Practical Resources for Talking to Children with Autism about Systemic Racism

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Acknowledgments: The authors are grateful to Dr. Jonathan Tarbox, Dr. Michael Cameron, and Michael Odinlo for their contribution and perspective on this paper.

Editor's Note:

This manuscript is being published on an expedited basis, as part of a series of emergency publications designed to help practitioners of applied behavior analysis take immediate action to address police brutality and systemic racism. The journal would like to especially thank Jovonnie Esquierdo-Leal and Melody Sylvain for their insightful and expeditious reviews of this manuscript. The views and strategies suggested by the articles in this series do not represent the positions of the Association for Behavior Analysis, International or Springer Nature.

Guest Editor, Denisha Gingles

Abstract

As part of the child-rearing process, situations that invite difficult conversations will inevitably arise. Oftentimes, there are no guidelines or structure for how to discuss topics such as sex education, systemic racism, bullying, grieving, and gun violence. Accordingly, adults may feel at a loss for how to address difficult topics and may even avoid difficult conversations completely. When adults choose to have these conversations, they may imitate the conversations their caregivers had with them, and therefore further the cycle of systemic racism, often unknowingly and unintentionally. Racial injustice has been a core part of the American experience since the founding of the republic; hence, conversations about systemic racism are long overdue. The need has significantly increased, given the current socio-political climate. Social justice may be a sensitive topic for some, but it is a needed conversation for all, including children with Autism Spectrum Disorder (ASD). Currently available curricula and teaching manuals in the Applied Behavior Analysis (ABA) literature include little or no resources for caregivers on how to address systemic racism with their children on the spectrum. Children with ASD should be educated about how they, and their families, can combat systemic racism in their everyday lives. The present paper addresses this gap in available treatment resources by offering practical suggestions and guidelines for how adults can address the topic of systemic racism with children on the autism spectrum to educate them and prepare them to contribute to a more equitable and just future.

Keywords: systemic racism, bias, autism, ASD, Acceptance and Commitment Training, family resources

Declarations

Funding: Not Applicable

Conflicts of interest/Competing interests: Not Applicable

Ethics approval: Not Applicable

Consent to participate: Not Applicable

Consent for publication: Not Applicable

Availability of data and material: Not Applicable

Code availability: Not Applicable

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Introduction

Systemic racism theory posits that the US society is structured such that Whites benefit the most and Blacks are oppressed (Feagin, 2006). In other words, racism is not limited to any individual's prejudicial and discriminatory actions; rather, racism is woven into every area of life, including culture, education, family, and religion to name a few (Feagin, 2006). Current financial systems also support wealthier individuals (who have mostly been White) through better loan rates and generous tax allowances (Williams, 2017).

Feagin (2006) traces the roots of systemic racism, also referred to as institutional racism, back to the founding of the nation. European invaders established their society through genocide and oppression of Native Americans. In the 17th century, Whites continued to establish their dominance in society by expanding the targets of their oppression to include African Americans. Even after slavery was abolished, Blacks were not given the opportunity to generate wealth. The Wealth Privilege model (Williams, 2017) explains how the effects of the unequal opportunities given to Blacks centuries ago can be seen today. According to this model, wealth can be viewed as a source of power that is both durable and transferable. That is, possession of wealth allows the owners access to opportunities to generate more wealth, and to pass this wealth on to their offspring. For instance, access to more money provides better educational opportunities, which in turn leads to more lucrative career and employment possibilities. Since Whites have been able to generate wealth for far longer than Blacks, the gap between Whites and Blacks continues to be unacceptably large.

Apart from economic disparities, systemic racism also has a host of negative socioemotional and health-related effects. Institutional racism is present in the medical field. Feagin and Bennefield (2014) found disparities between Whites and Black patients in terms of access to care (due to wealth disparities) and how medical professionals perceive them. These differences lead to negative outcomes for Black individuals, including higher mortality rates from illnesses compared to their White counterparts.

Impacts of Systemic Racism on Children

Much of the literature on systemic racism has focused on the impact on the Black community. Blacks are disproportionately affected by the unjust treatment of Black, Indigenous, and People of Color (BIPOC), as is consistently exemplified within the literature (Edwards, Lee, & Esposito, 2019; Mandell, Listerrud, Levy, & Pinto-Martin, 2002; Nix, Campbell, Byers, & Alper, 2017). Other races, such as Native Americans, Asians, and Latinx, are also targeted groups that are vulnerable to the effects of systemic racism (Araújo & Borrell, 2006; Findling et al., 2019; Young, 2011). A number of these effects that are specific to children will be discussed in this section.

Hill (2004) examined the effects of institutional racism on the child welfare system and how social and economic supports are denied to caregivers of children. Although child welfare policies are developed with good intentions, they have disproportionate effects on children of color due to the influence of systemic racism.

Within education, there are discrepancies as far as instruction, curriculum, and school funding for BIPOC (Young, 2011). For decades, there has been a disparity in funding between certain areas. This is often based on variables such as zip code, average household income, and race. When looking at measures such as qualified teachers, curriculum offerings and materials, and class sizes, the schools that serve primarily BIPOC students have significantly less funding than schools serving mostly White students (Darling-Hammond, 1998). Through these processes, a type of oppression for academic success is created for those with lower socioeconomic status and funding. Moreover, the presence of stereotype threat (i.e., teachers' perceptions that White students will outperform students of color) can widen the achievement gap even more and alter academic performance (American Psychological Association, 2006). This displays how the achievement gap between BIPOC students, and their White peers is part of a systemic issue. As Young (2011) points out in their study, most educators perceive racism as acts at an individual level, and they fail to recognize the systems in place that contribute to institutional racism. This, in turn, does not allow educators to see themselves as part of the system perpetuating racism, but rather view themselves as "others" that are *aware* of systemic inequalities and are not actively

contributing to them. Without this level of understanding, educators will continue to follow the cycle of oppression.

When specifically examining children with ASD, one must acknowledge that this population is a vulnerable group that are also subject to the effects of systemic racism. Although the prevalence of ASD among BIPOC and White children are comparable, it is often the case that Black and Latinx children are diagnosed an average of 1.6 and 2.5 years later, respectively (Mandell et al., 2002). This is likely because of difficulties seeking help, the implicit bias of clinicians, and limited opportunities for advocacy. Furthermore, unequal access to treatment is another barrier that is affected by factors such as “higher unemployment rates, higher rates of uninsured families, and lack of access to services due to geographical region or discrimination experienced by African-Americans” (Gourdine, Baffour, & Teasley, 2011). This demonstrates that Black families are faced with additional difficulties because of the health and social disparities they are subjected to by the institutional racism that is so ingrained in society today.

One concrete step that people can take is to have conversations about systemic racism. Racism is often discussed in terms of inequality or privilege, but not as a product of an unjust system wherein Whites are agents. The dismantling of the racial frame should begin during childhood (Feagin, 2006). Put simply, there is a need to begin having these difficult conversations with children more frequently and at a younger age.

Talking About Systemic Racism

It is important to note that the authors are not offering recommendations of an exact time when the topic of systemic racism should be discussed with a child, seeing as every child and family are different. The authors also recognize that the content of these conversations will vary depending on each family’s beliefs, ideals, and experiences. For example, families that are victims of racism will have different conversations than those that experience otherwise. More so, the authors discuss the significance and potential ways of addressing the topic of systemic racism.

While some may be under the impression that racism and bias should not be discussed with children, the literature shows that young children are capable of not only understanding racism, but can

already develop their own biases based on race. Bias can be defined as an inclination “for or against one person or group, especially in a way considered to be unfair” (Matsuda, Garcia, Catagnus, & Brandt, 2020). Children as early as age 3 are able to identify with a cultural group, construct theories about how other groups operate, and pick their social group based on factors such as race (Park, 2011; Escayg, 2019). This points to a need for imbedding race discussions in curricula or activities designed for children. Furthermore, children want more information and pose questions about racial differences. Park (2011) found that young children are posing complex questions surrounding race, identity, and power. This illustrates how children are seeking information about race and identity to help guide their understanding of their environment.

Public elementary schools in general demonstrate how inequality between race is exemplified in institutionalized schooling (Dulin-Keita, Hannon, Fernandez, & Cockerham, 2011). As an example, children coming from mostly White environments are given more learning opportunities, whereas children from BIPOC backgrounds are more likely to receive lesser quality opportunities with little to no resources. This indicates that children are exposed to systemic racism at an early age. Children that are in diverse settings are more likely to be exposed to talking about racial differences because they experience different groups (Connolly, 1998; Van Ausdale & Feagin, 2001; Park, 2011). However, a truly diverse environment may be difficult to find, given that the education system contributes to racial differences among groups from an early start (Cannella, 1997). Therefore, discussions regarding this topic are suitable and necessary for children to establish healthy repertoires of behavior to combat systemic racism in society today.

Resources for Families

Having Difficult Conversations

Approaching difficult topics in conversation with others, in general, can be challenging. Topics such as systemic racism may give rise to negative thoughts and feelings; however, regardless of these private events, one must find a way to move forward and open up the conversation. Part of the challenge surrounding difficult conversations is the uncertainty of not knowing how or where to begin. Adults

should keep in mind that there is no perfect way to have uncomfortable conversations. Nonetheless, there are some key considerations that individuals can consider to help prepare for the conversation that lies ahead.

Stone, Patton, & Heen (2010) outline some guidelines to help individuals prepare themselves to have difficult conversations with others. The first is to acknowledge the other person's feelings, while considering their own contributions to the topic. Advance preparation is key in this step, in order to allow time for self-reflection about one's own behaviors. The second recommendation is for the individual to consider their own and the listener's history, as engaging in difficult conversations can potentially trigger avoidant responses and private events. By bringing a level of awareness and flexibility regarding one's own experience, this can help foster a healthier environment to talk about sensitive topics. The third consideration is for individuals to prepare contingency plans, should there be an unexpected turn in the conversation. This will help individuals feel ready when someone has a particular response (e.g., a thought-provoking question, a reasonable comment, or a burst of emotions). The final recommendation is knowing when to take a break from the conversation so individuals can sit and process their thoughts regarding what has been discussed thus far. The important thing is to talk about and explain how systemic racism is exemplified in many aspects of our lives. For children and their families to learn to combat the effects of systemic racism, they must understand its impact on individuals, communities, and institutions (Michael & Bartoli, 2014).

At present, there are some general guidelines about how to approach the topic of systemic racism with typically developing children (MomsRising; Escayg, 2019). While anti-bias literature and curricula have made a significant impact within the educational system (e.g., focusing on family pride, establishing language to describe unfairness and human differences), many of these guidelines have yet to be widely evaluated in the scientific literature. Additionally, these often fail to evaluate where and how systemic racism began, and how the effects are still present in society today. There is a specific need for understanding the underlying systems in place that contribute to systemic racism, such as White supremacy, White privilege, and power. Some additional recommendations include confronting one's

own bias, encouraging children to speak up about what they have seen or experienced, providing an open space for children to ask questions, being mindful of one's own behavior, and modeling compassionate behavior. Despite these recommendations, there is little to no information for how to address this topic with children on the autism spectrum.

Discussing Racism with Children with ASD

The language of an adult plays an important role in the development of learning about systemic racism (Vygotsky, 1962; Park, 2011); this is why it is crucial to help adults come up with actions that they can take to speak to children with ASD about systemic racism. Everyone has biases in some way, and it is important to recognize how the environment may have shaped those perceptions. Without doing this, adults are unable to have an honest conversation about this topic with the children in their lives. Another suggestion is to model appropriate language and behavior for children. Children are likely to imitate models that align with the rules that are provided for them. Moreover, if one is not sure how to answer a child's curious question, one should be honest about this uncertainty. This demonstrates that it is okay to not have the answer all the time and that there are other individuals who can help address those questions.

The Role of Behavior Analysis

A behavior analytic approach to teaching about systemic racism may be helpful in this endeavor by using concept formation procedures. Concept formation is a teaching strategy where the learner forms complex discriminations and generalization of a concept by being exposed to stimuli that have similar and dissimilar features within that concept class (Cooper, Heron, & Heward, 2020). This means the learner will learn to identify certain features to determine whether something would fall under the category of what is or is not an example of a particular concept. A thorough discussion of concept formation is outside the scope of this paper; however, interested readers may refer to Zentall, Galizio, and Critchfield (2002), and Delgado and Hayes (2007). Miller and Weaver (1976) and Fox and Ghezzi (2003) have both demonstrated that concept formation techniques produced improvements in a learner's accuracy. In both studies, the authors used a training package that included multiple exemplar training (MET) to teach specific concepts. Systemic racism may be considered a concept that can be taught to children with ASD

through discrimination training (e.g., exemplars vs non-exemplars) and generalization techniques (e.g., multiple exemplars of racist comments and policies).

Additionally, Acceptance and Commitment Training (ACT - originally known as Acceptance and Commitment Therapy but referred to as *training* in this paper due to its non-clinical application; Lillis & Hayes, 2007) may be helpful for adults who have aversive thoughts and feelings surrounding racism. ACT is a behavior analytic approach to dealing with private events. ACT aims to promote behavioral flexibility and allow individuals to live in accordance with their values (Harris, 2019). ACT can help families of children with ASD engage in less experiential avoidance (e.g., change the topic when talking about racism) and instead engage in committed actions to help address racism (e.g., initiate conversations with their children).

Behavior analytic techniques have been evaluated in prejudice-related research in the past (e.g., Hauserman, Walen, & Behling, 1973; Lillis & Hayes, 2007; Mizael, de Almeida, Silveira, & de Rose, 2016), but much of this work has been done with typically developing children and adults. Furthermore, these studies have addressed individual experiences of racism, rather than examining systemic racism. The purpose of this paper is to provide suggestions to caregivers for how to begin talking about systemic racism with children with ASD.

Systemic Racism as a Concept

Adults may have the skills to successfully navigate through difficult conversations; however, ensuring that children acquire the knowledge that caregivers are trying to impart is a separate concern. This section will provide practical tools that families can use to help their children understand systematic racism. As mentioned earlier, systemic racism can be taught to children through concept formation techniques. Simply put, concept formation techniques are used to teach learners what something is, and what something is not.

Multiple Exemplar Training. Multiple exemplar training is a generalization technique wherein learners are provided with numerous stimulus and response variations (Cooper et al., 2020). In other words, this technique involves providing various examples of a concept across situational contexts in

order to ensure that children are exposed to the full scope of the phenomenon, rather than merely a few specific examples. When teaching children with ASD about systemic racism, adults can provide multiple explicit and concrete examples of systemic racism. For instance, parents can discuss redlining, segregation, and healthcare inequalities. Adults should take children's verbal and comprehension skills into account when providing examples. For instance, when talking about redlining, parents of a child with comprehension difficulties may say, "The people in charge did not allow Blacks to live in some areas." Caregivers of a child with near-typical comprehension skills may say, "The government forced Black people to live in neighborhoods that were not given as much money." More examples of how conversations can be adapted for different children can be found in Table 1.

Adults can also use experiential examples to illustrate this concept. While the authors are in no way suggesting that contrived experiences equate to systemic racism, such examples may help make the concept more concrete for children. For instance, parents may choose to create unfair rules in a game that give certain children an advantage (e.g., unequal starting money in Monopoly) on the basis of something that is outside the children's control (e.g., height, initials, hand size). Adults can then make the connection to systemic racism (e.g., "Having unfair rules is a little bit like what Black people face every day. The rules that banks, hospitals, and schools follow are unfair to Black people"). This would be similar to the famous Blue Eyes/Brown Eyes exercise, created by Jane Elliott, in which children in a school setting were treated differently based on the color of their eyes (Peters, 1970). These exercises are beneficial to the extent that they facilitate the conversation surrounding systemic racism. Furthermore, the child should have the ability to communicate with their caregiver regarding their experience in order for these activities to be meaningful. Remember to use examples that are in line with children's interests and strengths (e.g., Mario Kart examples for kids who like video games, soccer examples for kids who like sports). More suggestions can be found in Table 2. It is valuable to note that these contrived situations may evoke emotional responding (e.g., crying, whining, protests). These responses can be used as opportunities to teach perspective taking of BIPOC individuals who frequently experience unjust treatment.

Discrimination Training. Discrimination training is a teaching procedure wherein responses are reinforced under specific antecedent conditions, and not in others (Cooper et al., 2020). This technique involves differentiating between what is included in the concept, and what is not included. In the context of teaching children about systemic racism, caregivers may talk about an individual teacher's discriminatory behaviors (e.g., giving more severe sanctions to Black students, compared to White students who commit the same offense) and explicitly point out the contrast between this and redlining, wherein Black students achieve less desirable academic outcomes as a result of less resources allocated to their districts. Additionally, adults can discuss the distinction between stereotypes (e.g., "This Black guy wearing a hoodie looks dangerous"), and the practice of a police officer racially profiling and confronting Black individuals more often than people of other races. As with MET, families should also adapt their language to be appropriate for their child's comprehension skills when using discrimination training. For instance, caregivers of children with comprehension difficulties may say, "Having one teacher being mean to a Black kid is different from having school rules that cause Black kids to get in trouble more." Parents of children with near-typical comprehension skills may say, "The government made rules about where Black people could live and gave more money to the schools in neighborhoods where White people lived. This is different than if one teacher was being really mean to a Black student." More examples can be found in Table 3.

Experiential examples may be used for discrimination training as well. For example, when playing games, caregivers can illustrate the concept of systemic racism by creating unfair rules (e.g., all children whose names start with M can look at other people's cards during Uno). They can contrast this from individual experiences of racism by having one individual consistently cheat against another player (e.g., I peek at your Uno cards because your name starts with P). They can also differentiate this from social justice and equality by consistently enforcing the official game rules. Once the children have been exposed to all conditions, caregivers can make the connection to systemic racism (e.g., "Having unfair rules is a bit like what Black people face every day. The rules in schools or hospitals are unfair to them. Having someone cheat and be mean is also like what Black people experience. People say mean things to

them because of their skin color”). Again, create opportunities based on a child’s likes and interests. More suggestions can be found in Table 4. As with MET, it is important to note that these contrived situations may evoke emotional responding that may be used to teach perspective taking.

ACT-ing on the Challenge

This section is dedicated to adults who experience challenging thoughts and feelings when addressing sensitive topics such as systemic racism. The following exercises should be used flexibly, as there are many variations of the exercises below. Families are *highly* encouraged to take up the challenge and do the exercises with an open mind. Caregivers often express concern about negative thoughts and feelings that may arise when talking about systemic racism. Racist actions and statements have increasingly been paired with punishment. With repeated pairing, circumstances related to racism (e.g., conversations, thoughts) may lead to avoidant behaviors. Examples of avoidant behaviors may include, but are not limited to: remaining silent when witnessing racism, changing the news channel when seeing protests against police brutality, or redirecting the topic elsewhere when racism comes up in a conversation.

Harris (2019) refers to experiential avoidance as “the ongoing attempt to get rid of, avoid, or escape from unwanted private events such as thoughts, feelings, and memories.” Experiential avoidance functions as negative reinforcement (the removal of a negative stimulus that increases future probability of a behavior). For example, in the context of addressing systemic racism, parents may feel the desire to avoid talking about this topic with their children because they feel uncomfortable or unqualified to do so.

ACT is an empirically based intervention that aims “to increase psychological flexibility and strengthen behavioral repertoires leading to valued action, hence improving quality of life” (Hayes, 2004). ACT addresses 6 repertoires of behavior that promote psychological flexibility, consisting of acceptance, present moment awareness, values, cognitive defusion, committed action, and self-as-context (Harris, 2019). The 6 repertoires are displayed in a hexagon shape, which is used as a planning or tracking tool. This visual is referred to as the Hexaflex (Figure 1). All 6 behavioral repertoires on the Hexaflex are interrelated and work to support each other (Hayes, Luoma, Bond, Masuda, & Lillis, 2006). For instance,

acceptance, present moment awareness, and defusion are often referred to as Mindfulness, and help facilitate values and committed action. Mindfulness is “the paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally” (Kabat-Zinn, 1994). ACT may help caregivers flexibly respond to challenging thoughts and feelings (e.g., “I am not qualified to talk about this”), and engage in behaviors that matter to them (e.g., teaching their children about racism).

Present moment. Present moment, or present moment awareness, is the behavior of paying attention to one’s own behavior and immediate environment (Little, Tarbox, & Alzaabi, 2020; Hayes & Wilson, 1994; Hoffmann, Contreras, Clay, & Twohig, 2016). By redirecting one’s attention to the present, the individual is able to engage fully in whatever they are doing for more fulfillment and enhance awareness in order to perceive what is happening around them more accurately. The aim of present moment awareness is to foster flexible attention. By doing so, individuals are able to focus and engage fully on the most important aspects of their current activity, which then allows them to connect with the stimuli involved.

Mindful breathing (Harris, 2013). With this exercise, the individual redirects their attention to their own body and environment, while noticing things like their breath, muscles, and sensations through their five senses. Mindful breathing, which can be trained through meditation, guides the learner to focus on their breath, which is a tool that is always readily available, regardless of the environment one is in.

1. Close your eyes, feel your feet on the ground, and relax your posture
2. Inhale deeply
3. Hold your breath and feel your surroundings through the five senses
4. Slowly exhale and allow your muscles to relax throughout the process
5. Open your eyes

Notice Five Things (Harris, 2019). Individuals are to notice five things in their immediate environment in this exercise. Examples are as follows but not limited to, “Name 5 things that you can see, hear, feel, or smell.” For example, caregivers can utilize this exercise when they are

experiencing discomfort while addressing challenging topics with their children. Instead of focusing on the discomfort, families can:

1. Pause and take a deep breath
2. Look around at their immediate environment
3. Notice 5 things that they can sense based on their own preferences

By doing so, adults can take a break from their challenging thoughts and instead, focus on the present environment. Focusing on the present may allow the caregiver to engage in a more meaningful conversation with the child, rather than dwell on their discomfort in the past or future. For example, a parent who is overwhelmed with worries may lose out spending quality time with their child.

Acceptance. Acceptance involves making room for negative thoughts and emotions and acknowledging the futility of making negative thoughts and feelings disappear (Little et al., 2020; Hayes & Wilson, 1994; Fletcher & Hayes, 2005). For example, adults may feel uncomfortable, scared, and worried about addressing challenging topics such as racism with their children. Thoughts such as, “what if I say the wrong thing,” or “I’m not qualified to talk about this” may occur. With acceptance, the individual allows negative thoughts to happen and does not react to or avoid it impulsively.

Many ACT exercises use metaphors, which allow a learner to change or modify their behavior or response to their thoughts or emotions (Stoddard, Afari, & Hayes, 2014). Consequently, the use of metaphors can allow for the individual to behave in a different manner in response to their aversive private events.

Quicksand Metaphor (Hayes & Smith, 2005). The goal of the quicksand exercise is to help the person recognize the futility of struggling with their private events. To make the connection, imagine falling into quicksand and feeling the sensation of getting pulled deeper into the sand. The more you fight the pull, the deeper you get stuck. Instead, you should take deep breaths, relax, and slowly work your way out of the quicksand. Consequently, thoughts and feelings can

have the same effect. The more you try to fight negative thoughts and feelings, the deeper you may spiral within your thoughts.

For instance, an adult moves away from addressing racism when they fight their thought of, “Talking about racism makes me racist.” Caregivers can be taught that trying to avoid feeling uncomfortable while talking to their children about racism is a bit like trying to struggle their way out of quicksand. The more they worry about feeling uncomfortable, the more uncomfortable they are likely to feel. Instead, they can try “opening their arms” to the feeling of discomfort and turn toward what really matters: having meaningful conversations with their children.

Defusion. The purpose of defusion is to help a learner recognize their thoughts and feelings for what they really are, rather than taking them literally (Little et al., 2020; Hayes & Wilson, 1994; Hoffmann et al., 2016). Defusion helps individuals view their thoughts flexibly through an alternative lens. However, it is crucial to note that the purpose of engaging in cognitive defusion is not to “feel better” or remove aversive thoughts or feelings. Being more flexible allows the learner to move towards things that matter.

‘Or not’ | ‘thanks mind’ (Harris, 2013). In this procedure, the individual simply adds “or not” or “thanks mind” after stating their challenging thought or feeling. For example, one may say “If I talk about racism, I’ll sound racist... or not.” It allows individuals to recognize that there are multiple ways to interact and experience the negative thought.

Self-as-Context (SAC). Self-as-context focuses on establishing flexible perspective taking in regard to oneself and others (Little et al., 2020; Hayes & Wilson, 1994, Barnes-Holmes, McHugh, & Barnes-Holmes, 2004). Creating distance between one’s thought and oneself allows the learner to recognize that they are not made of up what they do or think, but rather are a place where thoughts and feelings occur.

Sky and Weather Metaphor (Harris, 2019). One example of a SAC metaphor is the comparison of oneself and negative thoughts/feelings about self to the sky and weather. For instance, parents may have the thought, “I’m a bad parent because I can’t do this.” The thought of “I’m a bad

parent” can be compared to the weather (e.g., tornado, tsunami) that takes place in themselves (e.g., the sky). This demonstrates that they are not defined by their thoughts, rather, their body is just a vessel where thoughts and emotions occur.

Values. Values are what give individuals purpose in life, what they care about, and what matters to them (Dixon & Stanley, 2020; Sandoz, Boullion, & Rachal, 2020; Little et al., 2020). It is important to note that values must be freely chosen, which “acts as a metric for meaning in life” (Luoma, Hayes and Walser, 2017). Values focus more on the direction one would like to pursue throughout life and are different from specific tangible goals that could be attained (e.g., values: being a good parent vs. goal: spending time with my child).

Where do you see yourself in X years? (the authors of this paper created a variation based on the “One Year From Now” exercise as an example - Harris, 2019). For example, a parent might have a thought, “I hate talking to my kids about systemic racism and I’m worried that I’m going to upset them,” which prevents them from addressing the topic with their children. Aligning their thoughts with their values can allow the adults to shift from dwelling on the discomfort to something that matters. For instance, the parent may now think, “AND, maybe I care more about being the best parent I can be to raise them to be caring, loving people, more than I do about my own discomfort right now.” As a result, the parent may be able to initiate the conversation no matter how difficult it is. The following exercise can be used to help adults identify what matters to them most and obstacles that get in the way of their values. After completing this exercise, adults can ask themselves questions that will guide them towards clarifying their values (e.g., Is there something bigger that this points to?, Why does it matter?, or What is appealing about this environment?).

What kind of environment would you like to see your kid living in in 1, 5, and 10 years?	1 year: 5 years: 10 years:
What are some obstacles and challenges that	Obstacles:

prevent that from happening?	
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Committed Action. Committed action involves a learner stating that they are going to take the steps needed to reach their goal and to do them (Little et al., 2020; Harris, 2019). To set the learner up for success, goals should be small and achievable, meaning that it should be stated when they are going to be done, how the behavior will be measured, and which behavior or action will become the target for intervention.

Matrix (Polk, Schoendorff, Webster, & Olaz, 2016). The matrix is a four-quadrant value-based exercise designed to align an individual's committed action with what they care about. This exercise acts as a visual to help guide an individual to engage in behaviors that result in larger, delayed, long term reinforcers. The authors note that there is no recommended quadrant to begin in. Rather, caregivers can start where they are most comfortable with.

At the bottom right quadrant lies values, which are what matters to an individual. For example, a parent may value “the well-being of their child,” or “being a good parent.” Moving to the bottom left quadrant are aversive thoughts (e.g., such as “Not wanting to talk about race makes me feel like a bad parent.”) and feelings, such as anxiety, frustration, or embarrassment.

Next, in the top left quadrant are experiential avoidance behaviors, which are behaviors that an individual engages in impulsively in reaction aversive thoughts and feelings. An example of such behavior would be not answering or avoiding the child’s questions, while redirecting their attention elsewhere. Finally, at the top right quadrant are committed actions, behaviors that one engages in to bring them closer to their values. In service of their values, a family may choose to address the current situation and diversity with the child, or watch the news and explain current events when necessary. The purpose of the matrix is to act as a guiding compass for individuals to self-monitor what matters to them and what behaviors and actions they can engage in to move them towards what they care about. Refer to Figure 2 for an example of a completed Matrix.

Social Validity

As with any proposed idea, it is important to consider how well these recommendations align with the family's beliefs, culture, and values. The examples and exercises presented in this paper are meant to serve as a guide to be implemented with flexibility. Since every family is unique, each family will approach the topic of systemic racism with their children differently. No matter how well an adult plans and prepares, these conversations may still be uncomfortable. Perhaps more important than whether the adult feels comfortable is the question of whether they are choosing behaviors that help them be the caregiver they truly care about being. This paper of course cannot determine that for families; however, the goal of this paper is to help caregivers create contexts in which authentic and courageous conversations about systemic racism can happen.

Conclusion

Adults in this society have the responsibility to prepare children for the injustices of the world. The purpose of this paper is to offer guidance to families about how to discuss systemic racism with children with autism. Previous literature provides guidelines for parents to address sensitive topics with typically developing children. The present paper extends the literature by offering recommendations specific to families of children with ASD. Resources such as the ACT model and relevant exercises are provided to help adults take up the challenge. It is critical to point out that learning about systemic racism is an ongoing and evolving process. Opening up this conversation is a small step towards helping families educate and prepare their children to contribute to a more equitable and just future.

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Appendices

Fig. 1: ACT Hexaflex

Fig. 2: Example of the ACT Matrix on discussing systemic racism with children with ASD

Table 1. MET Examples of Different Types of Systemic Racism Based on Verbal Ability

Verbal Examples: Modify the explanations to be appropriate for the child’s verbal and comprehension skill level.			
Topic	Low verbal ability	Moderate verbal ability	High verbal ability
Redlining ¹	The people in charge did not allow Blacks to live in some areas.	The people in charge did not allow Black people to buy houses and to live in some cities.	The government forced Black people to live in neighborhoods that were not given as much money.
Segregation ²	The people in charge did not let Blacks and Whites use the same things.	The people in charge made rules that forced Blacks to be separated from Whites in schools, public transportation, and work so that Whites could have the best things.	The government put laws in place to make sure that Black people and White people would not be in the same place. Blacks had their own schools, could not ride street cars, and were not allowed to have some jobs. This happened so that Black people would not be able to have the same experiences as Whites.
Healthcare ³	Doctors do not treat Black people the same way they treat White people.	Doctors offer White people the best medicine or newest technology, and do not offer Blacks the same things.	Doctors do more research that is helpful for White people, and less research that is helpful for Black people. Because of this, White people are able to get the newest treatment and technology.
Criminal Justice ^{4,5}	The police punish Black people more than White people.	The police use more force when arresting Black people compared to White people for breaking the same rules.	Black people are targeted by the authorities, such as the police, and are given more severe consequences comparing to White people for engaging in the same type of crime.

Table 2. MET Experiential Examples for Systemic Racism for Children with ASD

Experiential Examples: Create a scenario for children to experience inequality on the basis of something outside their control (e.g., initials, height, hand size) to illustrate systemic racism. It is important that caregivers facilitate conversations surrounding systemic racism following these activities.	
Exclusion	Plan a game/activity, but exclude some children.
Unequal distribution	Share a food or toy unequally (e.g., more slices of pizza, more time with a video game).
Games	Give children an advantage during games (e.g., more starting money in Monopoly, head start during races).
Leadership	Assign some children to be the “boss” for the activity so they have absolute control over the game.

Table 3. Discrimination Training for Individual vs Systemic Racism Based on Verbal Ability

Verbal Examples: Modify explanations to be appropriate for the child’s verbal and comprehension skill level.			
	Low verbal ability	Moderate verbal ability	High verbal ability
Redlining ¹	Blacks were told to stay away from some places. It was not just one person telling them to go away - all White people said so.	Some neighborhoods were only for White people. Blacks had to live somewhere else. It was not just one White neighbor being mean to a Black family.	The government forced Black people to live in neighborhoods that were not provided with as many resources. It was not just one mean White neighbor - this was something that happened everywhere.
Segregation ²	Black people were not allowed to use lots of things that White people were. It was not just one White person being selfish, none of the White people wanted to share.	Black people had to use different things (e.g., water fountains) than White people. It was not just one White person being selfish, it was a rule all Black people had to follow.	A lot of the best things were only for the White people. Black people had to stand at the back of streetcars (instead of having a seat). They had to use different water fountains. They were only allowed in some schools. These were actual rules they had to follow, and not just something that one White person said for them to do.
Healthcare ³	Many doctors treat Black people differently. It is not just one doctor being mean to one Black person.	A lot of times, Black people are not given the chance to get the newest medicine or the best technology. It is not just one doctor not being careful.	Most of the newest technology is based on what doctors know about White people. Many times, Blacks are not included when doctors study and try to make new discoveries. It is not just one doctor not giving Black people the best medicine.
Criminal Justice ^{4,5}	Black people are punished by cops a lot more than White people. It is not just one cop catching and hurting Black people.	Black people receive worse punishment, even if they break the same rules as White people. It is not just one cop or judge who	Black people are caught more often than other people are, and not because they commit crimes more. After they get caught, their

		is being unfair.	punishment is usually worse than what White people are given. It is not the case for just one Black person.
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Table 4: Discrimination Training Using Systemic | Individual | Fair Experiential Examples

Experiential Examples: Create scenarios for children to be treated unfairly based on an arbitrary characteristic (e.g., height, eye color, hand size) to illustrate systemic racism. Next, create another scenario wherein one child is treated unfairly compared to one other child to illustrate the experience of racism at the individual level. Finally, create a scenario wherein all children are treated the same way. Caregivers should use these scenarios to facilitate conversations surrounding systemic racism.			
Activity	Systemic	Individual	Fair
Games	Set up unfair rules (e.g., anyone whose name starts with A gets 500; everyone else gets 200 when passing go in Monopoly)	Role play behaving unfairly towards another (e.g., pushing a competitor at a race)	Implement consistent game rules for all players.
Sharing	Set up an unequal distribution (e.g., anyone under 5 ft can play with the iPad for 2 minutes; people over 5 ft can play with the iPad for 5 minutes).	Role play one person not sharing with another (e.g., one child taking the blocks of another).	Share the toys, materials, or food equally.
Chores	Give some children more chores than others (e.g., blonde people have to clean all bedrooms, dark-haired children only have to wipe the table).	All children have to do chores, but role play one demanding that the other do all the work (e.g., each child has to clean their room, but one is forced to clean both).	Everyone in the home has to do some chores to clean up after themselves.