

## Call for healthcare staff to beware of discriminating against autistic people

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Healthcare staff need to challenge their own assumptions about what is 'normal' if they are to provide non-discriminatory care to autistic people, according to authors writing in the journal *Learning Disability Practice*.

'Insider' descriptions of living with autism in a world where most people are not autistic may at the same time inform and challenge a professional approach to what can be termed as 'autistic behaviour'. The authors draw on the perspectives of the 'neurodiversity' movement, people who themselves have diagnoses on the autistic spectrum but reject that autism is a disorder, choosing instead to fight for their right to be autistic.

They include a case study to explore how such descriptions and perspectives can be applied to services supporting an autistic service user. The authors conclude that, regardless of whether autism is seen as a difference or a disorder, care staff providing services to autistic service users may need to examine their <u>assumptions</u> carefully if they are to avoid discriminatory practices.

The authors, from Norway, refer to newer research giving voice to autistic citizens, as well to the 'neurodiversity movement', an international movement of autistic self-advocates who regard autism as a difference rather than a disorder.

'For many autistic people, some of the greatest environmental barriers are to be found in <u>social interaction</u>, especially interaction with 'neurotypicals', the term devised by the neurodiversity movement to



describe persons who are not autistic, the "normal" majority,' they say.

The authors illustrate some of the challenges of non-discriminatory care with a <u>case study</u> about 'Sally', who lives in care home for adults with autism and <u>intellectual disability</u>.

One of Sally's activities is going for a walk accompanied by staff. Sally likes to stop for up to 20 minutes at a time to interact with the environment around her. She frequently stops by flagpoles, puddles and bushes - Sally likes to pull on branches and watch them move. But for staff, 'going for a walk' means walking continuously to one a specific place and returning home in the same manner, so they invariably prompt her to move on.

'Preconceptions that staff members bring to the situation seem to make it harder for them to recognise and acknowledge Sally's branch pulling as a pursuit of "interests and hobbies". If they are like most neurotypical people, such activities have no great part in making their own lives fulfilling,' the authors explain.

They go on to add that the 'uncritical use of "neurotypical standards" as guidelines on, for example, what behaviours are meaningful and what interests are considered legitimate when designing services for autistic service users, may bring staff into the territory of indirect discrimination'.

They challenge <u>healthcare staff</u> caring for autistic people to ask themselves questions such as 'where our choices limit the choices and actions of autistic service users, do these limitations spring from a need to protect other people's boundaries and uphold fundamental societal values or do they spring from our own need to make what seems strange, less strange'.



**More information:** Owren, T., and Stenhammer, T. (2013) Neurodiversity: accepting autistic difference, *Learning Disability Practice*. 16, 4, 32-37. <a href="www.learningdisabilitypractice.co.uk/">www.learningdisabilitypractice.co.uk/</a>

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