

WALES TOOLKIT




autism awareness in the workplace



FOR UNION REPS & OFFICERS

**a s c c** | autism spectrum connections cymru

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# Autism Awareness in the Workplace

WALES TOOLKIT

[ It is our differences that make us unique ]

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## Autism awareness in the workplace: **introduction**

**Autism** is a term describing a wide range of conditions that reflect neurological differences among people. These are known as autism spectrum conditions (**ASCs**).

Autism, along with other neurological conditions such as dyslexia, dyspraxia and attention deficit hyperactivity disorder (ADHD) are all examples of '**neurodiversity**'.

Neurodiversity is a relatively new term that refers to the diversity of the human brain and people's '**neurocognitive functioning**'. This means there is a wide range of difference in how people's brains work and not everyone is '**neurotypical**' (a term describing those without neurological conditions). Neurodiversity recognises that some people's brains are 'wired' differently.

There are an estimated **35,000** people with autism spectrum conditions in Wales.

More than **99%** of the general public say they have heard of autism. But only **16%** of people with **ASC** and their families think that the public have a good understanding of it.

With growing awareness of autism spectrum conditions, an increasing number of people in work have a formal diagnosis. There are also many people with the condition who, for a variety of reasons, may not have a formal diagnosis. Many workers are the parent or carer of someone with autism.

Barriers that are placed in the way of workers who have autism spectrum conditions can negatively affect their lives at work. There is still much to be done to increase awareness and understanding of the condition.

**Trade unions have a key role to play in the 'neurodiversity movement' which advocates for better understanding and inclusion of people who are 'neurodiverse' such as people with autism spectrum conditions.**

## The social model versus the medical model **approach**

Guidance from the TUC says: “There are different ways of understanding disability. The two main ones are the **social model** and the **medical model**.”

“The trade union movement uses the social model of disability.”

“The social model looks at the barriers that our society put in the way of disabled people’s participation including both attitudes and practical barriers.”

It aims to remove unnecessary barriers that prevent disabled people accessing work and services and living independently.”

The social model makes a distinction between **impairment** and **disability**. Impairment is described as “**a characteristic** or long-term trait, which may, or may not, result from an injury, disease or condition”.

Disability is the difficulty experienced by people with an impairment when the barriers put up by society interact with their impairment to deny them access or participation.

The social model identifies attitudes that create barriers to disabled people’s participation and equality. For example, there is prejudice and ignorance surrounding autism. There are also workplace practices, procedures, cultures, unwritten rules and forms of communication that do not take account of people with autism.

The medical model sees the impairment as the cause of disabled people’s disadvantage and exclusion. For example, an employer who decides that a person cannot work for them because they have autism rather than considering how to make the workplace suitable for them, is probably being influenced by the medical model. Unfortunately, the medical mode dominates much political and legal decision making.

The trade union movement supports the demand of the disabled people’s movement:

**‘Nothing about us without us’.**

Many trade unions have structures for disabled members; if your union does, it may be useful to invite and welcome the involvement of people with autism in these structures.

In the workplace, workers with autism need to be involved in any discussion around adjustments to overcome barriers that may have been identified.

Nothing **about** people with autism

**without** people with autism

The aim of this toolkit is to provide information to help union officers and reps in Wales represent autistic members effectively, address the barriers faced by workers with ASCs and promote the value of neurodiversity in the workplace.

It is also a resource for the **Autism Awareness in the Workplace** course.



## Autism awareness toolkit and course for union reps in Wales

The toolkit and course have been jointly developed by the **Wales TUC** and **Autism Spectrum Connections (ASC) Cymru**. With over 50 affiliated trade unions, the Wales TUC represents nearly half a million workers. It campaigns for a fair deal at work and for social justice.

Autism Spectrum Connections Cymru is a charity which was set up to provide specialist services in Wales. They offer a range of focussed support services and social opportunities for people with autism. Its ACCESS employment service works to support people to gain and maintain employment opportunities. It also works closely with employers to support them to identify and implement a range of reasonable adjustments.

This two-day course has been designed for trade union reps and aims to create greater awareness of autism spectrum conditions (ASCs) and neurodiversity in the workplace. The course is aimed at trade union reps from all workplaces and no prior experience or knowledge is required. The course aims to:

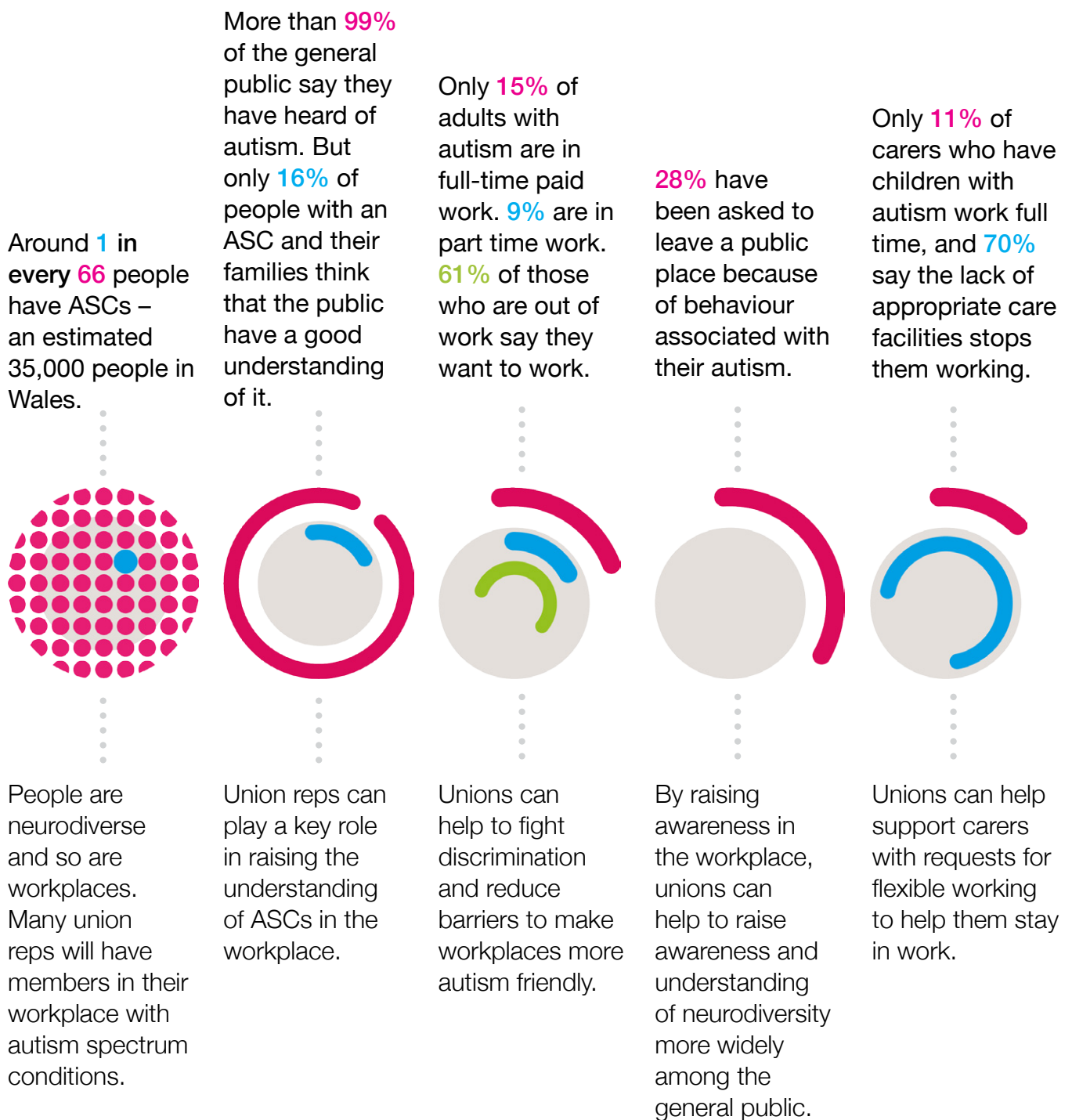
- Create awareness of neurodiversity and autism spectrum conditions (ASCs)
- Help reps consider various workplace factors that may negatively impact on workers with an ASC and on workers who may be parents or carers for people with an ASC

- Consider practices and environments within the workplace that may be direct or indirect discrimination against workers with an ASC and parent or carers of those with ASCs
- Consider best practice for workplaces and unions to tackle the barriers facing workers with ASCs

Contact [wtuceducation@tuc.org.uk](mailto:wtuceducation@tuc.org.uk) for information about courses running in your area.

**Autism Awareness in the  
Workplace course**

## Why is autism awareness important for your role?



(Figures from the National Autistic Society and Ambitious About Autism)



Due to the challenges caused by lack of awareness and prejudice, disclosure of an ASC in the workplace can be very difficult. People with an ASC may fear that they will be '**labelled**' and that others will perceive them as less capable than before.

In some cases, people with ASCs report that qualities once considered strengths become regarded as '**symptoms**' after disclosure. For example someone described as "**diligent**", "**driven**" and "**independent**" before disclosure becomes "**rigid**", "**obsessive**" and "**aloof**" once their condition is known about.

Unions can help by raising awareness of ASCs with employers and workers and by challenging discrimination.

A trade union rep can provide confidential advice and support.

Unions are able to provide individualised representation and support to members with ASCs and also represent members collectively.

## What is the role of unions?



Some people may be happy to disclose and discuss their condition with their manager or HR department. Often, if people are experiencing difficulties or discrimination they may feel more comfortable speaking to someone else in the workplace, such as a trade union rep.

It is important that trade union reps feel confident communicating with members with ASCs to support better inclusion. This toolkit aims to help reps have a greater understanding of autism spectrum conditions, gives some suggestions on communication tips and some case studies and examples of reasonable adjustments that may be a helpful resource to those representing members with ASCs. However, because every person with an ASC is different, the most important thing you can do is to **ask** and **listen** to the individual.

Like all workers, people with autism spectrum conditions can benefit from the collective power and voice of trade unions. Unions are democratic organisations. They can provide structures for workers with ASCs to make themselves heard. Unions can organise and bring members together to **challenge discrimination** and unfair treatment at work.

**Unions can bring together all members. Working together to remove barriers can make the workplace a better environment for everyone.**



## Autism and “invisible/hidden disabilities”

Advice from the TUC on supporting members with ‘invisible impairments’ states:

“Everyone recognises that someone who always uses a wheelchair to get around, or who is blind and uses an assistance dog is a disabled person. But many more people are disabled than those who can be identified by sight alone.

“The legal definition of disability includes millions of people who don’t look different on the outside. Some of the conditions that many people have that make it difficult for them to carry out ordinary day to day activities without adjustments are:

- Mental health conditions – depression, schizophrenia . . .
- Conditions such as dyslexia, dyspraxia, autism and epilepsy
- Progressive conditions such as rheumatoid arthritis or Motor Neurone Disease
- Chronic conditions such as diabetes and asthma
- People with cancer, Multiple Sclerosis or HIV are automatically counted as disabled from the time of diagnosis.”

Autism spectrum conditions can vary between different people. In many cases, people with an ASC can appear to have no obvious challenges in the workplace and fit in with their peer group in the same way as non-autistic people do.

Because there is no obvious ‘**visible**’ impairment, others sometimes fail to understand why a person with an ASC may have a genuine need for and entitlement to reasonable adjustments.

In some cases, lack of awareness or ignorance and prejudice may lead colleagues and managers to question if the person with an ASC is ‘**really disabled**’. They may accuse the person with an ASC of using it as an “excuse” for inappropriate behaviour or somehow gaining an unfair advantage. Such behaviour may deter people with ASCs, who are entitled to legal protection, from seeking the adjustments they need from their employer.

Union reps have an important role in raising awareness of ‘**invisible disability**’ in the workplace.

They can work to challenge discriminatory attitudes and help members secure the adjustments they need.

The following myths and facts are from trade union campaigner and author Janine Booth's Autism in the Workplace guide, written for the TUC:

## Myths and facts

**'Autism is one of those 'trendy' conditions that everyone seems to have these days.'**



This is a commonly-heard view, but an inaccurate prejudice which undermines the very real experience of people with autism and their friends and families.

**'Autism is just an excuse for bad or anti-social behaviour.'**



This is another commonly held view, but again, an inaccurate prejudice. 'Bad behaviour' can just be unusual or eccentric behaviour which may not harm anyone. Behaviour that does cause difficulties may be the product of distress, in a situation that does not take into account the needs of a person with autism: e.g. sensory overload, changes to routines, unkind comments.

**'Autism is a learning disability.'**



Autism is not in itself a learning disability, but it can often be accompanied by learning disability. It is estimated that 60-70 per cent of people on the autism spectrum have a learning disability.

**'Autism is a mental illness.'**



Autism is not in itself a mental illness. Autistic people may be more vulnerable to developing mental health problems, due to distress caused by social conflict, sensory overload, misunderstandings, discrimination and other factors.

**'Autism is a tragedy.'**



Autism can certainly have a big impact on individuals and families, who can face great difficulty and distress. However, portraying autism as a 'tragedy' can have very negative consequences for autistic people. "Autism isn't a tragedy, or a side-effect of genius – it's a difference to be valued". *Aspies for Freedom*

**'Autistic people are of low intelligence.'**



No. Autism is a spectrum, and includes people across the range of intelligence.

**‘Autistic people are like that bloke in Rainman.’**



Dustin Hoffman’s character Raymond Babbit was based on Kim Peek, who was probably not autistic! He did have a neurological condition, and was a ‘savant’ (meaning he could memorise and recall a remarkably large amount of information).

Some autistic people may be like Raymond, but autism is a spectrum, and many are not like him. While some may have ‘special talents’ or unusual, striking abilities, it is unfair to expect all autistic people to be like this, or to treat their abilities like ‘party tricks’.

**‘Autistic people are unable to empathise with others.’**



It may be more accurate to say that autistic people empathise differently from the way that ‘neurotypical’ people do. One theory is that autistic people lack ‘cognitive empathy’ (the ability to predict others’ intentions), but have ‘affective empathy’ (the ability to share others’ feelings) and ‘compassionate empathy’ (the desire to help others).

Many people would welcome progress in alleviating the more distressing aspects of autism. But many of these could be alleviated by better support, services and understanding from society; an end to prejudice and discrimination; and an acceptance that humanity is neurologically diverse.

Many people with autism do not want to be cured, seeing their autism as a difference with positive aspects, and wanting support and inclusion not a cure.

**‘If there is no cure for autism yet, we should prioritise developing one.’**



There are no medications to treat autism.

People may use medications to treat conditions that may be associated with autism e.g. depression. There are various therapies, treatments and support promoted to people with autism and their carers. Some (such as speech and language therapy or employment support services) are helpful but others... [may] ...be unproven or even harmful.

**‘There are medications, therapies and treatments for autism.’**



## Understanding autism spectrum conditions



### What are autism spectrum conditions?

This is a simple question – but the answer is very complex!

Autism is a term covering a wide range of conditions, including Asperger syndrome, that reflect neurological differences among people. These are known as autism spectrum conditions (ASCs) and are an example of ‘**neurodiversity**’, or differences in the way people’s brains work.

The way that autism is defined has changed as understanding of the condition has grown. However there is still some way to go with raising awareness and still on-going debate about the best way to define the condition.

Although you may hear a number of different terms for autism spectrum conditions, such as Asperger syndrome, ‘**classic**’ autism, ‘**high**’ or ‘**low**’ functioning autism - most of these are distinctions applied by diagnostic professionals. There is more information about some of the terms you may hear in the glossary. Because autism affects people differently, in this context it is not necessarily helpful to focus on these distinctions or to make assumptions about people’s skills, abilities or needs based on them.

You may hear the term ‘autism spectrum disorder’ or ASD used. Many people now use the term ‘**autistic spectrum condition**’ instead.

The trade union campaigner and author Janine Booth has noted in her **guide to Autism in the Workplace**, written for the TUC:

“The National Autistic Society describes autism as ‘a lifelong developmental disability’. However, some autistic people find this definition quite negative.

“A more neutral and descriptive definition might be: Autism Spectrum Conditions are neurological developmental conditions. They occur when atypical (unusual) brain connections lead to atypical development. These differences in the way the brain functions lead to particular challenges and abilities and unusual development.”

### The Spectrum

The first thing to know is what a ‘spectrum’ means in this context. The term refers to a condition which can have many different degrees of intensity, from very significant to very mild and everything in between.

In practice, this means that union reps will come across people with autism spectrum conditions who may have very different skills, abilities and needs, and it is important that each person with autism is recognised as an individual.

## Traits of autism

People with autism spectrum conditions are described as having ‘**autistic traits**’. These are common differences, which form part of the diagnostic criteria. They are:

- Differences in communication
- Differences in social interaction
- Differences in sensing and perceiving
- Differences in ‘central coherence’ (noticing details and making connections to see the ‘big picture’)
- Differences in ‘executive functioning’ (organising and planning)
- Differences in thinking

Because this is a spectrum condition, different people will be affected to different levels in each of these ways.

## Differences in communication

People with ASCs communicate differently – this is part of the official diagnosis. However, how this appears in the real world can be quite diverse.

Throughout this toolkit, it is recognised that each person with an ASC is unique, and their condition affects them uniquely. But some things will be common to those with the condition, because they are part of the official diagnosis. When it comes to communication, these common factors are:

- Difficulty understanding communication which is indirect, unclear or ambiguous.
- A generally ‘efficient’ communication style – saying exactly what you mean, not more or less.
- Difficulty understanding the ‘non-verbal’ and ‘para-verbal’ aspects of communication. ‘Non-verbal’ means things like posture, gesture and facial expression. ‘Para-verbal’ means how you speak – things like tone and volume of voice.

This toolkit includes some tips for communicating effectively with people with autism spectrum conditions.

This is also part of the official diagnosis, so everyone with an ASC will experience it to some degree. But again, all individuals will experience the differences uniquely.

This is closely related to differences in communication. Most communication takes place non-verbally – using posture, gesture, tone of voice and so on. For someone who doesn't understand these things, or who doesn't understand them instinctively, social situations can be extremely difficult. People may interpret language literally or they may find it hard to work out things that others take for granted, such as whose turn it is to speak in a conversation, or whether someone is joking or being serious.

In the workplace, this might mean things like not being able to tell if a person is busy, appearing to 'dominate' meetings by talking too much, or not being aware if colleagues seem stressed or frustrated.

Many people also struggle with working out unwritten social rules. They may not be aware, for example, of what topics are appropriate or inappropriate to bring up in the workplace. Or they may not recognise unspoken conventions, such as when it's okay to take breaks.

Finally, some people with an ASC find that they simply don't have the same level of need for social interaction as other people. They may find that they don't enjoy things like office parties or drinks after work, may prefer to sit on their own during lunch breaks and so on. It should be remembered that this is not true of all people with ASCs.





Though it is not part of the formal diagnosis, many people now recognise that people with ASCs sense the world around them differently. They may be highly sensitive to some things, or less sensitive, or both.

At school most of us were taught that there are five senses. In fact, it is now known that there are at least seven – and some scientists believe there are as many as 33.

There are as many possible examples of these differences in sensing and perceiving as there are individuals with an ASC. However, some of the more common are:

- Sensitivity to light – perhaps a dislike of bright light or difficulty reading letters on a bright computer screen
- Sensitivity to sound – sometimes loud noises can even be painful
- Sensitivity to smells – being bothered by strong odours like perfume, cigarette smoke or food cooking
- Differences in sense of balance, feeling ‘wobbly’ or having difficulty with things like climbing ladders
- Differences in sense of taste – perhaps enjoying unusual food combinations, or having a strong preference for different foods on a plate to not be touching
- Sensitivity to touch – this could mean that the person really dislikes certain textures or fabrics.

These differences are part of the condition, and workers with autism are entitled to reasonable adjustments under the **2010 Equality Act** to ensure that they are not put at a substantial disadvantage to a non-disabled colleague. Examples of workplace barriers and reasonable adjustments are discussed in the **addressing workplace barriers** section on page 27. Like other workers, people with autism are also protected by health and safety legislation which requires employers to protect all workers from the risk of injury or harm at work.

Sensory differences don't always cause discomfort or distress. They can also be delightful. Some people may take very great pleasure in apparently simple things, like the patterns made by sunlight on water, or the feel of walking barefoot on grass.

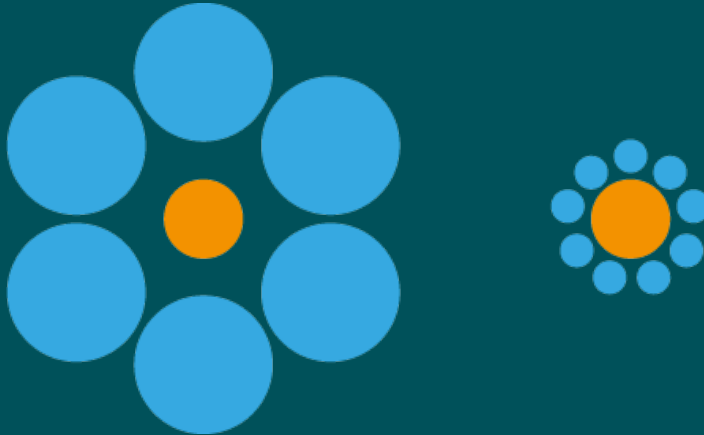


'**Central coherence**' is the ability to put small details together to make a bigger picture. People with ASCs tend to perform differently in tasks and experiments that test the ability to detect patterns, or to focus on details. For example, look at the image below:



On average, it takes people with an ASC much longer to identify what animal is in this picture – and some don't see it at all. They tend to focus on the individual lines within the pattern, and not the overall shape.

Another example is the famous '**Ebbinghaus Illusion**':



For most people without an ASC, the orange circle on the left looks much smaller than the one on the right – though in fact they are both exactly the same size! People with an ASC tend not to be fooled by this optical illusion, because they focus on the relevant details (the orange circles) and not the surroundings (the blue circles).

A third example is known as the **Stroop Effect**. You can try this experiment yourself easily. Simply read the words below out loud.

Red

Orange

Blue

Purple

Green

Many people without an ASC ('neurotypical' people) find this task quite hard! They get distracted from the letters of the word by its colour. However, people with an ASC tend to perform more quickly and accurately on the Stroop Experiment. Again, it's because they naturally pick out the relevant details (the words) and ignore the irrelevant ones (the colours).

## Differences in 'executive functioning'

'Executive Functioning' refers to various mental abilities: solving problems, making plans and carrying them out, deliberately focusing attention, monitoring situations and changing your response accordingly, and 'impulse inhibition' – being able not to do something even though you naturally want to (for example, being able to stick to a diet despite having lots of tempting sweets in the house, or managing not to raise your voice in response to a customer shouting at you in work).

Differences in executive functioning can affect people in a huge variety of ways. For example, it may make it difficult to be on time for things – people may not be able to effectively plan a journey to work, or carry out their plan once they've made it. It might make time-management more difficult. It might mean that people take longer to learn a job involving lots of different, complex tasks; or it could be that once they have learned a process, they find it very difficult to learn any new changes to it.

## Differences in thinking

It's a common **stereotype** that 'people with autism don't like change'. This is a big oversimplification, and it isn't true at all for some people, but a preference for familiarity, routine and repetition is part of the official diagnosis.

Related to this is the idea of 'special interests'. Very many people with ASC have one or more topics which they're extremely interested in. This can be very narrow (for example, a child might insist on watching the same episode of a cartoon over and over and over again) or relatively broad (someone's interest might be, say, 'ancient civilizations', and they read lots of books and watch lots of documentaries, join numerous clubs and societies and arrange holidays to places with ancient monuments.)

Sometimes these are referred to as 'obsessions', though this is inaccurate. The word 'obsession' refers to a distressing mental illness, where unwanted thoughts keep coming back despite the person trying very hard to get rid of them – the thoughts may give rise to strong feelings of horror, fear or disgust. Many people with an ASC really enjoy their interests and they're completely harmless, unless the person gets so absorbed in them that they forget to carry out appropriate self-care tasks (such as showering or eating properly). The special interest may be a very fulfilling hobby, or even lead to a job.

Like everyone else, people with an ASC can have other mental and physical health problems and conditions. These problems may be related to their autism, or completely unrelated. It may also be the case that their experience of health issues – and their experience of health care – is different because of their ASC.

Some of these differences may include:

- Altered experience of symptoms because of sensory differences – people may be more, or less, sensitive to things like pain, nausea or fatigue
- Greater risk of ‘meltdowns’ and / or ‘shutdowns’ when a person with autism is ill
- Reduced access to appropriate healthcare because of difficulty communicating with medical professionals, or coping with the sensory environment of a clinic or hospital
- Challenges with sticking to a treatment regime (e.g. taking medicine regularly) because of differences in executive functioning

People with ASCs are statistically more likely to have certain other conditions (compared to the number of people who have these conditions among the general population). These conditions are not part of the autism spectrum but are described as ‘**co-occurring**’ conditions as they can sometimes occur more frequently in people with ASCs. Not every person with an ASC will have a co-occurring condition.

## Co-occurring conditions



Some examples of co-occurring conditions include the following:

Autism spectrum conditions **are not** learning disabilities. However, like other people, people with autism can sometimes be diagnosed as having a learning disability as a co-occurring condition. There is some evidence that people with autism are more likely to be diagnosed with a learning disability compared to the general population. It is important not to make assumptions about how a learning disability might affect someone as they can affect people very differently. Many people with autism do not have a learning disability.

Some people **mistakenly** believe that dyslexia is an autism spectrum condition. In fact, it is quite separate, and many people have one condition but not the other. Dyslexia is a specific learning difficulty which affects an individual's ability to develop literacy skills. It affects things like the recognition of letters and verbal processing speed, and it is not related to a person's general intelligence. In working adults, the day-to-day effects may include:

- Quickly becoming tired when reading and writing
- Poor spelling and grammar
- Difficulty reading maps or following directions on a sat nav
- Mixing up strings of numbers, for example in a PIN or a telephone number

There is no clear agreement among researchers about the prevalence of dyslexia in people with autism spectrum conditions, although it is known to be higher than in the general population.

Learning disabilities

Dyslexia

## Dyspraxia (Developmental Co-ordination Disorder; DCD)

Dyspraxia is also, wrongly, considered by some people to be part of the autism spectrum. It is possibly the most common co-occurring condition, with some studies suggesting that up to 4 out of every 5 of people with autism also have dyspraxia. Dyspraxia affects an individual's ability to control their own muscular movements. This means that someone with dyspraxia may perform physical movements less accurately and/or more slowly. In the public mind it is usually associated with childhood (it used to be called 'clumsy child syndrome') but it is a lifelong condition. Effects on the day-to-day life of an adult with dyspraxia may include:

- Difficulty writing or using a mouse or keyboard
- Increased incidence of slips, trips and falls
- Increased incidence of accidental injury to self or others
- Difficulty learning to drive or ride a bicycle
- An unusual way of walking (perhaps more slowly, or with a gait more associated with older people)
- Speech differences (if the muscles of the mouth and/or throat are affected)
- Digestive problems (if any of the muscle groups that control the progress of food along the digestive tract are affected)
- Increased risk of musculoskeletal problems such as back ache, neck ache or RSI (repetitive strain injury)
- More than usual tiredness after physical exertion
- Appearing physically tense, even if the person feels mentally relaxed and comfortable

## ADHD (Attention Deficit Hyperactivity Disorder)

ADHD is a neurological condition which, as the name implies, can result in people finding it hard to concentrate, being easily distracted and restless and/or engaging in impulsive behaviour.

## Mental Health

Autism is not in itself a mental illness or mental health condition. However, people with ASCs are significantly more at risk of developing certain mental health issues. Some scientists believe that this is due to structural differences in the brain; others believe that the feelings of isolation, confusion, fear, discrimination, social conflict and stress caused by living in a world designed for people without ASCs is a more likely cause. The issue is controversial, with no clear consensus at the moment.

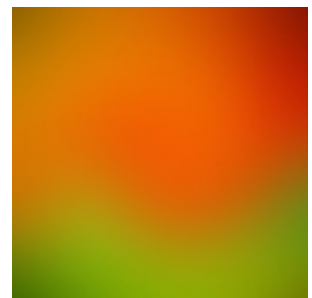
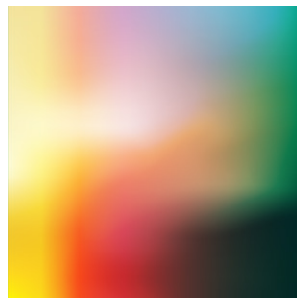
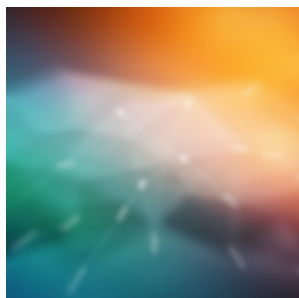
Even more than with physical illness, people with an ASC might find it more challenging than others to get appropriate diagnosis and treatment for a mental health problem. Differences in communication might make it difficult to explain distressing thoughts and feelings they are experiencing. Differences in thinking might mean that the person does not recognise these thoughts and feelings as unusual. In some cases their symptoms might be overlooked because they appear, on the surface, to be similar to common traits of autism.

## Anxiety

Given the pressures of living in a world designed for people without an ASC, it's not surprising that many people with an autism spectrum condition suffer from some degree of anxiety.

In fact, one study suggests that 9 out of 10 people with an ASC will suffer from at least one '**clinically significant episode**' of anxiety in their lifetime, compared with around 1 in 4 of the general population. ('Clinically significant episode' means that their anxiety is serious enough to require diagnosis and treatment by a doctor.)

Anxiety is just as unpleasant – and potentially debilitating – for someone with an ASC as for someone without. It has the added factor that it may make certain behaviours associated with autism (listed in the next section) more likely or more pronounced. If someone is self-conscious about their ASC or tries to hide it at work, this can lead to a vicious circle, as they become anxious about seeming anxious.





This section looks at some of the behaviour associated with ASCs which may seem ‘unusual’ or ‘challenging’ to people who are unfamiliar with the condition. It’s essential to remember, above all, that people with ASCs, like everyone else, have reasons for doing what they do. The aim of this section is to help increase understanding of the experience of living with an autism spectrum conditions and to lessen some of the confusion that people without ASCs sometimes feel.

### Distress - ‘Meltdowns’ and ‘Shutdowns’

It’s a complete **myth** – and a very unhelpful one – that adults with ASCs are prone to ‘tantrums’, or to ‘kicking off’ at work. However, ‘autistic meltdowns’ are a recognised phenomenon. They happen when a person is severely over-stimulated, when the person’s brain is receiving more input from their senses (in the form of light, movement, sounds, smells and so on) than it can possibly process.

If the person’s working environment is appropriate, there is no reason why this should ever happen at work. If it does, it is a sign that the person’s environment needs to be reassessed. It can also be a sign of **workplace bullying**. Unfortunately, some people use the fact that people with ASCs can be made very uncomfortable by apparently ‘harmless’ things to provoke a reaction.

‘Autistic meltdowns’ are more common in children. Children have not yet learned to control their emotions as well as adults, their senses are naturally more sensitive, and they are likely to be in an over-stimulating environment, such as school or day-care, for a lot of the time. All too often, they are seen as the child’s fault – they need ‘more discipline’ or to ‘toughen up’. This is simply wrong. But they will need the presence of a trusted adult to help them cope, and if a worker is caring for a child with an ASC, your understanding of this aspect of the condition will be very important to them.

## Living with autism spectrum conditions



‘Shutdowns’ are related to ‘meltdowns’. The person’s brain can’t cope with any more sensory input, so simply stops taking any more in. At best they may function ‘**on autopilot**’ and appear distracted; at worst they may find themselves unable to talk or move. As with ‘meltdowns’, if this happens at work it’s a serious warning sign that someone’s environment is inappropriate.



## Routines and Rituals

A sense of routine can be very important for someone with an ASC. Routine can help with executive functioning differences, and ritual can be very soothing. It may be difficult for others to understand why a person needs to take their break at a very precise time each day, or to have their work space laid out 'just so'. But these things can really help someone with an ASC feel safe in a world that seems confusing and chaotic a lot of the time.

Just as a person's special interests are different from obsessions, a person's rituals are not the same as the compulsions that form part of OCD (Obsessive Compulsive Disorder). People with OCD often hate their compulsions and feel trapped by them, while for someone with an ASC they can be helpful and enabling.



## 'Stimming'

'Self-stimulatory behaviour' or 'stimming' is the name given to a range of small repetitive actions that people with an ASC sometimes do. There's a huge variety of these, but some of the most common are: flapping hands, twirling hair, playing with jewellery, fiddling with small objects (lumps of Blu-Tak, rolled-up paper etc), jiggling a foot or a whole leg, stroking a piece of clothing or gently rocking in place.

These behaviours are usually harmless. Rarely, people may 'stim' in more detrimental ways, such as picking at scabs or biting lips, especially if they are under-sensitive to pain. This is not the same as self-harming, such as deliberate cutting or burning, which is a response to severe and acute stress in which the person deliberately seeks to feel pain.

Of course, people without an ASC 'stim' too – albeit in a more restricted range of ways.

When people without an ASC do it, it's called 'fidgeting' – and it's considered perfectly normal!

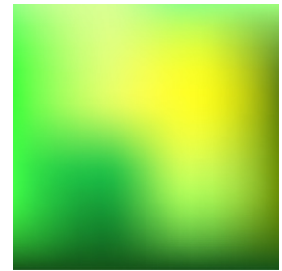
TUC guidance states: “The most effective approach for a trade union will be to negotiate with the employer to persuade them to adopt a social model approach to disability.”

The trade union approach can be put in practice by “discussing all the steps that can be taken to make the employer’s premises, services, provisions and practices free of the barriers that may disadvantage disabled people. This will also make the organisation accessible to many other groups of people, as well as creating a positive workplace environment and a more committed workforce.”

It is also helpful to encourage employers to recognise that neurodiverse people such as those with autism spectrum conditions bring a distinct range of skills to their work that can be of positive benefit to an organisation. The provision of autism awareness training and other steps to raise awareness more widely in the workplace have an important role to play in increasing understanding.

## The trade union approach

As part of looking at how employers can remove barriers, unions may identify the kind of obstacles that could impact adversely on workers with autism spectrum conditions and suggest changes that could address these barriers. These could include both physical changes and changes to working practices.



It may be helpful to review key policies and practices within a workplace to see whether these take in to account the needs of workers with autism spectrum conditions, consulting with autistic members and negotiating with employers to amend or establish new policies and practices where needed. These policies and practices could include:

- Recruitment procedures
- Performance related pay and bonuses
- Performance management and capability policies
- Health and safety
- Equality and diversity policies
- Flexible working policy/working hours
- Family friendly policies
- Autism/neurodiversity policies
- Emergency leave policies
- Bullying and harassment policies
- Training policies
- Sickness, absence and disability policies
- Occupational health
- Return to work policies
- Grievance and disciplinary policies
- Redundancy and redeployment

The most important thing you can do, always, is to listen to the person and try to understand the issues they are facing. Remember that they may have had bad experiences in the past and may need to feel reassured that you support them and take their concerns seriously.

### Tips for reps from autistic members:

- “Ask about the best way of communicating with the member (phone, email or face to face).”
- “If supporting a member during a case, agree to set intervals for updates and stick to these even if there is no news. Not receiving any updates can cause extra anxiety.”
- “Don’t be afraid to ask questions to find out what is the best way you can support an autistic member.”
- “Help us get as much information in advance as possible – seeing questions in advance of any meetings/hearings can be very helpful.”



### Make union events, communications and meetings autism friendly - tips from the TUC’s guide to **Autism in the Workplace** by Janine Booth:

- Meetings should have a clear agenda and run to time as far as possible
- Procedures should be clear, so that members know when and how to raise the issues that they want to raise
- Keep good order in the meeting
- Consider the physical venue that you use for union meetings, particularly regarding sensory issues. Choose a venue (or arrange a venue that you already use) to ensure: minimum background noise; adjustable light levels; away from strong smells etc.
- Consider the location of your meeting venue – can you help with transport if it is hard to access?
- Offer help with childcare/carers’ costs to enable members with autistic dependants to attend meetings
- Ensure that union materials are clear and accurate
- Use a variety of formats – graphics, cartoons, videos etc. as well as words
- Do not allow union meetings to become dominated by jargon and cliquey banter



Not everyone with an ASC has a **formal diagnosis**. As your awareness of ASCs develops, you may find yourself recognising the traits and characteristics in other people (or even in yourself).

This recognition is likely to be experienced by others in the workplace, especially after awareness raising sessions. As a union rep, members who think they may have an ASC might approach you for signposting and support.

Sometimes members seeking support for individual cases (e.g. grievance or disciplinary), may disclose that they think they have an ASC. If you think that someone you are supporting as a union rep may have an ASC, it's important to address this sensitively. Be aware that some people may actively choose not to be assessed for a diagnosis – and they have a right to that choice.

Others may welcome the understanding that a diagnosis can bring. Many people with an ASC aren't diagnosed until later in life, and they may have experienced years of encountering barriers, feeling different, isolated and excluded – and not knowing why.

## Recognising autism in the workplace



It is important that trade union reps know their limitations as non-health professionals and have the right information to signpost colleagues to appropriate advice and support when required.

Routes to diagnosis are changing and vary in different parts of Wales. Official diagnosis of an ASC can only be done by a suitably trained specialist. NHS Direct Wales can provide specific up-to-date details for your local area.

**Remember that even if no-one has identified themselves to you as having an ASC, it is very likely that the people in your workplace and your members will be neurologically diverse.**

[www.nhsdirect.wales.nhs.uk/](http://www.nhsdirect.wales.nhs.uk/)

## TUC guidance on disclosure

### TUC guidance states:

“The issue that arises first is whether the worker will disclose that they are disabled either to their union representative, and/or to the employer. Where workers are from an agency, or are fixed term, or part time, they may feel particularly vulnerable and even less likely to disclose any impairment...”

“Where the worker has a visible impairment, this is not likely to be an issue, although even in these circumstances it can happen that members will refuse to define themselves as disabled for fear of the stigma attached to the term. Representatives and officers will need to be sensitive to such views, and to explain clearly the reason for the definition and the consequences of rejecting it.”

“A positive approach by both the union and the employer will help encourage members to disclose their condition. The best way to encourage members to disclose impairments is to have a disability friendly and disability-aware workplace in the first place. Where this is not the situation, it will be all the more important that the union uses all avenues to assure members that it is there to represent everyone, so that members feel confident to approach the union for advice and support.”

“Far more likely is that workers with so-called ‘hidden’ impairments may refuse to disclose these. An enormous stigma remains attached to some impairments... The pressure not to disclose a condition may turn out to be a powerful obstacle, however, to retaining employment. In these circumstances it is particularly important that union representatives have a proper understanding of disability and are able to deal sensitively with members.”

(From “Sickness absence and disability discrimination: TUC negotiator’s guide”)



## Addressing workplace **barriers**

Under the **Equality Act 2010** employers have a responsibility to make **reasonable adjustments** to remove barriers for disabled workers. Below are some examples of the barriers that workplaces can create, and some ideas of adjustments that employers could make to help address these.

Many factors will be involved in deciding what adjustments to make and they will depend on individual circumstances. ASCs affect people differently, and it should be remembered that workers with disabilities may often need different

changes, even if they appear to have similar impairments.

Employers should always seek to discuss the adjustments with the individual, otherwise the adjustments may not be effective. An employer should not seek to impose adjustments that have not been discussed and agreed by the disabled person, and they should take steps to ensure that the progress of any agreed adjustments is carefully monitored to ensure adjustments are fully implemented and effective.

### Environment

The sensory environment can have a huge impact on someone with an ASC. It may be that they need adjustments to the working environment. Some of these adjustments will be simple, others may require a little more creativity. The most important thing is to ensure that the worker with an ASC has control and is involved in any changes to their environment. There is no 'one-size-fits-all' approach that can be used to create a generic '**autism friendly environment**'. Important things to consider are:

Are there too many 'sensory stimuli' – lights, sounds, smells, moving objects – for the person? Remember that because of heightened sensitivities, people with an ASC may be aware of things that others aren't.

Is the person able to control their environment? Can they adjust lights, window blinds, computer screens, temperature and so on?

How predictable is the working environment? Does the person have their own workspace which is the same every day? Are they notified in plenty of time if any changes need to be made?

Is there a clear difference between the person's individual workspace and shared areas? Are shared areas also appropriate to the person's sensory needs? If not, are there alternatives?

Does the person need somewhere quiet to go and relax? Can they access it when they need it?

### Some adjustments may be:

Having a desk-space which is near a window to allow for natural light, rather than harsh artificial lighting.

Not working near noisy machinery. People with ASC may have a very different experience of 'noisy' – some people can hear the internal fan of a computer or the hum of a fridge in a nearby room very clearly, which people without ASCs may not notice at all.

Keeping clear of strong smells – perhaps working in a fully no-smoking environment, or requesting that colleagues not wear strong perfumes or after-shaves.

Adjustment to uniform or dress-code policy – some people with ASCs have very strong reactions to certain types of fabrics or clothing styles (e.g. clothes which are too tight or too loose and 'flappy').

Providing noise-cancelling headphones, so that people can concentrate without being distracted by background noises that they find hard to block out.

Special screen-filters that block some of the UV light emitted by computer screens, which may make text harder to read.

## Work tasks

The tasks that an individual performs as part of their job are also crucial. Important considerations are:

Does the person fully understand all the tasks they have to do? Have they had sufficient training? Is there a clear job description?

Are the tasks meaningful to the person? Do they understand the purpose of them?

Does the task make good use of the person's strengths, skills and interests?

Is there a clear set procedure for completing tasks? If not, is there an opportunity for the person to develop one for themselves?

Does the worker have enough time to complete the work required of them – bearing in mind any effects of their condition? Are deadlines realistic?

### Some adjustments may be:

A written document that outlines the person's tasks on a day to day or week to week basis.

A clear procedure for the completion of certain tasks.

A mutually agreed and managed reduction in output targets.

Recognition that some people may produce excellent quality but not as much quantity of work.

Specific 1:1 and tailored training – especially if the role involves using flexible thinking.

## Working with others

In workplaces where there is a lack of understanding about differences in communication and social understanding there can be barriers in working effectively with others. Employers can work to reduce them by considering:

Is communication clear, direct and effective? How does the person know what they are supposed to be doing? How is that understanding checked?

Does the person feel able to ask questions about their job? What if they have to ask more than once? Or several times?

Do the person's colleagues and managers understand that person as an individual?

Do they have a clear understanding of other people's roles as well as their own? Have they been told who to approach for help?

Is the person fully accepted where they work? Do they feel wanted, valued and cared about, or merely tolerated? How can they be involved in the team in a way that's right for them?

### Some adjustments may be:

Instructions coming from one central person – manager or supervisor.

A buddy or workplace mentor to help with any questions.

More frequent, timetabled meetings with the supervisor as an opportunity to receive feedback and for them to ask any questions.

Autism Awareness or Understanding Autism in the Workplace Training for the team and management team.

A recognition and observance of the person's comfort zone around banter and social chit chat.

Workplace support to help put in place any communication strategies that may benefit the individual.

### Using a collective approach to address common workplace barriers

Many employers believe they do not need to make any changes until a worker identifies themselves as having autism and requests an adjustment. However, there are many general changes that an employer could make to the workplace to create a better working environment more generally which could also help to improve accessibility for neurodiverse people.

Such general changes could include:

- a quiet room or space for relaxation
- reduction in sensory overload in the workplace – control of light, reduction of noise and strong smells
- neurodiversity and autism awareness training for staff and managers
- all instructions and policies to be communicated clearly and accurately
- all changes in working practices to be negotiated with the union, and proper notice given before they are introduced
- paid time off for trade union reps to attend trade union training and events about autism and neurodiversity

Such general changes may often be beneficial to many people in the workplace. It is also helpful, from a trade union perspective, to approach issues as a collective. Such general changes are not a replacement for individualised reasonable adjustments and do not remove an employer's duty to provide individual reasonable adjustments for disabled workers.



The ability to get, and keep, a job and progress in work is a key route out of poverty, and a central part of social inclusion. Adults with autism are significantly **under-represented** in the workplace.

Sometimes, employers may not be aware of the strengths that people with ASC can bring to the workplace. In many ways the differences seen in autism spectrum conditions can also be great strengths. Everyone with an ASC is an individual, but it may be helpful to raise awareness with

## Strengths and benefits of having a team member with an ASC

employers and others about the positive strengths and qualities that can be associated with the differences people with autism spectrum conditions experience.

- **Punctual and reliable:** People with ASCs often enjoy routine and structure and therefore make punctual and reliable employees. Once a routine/timetable is in place, they can be very good at sticking to it. This can also be beneficial when breaking down tasks.
- **Diligent:** With differences in social interaction, many people with ASCs are often strongly focused on their work, and not distracted by the urge to chat outside of break times. With a strong desire to complete a task once it's been started and the ability to concentrate for long periods of time they are less likely get bored or feel the need for variety.
- **Discreet:** Many people with an ASC will not engage in workplace gossip and will often not see the point in it. It is much better for people to focus upon fact not hearsay.
- **Polite:** Although the communication style of many people with an ASC can appear to be abrupt or to the point, they rarely intend to offend or upset others with this style of communication. In fact, most people with an ASC put a lot of effort into deliberately learning strategies which can result in them coming across as very polite, thoughtful and considerate.
- **Independent and perceptive:** Able to see creative solutions to problems, and tackle situations that can be improved but never have been, because "that's what everyone else does" or "that's just how we do things here". People with ASC are much less likely to accept those lazy explanations.
- **Excellent eye for detail:** Some people with ASCs have an exceptional ability to spot mistakes within the workplace and find creative ways to fix them – an invaluable skill in all kinds of jobs, from proof-reading to computer coding to mechanical engineering.
- **Highly logical:** People with an ASC often think in a more logical way which then transpires into their work. They are often able to create orderly processes in their roles/tasks and are able to follow complex procedures correctly.
- **Insightful:** With the different way in which people with an ASC think and see the world around them, they often notice details or patterns that other people might miss.



## A guide to the law: rights for workers with autism

People with autism spectrum conditions are defined as disabled people for the purposes of the **Equality Act 2010**. Under the Act, a person is considered to have a disability if they have a physical or mental impairment and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. Autism spectrum conditions should qualify as a mental and/or physical impairment.

Not everyone with an autism spectrum condition may identify themselves as disabled, but they would be defined as disabled for the purposes of the Act.

It should be noted that the Equality Act is based on the Medical Model of disability. The trade union movement has for many years supported the Social Model of disability, which is the reverse of the medicalised approach contained in UK law. The social model sees the disability not as a 'defect' of the individual but in the barriers put up by society that interact with the individual's impairment to deny them access to participation.

The social model is also used in the United Nations Convention on the Rights of Persons with Disabilities, which has been ratified by the UK government but which has not led to a change in the definition of disability contained in UK law. TUC guidance is therefore obliged to use the language of the medical model because this reflects what is found in the law.

### THE EQUALITY ACT 2010

Who is covered by the Equality Act?

The Act covers discrimination in employment and vocational training, the provision of goods and services, public functions, education, premises and associations.



The Equality Act prohibits discrimination on the grounds of disability (disability is a '**protected characteristic**' under the Act). This protection applies to 'workers', which means it gives the right not to be discriminated against to people such as contract workers and office holders, as well as employees. It also covers job applicants. The following actions by an employer are unlawful under the Equality Act:

- **Direct discrimination:** treating a disabled (for the purposes of this handbook, an autistic) person less favourably than other employees.

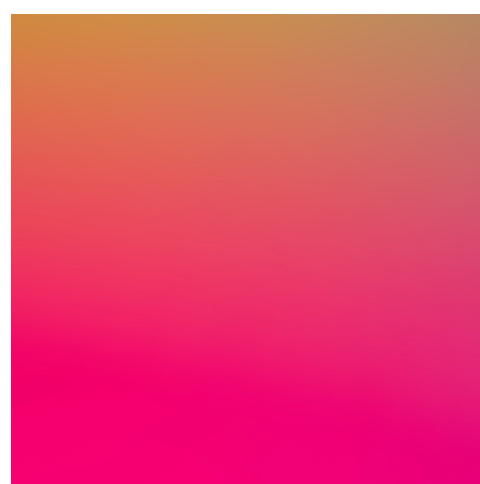
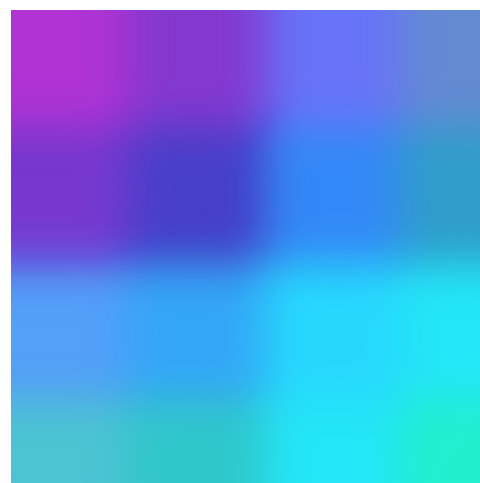
**E.g. if an employer gives a bonus to all workers other than the autistic worker.**
- **Indirect discrimination:** the application of a provision, criteria or practice to everyone that has particular disadvantages for autistic people compared to those who are non-autistic, and where the provision, criteria or practice cannot be justified as meeting a legitimate objective.

**E.g. if a promotion application process includes a social skills test that is irrelevant to the job being applied for and disadvantages an autistic applicant.**
- **Discrimination arising from a disability:** this occurs when an autistic person is treated less favourably because of something connected with their disability, and where the discrimination cannot be justified.

**E.g. if an employer dismissed an autistic worker because they rocked on their chair at work, even though they performed adequately in their job.**
- **Harassment:** engaging in unwanted conduct related to the worker's autism which has the effect of violating that person's dignity, or creating an intimidating, hostile, degrading, humiliating or offensive environment for the autistic worker.

**E.g. making 'jokes' about autism, or imitating an autistic worker in a derogatory fashion.**

From the TUC guide - Autism in the Workplace (Section 12: A guide to the Law) by Janine Booth.





## Reasonable Adjustments

A central part of the **Equality Act** is the requirement on an employer to make **reasonable adjustments** where a disabled worker would be at a substantial disadvantage compared to a non-disabled colleague. The requirement covers “provisions, criteria and practices”, “physical features” and “provision of auxiliary aids”.

### Failure to make a reasonable adjustment:

Once it has been established that the adjustment is reasonable, failure to comply is a breach of the law and cannot be justified.

What defines “reasonable” is (a) whether the adjustment is effective in removing the obstacle, (b) whether the adjustment is practical (c) the costs of the adjustment in relation to the resources of the organisation and (d) the availability of financial support (such as Access to Work).

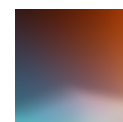
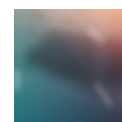
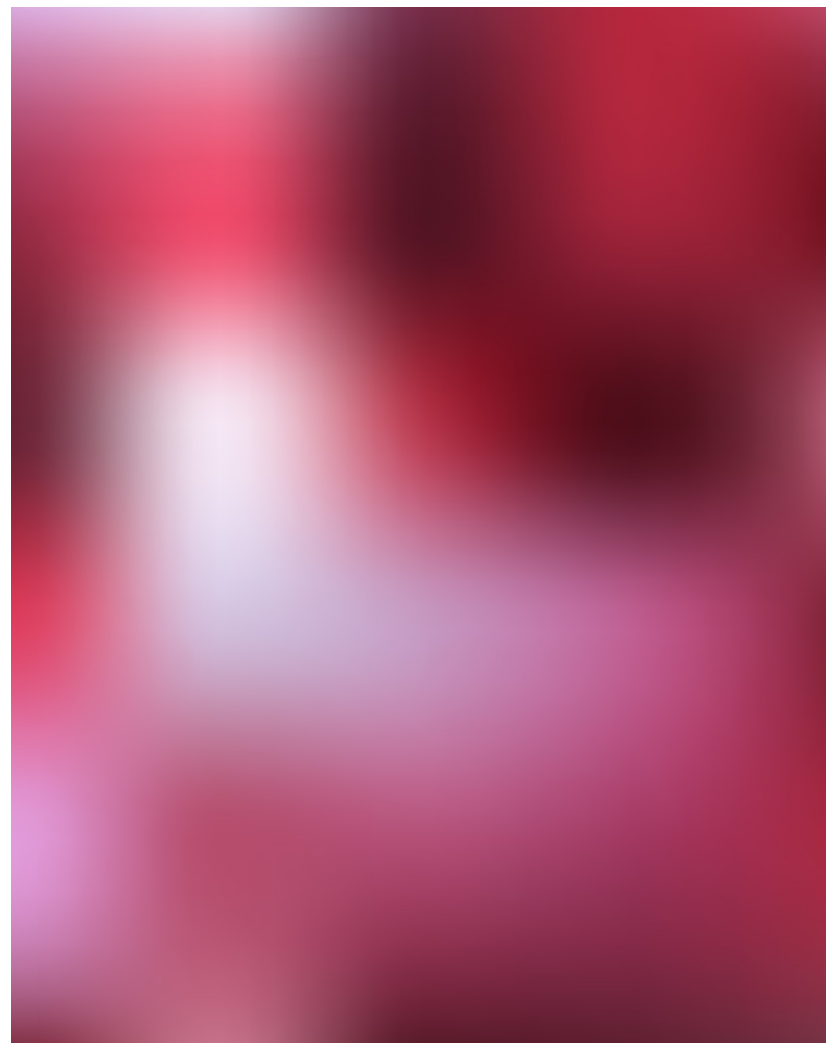
The Equality and Human Rights Commission Codes of Practice and its Guidance for Employers and Guidance for Workers present a clear account of what the law means in practice and lists a range of possible adjustments that fit the criteria. These are available from:

[www.equalityhumanrights.com](http://www.equalityhumanrights.com)

There are also some examples and case studies of reasonable adjustments provided in this toolkit in the **addressing workplace barriers** section on page 27. In every case it will be essential to discuss reasonable adjustments with the member concerned. Each case will have unique aspects, and an approach based on preconceptions about autism spectrum conditions is unlikely to be suitable for identifying the specific adjustments needed.

Access to Work funding may be available for some measures. Access to Work is a government fund that finances a range of different adjustments to enable disabled people to obtain or remain in work, see:

[www.gov.uk/access-to-work](http://www.gov.uk/access-to-work)



## Public Sector Equality Duty (Wales)

The Public Sector Equality Duty was created by the Equality Act. The duties are set out in the **Equality Act 2010** (Statutory Duties) (Wales) Regulations 2011 and came into force in April 2011.

The Welsh Government was the first government to bring in specific equality duties in order for public bodies to better perform their public sector equality duty.

The Act aims to ensure public authorities and those carrying out a public function consider how they can positively contribute to a fairer society in their day-to-day activities through paying due regard to eliminating unlawful discrimination, advancing equality of opportunity and fostering good relations.

Public bodies such as NHS Wales, local government and other bodies carrying out public functions are under a duty to consider equality when making decisions both in terms of service delivery and employment.

The Regulations place duties on the devolved public sector, including Welsh Government, covering equality impact assessments, publishing and reviewing Strategic Equality Plans, organisational objectives, engagement, pay differences, staff training, procurement, reporting arrangements and equality and employment information.

In Wales, there is a network of **trained trade union equality reps** in the public sector. Part of their role is to work with organisations to ensure that members' views and needs are represented and that organisations are meeting their statutory equality obligations.

You can find out more about trade union equality reps in your workplace from your own union. If you are interested in becoming an equality rep or would like to find out more, contact the Wales TUC at:

[wtuceducation@tuc.org.uk](mailto:wtuceducation@tuc.org.uk)

You can find out more about the Public Sector Equality Duty here:

[www.equalityhumanrights.com/en/advice-and-guidance/guides-psed-wales](http://www.equalityhumanrights.com/en/advice-and-guidance/guides-psed-wales)



## The Social Services and Well-being (Wales) Act 2014

The Social Services and Well-being (Wales) Act came into force in Wales in April 2016. The Welsh Government describes it as a “new law for improving the well-being of people who need care and support, and carers who need support for those who they care for”. The act changes the way that people access social services support.

In terms of the Act, “well-being” in relation to an adult, means well-being in relation to any of the following:

- physical and mental health and emotional well-being;
- protection from abuse and neglect;
- education, training and recreation;
- domestic, family and personal relationships;
- contribution made to society;
- securing rights and entitlements;
- social and economic well-being;
- suitability of living accommodation;
- control over day to day life;
- participation in work.

Under the Act, changes have been made to the way that people’s needs are assessed and the way that services are delivered, giving people more of a say in the care and support they receive. There is an emphasis on promoting a range of services and help within the community to reduce the need for formal, planned support.

People will still need to be assessed around their needs and their eligibility in order to decide what their care and support needs are. For adults, the assessment will help to find out what people want from their lives and look at what help they may need to achieve this.

The Act seeks to ensure that services are available to provide the right support at the right time, that more information and advice is available and that assessment is simpler and proportionate. Carers will have an equal right to be assessed for support. There are also stronger powers to keep people safe from abuse and neglect under the Act.

Local authorities are able to provide more information to those receiving support and to carers.

You can find out more about the Social Services and Well-being (Wales) Act here:

[www.legislation.gov.uk/anaw/2014/4/pdfs/anaw\\_20140004\\_en.pdf](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf)



## Autism Spectrum Action Plan Wales

Wales was the first country in the world to create an all-age strategy for autism. The first ‘**ASD strategic action plan**’ was published by the Welsh Government in 2008. In 2016 an updated plan was published, using feedback from people with autism and their families and carers.

An advisory group will monitor the plan’s implementation and it will be independently evaluated.

You can find more information here:

[www.asdinfo.wales.co.uk/strategy](http://www.asdinfo.wales.co.uk/strategy)

The updated plan will be supported by a new National Integrated Autism Service. The Plan outlines actions to:

- introduce a 26-week waiting time target from referral to first appointment for children with autism
- transform the education support for children with autism spectrum conditions
- implement a national assessment pathway for children
- improve employment opportunities for people with autism
- support organisations to become Autism-friendly
- raise awareness of information and resources.



This service is backed by £6m over three years. It will see specialist teams in every region providing diagnosis, support in the community and advice and information.





## A guide to the law: rights for parents and carers

Figures from Carers UK state that 1 in 7 workers in the UK are likely to be working whilst having additional caring responsibilities. This includes many workers who are parents of autistic children and those with caring responsibilities for adults with autistic spectrum conditions.

### The Equality Act 2010

The **Equality Act 2010** protects carers from discrimination in certain circumstances. Under the Act, a parent or carer of someone with an autism spectrum condition is protected from unlawful discrimination or harassment at work because of their caring responsibilities. This is because a parent or carer of someone with autism is 'associated' with someone with a protected characteristic (disability).

An example of unlawful direct discrimination in the workplace might be if someone is turned down for a job or a promotion due to their caring responsibilities.

The Act also protects carers of a disabled person from discrimination when shopping for goods, asking for and using services, and using facilities like public transport.

### The right to request flexible working

Since 2014, anyone who has worked for an employer for at least 26 weeks has the right to request flexible working arrangements. Prior to that the right had only been available to parents and carers. This right exists under the provisions set out in the Employment Rights Act 1996 and the regulations made under it.

Under the regulations, an employee must apply in writing and follow a prescribed procedure –

a union rep can help with this. An application for flexible working may include a request to change hours, times or location of work. For example, it could include things like asking for term-time only working or working from home.

Unfortunately, under the regulations, the right to request is only that; a right to request. Your employer does not have to grant your request but they must give it due consideration and must give 'business reasons' for rejecting an application.

In certain circumstances, it may be possible for the employee to challenge a rejection as discrimination. This is often the case when the person who has made the request is a woman with young children. Women still tend to have primary caring responsibilities so a refusal to allow flexible working is likely to put them at a disadvantage and could amount to indirect sex discrimination under the Equality Act. The employer rejecting such a request should be asked to explain how their insistence on standard, full-time hours is a proportionate means of achieving a legitimate aim (could they have accommodated the flexible working?).



## Parental leave

The **law** allows working parents, or others with a formal parental responsibility, who have worked for their current employer for at least 12 months, up to 18 weeks' leave for each child up to the age of 18.

Leave must be taken in blocks of a week, (unless the child is disabled, in which case leave can be taken in blocks of less than one week - including one day) for up to four weeks per year.

The leave is unpaid unless your employment contract states otherwise, and your employer can insist that you give 21 days' notice of your intention to take leave. Your leave entitlement is per child, so if you have more than one child who matches the criteria above you are entitled to more leave.

If you are returning from parental leave of four weeks or less you have the right to return to your original job. In other cases, if your original job is no longer available, then you are entitled to a similar job with at least the same status and conditions.

Some employers will provide a better entitlement than the legal minimum, including allowing employees to take parental leave in longer or shorter blocks and paying for part or all of your parental leave, so you should check your terms and conditions.

## Emergency leave

The Employment Rights Act 1996 provides for emergency leave. As an employee, you are entitled to take a '**reasonable amount**' of time off during your working hours for emergencies or other unforeseen matters that arise which affect your dependants.

Leave can be taken for a variety of reasons, such as:

- to assist when a dependant falls ill, gives birth or is injured or assaulted
- to make arrangements for the provision of care for an ill or injured dependant
- in consequence of the death of a dependant
- to assist a dependant in emotional distress
- when your dependant's care arrangements unexpectedly end or are disrupted
- to deal with an incident involving your child at school (or other educational establishment)

You have to tell your employer why you are absent and for how long you expect to be absent, as soon as reasonably practicable.

A dependant could be a spouse, partner, parent, child or someone who depends on an employee for care, for example an elderly neighbour. The law provides a detailed definition of who counts as a '**dependant**'.

There is no legal right to be paid for emergency leave but some employers may provide paid time off as part of the terms and conditions of employment. An employer who dismisses an employee because they took, or sought to take, emergency leave will be acting unlawfully. The law also protects employees from detrimental treatment arising from emergency leave such as forcing an employee to take annual leave to deal with emergencies, insisting on overtime working to make up the time or withholding a bonus or promotion because they have taken time off.

For further information on rights for carers, see also: Social Services and Wellbeing (Wales) Act (page 35).

The information in this section is based on TUC guidance, including "Time off and flexible working for carers", "TUC Guide to Equality Law 2011" and information from [worksmart.org.uk](http://worksmart.org.uk).





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Disabled Workers – A TUC Education Workbook

Sickness absence and disability discrimination: TUC negotiator's guide

TUC Know Your Rights – Time off and flexible working for carers

Epilepsy in the Workplace – A TUC guide

[www.worksmart.org.uk](http://www.worksmart.org.uk)

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This publication is also available in the Welsh language.

All TUC publications can be provided for dyslexic or visually impaired readers in an agreed accessible format, on request, at no extra cost.

This toolkit will be regularly updated, so we would welcome any comments or suggestions on how it could be improved. Please let us know if you notice anything that is out of date, unclear, or that you think may need correcting or updating.

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Disclaimer: The information in this toolkit is provided as general background information and should not be taken as legal, medical or financial advice for an individual's particular situation. Before taking any action, individuals should seek advice from a union and any appropriate professionals (medical, legal or financial) depending on their situation.

The Wales TUC Education Service is funded by Welsh Government.




CASE STUDIES

**autism** awareness in the workplace

FOR UNION REPS & OFFICERS

**asc** | autism spectrum  
connections cymru

 Ariennir gan  
**Lywodraeth Cymru**  
Funded by  
**Welsh Government**

  
**WALES TUC CYMRU**

# Autism Awareness in the Workplace

WALES TOOLKIT

CASE STUDIES

[ It is our differences that make us unique ]

## Case Study 1: Anxiety and ‘Meltdowns’

**D works as a data analyst, performing complex statistical investigations on specialist software.**

He has a diagnosis of Asperger syndrome and also has chronic anxiety.

When he first started in the role, he found that certain things raised his anxiety levels. Some of these were linked to the barriers around communication and social understanding that he experienced in his workplace – for example, having to ask colleagues or managers for help with work. Other triggers were sensory – for example, noise levels in the office or his phobia of thunderstorms. Changes to his schedule and difficulty knowing how to start tasks also caused a lot of stress.

When his anxiety reached unmanageable levels, D experienced ‘meltdowns’ at work. He would behave in ways that others deemed inappropriate for the workplace, and colleagues became concerned for his safety.

Because of his differences in communication and social understanding, D found that conventional ways of dealing with workplace stress – talking things through with his manager – did not help him, and in fact made him feel worse. Working together with a specialist autism employment support service, strategies were developed with him to allow him to communicate with his manager when his stress levels were high. These included putting stickers on documents to show where he needed help with his work, and a chart on the wall which he could use to monitor his anxiety. This meant that both manager and colleagues could help before things became impossible for him to manage alone; minimising verbal communication and allowing access to a quiet space.



### Things to think about:

- People with autism spectrum conditions are much more likely than the general population to experience chronic anxiety. Why do you think this is?
- In this example, conventional strategies didn't work well for the person, so it was important to think creatively about what would work instead. What do you need to consider when coming up with creative alternatives?
- The alternative strategy in this case involved using visual instead of verbal communication. What could you do if you were working with someone with an autism spectrum condition who preferred to communicate in this way?

## Case Study 2: ‘Unwritten Rules’

**C works as a tutor for a vocational training organisation. He has a diagnosis of Asperger syndrome.**

C interacted very well with his learners, but found other aspects of workplace communication difficult, especially when it came to interacting with colleagues. He felt that people saw him as ‘rude and abrasive’, though that was never his intention – he was simply being direct and efficient in his communication. He sometimes annoyed colleagues by interrupting them when they were busy or in private meetings; they thought that it should have been obvious that they were unavailable because of their body language or their position in the office, but this was far from obvious to C because he didn’t instinctively understand those signals. He offended others by making personal observations or commenting on their work, not realising that they would be embarrassed.

The adjustments put in place to help C have been all about learning. C has worked with an employment support specialist to improve his understanding of the ‘unwritten rules’ of communication. And his colleagues have also received autism awareness training in order to improve their understanding of C and his differences.

### Things to think about:

- What are some of the ‘unwritten rules’ that apply in your place of work that govern how and when people interact? What are the possible consequences of not knowing them?
- Considering what you’ve learned about autism spectrum conditions so far, what do you think are the most helpful things for managers and colleagues to be aware of if they work with someone with an ASC?



## Case Study 3: Dealing with Change

### **P has recently qualified as a radiographer. She has a diagnosis of Asperger syndrome.**

P's Asperger syndrome means that she has a strong preference for predictability and routine, and quick or unexpected change is especially stressful for her.

The hospital where she works provides a very thorough 6-month induction, during which new workers get to experience lots of different departments and see how other specialisms operate. This meant that she underwent a great deal of change when she was still very new to the job, and sometimes change was quite unexpected - to the extent that she became highly anxious. She also had a great many meetings which had to take place as part of the induction process – with managers, mentors and the occupational health department, for example – and became especially anxious when she didn't know what these meetings were going to be about or what they were for.

The adjustments were simple, but made a big difference to her. She was given at least 24 hours' notice before changing department, so she never had to go to work wondering what she would be doing that day. Correspondence requesting that she attend meetings is now clearer and states the purpose of the meeting, and she gets to see in advance what will be discussed at her work appraisals. She has access to a quiet space to take time out if she gets anxious and needs a few minutes to implement the stress-management techniques which she has learned.

### **Things to think about:**

- Consider a typical day in your job role. Do you have a clear plan at the start of the day for what you're going to be doing? By the end of the day, how much have you been able to stick to that plan? How do you think a person would feel doing that role, if they were uncomfortable with change?
- What is the induction process like at your place of work? Are people guided in gently, or 'thrown in the deep end'? How much freedom do people have to adapt their induction to their preferred learning style?

## Case Study 4: Time Management (Executive Functioning and Central Coherence)

### **J works at a law firm as a case-handler. He has a diagnosis of Asperger syndrome.**

Since starting work at the firm, J has had a lot of difficulty managing his time. He was consistently behind on his work targets, had lots of late deadlines flagged up on the internal computer system, and wasn't progressing to handling more complex cases as quickly as his peers. He was also making mistakes – sending out the wrong correspondence, or classifying information incorrectly on the computer. He ended up being placed on a performance improvement plan.

J's induction had been very fast, and he was expected to be handling live claims within a week of starting. He was taught how to do this with desk-side coaching in the office, which proved an inefficient way of learning for him as there were too many distractions. When he asked more experienced colleagues for help, he found that each one gave a slightly different answer – and those slight differences left him completely confused. There are also prompts on the internal computer system which remind him to do some tasks, but the descriptions of what the person needs to do are only partial, and again he found this completely confusing.

Reasonable adjustments have involved helping J to plan and prioritise his tasks, with short one-to-one meetings with his manager every morning. He has also created very detailed charts, lists and flow-diagrams which can guide him through the process. He has one single point of contact who he can go to with questions. And his work targets have been relaxed, to enable him to clear his backlog of work.

### **Things to think about:**

- How do you like to plan and organise your time? Do you use timetables, task-lists and process charts, or do you always 'just wing it'? Does your workplace allow you to manage time and tasks in a way that works best for you?
- People who don't know much about autism spectrum conditions are often surprised when people who display evidence of very high intelligence (e.g. getting a law degree) struggle with seemingly simple tasks (e.g. saving a document in the right folder on a computer). What is it about these tasks that can make them difficult for some people? What about the way the tasks are communicated?
- Try writing or describing a 'process plan' for a fairly simple task you do regularly at work or at home. Try to include every step, broken down into as much detail as possible. How many different steps does a 'simple' task actually require?

## Case Study 5: Sensory Processing

**F worked from home as a freelance writer, but was thrilled to be offered a 9-5 job at a local museum where she volunteered. She has a diagnosis of Asperger syndrome and dyspraxia.**

F found that the sensory environment of the museum – gentle lighting, quiet rooms and plenty of space – was absolutely perfect for her. But she found travelling to work a struggle. Getting on the bus every morning meant dealing with a noisy environment, packed with people who would sometimes bump and jostle – something that her heightened sense of touch and poor balance made very uncomfortable indeed. She would arrive at work feeling highly anxious and physically exhausted, and her timekeeping began to be affected. One day she ‘froze’ while getting off the bus, fell, and was off work for a few days with an arm injury.

On her return to work, an adjustment was agreed: she would change her working hours to arrive and leave an hour earlier. This meant that she could avoid the ‘rush hour’ and travel when public transport was less crowded. She was also allowed to work from home several hours a week.



### Things to think about:

- The person in this case study had a good sensory environment when she was at work. What things might make a sensory environment difficult? What impact might an inappropriate or poorly adapted sensory environment have on a worker with autism spectrum condition?
- How much control do people in your place of work have over their sensory environment? Can they adjust the lighting, heating or ventilation? Is there a lot of noise that they have to block out somehow, or are there quiet, private work-spaces available? What things could a person with heightened sensitivities change easily themselves, and what things would need a more formal reasonable adjustment process?
- In this case, the adjustment was negotiated when the person had an obvious visible health problem (an arm in a sling) as well as an ‘invisible condition’ (Asperger syndrome). Do you think this made a difference? How easy or difficult is it for people in your place of work to talk about invisible conditions? What can be done to help people understand them better?

## Case Study 6: Workplace Relationships

### **M works in retail, as the assistant manager at a branch of a major high-street chain.**

She is an excellent salesperson, and her product knowledge is superb. She also has a great eye for design, and loves creating enticing visual displays that generate lots of extra footfall in the shop. She consistently exceeds her sales targets, and since joining the staff team the shop has vastly increased its revenue.

However, her working life has always been difficult. Since starting work at the store, she has been the subject of numerous complaints by colleagues and junior staff members, and some of these have resulted in disciplinary investigations. Several times she has lost her temper when the store has been cluttered or stock has been mislabelled on the shelves, and shouted and sworn at colleagues. When more junior colleagues create window displays that are not up to her exacting standards, she completely re-does them without consulting anyone. Her perfectionism and harsh criticism of others (sometimes in front of customers or other staff) have led to several allegations of workplace bullying, and several people have left the store because they feel unable to work with her.

M has recently taken time off work due to stress. At a GP appointment to arrange a fit note, the GP referred her to the community mental health team for an assessment. As a result of this, she has just received a diagnosis of an autism spectrum condition.

### **Things to think about:**

- M now has to make a decision – should she disclose her diagnosis to her employer or not? What might be some advantages of telling them about it? What might be some potential disadvantages? If she did choose to make a disclosure, what support might be helpful for her to do so?
- M's condition has led to disciplinary action being taken against her. If a rep were supporting her through the disciplinary process, what do you think would be the most important things for them to take into account?
- It's an unhelpful myth that all people with autism are abrupt, abrasive or rude; however, some people do have a communication style that others may well find difficult. How would you feel about supporting someone like M? What support might you need to do so effectively?

## Case Studies 7 & 8: Illegal discrimination by management

### 7. Worker with Asperger syndrome and a learning disability

“AB worked as a golf club green keeper and had no problems for 13 years. A new boss made him wear highly visible clothing, banned him from using a motorised vehicle, gave him an unfair amount of heavy work, violently knocked a rake out of his hands, pushed him and swore at him, gave him a verbal warning and ridiculed him by giving him a child’s game as his staff Christmas present. AB resigned and took a claim for constructive dismissal and disability discrimination.”

(The case was won and AB was awarded £78,000).

### 8. Worker has Asperger syndrome and dyslexia

“AD worked as a hotel chef. His boss paid him less than half the minimum wage and did not pay him for working extra hours. The boss threatened to sack him for ‘taking too much off the end of a cucumber’, and threw frozen bread rolls around the kitchen. AD resigned and took a claim for unfair dismissal, disability discrimination and breach of minimum wage law to Employment Tribunal”.

(This case was won and AD was awarded £40,000).

#### Things to think about:

- What are the issues for workers with autistic spectrum conditions raised by these two case studies?
- What can unions do to support members who are subject to discrimination, and challenge discriminatory behaviour by employers?

(Case studies 7 and 8 are from “You don’t look disabled”: supporting members with invisible impairments – A TUC Guide).



## Case studies 9 and 10: Members with caring responsibilities for autistic dependants

### 9. Mo works in a ticket office for a railway company, and has a young daughter who has autism.

His daughter needs a very stable and predictable home routine, but Mo's roster meant that one week, he was doing early shifts, the next week late shifts, etc. His daughter was very distressed. He applied for 'flexible working' to have regular hours, but his manager was hostile. She grudgingly agreed to a short period of fixed hours, but undermined it from the start. A trade union representative accompanied him to all the meetings and challenged the manager's attempts to put him back on the round-the-clock roster.

Union members organised a petition of his workmates supporting Mo's fixed-hours arrangement, which made the manager look rather silly when she claimed that his workmates had complained about it!

The case was reported to the union branch, and members would have been willing to take industrial action in support of Mo.

When the manager failed to follow the policy and tried to cancel the fixed-hours arrangement, the union appealed to a higher-level manager, and got Mo's hours restored to what he needed.

### 10. Lynn, UNISON rep in a London borough council:

"I represented a member – ironically, a social worker in a learning disability team, my team! She has three children, the oldest of whom is a young adult with a learning disability and autism who lives at home with my member, who is the main carer.

"The member was having problems getting the leave she needed for specific things, such as community dentist appointments, which are very stressful – even when the leave was recommended by the professionals who were supporting her.

"She was also experiencing problems with long-term flexible start times. Her daughter is picked up to go to the college but times vary, and she needs to be at home until the bus arrives. This should not be a problem in our team at all.

"Trade union representation helped her a great deal, as when management saw she would challenge them and had support, they backed down.

"And our union has benefited too, as she is now chair of our Black and Minority Ethnic members' group!"

#### Things to think about:

- How do these case studies show how workplaces can present difficulties to workers with caring responsibility for an autistic dependant?
- How have unions helped to achieve progress towards making these workplaces more autism-carer friendly?
- What changes could be made to make your own workplace more autism-carer friendly?

(Case studies 9 and 10 are from the TUC guide to Autism in the Workplace by Janine Booth.)





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## What can you do in the workplace as a trade union rep?

**10** ways to make a difference in your workplace

- 1** Raise autism awareness at meetings with management – ask managers to provide a training budget for awareness raising training for all staff
- 2** Encourage employers to sign up to the national “Positive about working with autism” employer charter scheme at [www.ASDinfo.wales.co.uk](http://www.ASDinfo.wales.co.uk)
- 3** Attend the Wales TUC’s accredited course for union reps - Autism Awareness in the Workplace
- 4** Make your union meetings and communications more autism friendly - look at the communication tips section for ideas
- 5** Consult with autistic members to review workplace policies and negotiate changes to make them more autism friendly
- 6** Ensure that your workplace has an autism or neurodiversity policy or that autism and neurodiversity issues are addressed in your workplace equality policy
- 7** Support individual members with autism, parents and carers of those with autism to get the specific adjustments they need
- 8** Display autism awareness information on the union noticeboard, on the intranet or in communal areas such as canteens
- 9** Set up a learning event or discussion at a union meeting – invite a guest speaker from an autistic people’s organisation
- 10** Ensure that your union’s structures and activities for disabled members are well-publicised and autism friendly and that members with autism feel welcome to get involved

## What can your employer do?

There are number of things employers can do:

- 1 Commit to a training budget to provide autism awareness training to all managers and staff
- 2 Work cooperatively with unions to ensure all workplace premises, policies and practices are autism friendly and that all changes are made in consultation with unions
- 3 Familiarise themselves with and utilise resources available on the [www.ASDinfoWales.co.uk](http://www.ASDinfoWales.co.uk) website, including:
  - advice on interviewing a candidate with autism
  - advice for managers
  - advice for co-workers
- 4 Sign up to the Wales “Positive about working with autism” charter on the [www.ASDinfoWales.co.uk](http://www.ASDinfoWales.co.uk) website
- 5 Establish an autism and neurodiversity policy or include autism and neurodiversity into an equality policy (in consultation with unions)
- 6 Familiarise managers with ACAS resources on neurodiversity which include examples of organisations demonstrating good practice and employer case studies  
[www.acas.org.uk/index.aspx?articleid=5858](http://www.acas.org.uk/index.aspx?articleid=5858)
- 7 Engage with projects to support people with autism to get into work such as the Welsh Government backed Wales Anchor Companies Autism and Employment Project. Working as part of the project, ASC Cymru’s ACCESS employment service provides a range of developmental programmes to people with autism who are looking to gain workplace opportunities. The project is keen to support work tasters, work experience and paid roles within businesses. A well-established training, assessment and consultancy service is also available to employers and employees with autism. [www.asc-cymru.org](http://www.asc-cymru.org)

## Communication tips for union reps and colleagues 1











- The most important thing to remember is that everyone with an autism spectrum condition (ASC) is different and that everyone sees the world differently, particularly around communication, interaction and thinking styles.
- If you're not sure, **ASK** the person directly how they like to be communicated with. This simple step could save a lot of stress and confusion!
- Some people with an ASC enjoy banter, chit-chat and general social conversation; others don't. If you are working with someone who doesn't, don't take it as a reflection on you or your colleagues. It doesn't mean they don't like you – it just means they are not comfortable with casual social interaction or small talk in the workplace.
- Always try to keep your communication as clear and efficient as possible. It may help to take a moment to think about exactly what you want to say and what you need the person to understand. Don't assume that you've made something obvious, unless you've clearly stated it, in words, directly.
- Consider the environment if you need to have an important conversation. Many people with an ASC find that their sensory differences make it really hard to communicate in some circumstances – if the place is noisy, for example, or if there are lots of other people around. Turn off the TV or the radio, if you have them in the background, and keep distractions to a minimum.
- Remember that many people with an ASC find making eye contact uncomfortable. If they seem to be avoiding your gaze, it's not because they're bored, insincere or disrespectful – it's part of their condition. If someone seems to have a fixed gaze, offering too much eye contact, they may be trying to compensate for this difficulty, though this can inadvertently come across as challenging. Don't get into a 'staring contest'!
- Never make assumptions about people with ASCs. The fact that these are spectrum conditions means that there will be a very wide range of skills, abilities and differences between different people. It is not helpful to make assumptions or adopt a 'one size fits all' approach.



## Communication tips for union reps and colleagues 2



-  Remember that some people with an autism spectrum condition (ASC) find it difficult to ask for help. They're unlikely to be offended if you sensitively offer it, if you think they might be experiencing difficulties. Be specific: if someone looks lost, "Would you like me to show you where the staff room is?" is usually more helpful than, "Are you ok?"
-  Try to use language that's direct and unambiguous. Many people with ASCs have difficulty understanding metaphors, sayings and figures of speech. Explain workplace slang or professional jargon if you have to use it – people with an ASC may find it more difficult to 'pick up' specialised language.
-  If you ask someone with an ASC a question, they may assume that you want an answer as it may not be obvious when the question is meant rhetorically. Don't ask questions if you don't want an answer (like, "Can't you see I'm busy?").
-  If the question is "Can't you see I'm busy?" the answer might be "No, I can't"! Remember that people with ASC may have difficulty understanding things like body language and tone of voice, which might make that kind of thing obvious to a 'neurotypical' person but not to someone with an ASC.
-  Likewise, be careful with sarcasm. When we say something sarcastic, it's our expression and tone of voice that tells others that we don't really mean what we say, and people with an ASC can find it hard to understand these instinctively.
-  Affectionate teasing can be misunderstood for the same reason, and be inadvertently hurtful.
-  It sometimes takes people with an ASC a little longer to "get their thoughts in order" and to come up with a way of expressing what they want to say. Be patient, and avoid the temptation to speed things up by saying things for them.
-  It can often help to recap at the end of a conversation or a meeting, to check that the person has understood. It may be difficult for the person to question you, so explicitly invite them to – "is there anything you'd like to ask?"

## Sources of information and signposting 1



### **[www.asdinfowales.co.uk](http://www.asdinfowales.co.uk)**

The national site for Wales for autistic spectrum conditions. Here you will find information about autistic spectrum conditions, service details, training opportunities and updates on the implementation of the ASD Strategic Action Plan for Wales. It includes resources for employers such as the 'positive about working with autism' charter and downloadable resources that can be shared with individuals with ASCs, their families and carers.



### **[www.senedd.assembly.wales/mgOutsideBodyDetails.aspx?ID=470](http://www.senedd.assembly.wales/mgOutsideBodyDetails.aspx?ID=470)**

National Assembly for Wales Cross-Party Group on Autism.



### **[www.asc-cymru.org](http://www.asc-cymru.org)**

Autism Spectrum Connections Cymru (ASC Cymru) is a Welsh charity which provides specialist autism services and works as part of the Autism Initiatives group of charities. As a specialist charity it is understood that each person's autism will impact upon them in unique ways and they will therefore work in partnership with them and those close to them, to develop and achieve their own goals using a strength based model of support, shaped around each individual.

Its 21 High Street team offer focussed 1:1 support around key areas such as housing, employment and benefits advice. They can also meet with individuals to discuss problem solving in a number of areas, as well as providing a variety of social opportunities throughout each month. People can also access independent advocacy through 21 High Street, Cardiff, CF10 1PT, +44 2920 228 794, [info@asc-cymru.org](mailto:info@asc-cymru.org).



### **[www.autismeurope.org](http://www.autismeurope.org)**

Autism Europe.



### **[www.autisticuk.org](http://www.autisticuk.org)**


Autistic UK.





### **[www.acas.org.uk/index.aspx?articleid=5858](http://www.acas.org.uk/index.aspx?articleid=5858)**


ACAS - information and resources on neurodiversity.


## Sources of information and signposting 2


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**[www.equalityhumanrights.com/en/commission-wales](http://www.equalityhumanrights.com/en/commission-wales)**  
 Equality and Human Rights Commission Wales – information on the Public Sector Equality Duty and guidance on Reasonable Adjustments.
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**[www.autism.org.uk](http://www.autism.org.uk)**  
 National Autistic Society.
- 

**[www.valeofglamorgan.gov.uk/en/living/social\\_care/adult\\_services/autism\\_in\\_the\\_vale/adult\\_autism\\_advice/adult\\_autism\\_advice.aspx](http://www.valeofglamorgan.gov.uk/en/living/social_care/adult_services/autism_in_the_vale/adult_autism_advice/adult_autism_advice.aspx)**  
 Adult Autism Advice is an information and signposting service for adults in the Vale of Glamorgan. They provide advice for adults with high functioning autism and Asperger syndrome. You do not need a diagnosis to contact them.
- 

**[www.theautismdirectory.com](http://www.theautismdirectory.com)**  
 The Autism Directory is a large searchable database of information about services, including autism-friendly places.
- 

**[www.gov.uk/access-to-work](http://www.gov.uk/access-to-work)**  
 Access to Work funding may be available for some reasonable adjustments. Access to Work is a government fund that finances a range of different adjustments to enable disabled people to obtain or remain in work.
- 

**[www.janinebooth.com/](http://www.janinebooth.com/)**  
 The website of trade union activist, author and poet Janine Booth, who wrote the TUC's Guide to Autism in the Workplace. She has also recently published a book called Autism Equality in the Workplace which is available as a hard copy or e-book from Jessica Kinsley Publishers.
- 

**Signposting information about routes to diagnosis:**  
 If you think you may have an ASC and are looking for more information, you may find a test available online called the AQ50 test. Whilst this doesn't offer a diagnosis it can act as an indicator and a catalyst for your GP to refer you to a specialist.  
 Routes to diagnosis are changing and vary in different parts of Wales. Official diagnosis of an ASC can only be done by a suitably trained specialist. NHS Direct Wales can provide specific up-to-date details for your local area.  
[www.nhsdirect.wales.nhs.uk/](http://www.nhsdirect.wales.nhs.uk/)

## A simplified personal action plan

This resource sheet is intended to help union reps supporting members with autism spectrum conditions (ASCs). It can be used as a 'checklist' to help identify and consider workplace barriers and issues that might affect someone with an ASC. It can also be used to help structure discussions with individual members. Part 1 can be used to identify and consider barriers that exist in the workplace. Part 2 can be used to identify and discuss reasonable adjustments that could be helpful for removing those barriers. As a tool, it can be a good way of understanding the needs of a member with an ASC better. It isn't intended to replace an occupational health assessment or a specialist workplace assessment.

Part 1 – Identifying barriers created by the workplace	
Differences in social interaction	
Differences in communication	
Differences in thinking and behaviour	
Sensory challenges	
Opportunities to utilise interests and strengths	

Part 2 – Creating an ASC friendly environment – potential reasonable adjustments to address the barriers identified in part 1

Adjustments taking account of differences in social interaction

Adjustments taking account of differences in communication

Adjustments taking account of differences in thinking and behaviour

Adjustments taking account of sensory differences

Adjustments to best utilise interests and strengths



## Glossary 1

### A

#### **ADHD**

Attention deficit hyperactivity disorder. Difficulty with concentrating for a long time, sitting still, controlling impulses and thinking through decisions before acting on them. People with an autism spectrum condition are statistically more likely than average to also have ADHD.

#### **Ambiguous**

Having two or more possible meanings. For example: “Bob isn’t coming to the meeting. Tell John we’ll see him next week.” The word ‘him’ could refer to either Bob or John.

#### **ASC**

Autism spectrum condition. (See below, autism spectrum).

#### **Asperger syndrome**

A form of autism that affects the way a person communicates and relates to others. People diagnosed with Asperger syndrome often have fewer problems with language compared to those with other forms of autism. They are less likely to have a learning disability as a co-occurring condition.

#### **Atypical**

Something that does not conform to a usual type or expected pattern. For example, neurotypical refers to expected or ‘normal’ neurological development, while neuro-atypical refers to unusual or unexpected neurological development.

#### **Autism spectrum conditions**

A group of related neurological developmental conditions, including autism, Asperger syndrome and “pervasive developmental disorder not otherwise specified”. The conditions feature atypical brain connections leading to atypical development. These can range from very significant to very mild differences in thinking, perceiving and communicating.

#### **Autistic spectrum disorder (ASD)**

Another term sometimes used for autistic spectrum condition.

### C

#### **Central coherence**

Refers to a person’s ability to see the ‘big picture’ in a mass of details. For example, someone with strong central coherence might see a forest, while someone with weaker central coherence might see lots of individual trees.

#### **Childhood Disintegrative Disorder**

A diagnostic term for children with autism spectrum conditions. As it is now known that all ASCs are lifelong conditions it is now very rarely used.

#### **‘Classic’ autism**

One of the diagnostic terms you may hear. It is usually used to differentiate a diagnosis from Asperger syndrome.

#### **Cognition**

The mental actions or processes of learning, thinking, reasoning, experiencing and sensing. The term cognitive empathy refers to the ability to know what another person thinks, believes or intends (as opposed to how they are feeling emotionally).

## Glossary 2

### D

#### **Co-occurring conditions**

Some (not all) people with an ASC may also have other conditions such as ADHD, dyscalculia, dyslexia or dyspraxia. As these conditions are not on the autism spectrum they are often referred to as ‘co-occurring conditions’.

#### **DSM**

The Diagnostic and Statistical Manual of Mental Disorders, which is used by clinicians in the United States and elsewhere to diagnose autism spectrum conditions. The current edition is the fifth edition, referred to as DSM-5.

#### **Dyslexia**

A condition which can affect a person’s ability to process and remember information they see and hear. This can affect the acquisition of literacy skills such as spelling and letter recognition. It is not an autism spectrum condition, although people may have both an ASC and dyslexia.

#### **Dyspraxia**

A condition which affects a person’s motor skills or muscular control. It is not an autism spectrum condition, though many people who have an ASC also have dyspraxia.

### E

#### **Echolalia**

Repeating words or phrases that the person has just heard. Some people with autism spectrum conditions do this, especially as children.

#### **Equality Act (2010)**

The legislation which prohibits discrimination against people with certain “protected characteristics”. This includes autism spectrum conditions, defined as a disability under the Act. (It replaces the Disability Discrimination Act 1995).

#### **Executive functioning**

Things like forward planning, decision making and carrying out planned actions. Some people with autism spectrum conditions find this difficult.

### H

#### **‘High functioning autism’**

A slightly misleading term, as it does not describe how well people function in day-to-day life. Someone with ‘high functioning autism’ is simply someone who has a diagnosis of an ASC but does not also have a learning disability. See also low functioning autism.

#### **Hypersensitivity**

Increased sensitivity to certain things is common for people with autism spectrum conditions. They may be uncomfortable with, for example, loud noises, strong smells, bright or flickering lights.

#### **Hyposensitivity**

Decreased sensitivity is also common for people with autism spectrum conditions. Examples may include weak vision or finding it difficult to focus visually on objects, not noticing smells, or a poor sense of balance.

## Glossary 3

### N

#### **Neuro-**

When added to other words, 'neuro' refers to the physical brain, for example in words like neurodiversity and neurotypical.

#### **Neurodiversity**

Recognising that there is a wide range of difference in how people's brains work. The 'neurodiversity movement' advocates for better understanding and inclusion of people with conditions like ADHD, autism spectrum conditions, dyslexia, dyspraxia and mental health conditions.

#### **Neurotypical**

Sometimes used, especially by people within the neurodiversity movement, to refer to people with more 'normal' or 'typical' brains. The opposite is neurodivergent.

#### **Non-verbal**

Communication without using words, for example posture, gesture and facial expression. Sometimes people who don't speak aloud are referred to as 'non-verbal', though if they communicate with language in other ways (e.g. by typing or using sign-language) the correct term is non-speaking.

### O

#### **Obsessive Compulsive Disorder (OCD)**

A mental health condition which causes intense anxiety and strong compulsions to complete certain repetitive actions such as hand-washing or checking that doors are locked. People with autism spectrum conditions are statistically more likely to also have OCD.

### P

#### **Para-verbal**

The ways in which people speak, for example their tone, pitch and volume of voice.

#### **Pathological Demand Avoidance Disorder**

A diagnosis which is considered part of the autism spectrum. It refers to having a fear of the demands of day-to-day living as well as the more usual traits of the autism spectrum.

#### **Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS)**

A diagnosis which is considered part of the autism spectrum. Its precise meaning remains vague, and people very rarely receive it as a diagnosis now.

### S

#### **Savant**

At one time, people with autism spectrum conditions were often believed to have near-superhuman talents, in areas such as mental arithmetic, spatial logic or the ability to draw complex plans or play sophisticated music after a single exposure. In fact, savant abilities are extremely rare. People with ASCs do, however, often develop exceptional abilities related to their special interests.

#### **Self-stimulatory behaviours**

Behaviours which people with an autism spectrum condition may use, to help with sensory processing, stay calm in stressful situations or express their mood. Common examples involve flapping hands, rocking gently in a seat or twirling their hair.

## Glossary 4

### **Sensory processing**

The way we perceive the world around us. People with autism spectrum conditions often have different sensory processing to others. They may experience hypersensitivity, hyposensitivity or both.

### **Special interests**

Many people with autism spectrum conditions have at least one subject or topic which they're especially interested in. This could be anything, and many people love collecting information related to their special interests.

### **Spectrum**

A scale with two extreme points. It is not limited to specific values, but can vary infinitely between the two extreme points.

### **Stimming**

A common name for various types of self-stimulatory behaviours (see above).

**T**

### **Triad of Impairments**

Traditionally a diagnosis of autism is based on a person showing 'impairment' in three areas: social and emotional, language and communication, and imagination. Research is now suggesting that there may be other factors that are at least as important.

**U**

### **Unambiguous**

The opposite of ambiguous, not open to interpretation and having only one meaning.

**V**

### **Verbal communication**

Speaking and understanding the spoken word. Some people with autism spectrum conditions have difficulty with verbal communication, especially when they are stressed. They may prefer to communicate in other ways, such as by typing or writing things down.