

## Some thoughts on further training for mediators regarding Neurodiversity

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Below are a few notes on potential areas to include in further training on neurodiversity for mediators. I have focussed on some of the aspects of neurodiversity which may have practical implications in the preparation, mediation meeting or agreement phase of the mediation process (at least as I understand it). It would clearly be important for those with mediation expertise to develop further, especially how the factors listed could effect the various phases of mediation.

Not all the aspects mentioned below will apply equally to everyone with neurodiversity. I set myself the question – if in an ideal world, you were to set up the gold standard for adapting the mediation process for neurodivergent individuals what you would need to consider. There will no doubt other factors which could be reasonably added to the below list.

I haven't covered some of the reasons why individuals with neurodiversity may end up requiring mediation more frequently than others. If this perspective would be helpful for mediators to understand better (for instance why certain misunderstandings may occur), then this training content could be developed too.

In blue are some suggestions for interaction exercises during training.

### SENSORY SENSITIVITY

**Sounds** – individuals with ASD often can perceive sounds others can't (eg computer humming, high pitches, electrical wires vibrating) or can be more agitated by sounds everyone can hear (eg. transcription typist tapping on lap-top, clock ticking, road works/sirens outside). Also, autistic individuals are often less good at filtering out background noise. Individuals with ADHD can struggle with too much silence or be easily distracted by sounds

**Sudden** sounds like fire-alarms/sirens can be especially agitating/distressing/painful for someone with autism.

**Light** – autistic individuals are often very sensitive to light, especially artificial lights, especially strip lights. Can prefer to sit in dim/dark lighting. Often wear sunglasses more than others.

**Colour/visual busyness/order** – autistic individuals could be agitated by busy decorations, certain colours (simpler the better), patterns, squint paintings etc. ADHD individuals may be easily distracted by paintings/decorations. Cool colours like blues and greens, as well as muted tones like beige and cream, are generally calming and can help reduce anxiety and promote focus. Bright and Fluorescent Colours can be distracting and cause irritation or headaches for some individuals. Red can be high-energy and increase blood pressure.

Yellows can be overstimulating. Bold patterns can be confusing and overstimulating.

**Temp** individuals often feel significantly colder or hotter than others sharing the same environment.

**Smell** – autistic individuals can often smell things others can't, or are sensitive to particular smells, scents, perfumes etc. Also people with ND more likely to be allergic (eg to flowers etc)

**Touch** – physical contact, eg handshake, reassuring pat, hug may not be welcomed and may be distressing for autistic individuals.

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### IMPATIENCE and HYPERACTIVITY

Individuals with ADHD (combined subtype) can be highly impatient. They may get frustrated by sitting still too long (many won't go to cinema for this reason) and need to fidget, move. Verbal disinhibition can lead to being inadvertently rude. Find slow talker especially frustrating, so may have the urge to interject/finish sentences.

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### SOCIAL BATTERY

**Autistic people** usually find social interactions challenging, stressful and draining. Often 1:1 interactions are preferred to groups. When in group better if there is a structure to when to speak (individuals with ASD not good at sensing correct moment to enter/exit group conversation, so may end up not speaking).

**Recovery time** – autistic adults typically need extended time on own to process and recover between social interactions.

Individuals with **ADHD** can find social contact draining due to demands on getting there on time, focussing and suppressing urges to talk over people, finish sentence

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### EYE CONTACT

**Autistic** individuals struggle with eye contact, although many have learned to do this in a somewhat mechanistic manner. Usually, ability to manage eye contact gets worse with stress/anxiety. Can report feeling it is "too much".

Someone who is autistic may prefer to look at someone's mouth as this allows increased data to enhance their understanding of what is being said.

Some Individuals with **ADHD** find it easier to focus on what is being said by looking away (averting eye contact)

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FACIAL RECOGNITION		
<p><b>Emotions</b> – individuals with ASD often struggle to correctly identify the correct emotions by facial expression, often leading to misunderstandings.</p> <p><b>Faces test</b> – could be a useful exercise for delegates to try, to see how they find this test</p> <p><b>Identity</b> – individuals with ASD can often not recognise people they have met previously. This is due to limitations in their facial identity recognition systems and can lead to social errors</p>		
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LITERAL LANGUAGE		
<p><b>What does an agreement look like?</b> This could be a phrase used in seeking a compromise. However, what taken literally an autistic person may answer something like “I would assume an agreement is white A4 paper document”. So, asking someone with ASD a question like this can be very confusing/aggravating. It’s very easily done, given non-autistic people speak a different language (using a mix of literal and non-literal language), but worth being aware of the potential pitfalls.</p> <p><b>Transcript of mediation</b> – it may be a useful exercise to take a transcript of a real mediation and ask delegates to identify use of non-literal use of language within this.</p> <p><b>Precision of language</b> – autistic individuals often value precision in language, both in the language they select and that they require from others. This can lead to seeking repeated and extensive clarifications which others find excessive. It can also lead to delays whilst ASD individuals take time to carefully select the precise words to select.</p> <p><b>Humour</b> – autistic individuals generally don’t get word-play, irony, sarcasm</p>		
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THEORY OF MIND		
<p><b>Theory of Mind</b> – this is a core feature of ASD. It is distinct to empathy. It relates to the ability to imagine the world from another’s perspective. So, any mediation technique which tries to get an individual to see things from another’s perspective, may be doomed to fail, and may only cause frustration (like asking someone colour blind to read a colour coded chart)</p> <p><b>DOLLY ANNIE TEST</b> - a clinical test used in childhood assessment of ASD in children. May be useful exercise to illustrate ToM</p> <p><b>Empathy</b> – highly variable but can be very limited in some individuals with ASD</p>		
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PROCESSING OF SPOKEN LANGUAGE		
<p><b>Zoning out</b> – mind-wandering is core feature of ADHD. Usually better when individual engaged, although when too stressed people with ND can lose focus/shut down/ruminate over something</p> <p><b>Dyslexia</b> –dyslexia can impair processing of all language including spoken (not just reading/writing)</p> <p><b>Processing speed</b> – very variable. Can be super-quick or much slower.</p> <p><b>Visual cues</b> – if processing of spoken language an issue, then combining speech with something non-verbal (eg flip board, graphic, subtitles) can help a lot</p>		
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<b>PROCESSING OF WRITTEN LANGUAGE</b>		
<p><b>Dyslexia</b> –is a common co-morbidity with ND. Can significantly impair processing of written language. It can significantly impact a person's ability to understand and appreciate a written deal due to difficulties with decoding, processing, and retaining information from written text. This can lead to challenges in comprehending the terms, clauses, and overall implications of the agreement.</p> <p><b>Fonts (size and type)</b> – there are certain fonts which are better (and worse) for neuro-diversity Choosing appropriate fonts and sizes can reduce cognitive load, improve focus, and enhance the overall reading experience for neurodivergent individuals. Typically, a minimum of 12pt font is recommended, but many neurodivergent individuals benefit from larger sizes, such as 16pt or even larger. <b>Sans-serif fonts</b> are generally considered more accessible than serif fonts (like Times New Roman) for neurodivergent individuals, especially those with dyslexia. Examples include Arial, Verdana, and Open Sans. <b>Monospaced fonts:</b> Can be helpful as they provide consistent letter spacing, reducing confusion between similar characters. <b>Dyslexia-friendly fonts:</b> Specialized fonts like OpenDyslexic and Lexend are designed to address common challenges faced by individuals with dyslexia, such as letter confusion and visual stress. <b>Avoidance of:</b> All caps, italics, and overly decorative fonts can be difficult to read. Justified text, which creates uneven spacing, can also be problematic.</p> <p><b>Layout</b> – how documents are laid out can influence ability for individuals to ND to process, for instance optimal number of characters in a line, number of words in a sentence, sentence in a paragraph, use of bullet points, graphs. Increasing line spacing (e.g., 1.5 or 1.7) can improve readability by reducing visual crowding. Adjusting letter spacing can also enhance readability for some individuals.</p> <p><b>Paper colour</b> – Pure white backgrounds with pure black text can be dazzling and stressful for some neurodivergent individuals, especially those with dyslexia or autism. Many neurodivergent individuals, including those with dyslexia, have specific colour preferences that can aid in reading and comprehension. Pastel or muted colours like light blue, cream, or soft pastel backgrounds with dark text can reduce glare and make text easier to read. Some individuals may prefer specific colour combinations (e.g., blue text on a yellow background) that help them distinguish letters and words.</p>		
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<b>NUMBER SENSE</b>		
<p><b>Dyscalculia</b> – this is much more common in ASD and ADHD than background population. It is more easily overlooked than dyslexia, so an individual may not have a formal diagnosis. Dyscalculia can significantly hinder a person's ability to understand and appreciate financial deals. Individuals with dyscalculia may struggle with basic calculations, estimating costs, managing money, and understanding financial concepts, impacting their ability to make informed decisions about financial transactions.</p>		

<b>Maths prowess</b> – it is also true than many (not all) autistic people are very good when it comes to mathematical understanding		
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<b>NEED FOR CERTAINTY</b>		
<p><b>ASD</b> – autistic individuals feel readily out of control in a world which is often turbulent and confusing. Many like to either avoid holidays or have their holidays planned in advance so they know exactly what they are doing each day. Similarly autistic people often look up menu in advance of going to a restaurant to know exactly what they will order. Some may even have a dry run journey in advance of an appointment so they are sure what to expect. Worth establishing how important certainty is to them and try as best as possible to explain precisely what the process/steps of mediation process will be.</p> <p><b>Rules</b> – understanding the rules of a situation can help autistic individuals feel secure, so long as they understand them. It may help, if possible, to think about making the rules as transparent as possible, eg. who can speak, when and in what order)</p>		
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<b>OPTIMISING FOCUS</b>		
<p><b>Dual Attention</b> (individuals with ADHD often focus better if doing two things at once, so doodling, knitting, crocheting, notes taking, looking out the window – could all enhance their ability to follow mediation process – even if it looks like the opposite and rude)</p> <p><b>Medication</b> (ensuring individuals with ADHD remember to take medication and have top ups available if prescribed)</p> <p><b>Movement</b> (may not be possible but moving when walking/talking often helps pay attention – may be option for between session 1:1 with mediator, some ND individuals may do better in another room with video link)</p> <p><b>Subtitles</b> – many individuals with ADHD will use subtitles when watching tv/film on Netflix, or You Tube. This can helps focus. Could there be a solution in mediation (perhaps using video link in another room)</p> <p><b>Caffeine</b> (helps us all focus although can lead to over-stimulation/agitation)</p> <p><b>Blood sugar:</b> Stress and anxiety can significantly impact blood glucose levels, especially in neurodivergent individuals, by triggering the release of stress hormones like cortisol and adrenaline. These hormones can lead to increased blood glucose levels, potentially causing fluctuations and making it harder to manage blood sugar effectively.</p> <p><b>Breaks</b></p>		
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<b>SCHEDULING</b>		
<p><b>Start time</b> (many individuals with ADHD often run late or rushing to be on time, sleep often very poor in general in ASD and ADHD, so likely even worse night before mediation)</p> <p><b>Punctuality</b> (ASD can be highly agitated by late starts – my patients can often tell me exactly how many minutes they were kept waiting)</p>		

**Fixed meal times** (autistic people can have fixed mealtimes and get stressed when they are forced to change, individuals with ADHD can forget to eat, which can worsen cognitive problems)

**Medication timings** (most individuals with ADHD take stimulant medication, which is often highly effective. It does however wear off over time, so patients may need to consider whether they need to plan to top up. Worth finding out when optimal window time for functioning focus).

**Day of week** (living with ND is draining so may be better scheduling mediation earlier in week or when rested)

**Day of month** (oestrogen fluctuations can be extremely significant in its effect on impact focus, executive function and emotional stability and resilience)

**Breaks** (difficult balance between being flexible and not changing the goals posts)

**Last minute changes** (it can ruin an autistic individual's day to change appointment time at last minute)

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#### PLANNING FOR THE WORST

**Migraine** (significantly increased in both ASD and ADHD – often incapacitating and stress induced)

**Panic** (significantly increased in both ASD and ADHD – often incapacitating and stress induced)

**Autonomic dysregulation (dizziness/fainting)** associated with both ASD and ADHD

**Overwhelm/shut down** – cognitive and emotional shut down when overwhelmed

**Urge to self harm** (some individuals with ND will use self-harm as a way of coping when under mental and emotional stress)

**Suicidal thoughts** (some individuals with and will have chronic thoughts of suicide which may become more acute/intense under sig stress)

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