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Please, Hold Your Toothpicks: An Analysis of Autism on Contemporary Television

An honors thesis presented in partial fulfillment of the requirement for the Haslam Scholars
Program at the University of Tennessee

by Kellie Veltri

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Abstract

In the past decade, there has been a boom in representations of varied identities on entertainment television, including characters with mental illness and disabilities. There has particularly been an increase in television representations of autism spectrum disorders, which has coincided with the reframing of autism in the DSM-5. Exposure to these characters has increased public awareness of what autism actually looks like, but their characteristics are still very narrow and do not represent the full range of people with autism and what their experiences with the condition are actually like. In this thesis, I will explore historic representations of autism on screen, examine how television representations of autism line up with DSM-5 criteria for autism spectrum disorders, and identify where there are gaps in holistically presenting what people with autism look like and how these can negatively affect public understanding of the condition.

Introduction

The fifth version of the Diagnostic Statistical Manual of Mental Disorders (DSM) was published in 2013. Among several notable modifications to the previous edition was a change in the criteria that defined autism. The DSM-IV contained distinct diagnoses for individuals with marked lack of social interest and resistance to change, depending on the manifestation of these traits (Kanner 1943, DSM-IV, 1994). These included autistic disorder, Asperger's disorder, childhood disintegrative disorder, and pervasive developmental disorder-not otherwise specified (PDD-NOS) as distinctive conditions. These disorders were collapsed into one diagnosis, 299.00, Autism Spectrum Disorder (ASD), which also includes hyper- or hyposensitivity to sensory inputs as a feature, in the DSM-5. Although the "spectrum" implies a broader definition of autism, these updates have effectively narrowed it and limited who is able to get a diagnosis.

This is due to the fact that they have also significantly decreased the number of criteria considered in a diagnosis, and many individuals who would have once been labeled with Asperger's disorder or PDD-NOS may no longer qualify as autistic by the new standards.

Autism is unique from the majority of the conditions described in the manual, as it is not a mental illness but a neurodevelopmental disorder. This may contribute to a lack of general understanding about autism as a condition, and the changes to the manual may be counterintuitive to the work that the autism community has been doing to widen the public's understanding of what ASDs can look like. Representations of autism in film and on television have stuck very closely to the new criteria, further contributing to this limited view.

Media serves as a powerful tool to expose the public to and educate individuals about people different than themselves. This exposure is becoming increasingly commonplace for disabled individuals as they are seeing themselves represented on screen more often than in past decades. For years, many Americans' understandings of autism were largely limited to Dustin Hoffman's portrayal of Raymond Babbitt in the film *Rain Man* (Prochnow 2014). American media often has an othering problem: only the most successful and inspiring autistic characters get screen time. This directly demonstrates what American viewers see as "acceptable," which some new creators are attempting to change, albeit only slightly. Shows premiering in the late 2010s, such as *The Good Doctor* and *Atypical*, are attempting to provide viewers with a sympathetic and holistic view of autistic individuals through their main characters. However, they are almost universally white, upper-middle class, males in their teens or twenties, which is not a realistic representation of the wide range of autistic individuals in the United States. Despite increasing production efforts for accuracy, these characters also have extremely similar expressions of autism, which does a disservice to individuals throughout the spectrum by

focusing on a specific set of traits. Television serves as an amplifier for the perceptions of the population, and it is particularly important for young people to see representations of themselves on screen in their formative years in order to feel as though they belong (Caswell, Migoni, Geraci, & Cifor 2016). Because of this, it is essential that creators who want to represent people with disabilities on screen include more than a sliver of the population. Autistic people without savant skills or similar exceptional abilities deserve understanding, respect, and visibility, just as much as their more widely-accepted counterparts do, and this is where one of the most specific representation gaps exists.

What is Autism and How Do We Talk About It?

Until the publication of the fifth Diagnostic Statistical Manual (DSM), autism and related conditions were categorized as a series of disorders known as Pervasive Development Disorders (PDD) with similar but different criteria for each, including Autistic Disorder (299.00), Asperger's Disorder (299.80), Rett's Disorder (299.80), Childhood Disintegrative Disorder (299.10), and Pervasive Development Disorder-Not Otherwise Specified (PDD-NOS) (299.80), as they were labeled in the DSM-IV (American Psychiatric Association, 1994). A radical change was made in the 2013 publication, however, eliminating the existence of these particularly defined disorders and renaming them under the umbrella of Autism Spectrum Disorder (299.00) (American Psychiatric Association).

The new criteria are also much simpler and allow for specification within the diagnosis. There are five primary criteria which must be fulfilled, two of which have subsections. An individual must meet all three criteria of the first category and at least two out of the four variations in the second, for a total of at least five out of seven, in order to receive a diagnosis. Individuals identified with ASD must fulfill the following:

A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history.

1. Deficits in socio-emotional reciprocity, ranging, for example, from abnormal social approach and failure of normal back-and-forth conversation; to reduced sharing of interests, emotions, or affect; to failure to initiate or respond to social interactions.
2. Deficits in nonverbal communicative behaviors used for social interaction, ranging, for example, from poorly integrated verbal and nonverbal communication; to abnormalities in eye contact and body language or deficits in understanding and use of gestures; to a total lack of facial expressions and nonverbal communication.
3. Deficits in developing, maintaining, and understanding relationships, ranging, for example, from difficulties adjusting behavior to suit various social contexts; to difficulties in sharing imaginative play or in making friends; to absence of interest in peers.

B. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following, currently or by history.

1. Stereotyped or repetitive motor movements, use of objects, or speech (e.g., simple motor stereotypes, lining up toys or flipping objects, echolalia, idiosyncratic phrases).
2. Insistence of sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day).
3. Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).
4. Hyper- or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment (e.g., apparent indifference to pain/temperature, adverse response to specific

sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

- C. Symptoms must be present in the early developmental period (but may not become fully manifest until social demands exceed limited capacities, or may be masked by learned strategies in later life).
- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.
- E. These disturbances are not better explained by intellectual disability or global developmental delay.

Instead of grouping these symptoms by severity into different disorders, the DSM-5 identifies three severity levels for ASD based on the individual's demonstration of social communication and restricted repetitive behaviors according to the previously mentioned criteria. The manual also avoids the commonly-used layman's terms "high-functioning" and "low functioning," instead using a severity level system, labelling Level 1 "Requiring support," Level 2 "Requiring substantial support," and Level 3 "Requiring very substantial support." This is especially important to autism advocates because the functioning labels perpetuate stereotypes about the abilities of people along the spectrum and provides more information about the level of assistance that they require and how significantly their symptoms affect their daily life. There is a saying in the autistic community that goes, "If you have met one person with autism, you have met one person with autism." This is meant to signify that everyone on the spectrum is different, just like neurotypical people are, and their autism manifests itself in different ways, which is one positive aspect of the switch to the spectrum model.

The question of how people both on and off the spectrum talk about autism and identify autistic people has been the subject of hot debate throughout the past decade. This paper uses

identity-first language, meaning that people on the spectrum will largely be referred to as “autistic” rather than “people with autism.” Although many parents of autistic children use person-first language as a sign of respect and because they associate the term “autistic” with a negative meaning and want to emphasize that their child is a person first, this is no longer the preferred terminology within the community. As Lydia Brown of the Autism Self-Advocacy Network (ASAN) explains, “When we say ‘Autistic person,’ we recognize, affirm, and validate an individual’s identity as an Autistic person. We recognize the value and worth of that individual as an Autistic person.” There is also an organization, Identity-First Autistic, dedicated to championing this cause because they “are proud to be autistic.”¹

Literature Review

There is a limited body of work studying screen representations of autism, especially from the last decade (when the majority of television shows featuring autistic characters have premiered) and only one considers them within the context of the DSM recategorization (Nordahl-Hansen et al. 2017). Within this time frame, a rise in film and television representations of mental illnesses and physical disabilities has occurred, both in theatrical releases and on streaming platforms such as Netflix and Hulu, but far fewer are focused on neurodevelopmental disorders.

Nordahl-Hansen et al. (2017) sought to identify whether characters with ASD in film and on TV exhibited symptoms that aligned with the diagnostic criteria outlined in the DSM-5. The researchers, identifying a lack of “systematic data on the accuracy of representations of autism on screen,” particularly post-DSM-5. Their study reports on characters in 26 films and TV series in comparison to the DSM-5 disability criterion and the display of savant-like skills, although the

¹ “Welcome to Identity-First Autistic.” Identity-First Autistic, 2016.

study included portrayals of characters that were not explicitly labeled in the source as being on the spectrum but had been linked to ASD “in popular media and academic discourse.” These selections included characters with varying apparent levels of intellectual ability and globally-made films. The results were positive, with all of characters studied exhibiting 50 percent or more of the characteristics and 7 characters who were matched with all 12 characteristics. However, 12 of 26 characters studied demonstrated savant-like skills, which is significantly higher than estimates of the number of real people who have ASD and these skills.

In a broad study that analyzed the social content of storied representations of characters in children’s picture books, popular novels, television shows, and movies from 2006-2012, Belcher and Maich (2014) found that television depicts adults who are either canonically on the autism spectrum or assumed to be so as highly educated, intelligent individuals who are experts in their fields but struggle with social interactions and have abnormal quirks. They also note that the more challenging aspects of ASD, such as sensory sensitivity, meltdowns, and other socially embarrassing behaviors are almost universally excluded. These characters also tend to fill similar skilled roles, particularly in medical and detective dramas or as scientists in sitcoms (Matthews 2017). Autistic characters tend to be employed as either vehicles for comedy or as brilliant detectives and doctors who perceive things that none of their contemporaries can, which Summer O’Neal (2013) notes also occurs in other forms of literature, like Mark Haddon’s young protagonist in *The Curious Incident of the Dog in the Night-Time* and possibly the detectives *The Girl with the Dragon Tattoo* (Stieg Larson, 2008) and Arthur Conan Doyle’s *Sherlock Holmes* series as well.

Prochnow (2014) theorizes that autistic characters tend to fall into a few specific character archetypes, including the magical/savant character, the “different”/quirky character,

and the undiagnosed/unlabeled character. Characters tend to either be written as either having exceptional abilities and intelligence, being labeled as autistic but only exhibiting the characteristics that are viewed as positive and a bit unusual with none of the challenges, or those who display symptoms that fit the DSM-5 criteria for ASD (although with only minor social deficits) but not being labeled with a disorder.

Although modern media usually portrays autistic characters positively, television shows and movies still have a tendency to perpetuate certain stereotypes about these individuals. Since the release of *Rain Man*, popular characters with autism originally reinforced more myths than they dispelled, but this has improved with recency (Young 2012). Since then, a few more films with autistic characters were released. Most were documentaries, such as *Autism in Love* and *Life, Animated*, or otherwise informed by real life, like the *Temple Grandin* biopic about the famed professor. Some of the most DSM-5 consistent recent portrayals of autism in film have come from outside of the United States, including Australia's *Mary and Max* and Belgium's *Ben X* (Huard 2014). Particularly in the past few years, new and more diverse representations of autism have made their way into Americans' homes with the mainstream popularity of shows on network hit *The Good Doctor* and streaming success *Atypical* (Wolff 2018).

There is still a diversity problem in the media, however. Autistic fictional characters are overwhelmingly traditional, heteronormative, Western males, and even the few women represented “[exhibit] these exact stereotyped ‘masculine’ characteristics” (Matthews 2017). Matthews sort character types into six categories, “The Female Autistic,” and five male types, Associative, Artificial, Acting, Alien, and Artistic, indicating that although there are still limited representations of male characters on the spectrum, they have a wider range of options than their female counterparts. Women account for about a quarter of all people diagnosed with autism, but

only very few explicitly or referentially autistic characters in media (Loomes, Hull, & Mandy 2017).

The lack of autistic actors also lends to a source of debate within the community: whether non-autistic people should play autistic roles and vice versa. There are very few well-known autistic actors (this could be attributed to both low numbers of autistic people in general and the fact that many people go undiagnosed), so it is generally agreed upon that neurotypical actors can play neurodivergent characters, although the alternative would be preferable (Sinclair 2018). Sam Rubin (2018) emphasizes the need for proper training for these actors, though, because often their depictions lack the subtleties of actual autistic people's gestures and expressions.

There is a lack of consensus on how well screen representations aid educators in working with students with autism. Garner (2014) found that "a single viewing exposure to the top-rated (autism) portrayal had a significant negative influence on the attitudes of preservice teachers" in an Australian study. This finding indicates that what they labeled as negative portrayals of autism in the films studied reinforced teachers' preexisting stereotypes, as well as identifying a possible misunderstanding of the "spectrum" concept. Terminology was also identified as having unintentional consequences, with teachers being "more open and accepting of those with the Asperger Syndrome label than those with the autism label. Furthermore, when combined into ASD the influence of the films is non-significant suggesting that the terms Asperger Syndrome and ASD buffer the negative emotions toward autism." A survey of 273 Georgia educators, however, found "no relationship between media usage and knowledge of autism or knowledge of best practices" (Keener 2017). The majority of educators surveyed did not have negative or outdated perceptions of autism, believed in co-education with neurotypical peers, and "learned about autism through personal experiences or professional development, not popular culture

media.” Real-life experience is consistently better than media when it comes to understanding autism beyond a textbook definition, but this is not always a possibility for educators or for the general public (Garner 2014).

Historic Screen Representations

While this work primarily focuses on recent representations of autism, which have primarily been on television, it is impossible to discuss these without acknowledging their predecessors in film, particularly because they are so few. Some of the more popular examples of autism on film throughout the years include the following.

***Rain Man* (1988)**

This landmark film details the story of a young man, Charlie Babbitt (Tom Cruise) who discovers that he has a brother with special needs (Dustin Hoffman) who was kept a secret from him. His brother, Raymond, is described in the film as a “high-functioning” “autistic savant.” Happily, *Rain Man* approaches autism in a sympathetic and clinical manner. Raymond lives in an assisted living facility under the care of people who understand his condition and explain it to Charlie. He also demonstrates many DSM characteristics consistent with Level 2 autism. These include speaking in an awkward, stereotypical manner, exhibiting echolalia, and rattling off information. Raymond also demonstrates significant deficits in social communication, including failure to make eye contact, struggles with conversational turn-taking, and difficulty expressing his emotions. Additionally, he has a particular reliance on rituals and routines, expecting the same meal as his facility serves on the corresponding day of the week and adhering to a strict television viewing schedule. Some more abstract concepts elude him, such as how money works. This film remains popular decades later, but it is certainly not without criticism. Many have pointed out that Raymond actually lacks the extraordinary breadth of skills which the man he is

based on possessed, while simultaneously warping public views on the prevalence of a condition which only occurs in about one in ten autistic people in reality. (Treffert 2009)

What's Eating Gilbert Grape (1993)

What's Eating Gilbert Grape tells the story of a struggling family, particularly focusing on middle child Gilbert (Johnny Depp) and his younger brother, Arnie (Leonardo DiCaprio), who has an unspecified developmental disorder which is presumably a level of autism which requires very substantial support. Arnie exhibits many of the same autism characteristics as Raymond Babbitt, though to a much greater degree. He often has stereotyped motor movements, like clapping, exhibits echolalia, and makes unusual noises. Moreover, Arnie has very little independence despite being days away from turning eighteen. When Gilbert leaves his brother in the bath with instructions on how to finish bathing himself, he comes home hours later to the boy lying in the tub, half-frozen. The film also shows a potentially more dangerous side of the socially inappropriate behavior that comes with autism. Arnie constantly gets into trouble for climbing the town's water tower, and his family fears a fatal fall.

While Arnie is portrayed as heartwarming, the film is generally quite dark and morose in nature and contributes to some damaging stereotypes about autism. Gilbert says in a voiceover that doctors thought that Arnie would not live past age ten, and he admits that "some days you don't want him to live." This reinforces the idea that autistic people are a burden, and although parents may certainly have these feelings in real life, the sentiment clashes with the rest of the film's goal of making the boy feel loved and special despite the trouble he brings the family.

Mozart and the Whale (2005)

Mozart and the Whale follows the relationship between two autistic people, Donald Morton (Josh Hartnett) and Isabelle Sorenson (Radha Mitchell). Donald fits many stereotypical

characteristics of autistic men. He is an emotionally guarded math genius who is obsessed with finding patterns within numbers. Living alone and needing only some support, he is fairly socially competent, but his tendency to take things literally leads to awkward situations and he lives in filth. Likewise, his distractibility leads to challenges in retaining jobs. He is the organizer of a social group of autistic adults in his community, which is where he meets Isabelle. This group is especially significant to the film's importance because it consists of around a dozen autistic adults, both male and female, who have different levels of autism and varied behaviors.

Isabelle, a rare example of an autistic female protagonist, is the excessively emotional counterpart to the bottled-up Donald. She is extremely self-aware, particularly of her shortcomings, and leans into her self-proclaimed "craziness" rather than attempting to change. She works as a hairdresser, where she is good at talking to clients, although she has also gotten into trouble by interpreting figures of speech literally. When the two begin dating and move in together, they must overcome challenges in their relationship and cohabitation which specifically come from their autism, a unique situation that is not the focus of any other popular films. Isabelle has a big imagination and wild plans which she has difficulty carrying out, and she increasingly relies on Donald to provide things outside of their means to fulfill her fantasies, which leads to tensions within the couple. Overall, these characters are presented as real people with regular problems, but their autism is an integral part of who they are.

Current Screen Representations

This section will include detailed explanations of recent and current autistic characters on television. The six shows selected comprise the entire body of television shows with explicitly autistic major characters and one in which autism is heavily implied. Although some examples, such as Netflix's *Atypical*, are direct-to-streaming-platform series, and others are primetime

network shows, each are viewed by large and diverse audiences. The age groups targeted by these shows range from toddlers and young children to middle-aged and older adults, so this selection represents television viewed by Americans across age groups. These shows will be analyzed against the DSM-5 autism spectrum disorder criteria in order to assess the alignment (or lack thereof) between fictional characters and diagnostic traits. Growth in characters and change over time in longer-running series will also be noted.

Parenthood (2010-2015)

Parenthood, created by Jason Katims, premiered on NBC in 2010 and follows the lives of the members of a large, close-knit family. Although it was less than a decade ago, this show was revolutionary for the time, as none of its contemporaries showcased a character with an explicit developmental disability. It explores the life and relationships of a young person with autism in remarkable depth, the experiences of parents of an autistic child, and depicts child and family therapy at length. Katims has a son on the autism spectrum and his experiences informed the character (*Disability Spectrum*).

The show is a family drama which intertwines the stories of three generations of the Braverman family: two senior parents, their four adult children, and their respective families. A major narrative focus of the show is on the relationships between the four siblings and their spouses and children. Adam, the eldest of the middle generation, is husband to Kristina and father to Haddie and Max, the latter of whom is of interest to us for the purposes of this study. Max Braverman is a particularly unique case when it comes to studying representations of autism on screen because not only is he eight years old, he is also begins his role on the show without a diagnosis, receiving one in the pilot episode.

Max Burkholder, who plays Max Braverman on the show, was twelve years old when the show began airing. He is not autistic, so he underwent training on how he should act. He told *Associated Press*, “I would meet with a doctor who specializes in working with children with Asperger’s as well as the director of the next episode and we’d talk about what Max should be doing, how he’d react in certain situations, things like that.” In a 2010 interview with *Disability Scoop*, he explained what it was like to play a character with Asperger’s syndrome. Despite the education he received, it is clear that Burkholder was challenged by the role because he could not fully understand how someone with the condition actually experiences things but did not want to downplay the condition. He told *Disability Scoop*, “It’s...[hard] because I have to figure out a way of expressing what Max is feeling without making it seem that he doesn’t have Asperger’s.” He added, “As I do more and more, I start to understand more about what Max might be feeling.” When asked if he had received any feedback about his performance, Burkholder told DS that he “recently got a letter from a girl who has Asperger’s and she thought that I was doing well...It’s pretty touching when someone who actually has the syndrome thinks I’m doing a good job at portraying it.”

At the beginning of the show, parents Adam and Kristina are aware that their son Max has some atypical attributes and behaviors, but they attribute this to his unique personality rather than any particular source, much less a disorder. Adam describes his son as “a sensitive kid,” and Kristina tells one of her in-laws that “It’s important that things stay calm” when trying to talk to an upset Max. Our first introduction to Max is seeing his parents desperately begging their unresponsive son to go to his baseball game, finally convincing him with the promise of ice cream afterward. It is clear that Max possesses some childhood self-awareness, as his first line of dialogue is, “Can’t someone else hit? Please, I suck. I’m gonna strike out. Everyone’s gonna hate

me.” When his father, the coach tells him that it’s all about having fun, the younger Braverman tells him that that he is “not having any fun.”

Max is then shown at school, where he insists on wearing a pirate costume each day. He repeatedly attempts to cut shapes out of paper and stuffs his failed results underneath him on his seat, getting increasingly frustrated as the other students watch. Finally, one of his classmates tells Max to “save some paper for the rest of us,” and calls him a freak, leading Max to physically attack the other boy. When his parents come in for a conference, the principal encourages that Max see an educational therapist.

When an emotionally distraught Kristina tells Adam that the therapist thinks Max has Asperger’s, the latter tries to argue that Max does not have autism. Kristina tearfully explains that it is “high-functioning autism” and that “a lot of people with Asperger’s live very productive lives” at the same time as her husband’s emphatic rebuttals. He says, “I’ve seen autistic kids—the Lessings’ kid, with the hand flapping, come on!” and tries to argue that Max was merely having a bad day and that he would “not send him to special ed.” Kristina finally explains, “It’s not just the academics, okay? It’s not just the biting, or the pirate costume, or the fear of fire, or the tantrums. It’s everything. Please don’t make me be alone with this.” As the parents continue to process this news, she articulates the true challenge of parenting an autistic child—it’s not a problem to be fixed. She says, “I can deal with disease, a broken bone...I just don’t know how to deal with this. This is for life.”

Max’s parents do not know how to handle the news in a world in which autism was still largely misunderstood and frightening to many families who received the diagnosis, which is indicative of the show’s premiere date in 2010. The lesser occurrence of that reaction today demonstrates how much perceptions and the prevalence of autism diagnoses have changed in the

past decade. Adam approaches his son's potential diagnosis with a clinical mindset, searching for cures and treatment methods. When the Bravermans learn that autism is a lifelong condition which cannot be cured, only managed, they are proportionately terrified and overwhelmed by uncertainty.

Max is also unique in that he does not know that he is autistic until the second season of the show. Because he is so young, when Max is diagnosed with Asperger's syndrome, his parents choose not to tell him why he goes to a different school or has a behavioral aide, letting Max's naivety and general acceptance of the larger patterns of his life prevent him from asking questions. Max faces social isolation, but he does not attribute this to any particular aspect of his personality. He exhibits typical enough behaviors that he is able to walk through his day-to-day life without being immediately alerted that something is off about the way that people address him or that he is different.

Max does demonstrate many of the DSM-5 conditions for autism, including a fixation on special interests. In the first episode, Adam says that Max is on a "Major LEGO binge" and there is a cut to a shot of Max hyper-focused on the structure that he is building. Max also has a continuous fascination with insects and reptiles throughout the series, an interest which is used by his behavioral therapist as positive reinforcement for good behavior. A very literal person who tends to see the world in terms of black and white, he is obsessed with fairness and justice and takes following rules very seriously. Additionally, he is observant and able to tell when something is wrong based on changes in his family members' behavior. Max's character also demonstrates a low threshold for environmental stimuli. In the third episode, he becomes overwhelmed by the sound of bubbles cycling through the fish tank in his classroom. He begins by mildly expressing his frustration, saying, "Turn the bubbles down." However, his teacher's

response that he be quiet upsets him further. This causes Max to have a meltdown, running up to the fish tank and destroying it. His school handles this situation with a lack of sympathy that seems fairly unrealistic, telling Adam and Kristina that Max cannot attend the school anymore. The show also makes references to Max's physical sensitivities. Haddie buys him a weighted blanket because "a lot of people with Asperger's find them comforting," and Max says that he does not really like marshmallows because "they're too sticky" (4.1, 5.15).

Max also engages in repetitive behaviors, including wearing a pirate costume to school every day in the first season. His parents are especially concerned about this, having given up on fighting with him to wear regular clothes, but worried that he is further ostracizing himself from his classmates. When they get the chance to meet with Dr. Pelikan, a child behaviorist, this is one of the first behaviors that they address wanting to change. Pelikan tells them to "meet him where he is at" before they can begin to explore methods of improving his social skills, which leads to Adam playing pirates with his son in a similar costume. Consistent with DSM-5 descriptions of deficits in social communication, Max also struggles to understand sarcasm and verbal expressions. He does learn, however, to use these, if in an imperfect way. In Season 4, Episode 11, Max tells Crosby, "Spit it out. That's an idiom."

The show realistically addresses struggles and frustrations faced by families with an autistic member. Max's older sister, Haddie (Sarah Ramos), suffers from often being overlooked in favor of her brother and rebels in order to get attention (1.3). Season 1 Episode 5, titled "The Situation," as people outside of the family continually refer to Max's diagnosis throughout the episode, addresses some of the social stigma that the family faces in light of the news spreading. When the baseball coach of Max's former team sees him in a store after learning about Max's condition, he talks to him like a child, which comes off as condescending to the parents, although

Max is oblivious to it. Later in the episode, a fellow baseball parent offers, “help with meals, rides to school, anything” to Adam, who justifiably replies with a snarky, “Thanks, Scott. We can still feed and clothe ourselves.” His teenage nephew, Drew, contributes by calling the parent “a jackass.” This scene, while brief, is important for general audiences to see. It addresses a difficult and often overlooked issue faced by people with both cognitive and physical disorders, who are often addressed as though they are incompetent, invalids, or infants.

Before anything else, *Parenthood* is a drama designed to engage and entertain audiences. This is almost certainly the motivation behind the writers’ choices about how Max found out that he was autistic. Ideally, a child will receive this information through a detailed conversation with supportive parents (Seattle Children’s 2012). In a season one episode in which the whole family gets involved in an Autism Speaks walk and Max becomes obsessed with winning the trophy, cheering to his family, “Let’s walk for those kids with autism!” (1.12) This situation leads Kristina to ask Dr. Pelikan if she and Adam have made a mistake by not telling Max about his condition. He responds, “Well, there’s no perfect answer to the question of when do you tell a child [sic]. It’s different for every kid.” He reassures Kristina that she is doing the right thing by not telling Max, adding, “I think it’s important to not burden Max with information that he’s not going to be able to process just yet.”

However, Max finds out by accident when he overhears a fight between his father and uncle after Crosby has an affair with Max’s behavioral aide. This is not necessarily a detriment to the show, though, as this conversation does happen after the fact (2.17, 2.18). Max asks his parents what Asperger’s is, and they explain that it is a form of autism, and they explain that autism is a syndrome, but “not a disability.” Max is most upset that no one else in his family has the condition, and his mother does not help by uncontrollably sobbing through the conversation.

When the parents review this conversation with Dr. Pelikan, he explains that they should “emphasize some positive aspects of having Asperger’s.” He was visibly concerned about how they handled it, encouraging the parents to redo the conversation with a prepared script, which the Bravermans were not initially receptive to at all.

Two days after they tell Max, Adam decides to take Max to a theme park instead of to school and Max is ecstatic about riding the Velocerator. However, when they are sitting in the ride, it is announced that the ride will be shut down for the rest of the day for repairs and Max has a meltdown. This is only one example of a very realistic meltdown in the show, with another occurring a few episodes later when Jabbar cannot come over for a planned sleepover (2.1). One of the greatest sources of stress for Max is a deviation from a schedule or what he sees as “broken promises” because he cannot comprehend the complexity of unforeseen events occurring. This behavior is consistent with ASD tendencies of relying heavily on routine and not adjusting well to change.

Unfortunately, instead of asking why Max needs things to be a certain way or explaining why he needs to follow specific social norms, Max’s parents usually just give in to his protests out of convenience, which leads to him becoming quite unyielding and entitled as he ages. Although his behavioral aide made great strides with him in learning how to compromise, the Bravermans did not keep up this work. However, Max does demonstrate personal growth throughout the series.

One of the central struggles around Max throughout the show is the family’s trouble finding an appropriate setting for his education. After being forced to leave his first school, Max gets a place at a school for students with special needs after his parents beg the principal to admit him. In their interview they explain, “he’s too high functioning for a special-needs program, but

he has real trouble fitting into a mainstream school” (1.3). In an Individualized Education Program (IEP) meeting at the new school, Adam and Kristina learn that Max is academically far ahead of his classmates, and the principal recommends that they may want to consider enrollment in a school where he will be able to grow both socially and academically. The parents argue about which way they should go and eventually decide, with Gaby’s advice, to enroll him into Sydney and Jabbar’s private school (2.19). They have continued issues with placement over time as Max fails to integrate into his environment as a middle school student. His parents do not want to send him to a public high school, and he does not qualify for any of the special education high schools. As Adam asks, “Where do you put a kid who doesn’t belong anywhere?”

Max runs for class president in eighth grade, which requires him to make a speech. This public endeavor shocks his parents, but he was passionate about his cause—getting vending machines back into the school. Although he did not make any notes, he assures them that he “won’t get nervous.” This proves to be true, and Max makes a huge leap forward in talking about his autism to his classmates. After talking about the vending machines, he adds,

Also, I’m very tenacious. It means being very persistent. I’m like this because I have something called Asperger’s. Having Asperger’s makes some things very difficult for me, like looking people in the eye, or saying hello, so I don’t do those things very often. Some things also come very easily to me because I have Asperger’s, like being smart and remembering almost everything. Also, it means being tenacious, and so I will be tenacious about the vending machines. Another thing about Asperger’s is that I always keep my promises, so when I tell you that I will bring back the vending machines, you can believe me. Some people say that having Asperger’s can sometimes be a bad thing, but I’m glad I have it, because I think it’s my greatest strength.

One fellow student shouting “Vending machines! Hell yeah, Max!” and giving him a standing ovation sets off a roar of applause and Max wins the presidency (4.6).

As Max tries to become more independent and go on an overnight field trip on his own, he faces bullying from his peers, leading him to completely shut down and his parents needing to come pick him up. In the car on the way home, he asks, “Why do all the other kids hate me?...Is it because I’m weird?” When they press him further, he tells them, “Trevor peed in my canteen...He said he did it because I’m a freak. I’m a weirdo freak.” Breaking down, he lets out innermost thoughts which he had previously kept to himself, “I try to understand them, but I can’t. Asperger’s is supposed to make me smart. But if I’m smart, then why...why don’t I get why they’re laughing at me? They all do it, even the nice kids” (4.18). Kristina, distraught, climbs into the backseat of the car and hugs Max against his many protests, telling him how much she loves him, while Adam is brought to tears up front. This is the darker side of reality for autistic teenagers.

The final season of the show sees a teenage Max starting to face the challenges experienced by autistic adults, as well as beginning to develop a sense of self-identity as an autistic person. A career week episode at Max’s high school realistically addresses true fears experienced by young people with autism spectrum disorders and other developmental and cognitive disabilities. Max tells a fellow student, “you’re probably gonna end up unemployed anyway,” citing the statistic that “autism has an 85% unemployment rate” and that “[we’re] basically screwed” (6.12).

Parenthood is also unique in that it introduces additional autistic characters to the show. This includes the Braverman family’s young neighbor, Noel Lessing (Nicholas Lobue). Noel has a more significant expression of autism than Max does (he is referred to as having autism, not

Asperger's syndrome) and requires substantial support. Another character who joins the Braverman family in their misadventures is Hank Rizzoli (Ray Romano). His character demonstrates the extremely-rarely televised occurrence of an adult who struggles socially but does not know that they are on the autism spectrum, a stark contrast to the frequency at which this occurs in reality. Hank is a photographer whom Sarah gets a job assisting, and Max and Hank develop a close relationship as Max expresses a budding interest in the art. When Hank cannot help Max with a project on the day they had planned because of a work obligation, Max calls Hank a liar and runs out of his studio. Adam brings Hank a book on Asperger's syndrome in order to help him understand it better. Hank has an epiphany while reading the book and barges in on Sarah, asking if he does not pick up on cues and reflecting on his childhood meltdowns. He says that "all of a sudden, I'm not reading about the kid anymore. I'm reading about me. This book is describing me." This reflects a common event experienced by many parents of autistic children who realize that they may be on the spectrum themselves (SOURCE). Hank starts to wonder if his self-diagnosed condition is the reason why so many things have gone wrong in his life—his divorce, losing big jobs, his teenage daughter not wanting to speak to him—and realizes that this may be why he likes Max so much. Adam and Kristina are secretly thrilled about the prospect of him having Asperger's because he could certainly have had a worse life. Hank apologizes to Max and the two bond over his photos and a game of chess.

Hank visits Dr. Pelikan and tells him that as a child, "things had to be a certain way or I just sort of freaked out. But I got better over the years...but, still, I basically have two gears. I completely shut down or I go for it. Tenacious was the word that my wife used for me when we were married." He also reports that he scored a 42 on the test online.² When Hank says that he

² This is a reference to the Autism Spectrum Quotient inventory, which is scored out of a possible 50 total points.

wants Dr. Pelikan's gut opinion, the latter responds, "My gut is that it's a jump ball. I can't tell you that you definitely have Asperger's." He demonstrates several of the tendencies that he references when he joins the other men in the family in a poker game, which quickly falls apart.

Like all of the other shows examined in this thesis, it must be acknowledged that this show is not a perfect representation of autism or how it should be accommodated. Unfortunately, the show takes a fairly unrealistic turn in the later seasons and loses the poignant realism previously shown through the family's struggles with their autistic child inside and outside of their home. In season 6, Adam and Kristina find a solution to Max's school conundrum: opening and running a charter school on their own. Even putting aside the fact that this is a privilege not afforded to most children with special educational needs, the parents also received much criticism within the world of the show and in real life as neither of them had any prior experience working in education. They also do not approach discipline fairly, addressing a situation in which Max is bullying another student from a biased perspective and choosing not to punish him despite her parents' protestations.

Parenthood went above and beyond the shows before it and set a new precedent for how to write autistic characters. Despite its imperfections, this is still the only primetime show which has featured an autistic child. It not only got people talking about autism, but it showed it as an often-invisible disability. Max is not immediately recognizable as autistic, and teaching audiences that the condition presents itself in countless forms is a major benefit of the show. By putting audiences inside of the Bravermans' homes, therapy sessions, and schools, *Parenthood* presents the unfiltered and complicated reality of both raising an autistic child and growing up autistic, as well as the effects of not realizing that you are autistic until adulthood, and the show's effects are still palpable in today's television.

DSM-5 Conditions Exhibited: 7/7

***The Good Doctor* (2017-Present)**

The Good Doctor is an ABC primetime show, adapted from a Korean series of the same name that premiered in the fall 2017 season (Koblin 2017). The plot follows protagonist Dr. Shaun Murphy (Freddie Highmore), a surgical resident at San Jose St. Bonaventure hospital who is described as having “high-functioning” autism and savant syndrome. The series was met with great critical and audience reception and Highmore was nominated for the Golden Globe award for Best Actor for the show’s debut season. Highmore himself is not autistic, but according to interviews with executive producer and showrunner David Shore and Highmore, a significant amount of research went into making Shaun as authentic of a representation of an autistic surgeon as possible. The show has an autism consultant, Melissa Reiner, and Highmore spent time studying autism and interacting with a friend’s children who are on the spectrum (*Los Angeles Times*). He told Margy Rochlin of the *Los Angeles Times*, “There are people in my personal life who have autism. It was a condition I was aware of. I [read a lot]. I saw a brilliant documentary on Netflix called ‘Autism in Love,’ which is great because it focuses on the most human, deepest emotion that we may feel, which is being in love.” Highmore and Shore also discussed their plans for Shaun to change and develop over time, expanding, “Yes, he’ll always have autism. But he’s going to change continuously as an individual as he adapts to this new world that he finds himself in. That was exciting to me: This individual, regardless of whether or not he’s on the spectrum, is going on a journey as a character.”

They are also aware of perhaps the most important issue in representations of cognitive disabilities—the fact that one size does not fit all. In an interview with *The Last Magazine*,

Highmore explains that for him, “It was important to recognize that Shaun has to become his own person,” adding:

He’s an individual and he can’t ever possibly represent everyone who has autism in the same way a neurotypical lead character of a television show could never possibly represent everyone who’s neurotypical in the world. As much as the research was important, it was also important to think about Shaun and build him as a character in his own right and not purely define him through his autism and the savant syndrome that he also has.

The driving question of the first episode is whether Shaun will gain a full-time residency at the hospital where he has begun to work. Several members of the hospital board express a concern that the social communication challenges associated with autism will prohibit Shaun from engaging in the communication required from a surgeon, both with colleagues and superiors as well as patients. A personal connection with the president of the hospital secures Shaun the position, and much screen time in the first season is devoted to explaining and exploring the doctor’s identity and behaviors. The pilot episode introduces the audience to some of Shaun’s tendencies, including talking monotonously, especially to authority or with strangers who he is uncomfortable around, as if sticking to a script. He has a tendency to say exactly what he is thinking or feeling with no filter, and he has a posture and hand gestures that are often exhibited by people with ASD. One of the most easily noticeable of these physical gestures is the way in which Shaun holds his hands, fingers interlaced, in front of his chest. Highmore discussed the deliberateness of this decision to do this in an interview with the *Los Angeles Times*. He explains,

[It] came from two places. Kids with autism [used to be] encouraged to clasp their hands together in order not to stim. It's called 'quiet hands.' [Additionally], Surgeons, in an operating room, consider the front of the body as sterile and often stand in this position to keep their hands sterile. So that particular mannerism is sort of half something that's a trauma, that's been forced upon him and is also something that's natural for surgeons to do, so there's a comfort there too.

Shaun's sensory sensitivities are also incorporated into the story, including a sensory overload caused by the fluorescent lights and loud chatter in the hospital and discomfort with being hugged and giving handshakes, which he later explains he does not like because he is uncomfortable with being squeezed. An exchange in the third episode demonstrates that exceptions can be made if Shaun is enjoying himself enough, like when flying in a helicopter (1.3) The series' second episode opens with the audience accompanying Shaun as he goes through his morning routine, which is governed by a series of precise alarms as he moves from one daily task to the next. Subsequent episodes further demonstrated Shaun's need for sameness, and his preferences are typically tied to significant events in Shaun's life, such as reminders of his time living on a bus with his brother or in foster care. These include a plot in which he "fixes" his sink to drip at the same rate as the sink in one of his former foster homes because he cannot sleep otherwise and looking for the specific screwdriver that he has always used and not accepting a replacement (1.4). In stressful situations, Shaun ruffles his own hair, mimicking his brother's calming behavior for him (1.10).

Shaun demonstrates many more of the DSM-5 ASD characteristics, including an inability to understand sarcasm and taking jokes and expressions literally. In an early interaction between Murphy and a love interest, Lea Dilallo (Paige Spara), the latter calls him an "asshat," which he

interprets literally and is confused by (1.9). When Shaun learns from a coworker that people use mild insults to flirt, he makes an attempt at returning her affections by saying, “You look absurd in that sweater.” The inverse occurs when he learns that one can compliment people for personal gain and then he tells attending surgeon Neil Melendez (Nicholas Gonzalez) that he has “beautiful hair” (1.10). Shaun does not answer questions unless they are phrased as statements, and he believes that he cannot lie. An attempt by him to lie in a later episode proves this to be true when he is caught in his use of the colloquialism “no biggie” (1.5). He also exhibits characteristic patterns of thinking associated with autism, such as overthinking simple situations and assuming the worst possible outcome of a basic hospital visit. However, Shaun’s savant-like skills allow him to envision detailed images of the innerworkings of the human body and his eidetic memory helps him to remember textbooks full of diagnoses. When Shaun is concentrating on a medical mystery, he lacks focus on anything else and delays in answering his attending surgeon and fellow residents (1.6).

Unlike most of its contemporaries, *The Good Doctor* does not shy away from some of the more challenging emotional and social aspects of living with autism. Shaun has a strong desire to maintain his independence, living alone and later with Lea in apartments, and a disagreement about whether he needs a life coach or aide is the source of one of his most horrible fights with his mentor and hospital president at the beginning of the series, Dr. Aaron Glassman (Richard Schiff). When Glassman discovers that Shaun has been avoiding his therapist and skipping sessions, they get into an argument and the emotional overload causes Shaun to have a public meltdown in the hospital, hitting Glassman and running away (1.10). This is one of several examples of Shaun losing control of his emotional reactions, including in the next episode when Lea teaches him how to burn rubber on the road in her car and Shaun loses control of the vehicle,

going off the road and hitting a rock, believing the event to be his fault. Shaun's most severe stress reaction occurs in the season two episode "Quarantine," in which a viral respiratory disease causes the hospital to lock its doors, with Shaun in the quarantined area and at risk for infection. Shaun becomes overwhelmed by sensory overload and collapses into the fetal position, panicking and unable to help his fellow doctors until he is revived by fellow resident Dr. Morgan Reznick (Fiona Gubelmann), who helps Shaun focus on a specific patient's treatment.

Shaun's obsessive personality gets him into trouble as well as he violates boundaries by showing up at patients' houses to get them to the hospital and rudely telling off nurses when their methods differ from his own. In a dramatic turn of events fitting for the show's genre, the second season's penultimate episode sees Shaun lose his job as a direct result of his autism. After his Chief of Surgery, Dr. Jackson Han (Daniel Dae Kim), reassigns him from surgery to pathology due to his inability to communicate effectively with patients and poor bedside manner, Shaun confronts Han in his office, demanding his job back. When Han refuses, Shaun has a tantrum, screaming, "I am a surgeon!" repeatedly, leading Han to tell him that this behavior proves that he does not belong in the high-stress situations of the hospital and terminating him, although the new president of the hospital later soon fires Han and reinstates Shaun (2.17).

Shaun progresses with the show, learning and changing in his own way and becoming more accepting of others' eccentricities and ideas. He develops a crush on his neighbor, Lea, who helps him learn to drive, kiss, and communicate less seriously. Shaun begins to notice when others are being sarcastic, even though he does not always understand why they choose to do so, and he attempts to make jokes even though he does not personally like them (1.5, 1.17). When Glassman is diagnosed with cancer, Shaun becomes uncharacteristically distracted during a surgery and makes a mistake (1.18). Later in the episode, he finds out that Glassman's prognosis

is good, Shaun hugs the man and tells him that he loves him. In a second season episode, Murphy declares that he likes hugs sometimes (particularly when they come from Lea) (2.4). He learns to ask for clarification at times, such as when Park uses the word “huh” and Shaun says “You should give me context for that ‘huh’” (3.4).

The show also demonstrates to its audience that autistic people still have typical feelings and desires. In an early episode, it is made clear that Shaun has an interest in sex and attraction to women, and much later on, he confesses to Dr. Claire Browne (Antonia Thomas) that he would like to be a father someday. Mutually beneficially, other characters learn from Shaun throughout the show as well. Shaun also develops positive relationships with the other residents in his unit, building an especially close friendship like he has never had before with Claire, who spends time getting to know Shaun as a person and becomes his closest confidant. She adapts to communicating effectively with him through a series of trial and error, including learning to address him with statements rather than questions in the first season. When Shaun faints and his hurried self-diagnosis comes out as “trampoline,” Claire is able to use his tactics of step-by-step processing and visualization to figure out what was wrong with the patient.

The changes in the residents’ relationships with each other as a group come on slowly but are noticeable in small instances such as Season 3 Episode 1, “Disaster,” in which the residents socialize between shifts and ask Shaun for the nitty-gritty details of a date that he claims was “a disaster.” Surprisingly, he walks them through the details of his entire night with love interest Dr. Carly Lever (Jasika Nicole) and seeks advice. However, the show also uses this apparently normal date to demonstrate how doing regular activities can be a challenge for autistic people. He explains that the date was a disaster to him because

It was exhausting. Everything was always out of control. Anything could happen at any time. Anything did. There was too much to remember to do, too much to remember not to do, and none of it made sense. It was hard, uncomfortable, unpleasant. I spent the whole evening doing unnatural things to make her happy, and I have no idea if she was happy, and I know I wasn't happy, (3.1).

Not only does Shaun articulate the everyday struggles faced by people on the spectrum as they pursue romantic relationships, but it also demonstrates the progress that Shaun has made in his ability to express his feelings and experiences aloud.

The first half of Season 3 sees significance through subtlety in the story of Shaun's second romantic relationship, with Carly, while the second half makes major leaps forward as the relationship progresses. They have to work as a team to overcome both physical and emotional barriers in their relationship. Early on in their relationship, Carly explains to Shaun that holding hands is important to her, but it makes him uncomfortable, so they find a way to compromise by crossing their wrists (3.4). Over time, Shaun learns to be more open with Carly and he tells her he loves her (3.11).

Unfortunately for Carly, a double date reveals to her that Shaun may still have feelings for Lea and she breaks up with him so that they can be together (3.15). He realizes that this is true and confesses his love to Lea, who returns his feelings but claims that they cannot be together because she is "so selfish...and so needy...I'm a total mess" and Shaun would not be able to handle her because he "[needs] things a certain way" (3.16). When Shaun asks, she will not answer if it is because he has autism, but when he makes changes in his behavior and presses her further in the next episode, she admits that his inconsistent behavior is why she rejected him,

saying, “Shaun, you’re autistic. You can’t fix that” (3.17). This angers Shaun, who does not understand why his behavior upsets her, and he lashes out.

Shaun is not the only example of an atypical character on the show, though he is the only recurring one. One episode features a patient whose autistic characteristics are more severe than Shaun’s (1.7). The young boy, named Liam, is brought to St. Bonaventure by his parents, who do not want Shaun operating on their son because they believed that an autistic person would not be capable of doing so until Liam requests that Shaun be his surgeon. A previous episode (1.5) shows that Shaun relates better to children than to most of his adult coworkers and sees his brother in a young patient who looks remarkably like Steve, which aids in his interactions with him. His communication with Liam is similarly sympathetic, and Shaun understands much what Liam is experiencing socially and sensorially, explaining to his parents that their controlling nature is making their son sick. Although this episode makes a largely positive impact by showing a different level of autism and explaining it to its audience, one could argue it does a disservice to the viewer by suggesting that Shaun has an inherent understanding of the difficulties faced by someone whose autism is different than his own.

However, although this show has made great strides as a popular, positive screen representation of ASD, it is not without its shortcomings. The actors who depict autistic characters in the show are not autistic themselves, and a major plot point of the pilot episode is that Shaun will be skilled at the job because he has savant syndrome, contributing to the larger idea perpetrated by popular television that people with ASD must be unusually gifted in order to contribute to their communities in their chosen roles. One could argue that Shaun’s autism follows the textbook definitions too closely. While it is unlikely that someone operating at such a high level on the spectrum that they can earn a residency at a highly competitive hospital would

exhibit all of the symptoms of autism fully and consistently, Shaun's character often appears to fit the exact definition of what one would expect an autistic person to be, particularly in early episodes of the show. The show also sometimes exaggerates the role of Shaun's ASD on his attitudes and behaviors. A season 2 C-plot revolves around Shaun and Lea arguing about whether it matters how the toilet paper should be positioned on the roll in their shared bathroom, and Shaun's friends and coworkers act as though it is an autistic trait to have a strong preference (2.6).

Shaun fits most of the characteristics of ASD, but his behaviors are not always consistent with each other. While there are plenty of autistic surgeons in the real world, the level of social dexterity that he would have developed while working with patients in medical school is far above what he demonstrates in his residency, according to Darold Treffert in *Scientific American*. The show also neglects to mention how rare savantism actually is, making it seem synonymous with autism when it is the exception and not the rule in reality. However, the significance of this show cannot be understated, as it is the first mainstream program distinctly about an autistic person, and it does not shy away from the darker sides of living with a neurodevelopmental disorder and being misunderstood by the surrounding world. It seems very likely that this show will air for several more seasons and continue to gain viewership, exposing more people to a complex autistic character.

DSM-5 Characteristics Exhibited: 7/7

***Atypical* (2017-Present)**

The Netflix original show *Atypical* premiered on the platform in 2017 and follows eighteen-year-old high school student Sam Gardner (Keir Gilchrist), who is identified as being on the autism spectrum as he chases a personal goal to start dating and to have sex. Gardner

serves as a narrator for the show, explaining his diagnosis and behaviors explicitly throughout the show, particularly in the first few episodes. A prominent goal of this show is “tackling the myth that people on the spectrum are not interested in dating and sex” (Nordahl-Hansen 2017). Since this show’s protagonist is a teenager, this is an especially important for parents or peers who view the show to better understand the needs, desires, and drives experienced by their friends and loved ones who are on the spectrum.

The show faced criticism from autism advocates due to what they identified as misrepresentations of the condition (Rowe 2017). The first season was an attempt to be true to reality for those on the spectrum by creator and writer Robia Rashid, who consulted with a professor who worked at UCLA’s Center for Autism Research and Treatment. In preparing for the lead role, Gilchrist “talked a ton” with Rashid, and reports watching movies and reading books to research, in a demonstration of Keener’s point that the public learns about autism from popular media, and the supporting character Christopher is played by autistic actor Anthony Jacques (Fernandez 2017). However, autism advocates still took issue with the Sam character, finding him to be a stereotypical misrepresentation, and the show also received criticism like its peers for a lack of involvement of autistic actors and female diversity. Issues within the show, like the parent support group leader insisting that parents use people-first language, were received with criticism as well. The show’s creators attempted to rectify the situation by adding David Finch, who is autistic, to the writing team, and hiring eight autistic actors from The Miracle Project to play the members of a peer support group, along with more women being brought on as directors and writers (Patton 2018). This earned the show overwhelmingly positive reviews for its second season, praising the improvements (Luterman 2018).

Sam demonstrates and explains many behaviors that fit the DSM-5 criteria throughout the show. He is very intelligent and a gifted artist but does not display savant-like skills. In the pilot, the audience learns in the first scene that Sam has an obsession with Antarctica and penguins that is consistent with the DSM's description of "highly restrictive, fixated interests." He often likens his social situations to those in the animal world in order to figure out how to respond to them. He also interprets figures of speech literally, like when his father calls him "cock of the walk" because of a stray hair sticking out of his head, and Sam explains exactly how he is not like a rooster (1.2). He has sensory sensitivities and prefers unobtrusive sensations like "a nice neutral smell" (1.4). He wears noise-cancelling headphones to block out the many voices in the hallways at school. Sometimes his sensory needs take precedence over his learned skills, like when a woman's ponytail keeps brushing up against his face and he grabs onto it instead of moving or communicating with her (1.4). Other situations do still cause Sam to lash out, such as when his older sister, Casey (Brigette Lundy-Paine), moves his toothbrush without asking and he pours juice on her school uniform (2.1).

Sam handles interpersonal situations and decisions analytically instead of emotionally, like whether he should date a girl at school, Paige (Jenna Boyd), who shows an interest in him. His therapist advises him not to jump into a relationship, so he "decided to conduct a brutal examination of Paige's pros and cons," which he works on in front of her (1.4). Later, when Paige tells Sam that she loves him, he creates a checklist to figure out if he loves her back (1.7). The two must set rules and boundaries in their relationship in order for them both to feel comfortable (2.2). Sam has a best friend, Zahid Raja (Nik Dodani), who helps him navigate the social world, like when he teaches Sam how to lie (2.4).

Additionally, Sam demonstrates a strong resistance to change. He has conducted the same ritual for Casey's birthday for ten years, even though she finds it annoying (2.9). Sam attends a peer group to build relations and learn life skills. He is accepted into college, which is a triumph in itself for many autistic students. Because of this, he must practice for living away from home and becoming more independent. For example, he sleeps over at a Zahid's house in order to simulate living in a dorm (2.6). Sam has also learned to cope with some of his more challenging behaviors through therapy. He explains that "When I was younger, if I got upset or stressed, I would hit or bang my head or yell. Now I try to use replacement behaviors instead" (1.2). One of these is walking around his bed in a tight circle. He also repeats the four species of Antarctic penguin in a stressful situation (1.8).

The show also places a focus on how having an autistic child affects families. Sam's mother, Elsa (Jennifer Jason Leigh), attends a support group for parents of children on the spectrum and expresses frustration and exhaustion about her life having revolved around Sam for the past eighteen years. Sam's father, Doug (Michael Rapaport), is not as involved in the minutia of Sam's therapy and other needs and daily activities, but they do share poignant moments on screen. Like in other shows which feature families, Casey often feels left out or ignored by her parents. When she gets recruited to run for a selective prep school, Elsa shoots her down immediately because Sam relies on his sister so heavily. It is only when her boyfriend stands up for her and reminds Elsa that she has more than one child that the conversation is reopened. There are other autistic children and teens in *Atypical*, although most of the audience's exposure to them is secondhand, as we are told about them through their parents in Elsa's group.

With its smaller audience, this show may not have had the immediate, large impact that shows like *Parenthood* and *The Good Doctor* have, but it is noteworthy in that its audience is

much younger. Many teenagers who do not watch network television are drawn to the Netflix show, and it may help them understand their autistic peers more fully. Media like this may also help young people recognize signs of autism in themselves or their loved ones, and it destigmatizes seeking treatment and learning coping strategies. It not only serves as a source of entertainment, but as a tool as well.

DSM-5 Characteristics Exhibited: 7/7

Everything's Gonna Be Okay (2020)

January 2020 saw the premiere of an unexpected family comedy From *Please Like Me's* Josh Thomas about a young man who becomes the guardian of his teenage half-sisters after their father dies. Only ten episodes have aired to date, but the show is already making incredible strides in televised autism representation. The show is a celebration of diversity in many regards, not only portraying a blended family and a gay protagonist whose sexuality is more a fact of life than a source of distress, but the 17-year-old middle sister on the show is autistic and proud of who she is. The actress who plays Matilda, 21-year-old Kayla Cromer, is herself autistic and borrows on her own experiences for the role. The show both celebrates Matilda's individuality and makes references to how autism presents itself differently in women.

Cromer tells *Teen Vogue*, "Actors who play autistic characters, they haven't walked in our shoes because they don't have it themselves. So by incorporating parts of myself into the role, it just makes it more authentic." The show has received rave critical and audience reviews, particularly thanks to Cromer's character. As Inkoo Kang of *The Hollywood Reporter* puts it, Matilda is "a blunt truth-teller, but her high-functioning condition, girlhood and sexual curiosity render her worlds apart from her male and adult counterparts on television." Autistic writer for Salon Matthew Rozsa wrote about the show,

All of the little details of depicting someone on the spectrum are just right: the struggle reading social cues, the extreme directness in expressing one's self that some find refreshing and others off-putting, the perseverance, the unerring ability to self-sabotage, ongoing need to ask for advice and feedback about handling various social situations since you don't have the tools to accurately assess them yourself. When she tells one character that she assumes people are just nice to her because they feel it's expected of them due to her autism, but suspects they secretly dislike her, she articulates a thought many people on the spectrum have every single day.

Everything's Gonna Be Okay and Cromer also received warm reception from autistic viewers. *Teen Vogue* reports that “Through social media, she has also connected with people given hope by the show’s embrace of neurodiversity.” Cromer explains, “Hearing them tell their stories, how they’re on the spectrum and giving them advice, it can be overwhelming at times, but it’s just so rewarding...So many people say, ‘You are giving us a voice. I’ve waited so many years for an actor on the spectrum to be playing an on-the-spectrum role.’”

Due in no small part to Cromer’s presence, Matilda demonstrates autistic traits in line with the DSM-5. She speaks deliberately and sometimes awkwardly. Matilda is an extraordinarily talented musician, but she by no means has superpowers and is never said to be a savant. She is shown constantly practicing her craft. She tends to maintain control over her emotions, a skill which she discusses having learned how to do over time. When talking about her childhood meltdowns, she says, “I used to get upset out of empathy for Genevieve” (1.2). References are also made to coping mechanisms such as breathing exercises.

However, she is highly empathetic and self-aware of the effects of her autism, leading to lines like “Have I missed a fundamental social cue again or is this pretty weird?” (1.1). She often lacks tact, like when she tells a fellow student, “I think I’m done talking to you right now” (1.5). When her father reveals that he has cancer in the first episode, she starts barraging him with

questions about his condition, keeping it clinical and above the surface, but articulates, “this is very upsetting” (1.1). When Luke asks if she wants to play a video game, she replies, “I’m not coordinated enough. I’d probably embarrass you” (1.5). She has a sense of humor, including when it comes to her autism. She speaks at his funeral: “Hello, I will be doing Dad’s eulogy. I have autism. Dad used to get frustrated when I always made things about myself. But he’s dead now. Surprise!” However, she also credits her father with her development, saying, “Every time I tie my shoelaces or cross the road without dying, or make eye contact with anybody, or demonstrate a reasonable amount of self-esteem, that is thanks to him going above and beyond,” and shares the story of her father teaching her how to talk despite doctors saying that she probably never would.

Matilda thinks through clichés and desires to do what she sees as normal teen things. She’s also very pragmatic and literal, so she relies on information that she has gathered from observing media and her peers to inform her behavior. She turns to her younger sister, Genevieve (Maeve Press), for social advice and they hash situations out together. For example, when Genevieve tells Matilda that you can’t just ask a random stranger out, Matilda responds, “I know he might say no, and it will hurt my feelings, but to find love you have to make yourself vulnerable.” Then, when Genevieve asks if she knows how to flirt, Matilda answers confidently, “You’re supposed to ask questions about themselves and pretend that they’re smarter than you.” She takes this knowledge to ask the popular boy whom she has a crush on on a date. When Matilda approaches him, she asserts herself, saying, “I want to get to know Jake.” In a very pleasant turn of events, Jake does not ridicule or even quietly mock Matilda, telling her, “I think you’re awesome.”

However, when he admits that he does not share her feelings, Matilda has a difficult time figuring out the nuances of the situation. She asks, “Did you lead me on?” “Some people think they have to be nice to me because I’m different, but actually they don’t like me. Is that what you’re doing?” and, overwhelmed by emotion, starts drinking excessively. This show does not shy away from more serious content, as a later scene in the episode reveals when she loses her virginity while under the influence. When she gets drunk for the first time, she reveals her innermost thoughts: “I’m such a burden! I thought I would be okay because I’m more adaptive than other people with autism, but recently I just don’t understand!” in an unusual moment of vulnerability for an autistic character (1.3).

Like most of the other shows in this thesis, Matilda’s condition is the cause of many family tensions, an all-too-real experience faced by families with an autistic child. As Nicholas explains to his boyfriend Alex (Adam Faison) on their first date, his father got a woman in America pregnant and then “used my sister’s autism as an excuse to leave us while still looking like a nice guy” (1.1). Additionally, 14-year-old Genevieve often ends up filling the older sister role in her relationship with Matilda, giving her social advice. Matilda often unintentionally embarrasses her sister, as evidenced by her approaching Genevieve and saying, “Sorry, I know I’m not really supposed to talk to you while we’re at school.” Matilda is highly capable of expressing what she is feeling, but she does so without a filter. She tells her sister, “I feel very, like, happy, and honestly a little turned on. But I’m sorry to be self-centered like always especially while you’re having your first period. It’s so exciting!” When Genevieve’s friends press Matilda on the subject, she responds, “I don’t know what to say,” and getting distressed over how to handle the situation. When Genevieve’s friends continue to berate her for lying, Matilda has a meltdown, hyperventilating and rocking, then hitting a tree with her lunch bag

after her sister tells her to find her space. Matilda then runs to the theater, taking out her aggression on the piano. Their relationship is further complicated by their opposing worldviews: Matilda's black-and-white and Genevieve's much grayer. When Matilda finds out that Genevieve's friends, Barb (Lori Mae Hernandez) and Tellulah (Ivy Wolk), spread the information about her period to other students, Matilda says, "That doesn't make sense. Why would they tell people if they are your friends?...Friends are supposed to be good at keeping your secrets." When Genevieve justifies her decision to keep hanging out with them, Matilda argues that it is better to sit alone than to be friends with mean girls.

Matilda is often seen in the special education classroom in her school, in which the students practice developing their social skills. There she has the opportunity to interact with other autistic students, each of whom have varied presentations of ASD symptoms and who have a complex social world with each other. Just as their neurotypical students do, they fight, have awkward crushes on each other, enter relationships, and simply try to navigate high school. Matilda and her autistic friends have sensory sensitivities, which they discuss openly with each other. When Nicholas asks if she can hug him, Matilda explains, "I actually really don't like hugs. Dad taught me to do them when I was young and they made him happy so I did it for him. But I was hoping since he's dead now I wouldn't have to do them anymore," and strikes up a compromise to dance with him instead (1.1). When Drea (Lillian Carrier), who has a service dog for her anxiety, has a sensory overload, she asks her friend Jeremy (Carsen Warner) to squeeze her tightly and they kiss after some mental preparation. Later, Matilda and Drea decide to experiment sexually and Drea tells Matilda that she is hyposensitive to touch, "which you might think means I don't feel things, but actually I do, just very faintly. It's like a tickle and it isn't

that nice...so you have to grab me firmly” (1.8) The two begin dating after this, establishing boundaries and clear communication standards for their relationship.

Like *Atypical*, the show addresses the difficult realities faced by autistic teens entering adulthood, most notably when Matilda is accepted to Julliard and a future which excites her but which her sister and autistic coach/teacher do not believe that she is ready for, as she lacks the “fundamental skills” and social dexterity to navigate living independently in New York. She is encouraged to wait a year before attending so that she can work on developing these skills, but the family decides to visit New York so that she can practice before making a decision (1.8). The family takes the exact same route every day until Matilda is comfortable with it, insisting on not changing it until she is comfortable. Finally, she takes the trek by herself, but it is too overwhelming for her. She bursts out to her brother, “I’m never gonna be able to do this alone!” and decides that it is time to go home. What she decides to do next has yet to be shown as the show leaves the family in a cloud of uncertainty.

Overall, this show is an incredible representation of a young autistic woman, particularly aided by the presence and input of an autistic actress. Although there are only ten episodes thus far, Matilda arrives as a full-formed character, confident in who she is as an autistic person—not merely a character who happens to have autism. The work that the show does in explaining to its audience, assuming that they are both receptive and intelligent, is substantial in creating an interesting and well-rounded female autistic character. Her behavior is not perfectly aligned with the DSM, which is actually a positive because it is true to the experiences of many women on the spectrum. By both showing several autistic characters and the additional challenges that they face on top of regular high school struggles and acknowledging that they can live happy and productive lives, this show builds on the momentum of those which came before it.

Sesame Street

Sesame Street began airing on PBS in 1969 and has a long tradition of teaching young children not only the fundamentals of education, but also how to be good to and accepting of others. Thanks to an initiative started in 2015 called “Sesame Street and Autism: See Amazing in All Children,” the show has received wide praise for its approach to introducing autism to children at a young age in a way that they can understand. The creators made the rare decision to represent the condition with a female character, Julia. She is a humanoid puppet and by far the youngest character explored in this paper at four years old. Julia has only appeared in eleven episodes of the show, but several of these are focused primarily on her character and her autism. Julia first appeared as a cartoon in online shorts on the *Sesame Street* website. After receiving a largely positive response to the character, the studio decided to create a puppet and include her in the flagship show. Further webisodes continue to be published and have introduced Julia’s family and her companion dog.

Julia’s puppeteer, Stacey Gordon, has a son with autism and reflects on the value of having an autistic character in a show with such a young audience. As she told *The Journal*, “It’s important for kids without autism to see what autism looks like.” Executive director of the Autistic Self-Advocacy Network (ASAN), Julia Bascom, worked with Sesame Workshop in creating the character. In an interview with *Slate*, she explained that the organization reached out to *Sesame Street* after they announced their intention to add an autistic character to the cast.³ They were concerned that the company talked to “not just us but other self-advocates and people who experience autism in different ways.” Regarding Julia, she says,

³ “Sesame Workshop Expands Commitment to Autistic Children & Their Families.” *Sesame Workshop*, March 20, 2017.

We wanted to be sure...that the portrayal was positive and respectful and included Julia's strengths and what she's like as a person. We didn't want to show her as an educational object or an object of pity or a burden on the people around her...We also really wanted to focus on making sure that Julia had as much agency as possible and that the other characters were modelling respectful and inclusive behavior, since obviously a lot of typical kids are going to be watching *Sesame* and can learn a lot from that as well. But our big point was always just pushing and pushing and pushing to remember that the autistic kids are going to be watching *Sesame Street* as well.

When asked about the community's response to Julia, Bascom explains,

Obviously you can never design a character that makes everybody happy, especially with such a diverse disability, and people have had different reactions based on their experiences. I've seen a largely positive response overall. The biggest disconnect is that the autistic community uses identity-first language...The parent community tends to use "person with autism" language and that's what *Sesame Street* uses, and so [that is] frustrating.

Despite a largely positive response, this puppet has not been free of controversy. ASAN cut ties with Sesame Workshop over advertisements created in conjunction with Autism Speaks for its "Screen for Autism" initiative and 100 Day Kit for parents of newly-diagnosed children. They explain that they cannot justify working with a group which "uses the language of acceptance and understanding to push resources that further stigma and treat autistic people as burdens on our families."⁴

Julia's first appearance in "Meet Julia" begins with Big Bird greeting several of the neighbors while they paint. When he introduces himself to Julia, she ignores him, and Alan Muraoka explains that "Julia's just concentrating on her painting right now." When Abby Cadabby talks about how she loves the squish of finger paint in her fingers, Julia, who is using a paintbrush, lets out a sound of disgust and Abby responds, "I'm sorry, Julia. I know you don't

⁴ ASAN announcement: "ASAN Has Ended Partnership With Sesame Street." Published August 5, 2019.

like the way it feels.” Julia shows an impressive painting far above the artistic abilities showcased by her peers. When emergency sirens are heard, Julia covers her ears and starts humming, whining, “Noise, noise, noise,” when Alan asks what is wrong and she gets more upset when Big Bird tags her. Alan tells her to “take a break” and pet her stuffed rabbit, Fluffster, which makes her feel calm—she is clearly using her soft toy to stim. Alan walks a panicky Julia through deep breathing exercises until she is relaxed. Abby explains to Big Bird that “her ears are really sensitive, so some sounds are just too much for her.”

Alan serves as Big Bird’s advisor throughout this episode, helping him to understand the individual differences that Julia experiences, such as when it takes her a while to answer a question. When Big Bird surmises that Julia is shy, Alan explains, “Well, with Julia it’s not just that. You see, she has autism. She likes it when people know that.” He takes a highly individualized approach to explaining the concept, saying that “for Julia, it means that she might not answer you right away...and she may not do what you expect, like give you a high five.” Elmo adds, “Julia doesn’t say a lot,” and Abby explains that “she does things just a little differently. In a...Julia sort of way.” They reassure Big Bird that Julia loves playing with friends, and they are able to play tag together. Julia cheers, “Play, play, play!,” one example of her frequent echolalia. When Julia jumps while playing tag, Alan explains that she does things a little differently and Big Bird asks if this is because of her autism. Alan says, “Sometimes people with autism may do things that might seem confusing to you.”

They then share this exchange:

BIG BIRD: “Like when she flaps her hands?”

ALAN: “Yep. That’s just something she does when she’s excited. But you know what?
Julia also does some things that you might want to try.”

The characters join Julia in her game, which they decide to call “boing tag.” Because it is Sesame Street, the show ends with all of the Muppets celebrating their individual differences because they are all different species and sharing their love of singing.

In the 2018 episode “Shape Hunt,” Julia is shown to be very perceptive and bright. The crew has split into teams in a shape-finding scavenger hunt, and Julia points at a stop sign, calling, “Circle!” Her group explains that it is in fact an octagon, but they realize upon further inspection that she is actually pointing at the circular holes in the signpost. A similar event happens when the others cannot find a triangle in Hooper’s Store, but Julia notices triangles within a square print on Alan’s dishrag. She also finds shapes on the top of a fire hydrant in within a mesh pattern on a screen door.

Two other episodes particularly focus on Julia’s autistic tendencies. In Season 49 Episode 21, “Julia’s Haircut,” Julia expresses how much she dislikes haircuts. Alan expounds that, “sometimes a haircut can be a little upsetting for someone with autism.” Elmo and Abby decide to help Julia know what to expect by playing pretend hair salon. Alan uses a spray bottle on Julia’s hair instead of washing it in the sink, and when Julia has trouble sitting for her pretend haircut, he says, “I know it’s hard to sit still sometimes. You know, maybe a distraction would help.” Playing with Fluffster helps her take her mind off of the haircut and she goes to the salon more comfortable and confident.

A season later, the episode “The Fluffster Kerfuffle” sees the Sesame Street kids playing together with their favorite toys. When Rudy (Abby’s stepbrother) tries to play with Fluffster, Julia is distraught, crying, “No! Mine!” Alan asks Rudy to give the toy back and walks Julia through deep breathing exercises. Rudy, confused, asks what happened and Abby explains that “Julia got upset because you took Fluffster.” Alan adds that “Fluffster is Julia’s special toy, so

when Julia gets upset, it helps calm her down, and because he's so special to her, Fluffster is not a toy she likes to share, and that's okay." Abby explains that it's like Rudy's relationship with his special object, his blanket and they realize that they all have special toys, just like Julia. Rudy has trouble understanding why Julia did not just ask for her toy back. Alan explains that

[S]ometimes she has trouble finding the words to tell us how she's feeling...For Julia, it's part of her autism. You know how sometimes your feelings get so big that they feel like they won't all fit inside you?...When Julia's feelings get too big to talk about, Julia shows us how she's feeling in other ways, like she did today when you took Fluffster.

When the group decides to have a dance party, Rudy thoughtfully remembers an incident in which a loudly reversing truck upsetting Julia earlier in the episode and asks Alan to make sure that the music is not too loud because "loud noises can be extra loud for Julia."

This is a clear, age-appropriate, and thoughtful introduction to autism for both young viewers and their parents. It is the first exposure to autism that most young viewers will have had, and it is quite beneficial to present this positive representation before children have the opportunity to be taught stereotypes. While it is highly disappointing that Sesame Workshop chose to align themselves with a group that is viewed as so harmful and abhorrent to actual autistic people, but the introduction of an autistic character to a national public children's program still represents a huge leap forward for representation. Ideally Julia will receive more screen time as the show continues and autism will continue to be normalized for young neurotypical viewers and serving as a positive example for the autistic children watching.

DSM-5 Characteristics Exhibited: 5/7

Community (2009-2015)

Unlike the other shows featuring autistic characters from the past decade, *Community* ended before the DSM-5 recategorization of the condition to ASDs. The show, created by Dan

Harmon, aired on NBC for its first five seasons and Yahoo! Screen for its final season. The show follows a study group comprised of seven eccentric students through their time at Greendale Community College. One of the students, Abed Nadir (Danny Pudi), is a young twenty-something Palestinian and Polish film major with excellent observational skills and a vivid imagination. Although Nadir is never explicitly said to be autistic in *Community*, jokes are made and hints are dropped throughout the series by other characters that indicate that he is supposed to be viewed as such, and particularly that he has now-outdated Asperger's syndrome. Nadir interprets the situations that the study group faces through the lens of film and TV tropes, which is often met with confusion, and eventually, acceptance of his "weirdness" by his friends.

This behavior is not initially explained in the pilot episode, playing primarily for jokes, but the show establishes that Nadir is possibly on the spectrum early on. The audience is introduced to both Abed and Jeff Winger (Joel McHale) in the first dialogue of the pilot, which enters partway through a conversation which Abed dominates, explaining his entire background. At the end of his spiel, he asks Jeff, "What was the question again?" with the punchline being that Jeff had asked for the time. Several comments by other characters hint at Abed's condition in the pilot. When he first meets Britta, she tells him that "her brother works with children who have a disorder I might wanna look up." Later, when Abed remarks that he thought that Jeff was like Bill Murray's characters but is actually more like Michael Douglas' characters, Jeff angrily responds, "Yeah? Well, you have Asperger's."

Abed demonstrates many behaviors associated with DSM-5 definitions of ASDs, including an inability to express his emotions clearly and empathize with others. He tells the quarreling group, "I get a little doozy in the chamber if things get emotional" (1.1). As the arguing continues to escalate to shouting, Abed suddenly begins to act out John Bender's

emotional soliloquy from *The Breakfast Club*. He also struggles to understand social cues and nonverbal communication. Later, when the rest of the group is communicating silently behind Jeff's back by mouthing words and gesturing, Abed, not understanding, asks what is going on and fears that he has lost his hearing. When Annie calls Abed her "really good friend" in order to convince him to be a subject in a psychological study, he replies, "I didn't know we were really good friends. I figured we were more like Chandler and Phoebe. They never really had stories together" (1.4). In the experiment, Professor Ian Duncan (John Oliver) measures how long it takes people to "break" after being told that the experimenter is running late and that they must stay longer in the waiting room. After 26 hours, Abed, whom Duncan angrily calls, "Rain Man," is still there, and Annie furiously confronts him about why he never reacted. He tells her that he was livid, but that he valued her friendship, so he kept waiting. This unusual display of loyalty is an example of Abed's personality and lack of outward emotions, and shows that autistic people can, in fact, show their love in their own ways.

In the second episode of the series, Abed's character is continued to be established as the comic relief (although the comedy of the show is incredibly postmodern and the jokes in the show often contribute to worldbuilding or long-running subplots rather than just for a single laugh) and as a pop-culture loving eccentric. When someone comments on the frequency of Dean Craig Pelton's (Jim Rash) announcements, Abed says, "I like it. It makes every 10 minutes feel like a new scene of a TV show. The illusion lasts until someone says something they never say on TV, like how much life is like TV. There, it's gone." This commentary is one of the first of countless meta references throughout the series, some more subtle than others, but almost universally coming from Abed. He is self-aware of this behavior and uses television tropes to determine his own behavior, as well. When Jeff tells him, "It makes the group uncomfortable

when you talk like we're characters in a show you're watching," Abed responds, "Well, that's sort of my gimmick. But we did lean on that pretty hard last week. I can lay low for an episode."

The plot of the episode "Introduction to Film" establishes Abed more solidly as a character and provides information about his background (1.3). When Abed's father refuses to pay for him to take a film class, Britta pays for it instead and Abed makes a documentary about his parents. Upon seeing it, his father cries because he realizes that it is about Abed's guilt about his mother leaving and says, "My son is hard to understand. If making movies help him be understood, then I pay for the class." Abed is able to communicate emotions to his father through this format that he was never able to through words, even though he hurt his friends when they realized that he secretly got them to say the things he needed them to for the film.

Abed's tendency to understand his experiences through pop culture is not only because he enjoys it, but he specifically explains that it allows him to understand the world and his personal and social relationships, a task that is difficult for him otherwise. This strategy often pushes the plot of the episodes ahead, especially in the first two seasons, in which episodes often take the shape of a specific genre. However, his friends believe that he sometimes takes his imagination too far. Jeff is typically the first to curb Abed's behavior, which causes the other group members to push back and insist that he go along with it until things get extreme.

Abed can get too absorbed into his imaginary worlds for even his own sake at times, however. In the season 3 episode "Virtual Systems Analysis," he becomes entirely absorbed in his "Dreamatorium," a room specifically designated for Troy's and his imaginary play, which causes a conflict between Abed and their new roommate, Annie, who wants the room for her bedroom. Similarly, a dive into all of the possible occurrences that could occur from a roll of a die in the critically-acclaimed episode "Remedial Chaos Theory" leads to an obsession with the

Darkest Timeline, an imagined alternate version of reality in which the study group members have been replaced by evil versions of themselves.

Like *The Good Doctor's* Shaun Murphy, Abed learns from his best friend, Troy Barnes (Donald Glover), who “messes with him,” and attempts to do it back, but is not successful. (1.5) In this episode, we learn that Abed is gullible and unquestioningly trusts his friends. When Troy sarcastically that Luis Guzman is on his way to Greendale to answer Abed’s many questions, the latter asks how the actor knows about him. Troy responds that he called him on his cell phone, and Abed asks why a movie actor would call him, leading Troy to trick Abed into believing that he is President Obama’s nephew, along with other lies, which he later explains is a joke. However, Abed’s attempts to mess with Troy miss the point, including “this isn’t a table” and “all dogs are blue now.” For the rest of the duration of the episode, Abed puts on an elaborate ruse in which he pretends to be an alien studying Troy, but obviously fools no one, despite his efforts.

Disappointingly, as the show lost its voice in the later seasons and became more cartoonish, the characters turn into unrelatable caricatures of themselves. Abed’s character loses his realism, becoming more godlike than autistic, so these episodes are excluded from this work because they draw focus from the main analysis of Abed as an autistic character.

Overall, Abed is a fairly realistic depiction of an autistic person (especially considering the show’s comedic emphasis), although his character could become cartoonish at times, particularly in later seasons. The most disappointing aspect of the show is that Abed is a generally beloved and positively portrayed character, but he is never explicitly identified as autistic except in insulting or sarcastic contexts. While this takes away from the impact that Abed could have had on audiences, he is still a generally positive portrayal of someone with autism,

particularly considering his mixed heritage, interests outside of the fields of math and science, and relatively large circle of friends.

DSM-5 Characteristics Exhibited: 4/7

Discussion

The lack of variation these characters makes clear that there are few truly distinct representations of autism on television, contributing to a larger public lack of understanding about the condition and its many variations in real life. Autistic characters depicted on television and in movies are overwhelmingly white, male, young, heterosexual, and highly traditionally intelligent/academically accomplished. Of the characters examined in this paper, only two are female and one is a person of color, and he is not even explicitly autistic. This is certainly not representative of the wide range of people with autism spectrum disorders in the United States. When popular depictions of a disability (particularly invisible and intellectual disabilities) rely on limited, stereotypical views of the condition, it limits public perceptions for the many people who are not or who do not have a close relationship with someone who has that condition. This does a disservice to parents, teachers, friends, and others who are responsible for either identifying whether a child has autism or helping a child navigate life with the extra obstacles that their autism creates. More diverse representation is needed to significantly expand our social expectations for autistic people, just as the reframing of the DSM definition of autism spectrum disorders has done for psychiatrists. It is also unclear why media producers create characters that are seemingly intended to be autistic but are never explicitly said to be so in the source. This could be to make them more approachable—recognizable to people who know what to look for but not those who don't—or a resistance to labels, but either way, this practice will hopefully become less prevalent as time goes on.

Each of these characters can be categorized as having Level 1 Autism (only requiring some support) with perhaps the exception of *Sesame Street*'s Julia, who may be considered to be at Level 2: requiring substantial support. However, she is only four years old, so some of her social deficits may be due to age rather than the severity of her autism symptoms. The data on where individuals fall into these three categories are fairly speculative because of the fluid nature of the spectrum model and individual nature of autism. However, public health research has found that as many as 40 to 55 percent of autistic people have an intellectual disability, a statistic which does not factor into new televised representations of the condition. This is likely because historically and even still today, intellectually disabled and presumably autistic characters in movies and on television have been the butt of jokes and ridicule and creators are trying to defy this stereotype by getting as far away from it as possible. In an ideal future, a nonverbal character or one who has severe motor impairments will serve as a sympathetic representation of what autism can look like on the other side of the spectrum and audiences will be able to learn about how these individuals communicate and interact with the world around them, challenging notions that they are not able to do so.

Conclusion

Although varied in their presentations, these six characters have formed the basis of a largely positive body of autistic people on television that falls in line with DSM-5 criteria for ASDs. While some newer shows like *Atypical* and *Everything's Gonna Be Okay* match the language of the manual, instructing viewers on how to talk about autism, it must be considered that the field is rapidly changing. Terminology like "high vs. low-functioning" and diagnostic labels like "Asperger's disorder" are now clinically inaccurate and no longer considered appropriate by autism advocates. It is likely that how we talk about autism will continue to

evolve in upcoming years, and it is the responsibility of creators who choose to diversify their art to be informed about these and include the voices of the people whom they are representing in the creative process. American media has made great strides in the past decade in representing autism on television. Although there is still work to do, it seems like it is only a matter of time.

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