

GETTING AUTISTICS/ASPIES JOBS AND OFF PUBLIC ASSISTANCE

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PART 1

THE IMPACT OF AUTISM/ASPERGER'S PERCEPTIONS ON AUTISTIC/ASPIE EMPLOYMENT

THE NECESSITY FOR EFFECTIVE SYSTEMS IN ENABLING MUTUAL COOPERATION

Many Autistics/Aspies have a deep hostility towards the "system," "status quo," "proper protocols," etc. due to their extreme difficulty fitting in. However, "systems" are not inherently bad, the problem is that many of them lack the proper balance between firmness and flexibility. If a system is not firm enough, it does not enable individuals with inherently incompatible needs and wants to cooperate with each other so everyone can have their needs and wants met.

If it is not flexible enough, however, it will undermine the abilities of individuals to function in the manner most effective for them. Such individuals will be doomed to fail in areas they would otherwise succeed in if they were able to do things the way that works for them. The projects that I have been most successful with had well defined systems that were based on LESS ON RULES AND MORE ON TOOLS, combined with being given the leeway to use them at my own discretion. This enabled me to effectively respond to the specific circumstances that I found myself in.

The system that is set up to meet the social service needs of the United States has openings that allow private organizations to be part of the system. The Autistic community needs to recognize that these openings do exist so we can create our own sub-system, within the greater system, that will be more effective in meeting our needs.

THE 6 LEVELS OF PREPARATION NEEDED FOR AUTISTIC EMPLOYABILITY

- 1) **None:** Some Autistics/Aspies have been fortunate enough to find the right job/vocation that they can hold indefinitely. Most of them were able to find the right career path out of high school, although some have been able to figure it out later in life.
- 2) **An unabridged understanding of Autism:** Some Autistics may only need a complete understanding of Autism/Asperger's and how it plays out for them to find the right job/vocation. This means they need more than just an itemized list of all of their struggles; they also need recognition of their inherent strengths as well.
- 3) **Restoration of the Autistic's shattered self-confidence, resulting from them believing there is no hope that they can obtain the self-improvement necessary for employment:** This starts with them witnessing Autistics/Aspies in level 2, progress to level 1. Only then might some of them open up their minds to the possibility that they can achieve more than society thinks they can.
- 4) **Extra support because the extent of their disabilities will be more limiting in their employment options:** Autistic/Aspie after Autistic/Aspie has come to the same conclusion about the "vocational training options" in Phoenix, AZ, USA; all of the organizations who provide them only provide training for no higher than this level. It is as if none of these Autism/Asperger's "experts" realize that we are capable of anything else.
- 5) **So severely disabled that they are unemployable.**

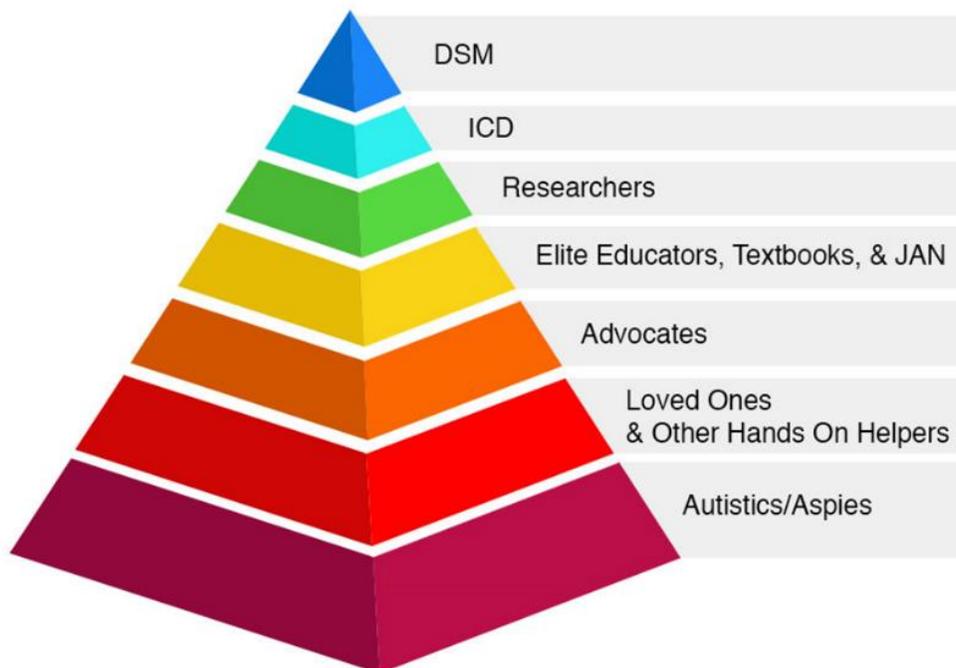
6) **Choosing to live off the system, refusing to consider the possibility that they might be able to improve their quality of life through personal self-improvement efforts:** A major problem that many Autistics/ Aspies face, who are forced on to public assistance against their will, is that many people will be quick to assume that they belong in this category. It is not my intention to go “goose stepping” through the Autism/Asperger’s community; passing judgement on whose struggles are real and who is faking it. I want to make it clear that many Autistics/Aspies were indeed forced on to public assistance against their will. It was either enduring the humiliation of becoming dependent on others or living on the street. The application process was so degrading to me that I considered taking my own life.

LIBERATING AUTISTICS/ASPIES FROM PUBLIC ASSISTANCE

The Autistics/Aspies that my plan targets are those who not only can get off public assistance, but also want to obtain complete financial independence. My plan does not require money, but for Autistics/Aspies to be allowed to have a say in what potential employers are told about them. What it does require is for those who have succeeded, without a diagnosis and/or special accommodations, to be given the stage so they can explain to those who are at a similar level of functionality how they did it. Once individuals who can be liberated from public assistance and/or special accommodations are liberated, the money that is being spent on them for those purposes can be diverted to those who are more severely affected.

\$20,000 in public assistance per year **X 10,000** individuals who can & WANT to be liberated from public assistance = **\$200 million** in taxpayer savings.

The Autism Community Pyramid



DSM (Diagnostic & Statistical Manual): Providing the diagnostic criteria for all “mental health” issues, including those that are not classified as “mental illness,” for the United States.

ICD (International Classification of Diseases): Provides the diagnostic criteria for all health care issues, both medical & mental, for the entire world. Although the American mental health professionals use the DSM for diagnostic purposes, the insurance companies use the ICD for billing all health care related services.

1) Although both the DSM & ICD consider Asperger's a variation of Autism:

- a. The ICD 10 (still used in America for now) lists Autism & Asperger's separately, the ICD 11 (Still used outside of America).
- b. The DSM was 1st to do away with the diagnosis of *Asperger's Syndrome*, while overhauling how autism is classified in terms of the level of impact that it has on one individual compared to another.

2) Both the DSM & ICD define Autism solely by its struggles.

- a. Although the superior memory of a friend of mine was 1 of 3 factors in him getting diagnosed, and Dr. Kanner's 1943 paper, in which he coined the term "Autism", notes that 7 of his 8 Autistic patients who possessed verbal communication skills demonstrated superior memorization skills, neither the DSM or ICD has superior memorization as part of the diagnostic criteria.
- b. This has resulted in the practice of the "autism experts" assessing autistics solely by their struggles, while treating their unique strengths like circus freak show oddities.
- c. Those Autistics/Aspies who realize that there's more to who they are than is listed in the DSM & ICD will strive to make the most of what strengths they do have, but are often frustrated when those around them are so blinded by their struggles that they can't see anything else.

Researchers:

- 1) Research is an inherently noble profession that many noble-minded individuals pursue. However, it is also a financially lucrative profession that many who desire fame and fortune pursue as well.
- 2) Public awareness press release and conference presentations have more to do with getting additional funding for continued research than actually educating the public. Some of these concepts will eventually be disproven, and therefore should not be immediately treated like facts to use as a foundation for your future strategies.
- 3) There are basic fundamental principles which do provide a strong foundation for future strategies.
 - a. The relevant differences between autistic & non-autistic neurology. I'm not asking what causes autism, but what the neurological differences are between Autistics & non-Autistics.
 - b. Brain Plasticity.
 - c. How human beings develop social skills, and the unique barriers that autistics have to overcome.
 - d. How a human being is treated will affect how their personality and social skills will develop.

Elite Educators: Those who teach the teachers, doctors, therapists, etc.

- 1) College Professors
- 2) Those who provide recertification training.
- 3) Conference presenters, especially keynote speakers.

JAN: Jobs Accommodations Network – Accommodations and Compliance Series – Employees with Autism Spectrum Disorder: To be elaborated on in the next section.

Advocates: The largest of these advocacy organization's public awareness activates includes one or more of the following:

- ❖ Hosting Conferences
- ❖ Providing Re-Certification Training
- ❖ Fund Raising for Research
- ❖ Fund Raising for Special Services

These fund-raising activities, as well as re-certification training classes and conferences, give these organizations considerable control over the 2 previous levels of the pyramid.

“Other Hands On Helpers” (“OHOHs”) include:

- ❖ Teachers
- ❖ Doctors
- ❖ Therapists
- ❖ Caseworkers
- ❖ Etc.

Much of the strife in the Autism community at large are problems that Autistics/Aspies, as well as their loved ones, have with the previously mentioned OHOHs. The problem with this is that the OHOHs are only doing what they were taught. So, if Autistics/Aspies, as well as their loved ones, have problems with them, they need to confront the ones who taught them.

Autistics/Aspies: The Autistic/Aspie community has many self-advocates that have been expressing their grievances and ideas to improve the quality of life for Autistic/Aspies and their loved ones. Although there have been some attempts to pretend like we’re being listened to, the reality is that decisions that impact the quality of life for us and our loved ones are being made by those who have little or no real regard for our input. This is being done by the major “Autism Advocacy,” who have appointed themselves as our representatives without our conciliation or consent. They not only do not allow us to have a say in how Autism/ Asperger’s is presented to the public, but also how the money that they collect in our name is spent for research and services.

AUTISM LEPROSY DILEMMA

To self-disclose/self-advocate or not to self-disclose/self-advocate, that is the question that weighs heavily on the minds of many of us Autistic/Aspies. There is a legitimate reason for Autistics to fear discrimination if they reveal their Autism to the public that has been told that it is a horrible blight. This discrimination is grounded in the fear that we might have an adverse reaction, including possible meltdowns, if...

- 1) ...they unknowingly make a mistake.
- 2) ...anything unexpected happens to us.

To avoid such potential problems, many deal with us like lepers. They not only keep their distance as much as possible, but also refuse to assist us in our own personal project when we ask them for their assistance.

Nevertheless, the fact that there is something inherently different about us is so obvious to non-Autistics that it is impossible for us to hide. What is worse, the wrongful judgements that are made about why we are the way that we are, or why we try to hide who we are, is based on the stigma that society has about our label. In a job setting, the ability for an Autistic/ Aspie to maintain long term employment may rest largely on their ability to get the right job. To get that right job, they need to explain why they need to be given that specific job. The only way they can do that is by self-disclosure.

PART 2

DEALING WITH THE AUTISTIC/ASPIE EMPLOYMENT “EXPERTS”

JOBS ACCOMMODATIONS NETWORK**ACCOMMODATION AND COMPLIANCE SERIES: Employees with Asperger Syndrome (2008)**

<https://autismambassadorscorps.files.wordpress.com/2016/04/jan-2008.pdf>

Accommodation and Compliance Series: Employees with Autism Spectrum Disorder (2013)

<http://askjan.org/media/downloads/ASDA&CSeries.pdf>

The Job Accommodation Network (JAN) is a service of the Office of Disability Employment Policy of the U.S. Department of Labor.

1) What is Asperger Syndrome? (Page 3 - 2008): This section seems surprisingly complete when you consider how incomplete the information provided by most Autism/Asperger’s “experts” is; who focus almost solely on our social difficulties and hyper sensory processing issues rather than our strengths. However, it is written at a high level of English, which almost constitutes as a foreign language to those of us who have no more than a high school education. In fact, I cannot tell with 100% certainty as to how thorough they were in addressing the issue of sensory processing without doing more of my own research on the vocabulary and diction they used in their explanation.

“People with Asperger Syndrome are often self-described loners who may be unable or unwilling to participate in spontaneous social interaction. Though friendship is desired, frustration occurs when trying to build social relationships, likely due to previous failed attempts (Klin et al., 2000).”

Although Autism/Asperger’s is not physiological in origin, Autistics/Aspies can have the same physiological issues as anyone else. It is a well-established fact that if you abuse another human being, there will be physiological consequences.

“People with Asperger Syndrome can excessively elaborate on their own topics of interest, however, be unable or unwilling to participate in other parts of conversation or to end a conversation, partially because of the inability to gauge social context or interpret social cues (Klin et al., 2000).”

- a. You do not go to work to socialize; you go there to make your boss money in exchange for a pre-agreed salary or wage. The more production based the job, such as construction and assembly work, the less socializing bosses want from their employees.
- b. Every social scenario that the Autism “experts” address are ones in which the Autistic is at fault.

“Gross motor skills, including posture and gait, and fine motor skills such as manual dexterity may be under-developed, making people with Asperger Syndrome seem clumsy or physically awkward (Klin et al., 2000).”

What is Autism? (Page 3 - 2013): What’s missing from this section? All of Klin’s contributions, including his insights into...

- a. ...the Autistic/Aspies point of view of their social issues. Although most Autistic self-advocates find his observations less than 100% accurate, at least he tried.
- b. ...the fact many of the Autistic/Aspie social issues are products of the physical, emotional, psychological, etc. abuse that they have suffered.

“Autism is a biological disorder, not an emotional illness. Refuse psychotherapy, psychoanalysis and intensive counseling. These approaches are useless. (Dr. Bernard Rimland - Health Counselor Magazine, Vol. 3 No. 6; June/July 1994)”

<http://www.bestbehaviour.ca/briefhistory.htm>

Dr. Rimland’s quote is even more shocking when you consider that he was psychologist. In other words, he told the entire Autism community to denounce his own profession when trying to understand and deal with Autism. His reaction was an overkill response to Bruno Bettelheim, who’s “refrigerator mother” theory in the 1940s condemned an entire generation of mothers. This theory supposed that Autism was caused by mothers who lacked the ability to show their children affection. After his child was diagnosed with Autism in the 1960s, much of Rimland’s research efforts was to exonerate his wife from the allegations that Bettelheim had made against the mothers of all Autistics. Since Dr. Rimland founded the Autism Society of America (1965) and the Autism Research Institute (1967), his views carry a lot of weight.

Although it is true that Autism/Asperger’s is not psychological or psychiatric in origin, Autistics/ Aspies are just as capable of developing such disorders as anyone else. Considering that many such disorders are the result of abuse, and that Autistics/Aspie typical behaviors and social isolation make them easy prey for such abuse, it would only make sense that we are more likely to have emotional and psychological issues. Allowing your hostility towards Bettelheim and his “Refrigerator Mother” theory to lead you to withhold from us the help overcome these issues is as detrimental to us as the original abuse itself.

- c. ...the problems that Autistics/Aspies have with “gross motor skills, including posture and gait, and fine motor skills such as manual dexterity.”

2) Point of Emphasis (Page 5):

“(Note: People with ASD may experience some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with ASD will need accommodations to perform their jobs and many others may only need a few accommodations.”

Based on my experience with Vocational Rehabilitation (March 2015-June 2016), it appears that no one involved in helping Autistics gain employment has gotten this memo. This entire mentality that “Autistics/Aspies are going to struggle no matter what job we give them, so let ‘s just create a work environment in which they will struggle the least,” completely misses the fact that there are some jobs that Autistics/ Aspies excel at.

- 3) **Questions to Consider (Page 5):** This list of questions to ask is fairly thorough, but they are only asking questions that are designed to identify struggles, in spite of the point of emphasis at the top of the page. No questions are asked about what kind of jobs they might excel at.

- 4) **Accommodation Ideas (Pages 5-11 [-9 in the 2008 version]):** This is also a fairly thorough list, but you do need to keep in mind that “higher functioning” Autistics may need few (if any) of these accommodations if they are given the right job that suits their strengths. The good news is that there is one bit of improvement found on the bottom of page 5-top of page 6, acknowledging that stimming “...often helps calm the person or assist in concentration on tasks...” The bad news, however, is that people who are supposed to be helping Autistics/Aspies overcome their employment struggles do so in a manner that could lead potential employers to the erroneous conclusion that all Autistics are more of a hassle than they are worth.

VOCATIONAL REHABILITATION & JOB COACH

1) The Assessment Test:

- a. The only truly useful activity that I've done with Vocational Rehab was in my 1st time through.
- b. Although the Psychologist went over the results with me, I am forbidden to have my own copy because it's considered to be the property of DES.
- c. Although I don't know the precise cost to the taxpayers, it is estimated to be at least \$100's if not \$1,000's to be used once then filed away.
- d. Vocational Rehab is completely close-minded when it comes to the possibility that it can be used for far more than the single purpose that it was designed to fulfill.

2) Counselors: In the 1st week of December, I was assigned my 4th counselor since starting the program in March. None of them took the time to...

- a. ...go over my previous job history. It was as if they were all trained to assume that all Autistics are low functioning and/or just out of high school.
- b. ...get input on employment related issues from those who know me.

1st Counselor: When I told her that I wanted to work in the Public Schools Special Ed. Department, she told me that she had never met an Autistic that wanted to work with people. Not only do I have extensive childcare experience, but the Autistic/Aspie support group has three members who work professionally with children. They include both of the group's co-organizers, an Occupational Therapist [Now Retired] and a Speech Language Pathology Assistant, as well as a Public-School Teacher.

2nd Counselor: Set me up with job training through Focus Employment Services, which turned out to be a complete scam.

3rd Counselor: Was completely close-minded to the idea of using the assessment test, given to me while I was still with my 1st counselor, as a special accommodation to fulfill the requirement of an "Arizona State approved para-professional test." This would have allowed me to work for the public schools without having to get an associate degree.

4th Counselor: I will be honest; I was going through the motions by then, waiting for her to do something that would lead me to believe that working with her would make a difference. It was not so much of me giving up on her personally, I gave up on Voc-Rehab's ability to help me.

My 2nd stint with Voc-Rehab: My only reason for going back to them is because they would pay for RI to take over my employment support needs.

CONCEPTS THE AUTISTIC COMMUNITY NEEDS TO BORROW FROM THE REFUGEE COMMUNITY

1) We need integration, not segregation or assimilation:

- a. **Segregation:** Alienation from those who are different than you because it's easier than trying to fit in.
- b. **Assimilation:** Trying to fit into the status quo by having everything unique about you, and your personality, purged.
- c. **Integration:** Developing the skills necessary to succeed in society, while maintaining your individuality. This enables you to improve yourselves while preserving your personal dignity so you do not develop inferiority complex, which will inevitably develop in anyone who believes are inherently inferior to those around them.

- 2) **We need to believe in ourselves:** This is extremely difficult for a group of individuals, like Autistics/Aspies, who have been given every reason to not believe in themselves by the very “experts” to who they are supposed to look to for help and understanding.
- 3) **We need to have Autistics/Aspies working inside the system:** Many of the case workers of the primary organizations the refugees depended upon were refugees themselves, who had to learn how to integrate into American society on their own. This gave them insight into the needs of newly arriving refugees that someone born and raised in America would never have had. I am not aware of any Autism organization that hires Autistics/Aspies to serve such purposes.
- 4) **Volunteers:** Although there are many good-hearted professional individuals who want to help their clients, the “assembly line” approach to how social services are run makes it nearly impossible to do as much as they wish they could. However, for every good-hearted caseworker, there seems to be 10 that are there solely to collect a paycheck and/or pad their resume until they get the job they really want. Volunteers, on the other hand, are driven by a passion to do whatever they can do to help. This will result in them going above and beyond what the professionals can do and/or are willing to do.
- 5) **Volunteerism:** Volunteerism by any struggling individual helps them by...
 - a. ...building their self-esteem. By volunteering for something that your good at doing, it gives you the opportunity to prove to yourself that you are able to succeed at something.
 - b. ...giving them the opportunity to develop relationships with those who respect them. Not only will they be shown respect and friendship by their fellow volunteers, but also by those who they are helping.
 - c. ...allowing them to try tasks that they normally would not be given the opportunity to. This can often lead to the discovery of previously undiscovered skills that could be used in an employment setting.
 - d. ...allowing them to take safe risks.
 - e. ...helping them overcome self-pity. Not only Autistics/Aspies need to realize that they are not the only ones who have suffered, a lot of people in all walks of life need to realize that others have suffer as well. Nevertheless, many of these sufferers, include those who have suffered far worse, have chosen not to spend the rest of their lives being victims. This allows them to live a higher quality of life than they ever could have lived while being consumed by self-pity.
- 6) **We need to have our own officially recognized organizations, that are run by us and for us, that specializes in helping us in the areas we want help in.**

MY 3-TIER MODEL FOR MORE EFFECTIVE SOCIAL SERVICES

Although my 3-tier system is unheard of when it comes to any government agency, it in fact bears resemblance to the administrative model of many churches. If a church governed itself after a government bureaucracy, the clergy would carry 100% of the burden of getting things done. Anything that they do not have the time or means to take care of goes undone.

The bureaucratic equivalent to the clergy are the case workers who are required to at least have a bachelor's degree and be on their way to a master's. The salary demands of individual with such high academic credentials is beyond what the state can afford. This results in the high turnover rate I addressed when assessing my experience with Voc-Rehab. Although such constant upheaval can make it difficult for anyone to proceed with any long-term goals, it is even harder on us Autistics due to our “executive functioning” issues that will be discussed in Part 3.

The following is my first draft of my 3-tiered system, which may require revisions as adapting a concept that works in its original environment may not fully translate into a completely different one. I eagerly desire the kind of open dialog with those who have different viewpoints that would lead to the perfecting this model.

Caseworker Advisors: This would be the only non-administrative employee that would require have a master's degree, which means that the state could afford to pay them a higher salary to retain them. Their job would be to provide training and consultation to the caseworkers, so they can provide better service to the client.

Caseworkers: If I must choose between someone with lofty academic credentials, or someone who will stick around long enough to understanding the unique individual that I am, its no contest for me. I have no use for anyone who thinks that they can learn everything they need to know about me by reading a book written by someone, who not only never met me, but has no idea what it is like walking in my shoes.

What I do need is someone who is going to stick around to the end. I want someone who thinks that a salary that is even smaller than what those with a master's degree considers too small to be great. There are two groups of people who I believe would be perfect:

- 1) Volunteers – Those who are willing to do the job for free would view being paid a fraction of what those who have a master's degree would consider acceptable to do such a job as a bonus.
- 2) Those who identify with the clients – As I said in the previous section, refugees who have successfully adjusted to life here in America are very effective in helping other who are now going through the same challenges. If this should not come surprise anyone with an ounce of common sense, then why is this concept applied to providing social services to those born and raise in the US?

Mutual Support, Networking and Accountability Groups: So, you sat down with your case work and hammered out a course of action to be done by your next appointment, but it all unravels because nothing goes as planned. Can your case worker immediately squeeze in enough time for you to figure out how to get things back on track? This was not my experience, and it became the final nail in my Voc-Rehab coffin.

Back in the early '90s, when I was in my 20s, I attended a general purpose 12 Step program* which enable me to address issues pertaining to codependency. The meeting format, which centered around discussing what happened during the previous week, enabled us to figure out how to deal with the issue that we were struggling with. Not only did the members of the group suggest solutions, but we also knew that we would be held accountable any commitments that we may have made to do specific things that would help us self-improve.

Although it was originally designed to help addict stay sober, the group's "let's talk about what you are actually dealing with right now" format enable me in all areas of my development. I believe in the methodology and highly advocate its use for any group who once to improve in all areas of their personal lives.

I firmly believe having the social services agencies develop cooperative relationships with independent support groups would enhance the effectiveness and cost efficiency of the agencies. The groups would remain autonomous in order that they can address issues outside the scope of the agencies; but would still be supportive of whatever tasks the agencies provided the group member/agency client to perform. These would be even more effective if the group leaders to be given a basic understanding of how the various programs work. I believe this concept of being an ally of the refugee sponsoring agencies,

* New Wine, Word of Grace Church, Mesa, AZ

rather than a subordinate, enable me to be more effective when assisting the refugee whom we had a common interest in back when I was able to help them.

9 STEPS TO CREATING OUR OWN "SUB-SYSTEM"

- 1) Have those who are committed to change organize themselves**
- 2) Figuring Out How the System Currently Works:** Many people have an inaccurate understand of how the system works due to:
 - a. Outdated information
 - b. Only having an abridged understanding of how it works
 - c. Them having different expectations of their and/or their loved one's potential.
 - d. They're just making stuff up
- 3) Draw up plans for various projects and programs that will help meet the unmet needs of the Autism community.**
- 4) Organize those who are committed to the cause to caring out volunteer activities that will put our plans in to action.**
- 5) Having evidence of how well our plans work so far, we sell it to those who have the desire and expertise necessary to take them to "the next level."**
- 6) Create a non-profit organization that will enable us to expand our operations to be a large as necessary to meet the needs of the Autism community.**
- 7) Begin seeking the financial support necessary for success to fund all our projects.**
- 8) Replicate our programs anywhere people are willing to run them.**

We do not necessarily have to wait until step 8 before replicating our ideas elsewhere. It is possible that we obtain so much success as volunteers that volunteers from other communities might ask us to advise them while we are still working on step 5.
- 9) Reexamine the effectiveness of our programs and ideology at least yearly**

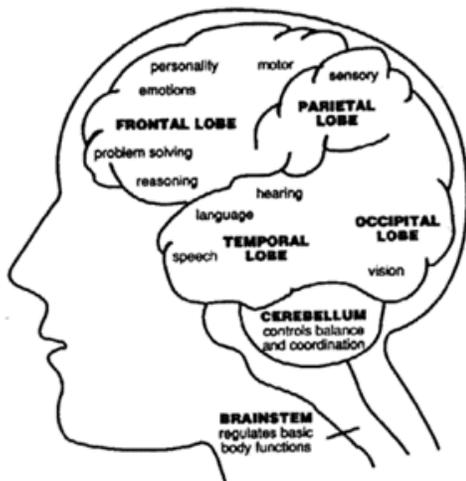
PART 3

UNDERSTANDING THE STRENGTHS AND WEAKNESS OF AUTISTICS/ASPIES IN
RELATIONSHIP TO EMPLOYMENTTHE NEUROLOGY OF AUTISM

BASIC AUTISM SCIENCE

(ACCURACY OF WHICH HAS BEEN REFINED BY DR. BRYAN WOODRUFF, NEUROLOGIST, MAYO CLINIC)

- 1) **Jason's Definition of Autism:** Autism is an atypical neurological connectivity paradox resulting in heightened activity in some areas of the brain and decreased activity in others, compared to non-autistic individuals.



Some of the issues that Autistics face because of their atypical neurological connectivity include:

- ❖ Sensory Processing Issues
- ❖ Hypersensitivity to Stress and Emotions
- ❖ Stimming
- ❖ Seizures
- ❖ Delayed and/or Impaired Language Development
- ❖ Delayed and/or Impaired Social Development
- ❖ ADD/ADHD
- ❖ Tourette's Syndrome
- ❖ Impaired Executive Functioning
- ❖ Impaired motor skills
- ❖ Hypersensitivity to Medications

- a) **Atypical:** most individuals have similar range of development, as well as means of completing certain routine tasks, problem solving, socializing, etc. The individuals who are outside that range are "Atypical."
- b) **Neurological Connectivity:** The simple explanation of this is that Autism/Asperger's is, at its neurological roots, a neuro-connectivity issues. Our neuro-connections are atypical.
- c) **Paradox:** The paradoxes of Autism can result in Autistics being extremely gifted in some areas, and extremely inept in others. The struggles Autistics/Aspies deal with are often aggravated by people who do not accept that Autism is a paradox; but instead focus solely on one aspect of Autism while refusing to acknowledge the legitimacy of the paradoxical opposite.
- 2) **Brain Plasticity:** The brain of every life form on Earth is constantly changing, enabling it to adapt in both positive and negative ways. This provides us with a scientific basis to believe that some areas which Autistics/Aspies struggle with may self-correct and/or be modifiable.
- 3) **Developmental Disabilities Do Not Affect All Areas of the Brain in A Universal Manner:** So the part of your, or you child's, brain that enables speech development is underdeveloped. What does this have to do with the part of their brain that enables them to understand what others are saying about them? Nothing! What does the part of the brain that enables bowel control have to do with the parts that allow them to memorize what they hear? Nothing! What does the parts of the brain that enables us to do complex mathematical problems have to do with the parts involved in social interaction? Nothing! Just because your, or your child's, brain may be affected in one area, that is not an indication of the level of functionality of other parts of our brain. Some areas may even be affected in a way that is to our advantage in certain situations.

4) Natural Countermeasures: It is well known fact that someone who loses their sight will develop an increased sense of hearing. This concept is not just limited to the blind; but is a well-known factor in so many other physical disabilities that the healthy part(s) of a body will compensate for unhealthy or injured parts. Not only do I believe that this gives us a basis to consider the possibility that this same principle may at play for those with developmental disabilities, but I believe that I can provide specific examples of it being a factor in the day-to-day lives of Autistics/ Aspies.

AUTISM'S CONNECTION TO ADD/ADHD

Many Autistics (myself included) have also been diagnosed with ADHD at some point in our lives. I was first diagnosed in my sophomore year of high school, 1986. I am not exaggerating when I say that I believe at least half the Autistics/Aspies I know have also been diagnosed with ADD/ADHD.

DEALING WITH ADD/ADHD IN THE WORKPLACE

The key to minimizing the impact of ADD/ ADHD, with or without the use medication, is to give them something that challenges their brain. Many of us Autistics/Aspie excel at overcoming certain challenges. If you give us jobs that tasks us to find solutions to such issues, if they are within our comprehension level, then many of us can become star employees.

AUTISM'S SHARED STRUGGLES WITH DEMENTIA

Adult Autistics eventually must ask the question as we get older, is my Autism getting worse or am I dealing with the natural progression of aging? The answer may be yes on both accounts.

IMPAIRED EXECUTIVE FUNCTIONING

WHAT IS EXECUTIVE FUNCTIONING?

“The brain’s ability to control itself and the environment so as to accomplish its goals.” (Sue Golubock)

Some aspects of executive functioning that Autistics are notorious for struggling with include:

- ❖ The ability to remember information long enough to do something with it.
- ❖ The ability to follow a step by step procedure to...
 - ...plan and organize a task.
 - ...carry out complex instructions.
- ❖ The ability to monitor one’s own progress toward a goal to see a task through to the end.
- ❖ The ability to initiate or get started on a task.
- ❖ The ability to organize one’s materials or the environment to find the tools/information needed to perform a task.
- ❖ The ability to stop one’s focus and shift to something else as required to complete a task.
- ❖ The ability to control one’s emotions to adapt when a task is not progressing as expected.

MEMORY'S ROLE IN EXECUTIVE FUNCTIONING

The subject of memory is far more complex then commonly used terms of “Long Term” & “Short Term” memories. There are probably at least a dozen different types of memory. Several types of these memories tie directly into the subject of executive functioning. Understanding the role memory plays in our day-to-day lives can help Autistics develop countermeasure into our overall self-management

strategy that may need to overcome deficiencies in executive functioning. This may also enable some Autistics to eventually be weaned off some of their needs for special accommodations.

Working, Immediate or Very Short-Term Memory: These are synonymous terms for a type of memory that is actually a core aspect of Executive Functioning.

Examples:

- ❖ Keeping information in your head long enough to convey it to someone else and then promptly forget it afterwards.
- ❖ Manipulating numbers “in your head” to do a math problem.
- ❖ Remembering what step you are on when carrying out a multi-step task.

TYPES OF LONG-TERM MEMORY

Declarative Memory: A type of long-term memory tied to the facts and experiences we have learned over the course of our lives. The two categories of Declarative Memories are:

Episodic Memory: “Past personal experiences (the events of an individual's life).” (Dr. Woodruff)

Semantic Memory: “Learned facts or knowledge (the sky is blue, water is made of hydrogen and oxygen atoms, etc.).” (Dr. Woodruff)

Procedural/Non-declarative/Muscle Memory: Another type of “long term memory” is the result of repeated activities and/or behaviors that create pathways in the brain, eventually allowing that activity to be done without conscious attention to every step of the activity. The development of these routines, which are the product of procedural memory, serve as a countermeasure for the executive functioning struggles that are tied to deficiencies in working memory. Autistics, in general, excel when they are in environments that have them performing regular routines that require as little thought as riding a bike.

EXTREME RELIANCE ON PROCEDURES, RIGID PROTOCOLS & REHEARSED SOLUTIONS

As I stated in the earlier section, “Autism’s Shared Struggles with Dementia,” Autistics typically share the struggles at problem solving with their executive function with Dementia patients. Those who have such struggles will be more dependent their various types of long-term memories that they can adapt into a solution. It is crucial for such individuals to develop routines, procedures, rigid protocols and rehearsed solutions as problem solving methodologies. Such dependency on the maintaining an effective status quo should not be confused with stubbornness, which is a character flaw, but that the individual has no other effective mechanism to deal with many of the challenges they face in their day-to-day lives.

When you consider how much of an ordeal it is for Autistics to develop the procedures necessary to overcome their executive functioning difficulties, it’s no wonder that so many Autistics have such an aversion to change. This is especially true when the change is clearly illogical and grounded in nothing more than the supervisors’ ego, resulting in them making the changes for no other reason than it is their prerogative to do so.

CIRCUMVENTING EXECUTIVE FUNCTIONING IMPAIRMENTS WITH DECLARATIVE MEMORY

When most non-Autistics/Aspies problem solve, they lead with their executive functioning to figure out “how to invent the wheel.” When I problem solve, I immediately start reminiscing about all the different ways seen others try “to invent the wheel.” I visualize what I have seen work, not work, as well as what could have worked if it were done differently. I refer to these as “TRANSFERABLE EXPERIENCES.” Often,

I am verbalizing my thoughts out loud to connect the dots that will eventually lead to me purposing a solution.

So, although I may not have an actual solution in mind when I start talking, I may have one when I am finished. Even if I cannot come up with solutions to every issue that I might bring up, I may have brought to the attention of the groups issues that need to be considered that might have been otherwise overlooked. This works very well when I have a precedent to draw off when devising strategies, but struggle to figure out how to solve problems that I have no experiences in dealing with, be them actual or transferable.

My basis for believing that non-Autistics/ Aspies do not problem solve in this manner is that they keep shutting me down before I can finish presenting my case, claiming that I am just rambling on about stuff that has nothing to do with the topic being discussed. Furthermore, my method of presenting a case supporting my views are at odds with the concept of presenting the abridged version of everything in two sentences or less that most non-Autistics/Aspies demand.

THE FRUSTRATION OF WORKING FOR ABSENTEE-MICROMANAGING-WORKAHOLICS

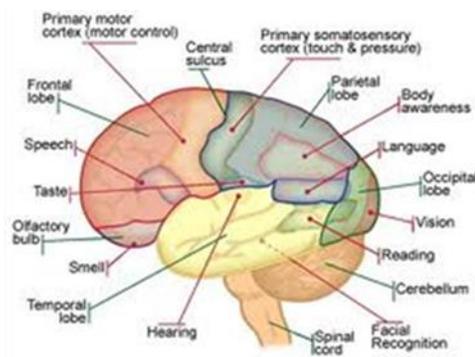
The problems that Autistics/Aspies have with absentee-micromanagers: The Autistic/Aspie may need coaching if something must be done a specific way that is more difficult for the them then for non-Autistics/Aspies, providing us with no flexibility for how it gets done. However, if the task does not have to be done the exact way the absentee-micromanager would do it if they had the time to do it themselves, then you need to give the Autistic/Aspie the flexibility to find a solution that works for them.

The problems that everyone has with absentee-micromanagers: The manager is not present to see that the problem(s) that their employee(s) are having stem from the fact that the plan they are required to follow is inherently flawed. The manager manager's workalcoholism is the cause of their absenteeism and all the previously mentioned consequences.

2 OPTIONS WHEN DEALING WITH PROBLEM MANAGEMENT STYLES

- 1) **The easiest solution:** Find someplace with a better management style, the option that the younger and/or less mature (myself included back when both attributes were true of me) are too quick to implement.
- 2) **The preferred solution:** Learn how to better deal with difficult individual and situations, a self-discipline which comes through age, maturity, and instructions from those who have use both to develop their own self-discipline.

Differing Types of Sensory Processing Issues



Our “5 senses” pertain to our “external sensory perceptions” of the world around us. Because of Autism’s atypical neurological connectivity, the Autistic brain may process this input in an atypical manner resulting in:

1) **Hyper sensory processing:** Resulting in extreme sensitivities and over responsiveness to certain sensory stimuli. Again, this “hyper issue” is a “headliner” issue that gets the most attention in the Autism community because the manifestations are impossible to miss because of how disruptive they are. I am not criticizing the amount of attention given these issues, but am wanting everyone to expand their understanding of sensory

processing issue in order that they realize that there are many issues that cause Autistics completely different types of struggles that are not nearly as noticeable.

- 2) **Hypo sensory processing:** Resulting in less or no responsiveness to certain sensory stimuli.
- 3) **Confused sensory input:** Resulting in an impaired ability to decipher sensory input. “Often the confusion comes from fluctuating between hyper & hypo processing, resulting in an avoidance of input (hyper) or lack of awareness of input (hypo)...leaving the person confused.” (Sue Golubock)

FEAR, STRESS AND EXTREME EMOTIONAL RESPONSES OF ALL HUMANS

There are 3 ways in which humans respond to fear:

- 1) **Freeze:** Being paralyzed by fear.
- 2) **Fight:** This does not necessary entail physical altercations; but are probably more often verbal.
- 3) **Flight:** Run away and/or hide

ATYPICAL PERSONAL BUBBLE ISSUES

- 1) **“Hyper-Bubble” Issues:** Autistics, whose process sensory input in a variety of atypical manners, may be naturally inclined to respond to people near them in a manner that is atypical.
 - a. Adverse physiological reaction to touch, especially light touch because it is very stimulating to our nervous system.
 - b. Trouble judging...
 - i. ...the direction that a sound is coming from.
 - ii. ...the distance someone or something is to them.
 - c. Hypoactive sensory processing
 - d. These issues may require Autistics/ Aspies to preserve a bigger “bubble” in order to...
 - i. ...have enough time to process all of the input that the brain is receiving before responding.
 - ii. ...focus on what they are thinking about instead of what is happening around them.
 - e. Autistics/Aspies may need a larger workspace in order that items in their peripheral are not exacerbating their executive functioning issues.
- 2) **“Hypo-Bubble” Issues:** Some Autistics have problems understanding the “personal bubble” needs of others, as well as overall danger awareness. This can range from them running out in the middle of traffic, to in ability to understand “stranger danger.”

THE INCREASED LEVEL OF STRESS AND EMOTIONS THAT AUTISTICS/ASPIES MUST MANAGE

When you consider the stress that comes from our executive functioning impairments making it difficult to do what seems easy to everyone else, as well as our sensory preceptors operating in an atypical manner, it is reasonable to conclude that an Autistic’s/Aspie’s baseline stress level should be higher than that of non-Autistics/Aspies.

My goal in making the next 2 lists was to show the progression that Autistics/Aspies may take in their path from happy and/or content to overloads/meltdowns. I am not saying that every Autistic/Aspie will exhibit all of these red flags every time and/or in the exact order listed, I am just saying that these are red flags that you should understand the significance of.

HOW INCREASED LEVELS OF STRESS AND/OR EMOTIONS CAN AFFECT THE AUTISTIC BRAIN

- 1) **Rapid Implementation of Rehearsed Solutions:** The body's natural response to the stress that such situation causes it to release cortisol, which triggers the adrenal gland. One of the effects that adrenalin has on me is rapid thinking/problem solving.
- 2) **Paralysis by Analysis:** When Autistics/Aspies get caught in a "spin cycle" of excessive analyzation, resulting in them over thinking a situation.
- 3) **Obsessive and/or compulsive focus on the final solution:**
 - a. This can cause me to not be able to see, and/or focus on, the individual steps necessary to solve a problem.
 - b. In situations in which I struggle to figure out the solution, I my focus turns to what I can do to stop the stress with little or no regard for whether or not it will solve the problem.

The last three ways Autistics/Aspies are affected by stress mimic the signs of aging, fatigue, etc.

- 4) **Decrease of what may already be subpar motor coordination**
- 5) **Decrease of already subpar executive functioning**
- 6) **Extreme Reliance on Procedures, Rigid Protocols and Rehearsed Solutions**

How Overloads of Stress and/or Emotions Can Affect the Autistic Brain

- 1) **Shut-Downs:** When Autistics lose their ability to exhibit any functionality; including the loss of the ability of self-expression.

THIS MAY BE THE FINAL WARNING THAT THE AUTISTIC/ASPIE IS ON THE PATH TO A MELTDOWN!

Just as circuit breakers are built in countermeasures to electrical fires, it is my firm conviction that "shutdowns" are my mind's natural preemptive countermeasure to "meltdowns." If this is true of all Autistics/Aspies, then it provides them and/or those who interact with them the ability to recognize when a meltdown is immanent so corrective measures can be taken.

- 2) **Meltdowns:** When Autistics lose it and start exhibiting are often viewed as "behavioral issues." This reaction is so synonymous with Autism/Asperger's that it is the one and only Autistic/Aspie response to stress and/or heightened emotions that society at large recognizes.

COMMON DENOMINATORS OF VOCATIONS, AND OTHER PROJECTS, THAT AUTISTICS/ASPIES HAVE BEEN MOST SUCCESSFUL AT

To be clear, I am not saying that no Autistic/Aspie can succeed in vocations that don't have these attributes, but they are the most common amongst jobs that Autistics/Aspies have had the greatest success.

- ❖ **Requires the brain to be fully engaged on the task:** Mundane labor will cause anyone to lose focus, those who have any ADD/ADHD, which is common amongst Autistics/Aspies will have even a harder time.
- ❖ **Absent of the specific sensory stimuli(s) that the individual has difficulties managing:** Yes, the ADA gives employee the right to ask for reasonable accommodations that can help nullify issues like these. What about Autistics/Aspies pursuing vocations/jobs in which these problems don't exist?

- ❖ **Ties into their cognitive strengths:** This will vary from Autistic/Aspie to Autistic/Aspie, but if you take the time to figure out how to match up those strengths with jobs that they are perfectly suited for, then there would be less need for special accommodations.
- ❖ **Analyzation almost always plays a major role:** Some are better at analyzing math, drawing/schematics/blueprints, statistics, data, etc., while struggling at analyzing others on the previously mentioned list.
- ❖ **Well established fundamental principles:** There may be some variation in how these principles are applied, but you don't need to go to college to get a new 4-year degree every time you change employers and/or get a new boss. Although not all the vocations that Autistics/Aspies have been most successful at require a college degree, they do have basic fundamental principle that don't change every time you get a new boss.
- ❖ **Fully trained by fully qualified instructors prior to employment, and/or orientation training at the time of hire:** Most menial labor jobs will have someone with higher seniority train the new hires. The problems I've seen, especially with overnight shifts, are:
 - Not everyone has the natural ability and/or patience to teach others.
 - Many will teach their way of doing things, even though it contradicts the employee manual. Some because the manual was written by corporate bosses that are completely disconnected from the realities of the job, other because they're too lazy to do the job right.
 - Some are burnout and will spend more time talking about their dissatisfaction, rather than how things should be done and why.
- ❖ **Many have the right balance of structure and flexibility:** Yes, having well defined job description makes job a whole lot easier on everyone, especially Autistics/Aspies. However, many vocations give workers the flexibility to do accomplish the tasks in a manner that works best for them.
- ❖ **Well defined chain of command:** A few industries have the minimal organizational structure necessary to fulfill the terms of their contracts. This is especially prevalent when working overnight positions, and/or absentee supervisors whose random check-in and/or only coming when they're advised of a problem. The result can be some employees assuming authority that they don't actually have, doing their job however they feel like it and/or reject correction from someone who is telling them what the company guidelines/post order stipulate.

For Autistics/Aspies who tend to be more dependent on structure, and possess a strong work ethic, this can lead to a lot of conflict with their coworkers. They, as well as everyone else for that matter, would therefore be better off working for employers in which everyone knows who's in charge.
- ❖ **Little to no micro-management, especially from absentee managers:** Structure does not mean suffocating, especially by those who are rarely present to see whether or not their brilliant ideas are as brilliant as they think they are.
- ❖ **The ability to work in smaller groups:** Although the traditional school teacher may have classes as large as 3 dozen children, special ed. classes offer the ability to work 1-on-1, as does all of the other vocations that Autistics/Aspies have had the most success in.
- ❖ **Some are not profit driven:** Although banking and insurance are obviously driven solely by the pursuit of profit, teaching and the military are not.

TYPES OF JOBS AND PROJECTS AUTISTICS/ASPIES HAVE BEEN SUCCESSFUL

Professional and Volunteer Jobs that I Had Pre-Diagnosis Success	
Working with Children with Disabilities	
<ul style="list-style-type: none"> ❖ My Little sister, Kelly (Adopted), Has Fetal Alcohol Syndrome (volunteer) ❖ Wyoming Special Olympics (volunteered at 3 events) ❖ Parkway Elementary (Volunteered 1½ hours per day during my last 1½ years of high school) ❖ Refugee Community (volunteer) <ul style="list-style-type: none"> ➤ An Ethiopian boy who was born with cerebral palsy ➤ A Sudanese girl who was probably a “lower functioning” Autistic 	
Children’s Ministries of various Churches (mostly volunteer, but sometimes paid)	
<ul style="list-style-type: none"> ❖ Teacher, assistant teacher & childcare provider for various church programs ❖ Puppeteer & Ventriloquist (volunteer) ❖ Writer of Skits & Plays (both puppet & drama), some of which were made to order to illustrate the main lesson of the requesting teacher (volunteer) 	
Pizza Delivery Driver (Success Limited)	English Teacher (Volunteer)
Taxi Driver (Success Limited)	Refugee Caseworker (Volunteer)
Bread Truck Assistant (Success Limited)	Refugee Consultant (Volunteer)

I know Autistics/Aspies who have had pre-diagnosis Succeeded at these Jobs	Jobs that I Know Autistics/Aspies have Had Success At Since Being Diagnosed
Computers	Computers
Engineering	Speech Language Pathology Assistant (5)
Occupational Therapist	Peckham Inc. (6)
School Teacher (1)	Direct Care Provider (7)
Air Force Aircraft Mechanic (1 & 2)	Department Store Stocker
Bank Teller, then Loan Officer (1 & 3)	Dishwasher
Medical Insurance Claims Adjuster (4)	Library Assistants (8)
Tax Preparer	Bookstore Employees
Accountant for a non-Profit Organization	Citizenship Teacher (Volunteer)
Rout driver who sets up store displays (1)	Autism Advocates/Consultants (Volunteer)

Notations
(1) Can’t prove these individuals exists because social stigmas associated with Autism have resulted in them being so ashamed of themselves that they won’t “come out of the closet” to confirm they share my grievances & support my solutions.
(2) It is my understanding that an Autism Diagnosis is now automatic grounds for rejection of enlistment, or immediate medical discharge for those who did not get diagnosed until after they enlisted.

(3) Made the mistake of excepting a promotion to branch manager.
(4) Cannot prove that this individual exists because he is filled with so much self-hatred that has resulted from him internalizing what the bullies said about them and only excepts those concepts.
(5) Tara Marshal pursued career after receiving advice from Sue Golubock (now retired Occupational Therapist) They have been the Co-organizer of an Adult Autistic/Aspie Support Group since 2002.
(7) A company that provides employment/employment training for individuals with developmental disabilities. I was told about this opportunity (the best I'm aware of existing for Autistics) from an Autistic who just got hired by them who made a 1-time appearance at my monthly Autistic discussion group, not by any Autism organization or employment assistance service.
(6) I started working in a Day program for adults with various developmental disabilities that is run by United Cerebral Palsy 7 years after Desert View refused me the opportunity to volunteer to do the same kind of work with their children, in spite of my pre-diagnosis experience of doing the exact same volunteer work at Parkway Elementary School.
(8) Mostly Volunteer, but 1 or 2 have obtained PT employment.

SHORT TERM EMPLOYMENT SOLUTIONS IF THE CIRCUMSTANCES ARE RIGHT
In Home Caregiver (If they have a car, can survive on about 20 hours per week, the client [& or their legal guardian] is not problematic & the economy has not crashed.)
Residential Caregiver (If they can find a house in which the other staff cares about doing things in accordance to the expressly stated rules and protocols.)
Contracted Security (If they have a car & the economy has not crashed.)