

Aspiring Psychological Professions (CoP)

Introduction to Neurodiversity

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28 May 2024



Aim for today

Working with neurodiversity

Being a neurodiverse person

Help and support in the workplace/University

Special Interest Groups/Working Groups/Staff Groups

Quiz

How often is neurodiversity talked about within your place of work/study/home – never, often, sometimes, always

What words are used to talk about neurodiversity

How do people with neurodiversity experience our psychological services?

Neurodevelopmental disorders (NDD)

Autistic spectrum **disorder** (ASD)

Attention **Deficit** Hyperactivity **Disorder**

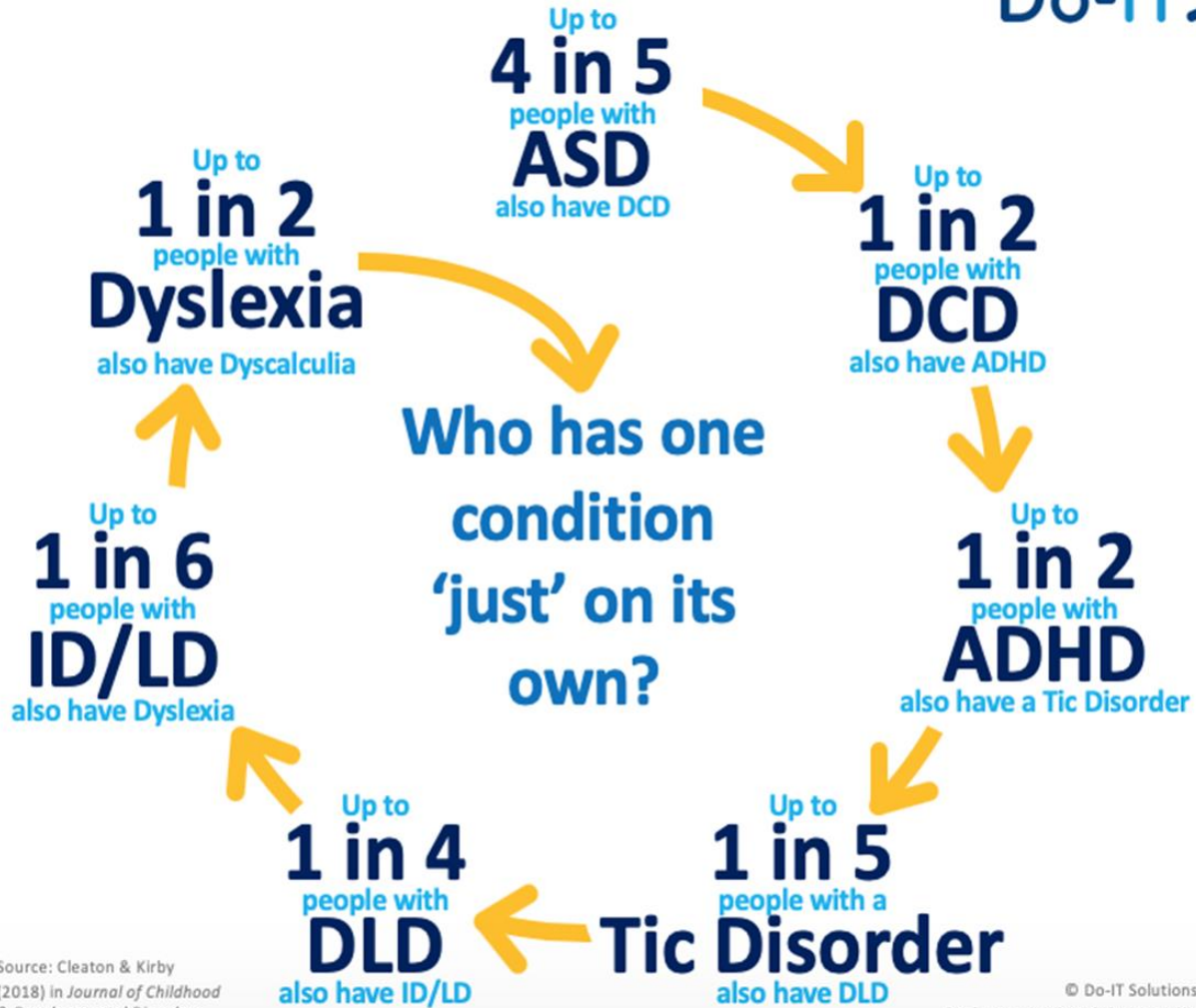
Dyscalculia

Dyslexia

Tourettes **syn**drome

Developmental co-ordination **disorder** (DCD)/**Dys**praxia

Do-IT>



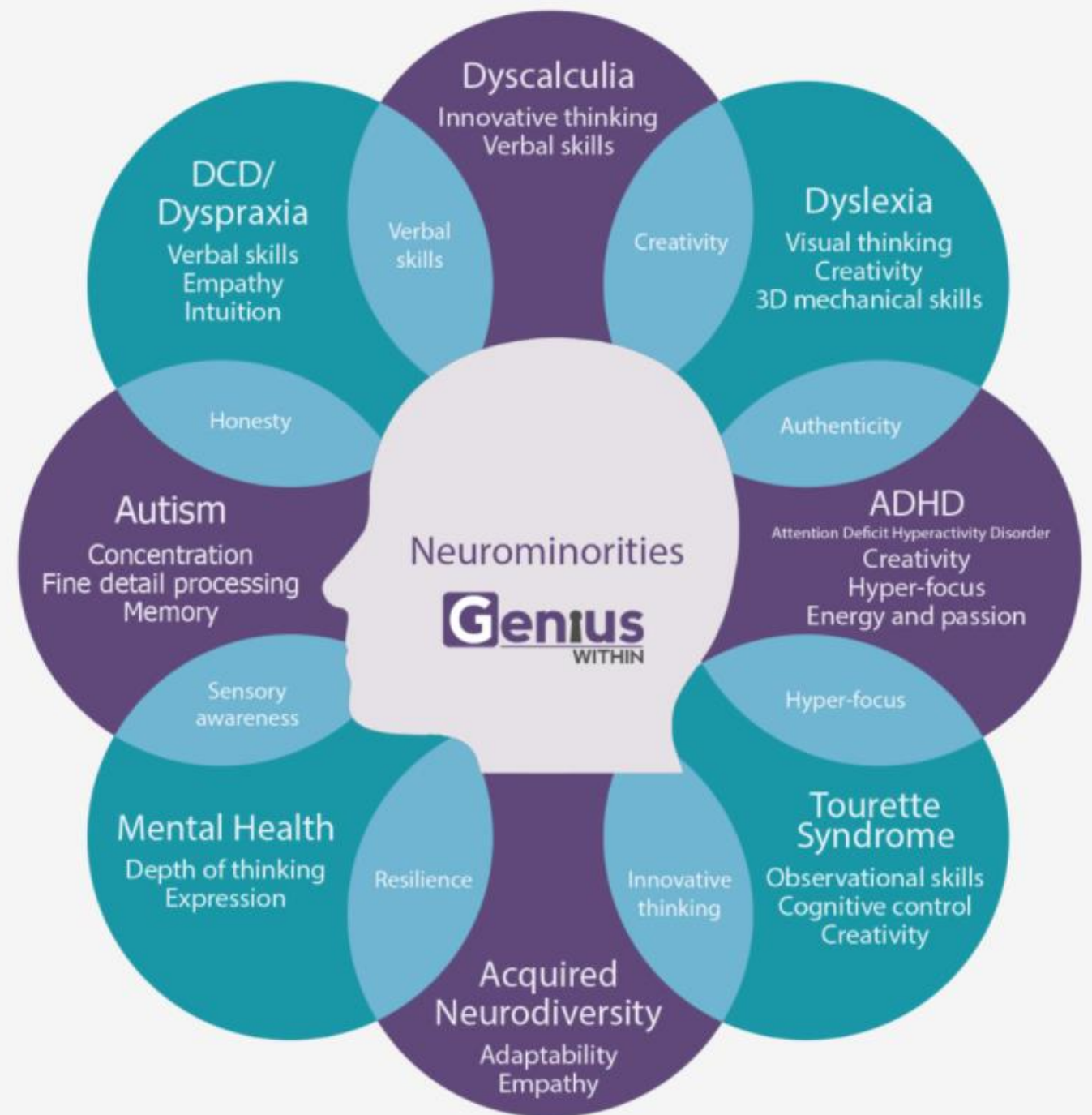
Be aware of comorbidity/
co-occurrence

In my Language (start at 3mins)
[https://www.youtube.com/watch?
v=JnylM1hl2jc](https://www.youtube.com/watch?v=JnylM1hl2jc)

Neurodiversity within clinical practice

Neurodiversity is the diversity of human minds, “the concept that all humans vary in terms of our neurocognitive ability. Everyone has talents and things they struggle with. However, for some people the variation between those strengths and weaknesses is more pronounced, which can bring talent but can also be disabling.”

<https://geniuswithin.org/what-is-neurodiversity/>



Reasonable Adjustments



Public Health
England

Guidance

Reasonable adjustments: a legal duty

Updated 15 September 2020

Contents

1. What we mean by reasonable adjustments
2. What we mean by learning disabilities
3. What you might notice if someone has learning disabilities
4. Health of people with

1. What we mean by reasonable adjustments

Under the [Equality Act 2010](#) public sector organisations have to make changes in their approach or provision to ensure that services are accessible to disabled people as well as everybody else. Reasonable adjustments can mean alterations to buildings by providing lifts, wide doors, ramps and tactile signage, but may also mean changes to policies, procedures and staff training to ensure that services work equally well for people with learning disabilities.

Curiosity and Context



Before Meeting the Person



ENVIRONMENT



ACCESSING
SERVICE



SETTING THE
SCENE

Assessment and treatment

- Listen/ask how they talk about themselves
- Use of language – “ASD”, “autistic person”, “person with autism”
- Other Neurodiversity use persons language
- Delivery of sessions
 - Do they want someone there with them?
- Length of sessions – short/long/tel./video
- Adapting material
- Ask how they learn, record things – build on that encourage a therapy notebook if relevant
- Sending voice-memos instead of emails/texts (consent first!)
- Text-to-speech software
- Clear, concise and specific information about what to expect from the service and sessions
- Bullet notes after via email
- Be Authentic

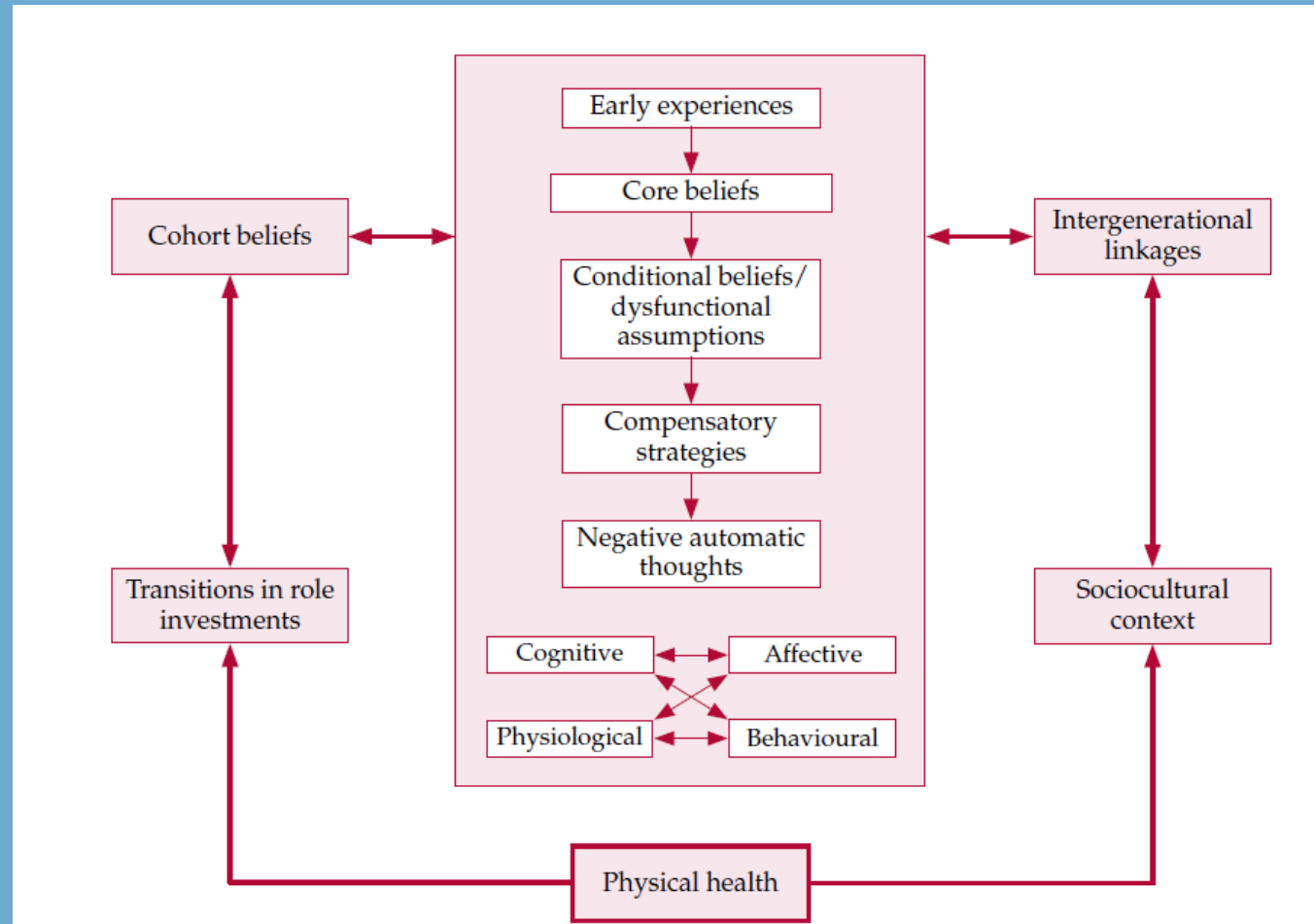
Specific questions to ask



- When were you first diagnosed with [autism/ADHD/ADD/dyslexia...]? What did you make of this?
- What support, if any, were you offered at this time?
- How does autism/ADHD/ASD/dyslexia... impact on your school/work/social life/hobbies?
- What support for autism/ADHD/Autism/dyslexia..., if any, have you been offered or found to help?

Data Sets – do they make sense to the person

Formulations - making sense



Lazy, forgetful, stupid, clumsy, can't do anything right, careless, inconsiderate, loud, messy, daydreamer, good for nothing, weirdo, argumentative, does not apply self, selfish, ditzy, *only* interested in what they want to do, dirty, annoying...,

Exploring Strengths/weaknesses



- Everyone has their own strengths, weaknesses and preferences in ways of learning new information. Do you have a preference in any of these approaches?
- What, if anything, are you really interested in? [draw on to make sessions meaningful and explain theories via analogies using their interests]
- Is there anything that you already know is not helpful for you in conversations?
- Do you have any concerns about remembering/attending appointment times that we can problem solve together?
- Do you have a preference whether you have support through treatment sessions? (E.g.: family member, friend, carer)
- Do you have any sensory sensitivities? (e.g: distracted by various noises, dislike loud noises, visual sensitivity (brightness, busy backgrounds, colour))
- How did you find our conversation today? What went well? Is there anything you'd like me to do differently next time?

Sensory issues – Autistic people

An autistic person might be over or under sensitive to the senses (sight, sound, smell, taste, touch, vestibular, (balance), proprioception (body awareness), interoception (internal, hunger, thirst) - the role these play in anxiety,

Think “too much information, or not enough stimulation” – sensory seeking / sensory avoidance

Impacts on emotional regulation – can be more challenging to regulate, however other strategies can help

May present issues around, food, clothing, routine

Basic needs – hard to regulate emotions if hungry, cold, thirsty – Autistic people might not be aware of these needs, so might need reminders, alarms, visuals

See <https://www.autism.org.uk/advice-and-guidance/topics/sensory-differences/sensory-differences/all-audiences>



BALANCE - OUR VESTIBULAR SYSTEM

• Fear of heights • Difficulty sitting still, always moving and seeking movement • Dislike tilting their heads or being upside down • Appear to be clumsy and lack typical motor movement coordination • Has difficulty riding a bike, jumping, hopping, or balancing on one foot • Can be a thrill seeker at times and does not see risk or danger • Rocking or spinning excessively



BODY AWARENESS - OUR PROPRIOCEPTIVE SYSTEM

Applies too much pressure when writing or colouring-in • Appears too rough when touching other children or animals • Appears clumsy, uncoordinated and have difficulty performing everyday activities • May enjoy tight clothing or lots of layers • Always full of energy, on the go, loud and active • Walks with heavy feet, sounds like stomping • Fidgety when seated



TOUCH - OUR TACTILE SYSTEM

Bothered clothing, socks, tags, certain materials • Touching things constantly • Avoids groups of other children, may fear unexpected touch • Avoids outdoor play, may dislike the wind on their skin • Difficulty holding a pencil or using scissors • Dislikes finger painting and using glue or clay • May walk on their toes



HEARING - OUR AUDITORY SYSTEM

May be extremely sensitive to auditory input and appear stressed or anxious • Covers their ears when they are exposed to sudden or loud noises • Have difficulty determining where a sound is coming from • Distracted by seemingly normal background noises, not able to filter them out • Either some delay or confusion when following verbal directions • May have normal hearing but has difficulty organizing, interpreting or remembering auditory input



SIGHT - OUR VISUAL SYSTEM

Difficulty maintaining eye contact • Has trouble copying information from one place or page to another • Struggles keeping place while reading • Has a hard time tracking a moving object • Gets tired with reading or homework • Exhibits characteristics of dyslexia, reversing words or letters when copying • Difficulty judging space and distance



SMELL - OUR OLFACTORY SYSTEM

Sensitive to even typically pleasant or normal smells, causing stress or anxiety • Refuses certain foods due to their smell • Bothered by typical household or cooking scents, perfumes and aftershaves • Determines whether he or she likes someone as a result of how they smell • Excessively smelling when introduced to objects, people or places • Uses smell to interact with objects • Seeks strong odours



TASTE - OUR GUSTATORY SYSTEM

Fussy or picky eater, preferring to eat foods with familiar tastes and textures • Only eats "soft" or pureed foods past 2yrs of age, may gag with textured foods • Has difficulty with sucking, chewing, and swallowing • Fearful of going to the dentist or having dental work done • Dislikes or complains about toothpaste and mouthwash • May lick, taste, or chew on inedible objects past the toddler years • Complains or reacts adversely to smells

Communication

Autism is neurological, so you can't simply train a person to be neurotypical e.g. making eye contact (can further reinforce negative core beliefs)

What works for the person?
Longer to process verbal information? Preference to written information, or diagrams? Drawing, stimming whilst talking?

Adapting the environment
– lights dimmer? Having sessions when the office is less busy?

Stick to what you say, or give notice where possible

Say what you mean – avoid metaphors

ADHD

Executive function & memory

Sitting still

Interrupt

Focus



Dyslexia

<https://www.bdadyslexia.org.uk/advice/employers/creating-a-dyslexia-friendly-workplace/dyslexia-friendly-style-guide>



Neurodiversity in the Workplace

Support as a clinician

WORK:

Access to Work

<https://www.gov.uk/access-to-work>

Manager/supervisor/clinical leads

Allies/Buddies

Studying:

<https://www.gov.uk/disabled-students-allowance-dsa/eligibility>

University and/or College student support services

Signposting



National Autistic Society

<https://www.additudemag.com/category/adhd-add/>

ADHD UK: <https://adhduk.co.uk/>

CHADD: CHADD - Improving the lives of people affected by ADHD

The British Dyslexia Association

Audio guides:

<https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/mental-wellbeing-audio-guides/>

ADHD Foundation:

<https://www.adhdfoundation.org.uk/wp-content/uploads/2022/03/>

Special Interest Groups (SIG)

BABCP : <https://babcp.com/Neurodiversity-SIG>

Within workplace:

Autism and Talking therapies SIG

Neurodiversity Working Group – champions from service

ND@HPFT – staff network (trust wide)

Quiz

What might you do differently now when working with neurodiversity

In your current practice

As a work/study colleague (ally)

If you are neurodiverse

Flexibility with Neurodiversity



Inspiring Neuroaffirmative clinicians

Dr SUZY YOUNG : <https://www.psychology-services.uk.com/susan-j-young>

Dr NANCY DOYLE <https://geniuswithin.org/our-team/prof-nancy-doyle/>

INSTAGRAM : Cherish Graph 'AuDHD_therapist'

Dr. Megan Anna Neff blog : <https://neurodivergentinsights.com>

Dr Amanda Kirby <https://neurodiversityatwork.co.uk/bitesize-blog>

Any Questions...

