

Neurodiverse people (nds) tend to face many disabling barriers which others do not tend to face. Also the umbrella disability movement tends to be very unaware at best, and actively hostile at worst, to nd concerns. These barriers, as well as a refusal by most of even the user-led disability movement until very recently to recognise us as disabled, continue to result in gross underrepresentation of nds. I have come across compelling evidence (e.g. emails sent to DANMAIL), that even some leading DAN activists share this attitude. There is only one Disability Rights Commission commissioner who declares himself to be ND. There are none that I am aware of on the BCODP executive.

There is as yet no legal requirement on the umbrella disability movement that they should guarantee the representation of all major impairment groups, let alone minimum levels of representation for each impairment group. To make them properly representative a form of proportional representation is necessary, enforced by a Code of Practice and then if that does not work by legislation.

The Nothing About Us Without Us principle applies. Therefore we need to meet as soon as possible.

Our main specific disabling barriers are increasing, designing out nds and include:

1. Lack of awareness in general, including within the umbrella disability movement.
2. Apparent impairmentism. The stereotype that most disabled people "look disabled", whereas in fact 70%+ have non-apparent impairments. Reinforced by a lack of media outlets for non-apparent impairments. Where is the ND equivalent to "See Hear"? Where are the ND equivalents to "alight here for the Royal National Institute of the Blind"?
3. Institutional barriers to greater participation in the disability movement, e.g. job adverts that require significant grant-based fundraising and managerial experience. As grant-based funding for user-led nd organisations is practically non-existent, this effectively stops nearly all nds from getting responsible jobs within the Disability field.
4. Open plan environments (sensitivity to lights, noises etc, especially multiple stimuli). This is made worse by the mania for more and more open plan environments. Also, so called "accessible transportation" standards are actually made worse for many nds because of getting rid of "old fashioned" quiet enclosed carriages. The real reason for this as an ND District line manager has told me is that the open plan ones are "cheaper to maintain".
5. Lack of soundproofing, let alone of lightproofing.
6. No provision for this in "accessible housing", including "accessible housing" standards or in points systems.
7. Requirements to multitask.
8. Requirements to be "good communicators" and "good with people" (read: with non-nds (neurotypicals or nts). Though most communication problems with customers are with nds, in my experience, where a bit of nd awareness or an nd on the scene might have helped. How is it that in my last job I was the one who successfully dealt with most of the "difficult customers" that others could not deal with? Probably because most of them were undiagnosed nds.
9. Elimination of specialised job roles and administrative support, forcing many nds to try and often fail to do their own administration.
10. Lack of proper access to diagnosis, let alone treatment.
11. Lack of awareness amongst nds that neurodiversity exists let alone that they are nd.
12. Lack of awareness to hyper and hypo sensitivity in nds amongst medical professionals. Therefore a failure to microdose and macrodose where necessary.
13. Dismissive attitudes (disbelief through to accusations of laziness and misdiagnoses of depression, schizophrenia and sectioning from professionals, especially doctors), let alone the public. This is in contrast to the sympathy (though this can be nauseatingly

patronising) shown to wheelchair users, the deaf, the blind and others with more obvious impairments.

14. Information overload, exacerbated by the short-term memory problems that nearly all nds have.
15. Complexity of information (and the sequencing of it). If this is "poorly sequenced" that may be why!
16. Lack of understanding of the organisational difficulties most nds have.
17. Lack of information in nd-accessible formats.
18. Lack of understanding of social interaction differences (e.g. in tone and pitch of voice, attentional span). This leads to such problems as missummarising what we are saying. This is getting worse as more and more social conformity is demanded, and the excellent English eccentric tradition is eroded.
19. Lack of nd-accessible computer equipment (especially for mainframes),e.g. spell checkers, effective voice recognition software which takes into account variable tone and pitch of individuals. Let alone things like reverse letter dyslexia software.
20. Lack of adjustment of employment interview and assessment procedures to take into account ND strengths and weaknesses.
21. Pollution and additives - exacerbate the allergies that many hypersensitive nds have.
22. Lack of understanding of the pervasiveness of nd conditions. Most people think that they are just "specific learning difficulties" ("splds").
23. Arbitrary IQ cut off point of 70 for access to Learning Disability Services under Valuing People. The initial version of "Valuing People" specifically excluded people with Asperger's Syndrome. Only after pressure from Angela Browning, MP for Tiverton (Conservative) whose son has Asperger's, and the National Autistic Society, was this changed. However, this has not been widely communicated to people on the ground, and in practice nds of all sorts continue to be excluded. The situation is even worse for nds without an Asperger's diagnosis.
24. Reinforcement of the above exclusion for those with Asperger's (who are classified as people with Autistic Spectrum Disorders (ASDs) through subsequent developments. As the National Autistic Society report "A place in society" (May 2004), p.2, column1, para 3, **Misconception reinforced**, puts it, "The recent *Fair Access to Care Services* guidelines for England reinforce the misconception that the support needs of people with ASD pose a minimal threat to their ability to live independently, through a case study featuring a person with Asperger syndrome under the heading 'low risks to independence'." (Department of Health (2003). *Fair Access to Care Services: Practice Guidance*, DoH: London, 2003, p.26.
25. Institutionalised exclusion of nds on official bodies that are supposed to deal with the aspects of neurodiversity. The All-Party Parliamentary Group on Autism (APPGA) Autism Manifesto group and its committees and subcommittees, organised in collaboration with the National Autistic Society (NAS) where they sometimes meet, has failed to include anyone on the autistic spectrum on it even though the NAS has finally got someone on the board. A classic case of policy about NDs being created without any input from NDs! Needless to say issues like the open plan environment problems got left out.