic discourse. The final dataset comprises 6,568 posts and 23,993 associated community responses from approximately 3,343 distinct participants. Sampled communities span autism-specific subreddits (including r/AutisticPride, r/AutismTranslated, and r/neurodivergent), neurodivergent women's communities (r/AutismInWomen, r/adhdwomen), LGBTQ+ spaces (r/trans, r/lgbt, r/nonbinary), and broader social networks (r/AmItheAsshole, r/relationship\_advice, r/TrueOffMyChest). Data types include post content, hierarchical comment threads, user flair, community guidelines, engagement metrics, and temporal posting patterns. All data collection focused exclusively on publicly available content, with standard research anonymization protocols applied to protect participant privacy. Rate limiting and ethical scraping practices ensured minimal impact on community platform performance.

Analysis proceeded through three integrated phases designed to move from computational pattern identification to detailed qualitative interpretation. Phase one employed computational preprocessing for corpus creation and initial pattern identification: VADER (Valence Aware Dictionary and sEntiment Reasoner) for sentiment analysis across the full



dataset, NLTK (Natural Language Toolkit) for keyword frequency analysis and corpus processing, and pandas for data structuring and temporal discourse mapping. This computational phase identified 159 distinct keywords across seven analytical categories (digital culture, resistance strategies, resistance terms, intersectional terms, autism-specific terminology, identity terms, and community terms) and enabled systematic identification of high-engagement content, community-specific terminology patterns, and cross-community discourse themes that informed subsequent qualitative analysis.

Phase two applied Fairclough's (1995) critical discourse analysis model to the computationally identified patterns. Textual analysis focused on linguistic strategies including identity-first language usage, medical terminology reappropriation, and community-specific neologisms. Discursive practice analysis examined intertextuality patterns, authority positioning, and community validation mechanisms through which participants navigate multiple discourse communities. Social practice analysis addressed the broader political and cultural contexts shaping community resistance strategies. This phase was extended through multimodal discourse analysis (Kress and van Leeuwen 2006) applied to the 2,272 visual artifacts identified in the dataset, representing 34.6% of posts containing visual elements. As argued in Section 2, the multimodal extension is necessary because community meaning-making operates across linguistic and visual registers simultaneously, and restricting analysis to language alone would miss the semiotic resistance practices that constitute a significant dimension of neuroqueer counter-discourse. Phase three conducted thematic analysis of resistance strategies and counter-narratives through iterative coding procedures in which analytical categories emerged from community discourse, maintaining the investigation's commitment to centering community knowledge production.

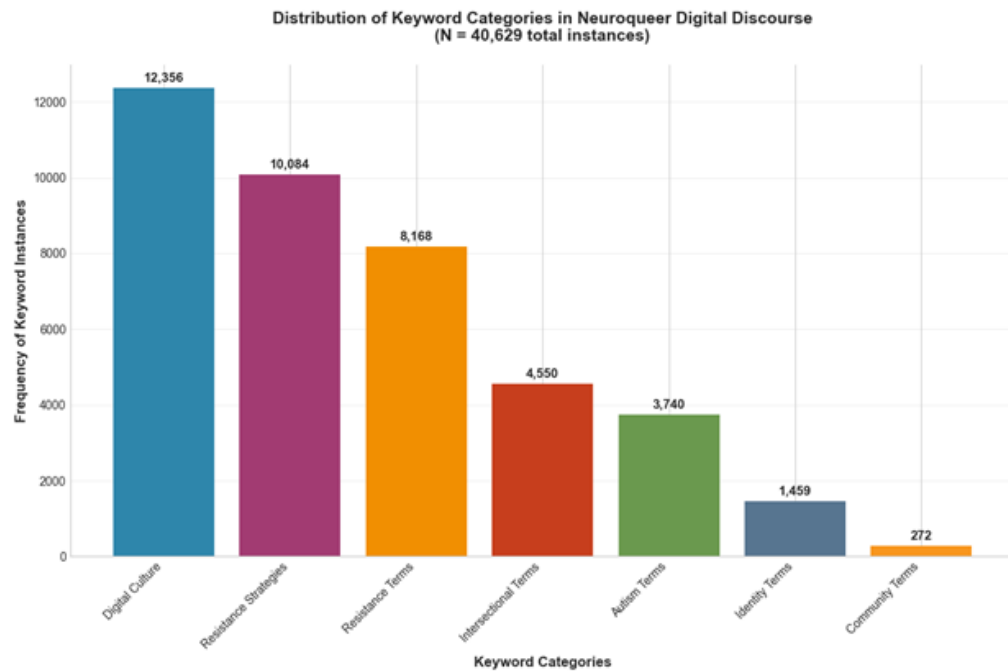
The investigation is situated within my experience as a queer woman navigating the space between community recognition and clinical validation of neurodivergence. I am a long-term participant in several of the digital spaces examined in this study, though primarily as a reader rather than an active contributor. This mode of engagement mirrors how a substantial proportion of community members participate: reading, absorbing, finding recognition in others' articulations of shared experience. The analytical patterns identified in this investigation first became visible through that situated participation, not through detached observation, therefore my experience of the disjuncture (between experiential self-knowledge and institutional gatekeeping) directly informs my attention to the epistemic dynamics this paper documents.

This situated participation shapes the analysis in specific ways that should be made explicit: it informs which patterns are recognized as significant: the reappropriation of clinical terminology, the epistemic function of community validation practices, the semiotic work of memes that a reader outside these communities might dismiss as humor rather than recognizing as resistance. It also informs the decision to treat community-generated categories and terminology as analytically primary rather than translating them into academic equivalents. These are commitments about how CDA is conducted, about what counts as a salient textual feature and what contextual knowledge is brought to discursive and social practice analysis.

At the same time, my position as a researcher in an academic institution introduces the very power asymmetries this investigation interrogates. I have attempted to address these dynamics by centering community discourse as primary source material and by analyzing community knowledge production as legitimate epistemic practice, following the commitment to rhetorical sovereignty theorized in Section 2. I do not claim to have resolved the tension

between proximity and analytical distance; I hold it as productive and make it visible rather than obscuring it behind a performance of objectivity.

## Findings and Discussion



**Figure 1:** Distribution of keyword categories.

**Accessibility Text:** Distribution of keyword categories across 6,568 Reddit posts in neuroqueer digital communities. Digital culture terminology represented the highest frequency (12,356 instances), followed by resistance strategies (10,084 instances). Data collected over six-month period across 64 subreddits.

### *Hegemonic Discourses: Pathologization as Epistemic Practice*

The textual analysis revealed pathologization operating both as a stigma and as an epistemic practice: a systematic mechanism through which neurodivergent individuals are disqualified from authoritative speech about their own experience. Pathologization does not only repress neuroqueer subjects; it produces them as subjects whose testimony is structurally unreliable, whose self-knowledge is diagnostically suspect, and whose claims to gender self-determination can be dismissed as symptoms.

The frequency of deficit-oriented terminology mapped this epistemic machinery into action. “Therapy” appeared 1,930 times, “treatment” 699 times, and “cure” 857 times across pathologizing discourse contexts. The term “normal” appeared 3,086 times, consistently positioning neurodivergent experience as deviation requiring correction. Additional terms including “functioning” (336 instances) and “burden” (301 instances) appeared in contexts that constructed neurodivergent individuals as fundamentally lacking capacity for autonomous decision-making. These descriptors constitute what Fricker (2007) identifies as testimonial



injustice operating at a structural level, where the autism diagnosis itself functions as a credibility-reducing identity marker. When a participant reported being told she was “too empathetic to be autistic,” the clinical framework did not merely misdiagnose; it enacted the circular logic through which autistic testimony about autistic experience is systematically deflated. The diagnosis positions the speaker as unreliable, and the unreliability attributed to the speaker is then used to confirm the terms of the diagnosis.

Protective rhetoric compounded this epistemic exclusion through care-oriented language that functioned as justification for restrictions on autonomy while maintaining the appearance of beneficence. This discourse targeted intersectional identities with force: transgender neurodivergent individuals received disproportionate scrutiny regarding their capacity for authentic identity formation, with gender variance treated not as a parallel dimension of self-knowledge but as further evidence of compromised judgment requiring external management. The analysis also revealed temporal hierarchies that positioned childhood diagnosis as more legitimate than adult self-recognition, creating barriers especially for individuals whose neurodivergence was not identified during childhood, including disproportionately women, people of color, and LGBTQ+ individuals whose presentations do not conform to the diagnostic prototypes established through research on white cisgender boys. These temporal hierarchies are themselves a form of hermeneutical injustice in Fricker’s terms: the interpretive resources available within clinical frameworks are structured around a narrow demographic prototype, and those who fall outside it lack access to the conceptual tools that would make their experience legible within institutional settings.

Expert-versus-experience narratives privileged professional interpretation over lived experience testimony, utilizing medical authority as the ultimate arbiter of identity validity. The selective appropriation of scientific authority was visible in the citation of research supporting deficit narratives alongside systematic disregard for scholarship documenting neurodivergent agency and community innovation. This appropriation extended to concepts originally designed to challenge deficit frameworks: Milton’s “double empathy problem,” which identifies communicative difficulties as “a disjuncture in reciprocity between two differently disposed social actors,” appeared in pathologizing discourse contexts reframed as evidence that autistic individuals cannot reliably articulate gender experience. The concept was stripped of its critical force and turned against the communities it was developed to support. This pattern of epistemic appropriation is not simply bias; it is cognitive injustice, the exclusion of neurodivergent ways of knowing from the epistemic practices through which authoritative knowledge about neurodivergence is produced.

#### *Counter-Discourses: Linguistic Resistance and Epistemic Agency*

Against this pathologizing apparatus, the analysis found extensive counter-discursive practices through which neuroqueer communities constructed alternative frameworks for understanding their own experience. The prevalence of resistance terminology (18,252 combined instances) over clinical terminology (3,740 instances) indicated a community discourse oriented toward agency rather than deficit. Key resistance terms included “refuse” (819 instances), “challenge” (550 instances), “reject” (512 instances), “resist” (324 instances), “unite” (332 instances), “organize” (234 instances), “validation” (223 instances), “authentic” (211 instances), “disrupt” (172 instances), and “solidarity” (162 instances).

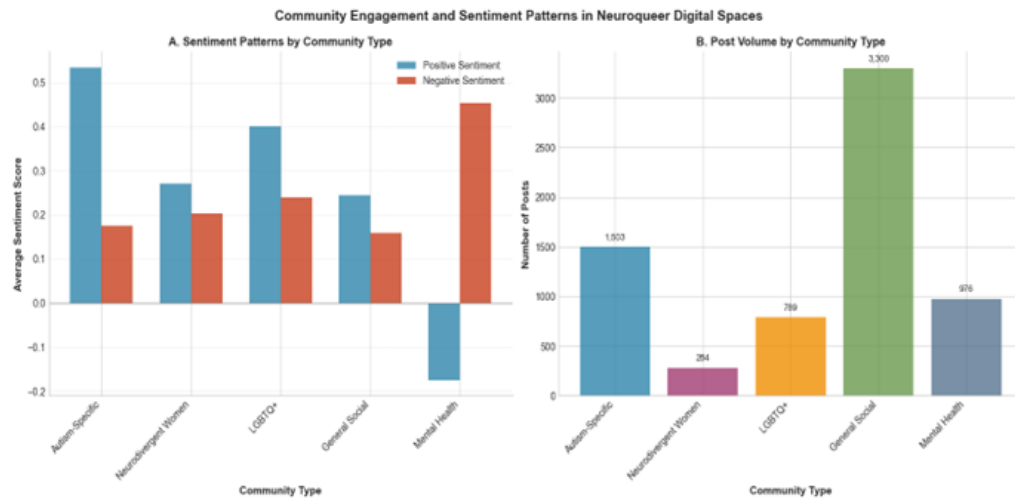


Figure 2: Community engagement and sentiment patterns

**Accessibility Text:** Community engagement patterns and sentiment analysis across neurodivergent digital communities. Shows predominantly positive sentiment orientations (61.9% positive in posts, 55.7% positive in comments), contradicting deficit-focused assumptions about neurodivergent discourse.

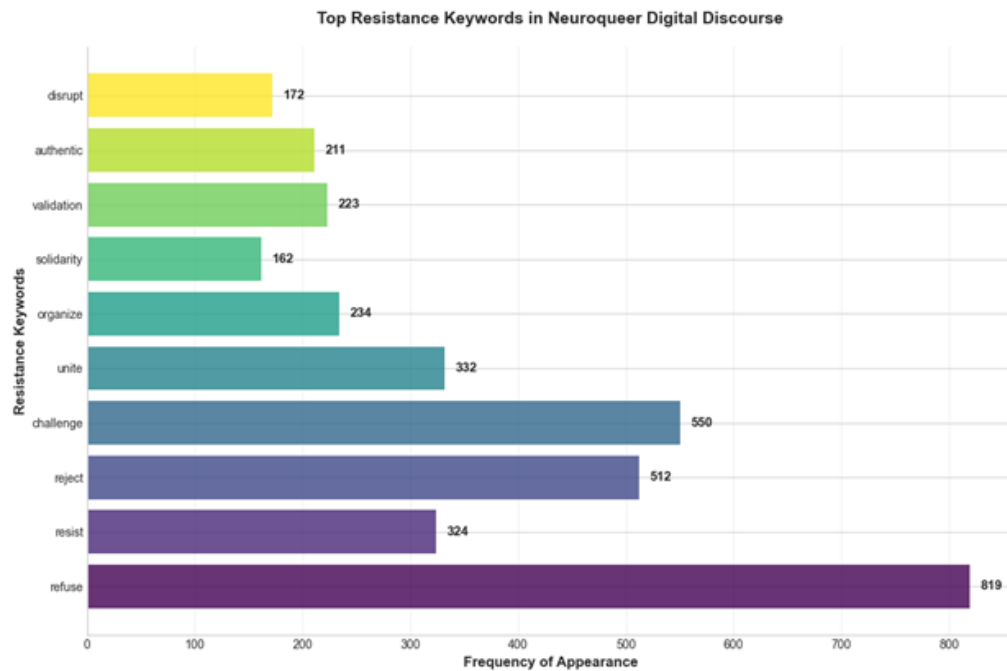


Figure 3: Top resistance keywords

**Accessibility Text:** Top resistance keywords identified through computational analysis of community discourse. Resistance terminology (18,252 combined instances) appeared 4.9 times more frequently than clinical/medical terminology (3,740 instances).



These constitute Yergeau's rhetorical sovereignty. When communities engaged in reclamation of diagnostic language, transforming pathologizing terminology into tools for identity affirmation, they were practicing the demi-rhetoricity Yergeau identifies: not failing to meet the communicative standards set by neurotypical discourse, but refusing those standards and constructing alternatives. Posts featuring titles such as "My [pathological/obsessive/special] interest in [topic]" transformed clinical deficit language into community celebration, simultaneously acknowledging the diagnostic framework and subverting its authority over meaning. This is linguistic reappropriation operating as epistemic resistance in Fricker's (2007) sense: the active construction of alternative interpretive resources in contexts where dominant frameworks systematically exclude the experiences of marginalized knowers.

The creation of new terminology pushed further, exceeding existing categorical frameworks entirely. Community-generated neologisms (including the mentioned "neurogender," "autigender," and "neuroqueer") asserted identity categories that challenge both medical monopolization of identity definition and binary gender frameworks. Participants frequently articulated this integration in terms that refuse decomposition: "my autism and my gender aren't separate things, they're part of the same experience of being me." These linguistic innovations constitute responses to hermeneutical injustice: the gap in collective interpretive resources that makes it harder for neuroqueer individuals to articulate their own experience. The creation of those new gender-terms is not just a terminological preference; it is the construction of the interpretive resources that institutional frameworks have failed to provide, enacted by the communities that need them. The terms spread across community networks through viral mechanisms, demonstrating rapid adoption and adaptation that institutional knowledge production cannot (and does not want to) match.

Posts like "I'm autistic with savant traits. I came here looking for connection, not to be dissected" exemplify resistance to what Yergeau (2018) identifies as the medical gaze that positions autistic individuals as objects requiring external interpretation rather than agents capable of self-representation. The statement performs rhetorical sovereignty in the act of refusing the terms on which clinical engagement is offered: the speaker is not rejecting knowledge about autism but rejecting the subject position of the person who is known rather than the person who knows.

Community discourse also consistently replaced individual deficit models with environmental explanations for functional difficulties. Posts describing workplace experiences contrasted supportive versus hostile environments: "supportive manager who understood my needs" against "toxic environment where I was constantly criticized." These narratives relocated the source of difficulty from the neurodivergent individual to the institutional environment, enacting the social model of disability in everyday discourse and reversing dominant causal frameworks that locate problems within individuals rather than systems. The pattern was not limited to workplace contexts; community members applied environmental analysis to educational settings, healthcare encounters, and family relationships, consistently demonstrating that functional outcomes are determined by the accessibility of environments rather than by inherent individual limitations. Documentation of successful advocacy further reinforced this epistemic repositioning: "I prepared a one-page summary of my accommodation needs with legal backing and specific suggestions for implementation" positions the neurodivergent individual as an experienced self-advocate with practical expertise, directly countering the expert-versus-experience hierarchies through which pathologizing discourse operates. These advocacy narratives circulated as practical resources across communities,



building collective capacity for institutional navigation.

The consistent use of identity-first language throughout community discourse, the deliberate preference for “autistic person” over “person with autism”, placing the identity category in attributive (and not just post-modifying) syntax position, constitutes a linguistic practice through which community members assert definitional authority over their own experience at the level of everyday lexical choice. This identity-first language refuses the separation between person and condition that person-first formulation grammatically encode, treating autism not as an appendage to a pre-existing subject but as constitutive of the subject who speaks. The practice enacts, at the level of nominal structure, the same refusal of categorical decomposition that community-generated terms like “neurogender” perform at the level of identity taxonomy. All of this represents what Yergeau (2018) conceptualizes as the assertion of neurodivergent individuals’ right to define their own experiences, a linguistic practice that challenges the neurotypical monopolization of cognitive norms.

### *Community Building and Alternative Epistemologies*

The analysis revealed community-based infrastructures that tried to compensate for institutional failures while constructing alternative knowledge systems. The high frequency of community-building terminology indicated robust mutual aid practices operating through horizontal knowledge exchange: “together” (2,692 instances), “share” (2,310 instances), “solidarity” (162 instances), “organize” (234 instances), “unite” (332 instances), “educate” (254 instances), “acceptance” (238 instances), “validation” (223 instances), and “affirming” (267 instances). The scale and consistency of this terminology across the dataset indicates that community building is constitutive of neuroqueer digital discourse: mutual support and collective knowledge production are the discursive practice, not merely its context.

Community networks shared practical strategies for workplace navigation, sensory accommodation, healthcare advocacy, and institutional system navigation. These mutual aid practices prioritized experiential knowledge over professional recommendations, with community members sharing detailed strategies for managing specific challenges based on lived experience. Posts seeking support for workplace or institutional discrimination received consistent community response patterns providing both emotional validation and practical guidance, creating learning environments that accommodated diverse communication styles and knowledge processing approaches. The horizontal structure of this knowledge exchange is significant: information flows between peers based on experiential credibility, not from experts downward on the basis of institutional credentials.

This knowledge production operated through specific community governance practices that demonstrated understanding of power dynamics, conflict resolution, and inclusive participation. Moderation practices consistently prioritized community safety while maintaining commitment to diverse perspectives, and community guidelines reflected collective negotiation processes that centered accessibility and mutual respect. Content warnings, flexible participation structures, and accommodation of diverse communication styles constituted forms of care work that sustained community organizing. These practices created a crip time and space (Kafer, 2013): environments that accommodate diverse cognitive and temporal processing needs in ways that traditional institutional and activist spaces routinely cannot.

The distribution of posts across autism-specific communities (1,503 posts), LGBTQ+ spaces (789 posts), mental health communities (976 posts), and broader social networks (3,300 posts) demonstrated extensive cross-community participation. This multi-community engagement pattern reflects the complex identity navigation characteristic of neuroqueer



individuals who participate simultaneously across autism-specific, gender and sexuality, disability justice, and broader social support networks. This cross-community participation pattern distinguishes neuroqueer digital spaces from communities of practice in Eckert's (2006) sense, where sustained mutual engagement in a shared enterprise generates shared repertoire over time. What the data shows is closer to discursive community: participants share semiotic resources across multiple spaces without stable co-membership, accomplishing neuroqueer identity through embeddedness in a single shared practice.

#### *Multimodal Resistance: Memetic Discourse as Semiotic Practice*

The examination of the visual artifacts (34.6% of all posts containing visual elements) revealed multimodal resistance mechanisms that extend the linguistic practices documented above into the visual register.

The comparative meme "Telling neurotypicals I'm autistic vs. Telling autistic people that I'm autistic" provides the clearest case for multimodal analysis through Kress and van Leeuwen's (2006) framework. The meme operates through a two-panel visual grammar in which the contrast between panels is the meaning-making mechanism. The upper panel depicted aggressive neurotypical responses ("I don't think you are," "Everyone is a bit autistic!!," "But you made eye contact!") rendered through intense visual imagery. The lower panel represented autistic mutual recognition through a simple exchange: "I'm autistic" / "We know," set against contemplative figures. Read through Kress and van Leeuwen's attention to the grammar of visual design, the meme's compositional structure performs the double empathy problem visually: the upper panel's chaotic density signifies the epistemic violence of neurotypical disbelief, while the lower panel's visual calm signifies the shared interpretive resources available within community. The meme simultaneously documents testimonial injustice, in Fricker's terms, where the speaker's credibility is deflated by identity prejudice, and demonstrates the existence of epistemic communities where that injustice does not operate. The differential reception patterns across neurotypical and neurodivergent audiences confirm that diagnostic authority operates differently across social contexts: neurotypical responses focus on external behavioral validation ("But you made eye contact!"), while autistic community responses center shared recognition emerging from insider knowledge systems.

The recurring ADHD self-medication meme featuring Norman Osborn declaring "You know, I'm something of a scientist myself" performed a different kind of semiotic work: the appropriation of scientific authority through popular culture reference. By repositioning community members from passive subjects of medical intervention to active knowledge producers with legitimate expertise based on lived experience, the meme enacts Yergeau's (2018) argument about rhetorical sovereignty at the level of visual discourse. The popular culture frame (a supervillain's ironic self-aggrandizement) carries the subversive content (community members as scientists of their own experience) in a register that is simultaneously humorous and politically serious. This simultaneity is important, because humor does not diminish the political claim but enables it to circulate in contexts where direct assertion might meet resistance. This is the stance dimension of memetic communication: the meme's form (appropriated film still) and content (self-medication knowledge) are familiar, but the stance, the subject position from which the claim to scientific authority is made, is transformed. The meme's viral success across neurodivergent communities demonstrates that this transformation resonates as shared experience: the ironic claim to scientific expertise reflects an understanding, widely held within these communities, that lived experience constitutes a form of knowledge that clinical frameworks routinely fail to recognize.



The prohibition signage meme declaring “No eye contact / Penalty £200” used governmental visual grammar to transform sensory boundaries from individual accommodations into legitimate community standards. The masking meme presenting individuals with overlaid text “POV: Neurodivergents masking in public” created deliberate tension between apparent normalcy and performative facade revelation, documenting hidden affective labor while challenging assumptions about natural social behavior. These visual practices operate within the same discursive field as the linguistic innovations documented in Section “Counter-Discourses: Linguistic Resistance and Epistemic Agency,” extending semiotic resistance beyond language into the multimodal register where much of digital community meaning-making actually occurs.

*Intersectional Lived Practice and the “/” in Action*

The cross-community engagement patterns documented in this dataset reveal how neuroqueer individuals navigate multiple identity communities simultaneously, and this navigation itself constitutes a form of the “/” work theorized in “Theoretical Framework”. The distribution of posts across autism-specific, LGBTQ+, mental health, and broader social networks (Figure 4) demonstrates that community members do not confine their discourse to single-identity spaces. Their participation across communities performs the refusal of categorical separation that the “/” names.

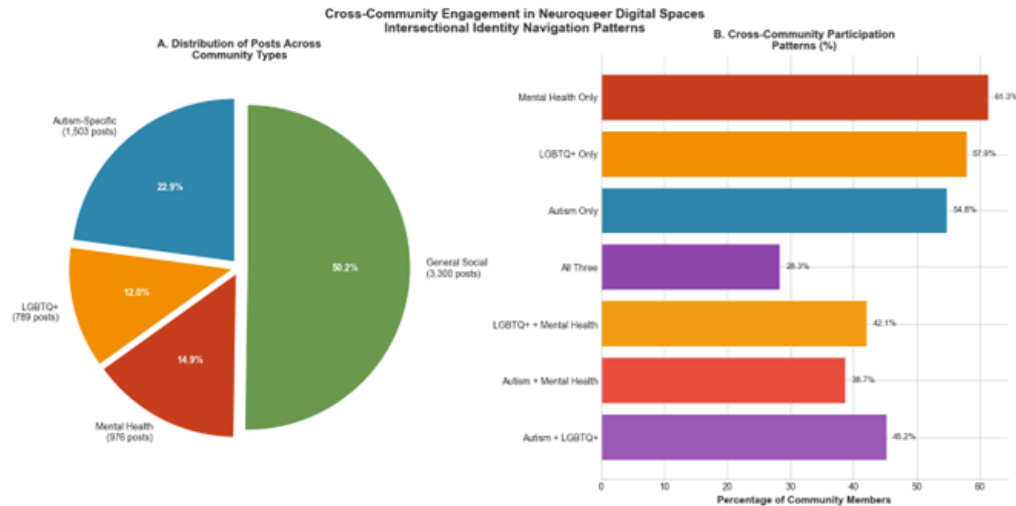


Figure 4: Cross-Community Engagement

**Accessibility Text:** Cross-community engagement patterns demonstrating intersectional participation across autism-specific communities (1,503 posts), LGBTQ+ spaces (789 posts), mental health communities (976 posts), and broader social networks (3,300 posts).

The evidence of participants navigating multiplicative minority stress through community-developed support systems validates the claim that intersectional oppression produces effects that cannot be understood as the sum of separate injuries. But the community discourse analyzed here suggests something that even multiplicative models may not fully capture. When a participant described feeling “caught between communities” because



traditional LGBTQ+ spaces failed to accommodate neurodivergent communication styles, the problem was not that two separate oppressions were multiplying; it was that the categorical frameworks structuring those spaces could not accommodate an experience that refuses decomposition into separate axes. The community responses to such posts consistently provided both emotional support and practical strategies for navigating multiple identity communities, demonstrating intersectional consciousness in action: communities developing analytical frameworks that recognize systemic inequality while building solidarity across differences.

The emergence of neurogender terminology within community discourse represents, once again, the sharpest empirical evidence for the “/” argument. Those terms do not name an intersection of neurodivergence and gender; they name an experience in which the two are inseparable. This is what Geerts and colleagues (2022) identify through the “/” as a material-semiotic practice: a refusal of categorical separation in which disability and gender are understood as producing each other. The community’s capacity for maintaining neurodivergent identity centrality while recognizing other systems of marginalization illustrates the kind of relational analysis that exceeds additive, and even multiplicative, intersectional frameworks. These engagement patterns have implications for how digital platforms function as infrastructure for neuroqueer community formation. Reddit’s pseudonymous participation enables identity exploration and vulnerable disclosure that would face significant barriers in identifiable contexts. Threaded discussion architecture accommodates neurodivergent communication preferences including detailed explanations, tangential exploration, and asynchronous participation. Subreddit-specific engagement patterns demonstrated community self-organization through specialized discourse norms reflecting different community functions: r/AutisticPride showed moderate engagement with high community cohesion (316 posts, average score 42.5), while r/AmItheAsshole demonstrated high individual post engagement with lower community cohesion (148 posts, average score 4,177.0), indicating different interaction dynamics across neurodivergent-specific and mainstream digital spaces. At the same time, algorithmic content curation, platform content policies, and the tension between community autonomy and platform governance create ongoing constraints that communities navigate through systematic adaptation strategies including cross-posting practices, content summarization, and the development of community guidelines that balance authentic expression with platform compliance. These affordances and constraints together shape the conditions under which the discursive practices documented throughout this section operate, and they do so unevenly: platform architectures privilege certain forms of communication and certain identity performances over others, creating conditions that neuroqueer communities must continuously negotiate rather than simply inhabit.

## Conclusion

This research set out to examine how autistic queer and trans communities mobilize digital platforms to resist pathologizing discourses and construct alternative frameworks for understanding neuroqueer experience. The findings demonstrate that these communities resist, but also produce; they produce alternative epistemologies (in which experiential knowledge holds authority independent of clinical credentialing), they produce multimodal cultural forms (which simultaneously critique dominant narratives and build community solidarity) and they produce, in the everyday practice of community discourse, the destabilization of categorical



boundaries that academic theory has recently begun to articulate.

The paper also contributes to critical disability studies by demonstrating what the “/” between disability studies and gender/queer studies looks like in practice: the community discourse analyzed here shows that neuroqueer digital communities have been performing “/” (the material-semiotic practice of refusing categorical separation) creating identity categories, knowledge systems, and cultural forms that intertwine neurodivergence and queerness and disability. The paper shows that the communities at the field’s origin do not respect its boundaries and that this boundary-crossing is analytically productive.

This work also contributes to neuroqueer theory by providing empirical analysis of the discursive practices which neuroqueer identity is “done” in Barnett’s (2024) sense. Walker’s (2021) theoretical claim that neuronormativity and heteronormativity are fundamentally entwined finds concrete expression in community members’ refusal to narrate neurodivergence and queerness as separate experiences in the creations of terms that make categorical separation linguistically inviable, and in the multimodal production that contests pathologizing frameworks across semiotic registers simultaneously. Yergeau’s (2018) rhetorical sovereignty is documented here as an existing community practice, enacted through linguistic reappropriation and the construction of alternative epistemic communities.

Moreover, this investigation shows how testimonial and hermeneutical injustice operate as structural features of clinical encounters with neurodivergent individuals and how community-generated knowledge production constitutes epistemic resistance. This positions feminist epistemology as necessary to disability and queer theory in understanding how neuroqueer communities contest the epistemic conditions under which authoritative speech about their own experience is produced.

Finally, this paper also contributes to Gender and Language Studies and Queer Linguistics by demonstrating how neuroqueer communities develop discursive practices that exceed existing framework for understanding identity as interactionally accomplished. The linguistic innovations documented here “do” both gender and neurodivergence, pressing against the assumptions of discrete identity categories. The neuroqueer case suggests, therefore, that these fields’ analytical tools require extension when confronted with communities whose discourse practices refuse the decomposition into separative identity dimensions.

These findings carry implications for clinical, educational and research practice. Clinical and educational institutions would benefit from recognizing community-generated knowledge about accommodation, identity formation, and support as legitimate expertise that cannot be simply overridden by professional authority. Research methodologies that position community members as co-researchers offer pathways for scholarship that could serve both academic understanding and community advocacy goals. Cross-platform comparative analysis and longitudinal studies tracking discourse evolution could extend the present findings by documenting how resistance strategies adapt to changing political and technological contexts.

The investigation’s limitations bear repeating in closing: the platform-specific focus of Reddit, the English-language and predominantly North American scope, and the six-month temporal window all constrain generalizability. What they do not constrain is the central finding: that neuroqueer digital communities have established themselves as sites of knowledge production whose theoretical contribution, methodological innovation, and epistemic practices demand recognition within academic discourse. The communities that neuroqueer theory claims as its intellectual and political origin are not waiting for that recognition: they are already doing the work.



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