

## What is Neurodiversity?

Neurodiversity is about how our brains process information and how we think, as we can be wired differently. This includes concentration, language, sound, images, light, texture, colour, touch, smell, taste, perception, sequencing, movement, social communication, reading, writing, attention, hyperactivity, speech, thought and memory.

Four of the major neurodiverse types related to autism are listed below. Bipolar and schizophrenia are also classed as neurodiverse conditions.

## What is Autism Spectrum Disorder (ASD)?

An Autism Spectrum Disorder varies from person to person. Fundamentally it means that the person has difficulties in the following areas: Social Communication, Social Interaction and Social Imagination. ASD is a lifelong developmental disorder and people with ASD often demonstrate repetitive behaviour patterns, narrow obsessional interests and resistance to change. They can have unusual sensitivity to their environments.

It can affect how they talk with people – they can be very literal, not understanding jokes, lack understanding when to start or end a conversation and not knowing what to talk about. They find it hard to make and maintain friendships, lack awareness of social rules, can find others confusing and unpredictable, they may have inappropriate behaviours and manners. Asperger's Syndrome is a type of Autism.

## What is Dyslexia?

Dyslexia is a learning disability and can affect all levels of intelligence. This is when the development of automatic skills may not match up to an individual's other cognitive abilities. They are characterised by difficulties in the following areas: Auditory Processing, Literacy, Numeracy and Working/Short-Term Memory. Some adults may have severe dyslexia and may not be able to read or write.

Dyslexia can affect how they process and extract words, making sense from written material and cause weaknesses in reading and spelling words. It can also affect how they remember things for a short time and mean that they have difficulty holding on to several pieces of information without referring to notes.

## What is Dyspraxia?

Dyspraxia may be seen as clumsiness. It's generally recognised to be an immaturity or impairment of the planning, organisation of movement and co-ordination. It affects the following areas: Gross and Fine Motor Skills, Perception, Thought, Speech and Language.

It affects how people move their bodies, how they see and think about the world and how they speak and use words.

## What is Attention Deficit Hyperactivity Disorder (ADD/ADHD)?

Attention Deficit Hyperactivity Disorder is a genetic and neurobiological disorder found in adults as well as children and is defined and based upon observations about how people behave in the following areas: Attention Span, Hyperactivity and Impulsiveness.

They can have difficulty keeping attention, getting easily distracted can also concentrate so intensely on something that they become unaware of their environment. People can become bored, daydream, often lose things and struggle to follow instructions. They may have too much energy, keeping busy, fidgeting, sublimation, very impatient, act without regard for consequences and difficulty waiting their turn. They don't always stop and think before they do things, acts on a whim, and acts on urges too readily, poor organisation and planning ability.

## More information

The above conditions are not mental illnesses. They are development disorders and are associated with learning difficulties. Some people think you can catch them, you cannot. There is a genetic connection. Individuals may have more than one neurodiverse condition as they can overlap each other.

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# Guidelines for The Police and Emergency Services

**Neurodiversity**  
Autism Spectrum Disorder (ASD),  
Dyslexia, Dyspraxia and  
Attention Deficit Hyperactivity  
Disorder (ADD/ADHD)



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## What to do ...

- 🌟 **DO** ask them if they have an ID Neurodiversity Alert Card/Wristband if they do, ask them to show you.
- 🌟 **DO** contact family and/or carers as soon as possible.
- 🌟 **DO** keep your language simple and direct, using the person's name to get their attention and then use short sentences e.g. Sam please sit down or Sam please get in the car.
- 🌟 **DO** explain to the person why they are there and what you are going to do. They may not recognise the police uniform, police care or understand what is expected of them.
- 🌟 **DO** simple closed and direct questions. Use visual cues to increase understanding e.g. photos, symbols, writing, drawings, objects etc.
- 🌟 **DO** allow the person extra time to process and respond to questions. If you interrupt them then they may have to start again or become overwhelmed.
- 🌟 **DO** check for understanding as they are unlikely to tell you that they do not understand. Be clear to minimise misunderstanding or misinterpretation.
- 🌟 **DO** support them if they are left in custody, as self harming behaviours can occur in times of stress and they are vulnerable around others due to their lack of social understanding.
- 🌟 **DO** take into account medical issues, e.g. people with ASD are at a higher risk of having seizures.
- 🌟 **DO** be clear of the outcome of seeing the person, i.e. what is expected of them in the future, what they are meant to/not meant to do etc.
- 🌟 **DO** keep choices simple due to problems with understanding.

## What not to do ...

- 🌟 **DON'T** make the person wait in a crowded, noisy room. This will increase anxiety.
- 🌟 **DON'T** expect them to understand body language, gestures, tone of voice or facial expressions. Be concrete in what you say.
- 🌟 **DON'T** use abstract ideas and phrases due to literal interpretation, e.g. saying "jump in the car" may lead to the person physically jumping in the car.
- 🌟 **DON'T** take lack of eye contact as a sign of rudeness or guilt. It can be hard to process a lot of information as the face has a lot of detailed information.
- 🌟 **DON'T** attempt to stop flapping, tapping, rocking, pacing etc. behaviours unless it is essential.
- 🌟 **DON'T** invade their personal space unless necessary. Restraint should only be used if they are a definite risk to themselves or others.
- 🌟 **DON'T** ask several questions at once as you are likely to cause confusion.
- 🌟 **DON'T** assume that inappropriate behaviour is deliberate, it may be the only way that a person can cope with a stressful situation.
- 🌟 **DON'T** shout.
- 🌟 **DON'T** think they are deliberately being rude or disrespectful if they talk inappropriately or on seemingly irrelevant topics. This is likely to increase in times of stress.

## Remember Stay Calm

## What to be aware of...

People with Neurodiversity can be extremely sensitive to specific sensory stimuli and this varies depending on the individual. It is important to think about the senses when talking to the person.

### Sensitive Vision:

Turn off fluorescent lights where possible or flashing stimuli and be wary when using flashing sirens.

### Sensitive Hearing:

Limit the amount of noise in the room, e.g. close windows, turn off siren etc. Don't shout.

### Pain:

People with this card/wristband can have a very high or low pain threshold and may demonstrate an unusual response to pain, including laughter, humming, singing, taking clothes off etc. They may not tell you if they are injured, so look out for bleeding, signs of injury etc. They may also find certain touch painful, so do not touch the person, even to guide them somewhere.

A person with a condition can easily be overloaded with sensory information in busy places, such as the front desk, where there are lots of people etc. The way in which this sensory overload is dealt with depends on the individual. It can trigger a fight or flight reaction. Some may rock, tap objects, talk incessantly, pace, repetitive questioning etc., whereas others might withdraw, place their fingers in their ears etc. These behaviours help calm the individual so it is very important not to stop these behaviours unless necessary, as this may lead to more challenging behaviour.

The **DOs** and **DON'Ts** mainly apply to people with ASD/ADD/ADHD but may be helpful for other neurodiverse conditions.

*This leaflet is a guide only, everyone is different, difficulties vary from person to person, these guidelines are there to inform your judgment not replace it.*

