Environmental accessibility for autistic individuals: Recommendations for social work practice and spaces

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ABSTRACT

INTRODUCTION: Research and personal stories from disability advocates have highlighted the significant impact of environmental inaccessibility on an individual’s independence and dignity. This article focuses on accessibility for autistic individuals, specifically the lack of accessibility they experience in built environments due to limited autism awareness among professionals and the public.

METHOD: Literature focusing on social work’s role with autistic individuals, autism-friendly approaches, and accessible architecture was reviewed. The social model of disability and critical disability theory were utilised to explore social work’s responsibility to develop and advocate for environmental accessibility for autistic individuals. Through this analysis and the collation of strategies from the reviewed literature, the Environmental Accessibility Infographic was developed.

IMPLICATIONS: The Environmental Accessibility Infographic has broad implications. Firstly, it can be applied to any built environment to improve accessibility for autistic people and others with sensory processing needs. Secondly, the accessibility strategies have the potential to positively impact social workers’ practice with autistic people as they can guide change that will ensure their practice is autism-friendly and anti-oppressive.

KEYWORDS: Autism Spectrum Disorder; environment; accessibility; critical disability theory; anti-oppressive practice; social model of disability

Over the last two decades, accessibility for disabled individuals has become a key area of focus for many professions regarding inclusive practice and the environment in which they engage with clients. Accessibility for disabled individuals is becoming a widely discussed issue on social media, blogs, and through other forums such as Ted Talks. Disability activist, Sinéad Burke, advocates for an inclusive design that provides accessibility for disabled people (Burke, 2017). In her Ted Talk, Sinéad stated that “design is an enormous privilege, but it is a bigger responsibility,” she goes on to say that it is design that can inhibit a person’s autonomy and independence, not their impairments (Burke, 2017). Environmental accessibility can have the power to either ensure or diminish an individual’s dignity, and due to this, it should be important to the social work profession.

In Aotearoa New Zealand, the rights of disabled individuals are upheld by the Human Rights Commission (2021) and the Health and Disability Commission (2019).
While these commissions advocate for the rights of disabled people in Aotearoa, the laws and codes for ensuring accessibility within the built environment often cater only for people with specific disabilities, such as those with physical disabilities, learning disabilities, deaf or hard of hearing people, and those who are blind (Standards New Zealand, 2001). Accessibility for those with invisible disabilities, such as autism spectrum disorder (ASD), are often absent from building codes, and due to this, built environments can be difficult for autistic people to navigate.

The author of this article is a late-diagnosed autistic individual, practising social work with children and their families. As an autistic individual, I find myself in inaccessible environments frequently within public and professional spaces. Other people’s lack of autism knowledge often contributes to my accessibility needs as an autistic adult being seen as being demanding, picky or childish. I have found that many people do not understand the difficulties that I, and other autistic people, face completing daily tasks like grocery shopping, driving, or working within a professional social work environment. These experiences led to the critical reflection of social work practices and recommendations made in this article.

Throughout this article, the author will use identity-first language, autistic individuals over person-first language, individuals with autism. Over recent years, many individuals within the autistic community have discussed their preference of identity-first language through social media and blogs (Hayden, 2021). In doing so, they often identify autism as a core component of their personality, interwoven into everything they do. For this reason, the majority of the community expresses that they feel autistic person more accurately represents their experience rather than person with autism (Hayden, 2021). This preference for identity-first language has also been shown to be true through research (Gillespie-Lynch et al., 2017). While identity-first language is preferred by most autistic people, best practice is to ask each individual what language they prefer. The terms non-autistic and neurotypical will be used in this article to describe those who are not autistic.

Autism spectrum disorder (ASD) is a developmental disability which is characterised by repetitive and/or restrictive behaviours and interests, impairments with communication and social interactions, and atypical sensory processing (Hull et al., 2017). The level to which environments are accessible for autistic people can significantly impact their ability to function within built environments (Davidson, 2010).

It is important for professionals, such as social workers, to consider accessibility and its implications for practice with autistic individuals as they can experience many environments as inaccessible. Environments such as public outdoor spaces, classrooms, workplaces, libraries, hospitals, supermarkets, and organisations’ built spaces, can be difficult for autistic people to navigate due to inaccessibility. Social work practice in Aotearoa New Zealand is underpinned by anti-oppressive practice (AOP). Anti-oppressive practice requires social workers to acknowledge and challenge structural, cultural, and personal oppression in their everyday practice (Maidment & Egan, 2016). As such, social workers are well placed to advocate for accessibility rights for autistic people, and challenge systems in which they may be discriminated against for their differences.

This article will explore the methods through which social work environments and practice can be made more accessible for autistic individuals. Firstly, the way in which autistic people experience the world and some of the common misconceptions people hold about ASD will be discussed to provide context for the exploration of social work’s role in creating accessible environments.
Secondly, the social model of disability will be examined as a lens through which to view and understand accessibility issues for autistic people. Along with this, critical disability theory will be used to identify the implications accessibility issues have on the social work profession and individual practitioners. While the final section of this article will bring together knowledge from different professions to provide a collection of strategies that can act as a standard for developing accessible practice and environments for autistic individuals in Aotearoa New Zealand.

**Autism and sensory processing difficulties**

**Perceptions of autism in society**

According to the World Health Organisation (2021), ASD occurs at a rate of one in every 160 individuals globally. However, rates of ASD vary significantly between countries as one in every 54 individuals is identified as autistic in Aotearoa New Zealand (Acraman, 2021). These rates have risen significantly over the last decade. In 2016, only one in every 120 individuals was identified as autistic in Aotearoa (Ministry of Health, 2016). However, it is likely that ASD is not occurring at a greater rate, but rather, diagnostic criteria are beginning to reflect diversity within the autism spectrum more accurately, and professionals are becoming more competent at identifying autistic individuals.

Autism stereotypes are widely perpetuated within society (Rodgers et al., 2018). Stereotypes and misconceptions around the nature and presentation of autism can lead to the discrimination of autistic people, invalidation of unconventional presentations, and misdiagnosis. Many of the stereotypes that exist today have been cultivated through media. Movies and TV shows, such as *Rain Man*, *Atypical* and *The Good Doctor*, depict autistic individuals as white males who speak and move in unusual ways and have savant-like abilities (Rodgers et al., 2018). The media’s portrayal of autism can impact professionals’ biases regarding how they expect autistic individuals to present. This can lead to the invalidation of a person’s diagnosis and accessibility needs. Autistic advocates have reported receiving comments such as “you don’t look autistic”, “you communicate well for an autistic person” and “you must be Asperger’s/high functioning” (Redjohn 1971, 2016).

A common misconception is that autism is present only in males. Some authors, such as Ratto et al. (2017), have posited that the gender ratio seen within autism diagnosis rates is highly affected by bias and stereotypes. This rate is generally recorded as one female to every four males diagnosed with ASD, however, it is likely that many autistic individuals who were assigned female at birth remain undiagnosed (Ratto et al., 2017). The influence of autism stereotypes in society may contribute to the lack of accessibility frequently experienced by most autistic people, particularly within the built environment.

Ethnicity and culture can also affect the way autism is viewed. In Aotearoa New Zealand, a key cultural group to consider are Māori, who are indigenous to Aotearoa. In 2017, the term *Takiwātanga* was proposed as a way to portray the Māori understanding of autism (Opai, 2017). Takiwātanga means “in their own time and space”. The term encapsulates a widely accepted notion by Māori that autistic individuals should be accepted for who they are and be provided with accommodations that meet their needs (Tupou et al., 2021). Cultural differences, in combination with sensory needs, have the potential to significantly impact the level to which environments are accessible for Māori autistic individuals—particularly within spaces and practices that have been developed from a western worldview.

The next section of this article will discuss the impacts of sensory processing issues on autistic individuals and the way in which...
the environment influences the experience of sensory processing issues.

**Sensory processing**

Prior to 2013, when changes were made to the diagnostic criteria for autism, sensory processing issues experienced by autistic individuals were generally diagnosed as sensory processing disorder rather than being seen as a component of ASD (Hazen et al., 2014). Professionals now recognise that a core feature of autism spectrum disorder is atypical sensory processing, which is highlighted by its inclusion in the DSM-5 (Robertson & Baron-Cohen, 2017). Hazen et al. (2014) identified that this shift in thinking has contributed to a growing body of research regarding sensory processing issues and the way in which they can impact other ASD impairments.

Robertson and Baron-Cohen (2017) estimated that 90% of autistic individuals experience atypical sensory processing. Hearing, taste, smell, touch, sight, proprioception, and vestibular senses can all be affected by sensory processing issues. Sensory processing issues for autistic individuals consist of three categories: hypersensitive, hyposensitive, and sensory seeking (Ashburner et al., 2013). Autistic individuals are likely to experience a combination of hypersensitive, hyposensitive, and sensory seeking responses to different stimuli. Sensory processing issues can be fluid, and responses to stimuli may change day to day or moment to moment. In periods of hypersensitivity, individuals experience distress in response to sensory stimuli, which can result in sensory overload, for example, a car alarm, light touch, or a pungent smell may overwhelm the individual (Hazen et al., 2014). While in periods of hyposensitivity individuals may seem unaware of, or slow to react to sensory stimuli, for example, taste seeming dull, being unresponsive to their name, or a high pain tolerance (Hazen et al., 2014). Finally, sensory seeking behaviours relate to craving a certain sensory experience, for example, the feeling of certain fabrics, chewing on an object, or listening to loud music (Hazen et al., 2014). Sensory overload occurs when the brain is unable to process sensory input as a result of overstimulation (Bates et al., 2016). Sensory overload can impact an individual to the extent that they may need to remove themselves from the environment. While these examples demonstrate how sensory processing difficulties might be experienced by an autistic person, it is important to acknowledge that every autistic person is different, and their sensory experiences are diverse and can vary based on situational factors.

Other features of ASD are repetitive and restrictive behaviours. Self-stimulatory behaviours or **stimming** falls under this feature. Stimming is a voluntary behaviour used by most autistic people to self-regulate their emotions by creating sensory input to focus on (Gilliespie-Lynch et al., 2017). Most neurotypical people also stim, for example, spinning a pen or tapping your foot to concentrate are both self-stimulatory behaviours. Common autistic stimming behaviours are hand flapping, spinning, touching comforting textures, rocking, and tapping objects or oneself (Davidson, 2010). In some cases, stimming can be harmful if the individual is hurting themselves or others, but usually stimming is non-harmful. People who are unaware of the purpose of stimming may try to stop behaviours to help the individual calm down or fit in. However, it is important that stimming is normalised, and it should be encouraged by professionals as a strategy to manage sensory issues.

Autistic individuals often feel a need to hide their differences from their neurotypical peers in an effort to fit in. This phenomenon is known as **masking**. Masking strategies may include hiding social difficulties, maintaining eye contact, reducing stimming behaviours, and rehearsing scripts for social situations (Hull et al., 2017). Successful masking may allow autistic individuals
to appear behaviourally non-autistic for limited periods of time (Cook et al., 2021). However, masking has been linked to several negative consequences such as misdiagnosis, mental health difficulties, identity confusion and burnout (Cook et al., 2021). Autistic people report that masking is mentally and emotionally draining and requires extensive concentration on social cues, maintaining the social norm, and scripting (Hull et al., 2017).

Frequent periods of masking can lead to burnout. Autistic burnout varies from non-autistic burnout in that it is due to the stress of living in an inaccessible world and fatigue as a result of masking (Higgins et al., 2021). Burnout for autistic individuals can involve the full or partial loss of executive function, memory capacity, speech, social skills, and self-care capabilities, along with increased difficulty managing sensory overload (Higgins et al., 2021). Addressing the social and environmental aspects of our society that are inaccessible to autistic people will help to reduce stressors, and therefore, the experience of autistic burnout.

The next section of this article will examine the way in which accessibility needs are understood and discuss social work’s role in relation to the difficulties autistic people face, along with the responsibilities of the social work profession to develop accessible practice and environments.

Interpreting accessibility issues: social work’s role

Models and theoretical lenses

An important factor to consider when discussing accessibility is society’s understanding of disability. The social model of disability, developed in the 1970s, views disability as a socially constructed phenomenon (Woods, 2017). The social model posits that it is the way in which society views disability and the environments that disabled people must navigate that truly disable them. While the medical model, which remains the predominant model of understanding, argues that disability is a result of impairments alone and they should be corrected with medical intervention (Anastasiou & Kauffman, 2013). A contemporary approach recognises both the medical model and the social model, where it is understood that both impairments and a number of social factors impact one’s experience of being disabled (Woods, 2017).

Acknowledging the societal views that underpin disabled people’s experiences of the world is critical to discussing accessibility issues and social work’s role in ensuring their practice is equitable and accessible.

The social model of disability demonstrates the importance of considering what environmental and societal factors contribute to an individual’s experience of disability. As a method of reflective practice, critical social theory can be utilised by social workers to critique structures and power struggles that impact their clients on a systemic level as well as to address their own biases and preconceived ideas (Harms et al., 2019). Critical disability theory evolved from critical social theory and has become widely used alongside the social model of disability as a theoretical underpinning for the disability rights movement (Hall, 2019). Critical disability theory views disability as a social, cultural, and political phenomenon rather than a direct result of the individual’s impairments (Hall, 2019).

Through these theoretical lenses, the environment becomes a significant factor that can disable an individual. This issue brings into focus the power that professionals and designers can have over the level of disability individuals face. For example, if an environment was designed specifically for autistic people they would most likely thrive in that environment and, by society’s definition, would not present as being disabled. Therefore, social workers have a responsibility to utilise critical disability theory to analyse their practice and
the systemic issues that autistic people face—such as environmental accessibility.

Taking a critical disability theory approach is also important when working with Māori autistic people as they may experience marginalisation and discrimination in different ways to New Zealand European autistic individuals. In their study, Tupou et al. (2021) found that parents of autistic children felt that understandings of autism draw heavily on western medical perspectives, while in Te Ao Māori, autism is seen as a natural part of human variation. These whānau also reported that they looked for support in their own communities due to a lack of cultural competency among the professionals involved in their child’s care (Tupou et al., 2021). In her study, Bevan-Brown (2004) found that Māori autistic children were culturally disadvantaged in school settings as they were often left out of cultural practices due to teachers’ and teacher-aids’ lack of autism awareness. These findings highlight the need for social workers to be both culturally competent and autism-aware as the intersectionality of these identities may cause increased disadvantage for their clients.

The next section of this article will examine the level to which autistic people’s accessibility needs are understood and met within the social work field, particularly through education and research.

Social work’s level of accessibility

Social workers work with a diverse range of people over their careers, which may include differences in culture, religion, gender, sexuality, or disability. It is important that social workers can work competently with each of these groups in a way that remains anti-oppressive and utilises a critical theory lens to interpret issues. One of the many ways that a social worker’s competency is developed is through education and evidence-based practice. However, best practice for working with autistic people is seldom addressed in social work education or research (Preece & Jordan, 2007). While new social workers may develop autism-friendly practice through observing co-workers and working with autistic individuals following their education, it is possible that this may not be achieved until one has been a social worker for many years.

Due to this potential delay, it is important that components of autism-friendly practice are taught within social work education. Several authors identified that there is a significant lack of education around developmental disabilities in social work programmes, and that misconceptions about autism can lead to biases and stereotyping (Bishop-Fitzpatrick et al., 2019; Preece & Jordan, 2007; Keesler, 2019). In their study, Preece and Jordan (2007) found that many misconceptions were held about autism. A fifth of the social workers they interviewed believed that the measles, mumps, and rubella (MMR) vaccine causes autism, a claim that has been shown to be false (Preece & Jordan, 2007). Bishop-Fitzpatrick et al. (2019) argued that there is currently limited systemic intervention from the social work field regarding the discrimination and lack of accessibility that autistic individuals face. This highlights the importance of social work students learning to utilise models and theories such as the social model of disability and critical disability theory to analyse systemic impacts on their clients.

Along with this, very little social work research regarding working with autistic individuals has been undertaken in Aotearoa New Zealand. In the Aotearoa New Zealand Association of Social Workers journal, only two articles address the topic of autism, one examined parents’ views of ASD (Hastie & Stephens, 2019), while the other discussed the inequities and suffering that autistic school students face (Oades, 2021). While both of these articles contribute to a social worker’s understanding of autism and ability to work with autistic individuals, neither directly addresses becoming autism-friendly...
within one’s practice and work environment. Regardless of the focus of the previous research, it is clear that there is a significant paucity of New Zealand scholarship in this area of social work. While some research has been completed internationally, best social work practice when working with autistic individuals is a largely unexplored topic. The lack of research regarding best practice guidelines for working with autistic people requires greater recognition within the social work profession in Aotearoa New Zealand.

However, Haney and Cullen (2018) argued that social workers are perfectly placed to challenge discrimination and advocate for systemic accessibility changes alongside autistic individuals. Particularly because social workers practise in a broad range of sectors and are able to influence change in many different environments and contexts. The social work profession has the potential to empower autistic people by ensuring their workplaces are accessible and inclusive, and advocating for systemic change such as greater autism awareness and acceptance, and environmental accessibility within the wider community.

**Accessibility and the built environment**

**The role of design**

Many authors have identified the need for architects to become more aware of autism accessibility needs when designing the built environment (Denhardt, 2017; Kinnaer et al., 2016; Mostafa, 2008; Shell, n.d.). Tola et al. (2021) argued that the built environment is an extremely influential factor in the quality of life for autistic people. Inaccessibility has the potential to impact autistic people’s capability to complete tasks such as going grocery shopping, visiting public spaces, and accessing education, among others. Physical accessibility is usually adequately addressed in built environments, however, research and thinking around designing spaces for sensory accessibility for autistic individuals is relatively new (Bates et al., 2016).

Some businesses and public spaces, such as supermarkets and libraries, offer small windows of time each week when specific accommodations are made for autistic people, such as lights being dimmed, music being quietened and minimal staff on the floor. While this creates a more accessible space for autistic people, it only occurs for a short period of time, normally once a week in the middle of a weekday. Many autistic people who have significant sensory issues also have full-time jobs or need to visit the supermarket more than once a week. For spaces to be considered autism-friendly and accessible they must always be accessible.

Although designers have begun to focus on creating autism-friendly spaces, this process can lead to autistic needs and voices being forgotten. Generalised design standards for sensory accessible spaces can result in inadequate environments as autistic people’s sensory needs are diverse (Kinnaer et al., 2016). Elise Roy, a deaf disability advocate, proposes that there is only one way for designers to address this issue, which is including disabled people in the design process (Roy, 2015). Along with other authors, Roy (2015), argued that disabled people have unique experiential knowledge which makes them experts about accessibility issues (Burke, 2017; Gillespie-Lynch et al., 2017; Kinnaer et al., 2016). This is especially true for autistic people because sensory issues vary significantly between individuals. In social work, the most important perspective is the service user’s perspective, and their needs, wants and rights should guide the intervention or advocacy they receive. Autistic individuals, like neurotypical people, are the experts on their own situation, even though they may communicate their needs differently (Gilliespie-Lynch et al., 2017). For spaces to be made autism-friendly, it is essential that disability is thought about in different ways and autistic people are included in design.
planning. Instead of trying to accommodate individual issues, design should aim to create inclusive spaces that are accessible for everyone (Stebbins, n.d.).

Shell (n.d.) argued that buildings designed with autism accessibility in mind, are better for all users. All building users struggle with sensory input on occasion, whether it is a loud or bothersome noise, or another environmental stimulus. Designing for autistic people also creates a space in which neurotypical people may find that they can function more effectively.

**Environmental accessibility strategies**

Due to the paucity of the literature addressing environmental accessibility for autistic people and the diversity among autistic individuals’ sensory experiences, strategies for creating accessible spaces vary significantly. However, it is possible to identify some common factors among the strategies discussed in previous research, many of which were created in partnership with autistic people. Figure 1 displays a summary of these strategies which have been collated across social, educational, psychological, and architectural research. The infographic can be used as a standard from which autistic-friendly practice can be developed within professional and public spaces.

**Reduction of sensory input**

One of the most important strategies for creating accessible spaces for autistic people is sensory input reduction (Mostafa, 2015).

*Figure 1 Environmental Accessibility Infographic*
While all other strategies recommended in this article can be utilised to make sensory input more manageable, the reduction or removal of particular sensory inputs altogether may have the greatest positive impact for autistic people. The fewer sensory inputs to process, the easier the management of sensory issues becomes for individuals (Mostafa, 2015). This can be achieved through sound-proofing or minimising reverberations, using muted colours and simplistic patterns, having the same furniture throughout a space, minimising intense smells, or using indirect lighting (Shell, n.d.).

**Pre-visit information**

Uncertainty regarding an environment and meeting new people, such as a social worker, can be a significant barrier for autistic people. A coping strategy frequently employed by autistic people when faced with uncertainty is avoidance, which can lead to a lack of engagement with services. One way to support autistic people to navigate this uncertainty around new environments is to provide pre-visit information (Hugo, 2018). Pre-visit information should provide specific details about what can be expected from an appointment, photos of the staff, information about each of them, and a walk-through video of the building highlighting key areas such as the reception, meeting spaces, emergency exits, and toilets (Buckley, 2017).

**Practice visits**

Some autistic people may find a practice visit helpful to alleviate anxiety and become familiar with sensory stimuli present in a new environment. A practice visit, much like a walk-through video, can be used to show the individual key aspects of the building (Hugo, 2018). Although, unlike a video, during an in-person visit the individual can ask questions, identify potentially disabling factors within the environment and plan accordingly. The option to request a practice visit should be a part of the pre-visit information provided for clients.

**Alternative engagement options**

Another strategy to ensure accessibility for autistic individuals may be offering alternate methods through which to engage with a service. Spain et al. (2021) completed a study that looked at the effect of the Covid-19 outbreak on autistic individuals. In their study, autistic individuals reported that the alternative methods of engagement that were offered by services over the Covid-19 lockdown period, such as emails, phone calls, and video calls, were often more accessible for them (Spain et al., 2021). These findings have important implications for practice as they indicate that autistic people may find it easier to engage with a social worker virtually from their home environment. While this may require social workers to re-evaluate the importance placed on face-to-face interactions, alternate forms of engagement can create a more accessible environment for autistic people.

**Clear signage**

Clear signage is vital to make a space accessible to all people, especially disabled individuals. Signage should be easily understandable and denote the purpose of each space to provide clarity and order (Bates et al., 2017). This is important because autistic people may find it more difficult to navigate environments when experiencing sensory overload due to their reduced capacity for sensory processing. Along with this, having clearly labelled spaces can help autistic people orientate themselves to a new environment (Mostafa, 2015). Some authors have also suggested that having different colours on feature walls or doors in each space can help autistic individuals to make sense of their environment (Kinnaer et al., 2016; Mostafa, 2015).

**Sensory packs**

Sensory packs are an innovative tool for organisations and public spaces to increase their level of accessibility for autistic people (Hugo, 2018). Sensory packs contain various
items that may help autistic people cope with sensory issues. They can be extremely beneficial in spaces where a reduction of sensory input cannot be achieved easily. Sensory packs can include items such as earplugs or noise-cancelling headphones, a variety of fidget tools, a weighted item and a map of the building that shows escape spaces (Hugo, 2018). Having sensory packs available can help to break down the stigma that autistic people regularly face for using self-regulation strategies such as stimming. By making this small change, organisations can validate autistic people’s needs and make the environment more accessible.

Customisable spaces

To support the varying needs within and between autistic individuals, spaces should be customisable and flexible (Tola et al., 2021). An individual’s needs can change daily or moment by moment, by having a space that can be adjusted, organisations can allow for the full inclusion of autistic people. Customisable aspects of a space may include blinds on windows to block out sunlight, the ability to dim lights, doors between spaces, furniture that can be rearranged, or air-conditioning that can easily be adjusted. In existing spaces some of these accommodations may be difficult to achieve, but social workers can work around barriers by gaining their autistic client’s perspective and working together to find a solution.

Escape rooms

An escape room is a separate space within a building that has been purposefully created with minimal sensory input (Kinnaer et al., 2016). Escape rooms are a place in which autistic people can retreat to manage sensory overload. Even when strategies are used to make a space more sensory-friendly, it is inevitable that at some point an autistic person will experience sensory overload. Escape rooms should be sensory-neutral environments, typically they are quiet, and have dim lighting and simple designs (Mostafa, 2015). They may also have stimming tools and furniture that can be used to stim such as a rocking chair. By creating a space in which sensory inputs are minimised and autistic people are encouraged to manage their needs in a way that works for them, organisations can ensure their space is accessible.

Sensory rooms

Sensory rooms are spaces that autistic people can use when they are sensory seeking. Unlike escape rooms, sensory rooms have increased opportunities for sensory input (Kinnaer et al., 2016). This may include fidget tools, noise-makers, various surface textures, colour-changing lights, an object for bouncing like a swiss ball or small trampoline, smelly objects, or speakers to play music. It may not be possible for some agencies to create a sensory room in their existing built environment. In these cases, elements of a sensory room can be incorporated into sensory packs for clients. Sensory overload is often a more significant barrier for clients compared to sensory seeking needs, for this reason it is more important to create an escape space where possible (Kinnaer et al., 2016).

Recommendations for practice

The following recommendations provide key areas in which the strategies suggested in this article can be utilised to create positive social change within the social work field in Aotearoa New Zealand.

Transforming social work environments

When environments are designed to suit an autistic person’s sensory needs they are able to thrive, as such, social work spaces should be made environmentally accessible wherever possible. The strategies proposed in this article are designed to be simple adjustments that can be made to any space to increase its accessibility for autistic people. To ensure that the strategies
are adequately meeting sensory needs, they should be implemented through collaboration with autistic clients. Along with this, the promotion of autism-friendly spaces and practice has the potential to result in consciousness-raising about the misconceptions practitioners may hold about ASD and the effect these can have on engagement with autistic people. Advocating for the development of autism-friendly practice and creation of accessible environments should not only be the responsibility of individual social workers but the social work profession as a whole through research, professional development and partnering with autistic people. It is crucial that the development of accessible environments and practice is championed at both a micro and macro level within the social work profession. Another key group of stakeholders to be considered are autistic social workers, as inaccessible social work spaces do not only impact autistic clients. It is important that autistic social workers are not lost amongst this discussion, as the strategies proposed in this article can significantly benefit them as well.

**Engaging in interprofessional collaboration**

Interprofessional collaboration has the potential to be a key of factor of influence on the development of autism-friendly practice for the social work profession. Collaboration across disciplines, such as architects, social workers, council members, teachers, health workers, and autistic people, will allow for the most innovative practices in each area to be shared and used to inform the development of accessible environments and practice. While this article has primarily discussed how these strategies can be utilised within social work, they are applicable across many different disciplines such as health, education, public services, and architecture. Collaborative practice between disciplines has been shown to improve outcomes for clients (Giles, 2016). Due to this, interprofessional collaboration has significant potential to result in long-term positive social change for autistic people, at both individual and systemic levels.

**Education and professional development**

There are a number of ways that a social worker can gain an understanding of autism-friendly practice, such as working with autistic people, reading current research, undertaking professional development, and learning from autistic social workers. One of the most pertinent aspects of this professional development is gaining a good understanding of autism, how it presents and common misconceptions that are held about ASD.

The aim of this article was to contribute and develop knowledge that can enhance a social worker’s practice—it thus has significant implications for social work in Aotearoa New Zealand. However, there is still development needed in this area within the social work profession. More research in this area is vital and autistic social workers should be utilised for their understanding of autism and social work practice. Along with this, the knowledge and strategies discussed in this article have the potential to be developed into a professional development programme for social workers in Aotearoa New Zealand.

One of the key factors of influence in developing an autism-friendly workforce is social work education. The skills developed during education become the foundation of a social worker’s practice. It is paramount that this foundation provides an understanding of diverse groups and their needs. This is of particular importance because some of the elements of engagement and interaction taught in social work education may actually hinder engagement and relationship building with autistic people. Teaching the elements of autism-friendly practice early on will ensure that they are woven into the foundation of each new social worker’s practice. Every social work programme within Aotearoa New Zealand should include the development of autism-friendly practice skills.
Conclusion

Living in an inaccessible world can be far more disabling for autistic individuals than their impairments alone. While there is currently a lack of research regarding the implications of environmental accessibility for autistic people, it is a significant inequity that individuals face in their daily life. Often inaccessibility is influenced by the stereotypes and misconceptions about autism perpetuated in the media. Professionals working with autistic individuals may hold preconceived notions about autistic presentations and needs due to the perpetuation of stereotypes and misconceptions. As discussed throughout this article, social workers have the potential to make their practice and the environments they work within accessible for autistic people. This can be achieved through autism education for social workers, interprofessional collaboration, and the use of the environmental accessibility strategies proposed in this article. A final thought from disability advocate, Elise Roy, “professionals must change their mindset from that of tolerance of disabled individuals and individual accommodations to creating fully inclusive practice and environments” (Roy, 2015, 06:40).

Submitted: 21 March 2022

Accepted: 28 August 2022

Published: 23 September 2022


Roy, E. (2015). When we design for disability, we all benefit [Vidéo]. Ted Conferences. https://www.ted.com/talks/elise_roy_when_we_design_for_disability_we_all_benefit#t-777424


