

Correspondence

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Autistic psychiatrists: Royal College of Psychiatrists response

The editorial by Sue McCowan et al¹ raises the important issue of autistic doctors, in particular, autistic psychiatrists. As the authors point out, students of medicine are likely to self-select for certain autistic traits, such as diligence, attention to detail and perfectionism. Despite this, many autistic doctors report high rates of workplace stress and burnout. As representatives of the Royal College of Psychiatrists, in meetings and correspondence with the organisation Autistic Doctors International, we have been shocked – but not necessarily surprised – to hear that the majority of their members have been reluctant to disclose their autism diagnosis to work colleagues for fear of negative career impact.

Although autism is not itself a mental illness, it is associated with mental health disorders of all kinds.² Autistic people are significantly overrepresented in both community and in-patient psychiatric settings.^{3,4} Autism often affects how mental disorders present and how they are best managed.⁵ It follows, then, that all psychiatrists should be able to identify autism, treat mental health problems associated with autism, and make reasonable adjustments for autistic patients in their daily practice.

Psychiatrists should also be aware that they are very likely to have autistic colleagues, including autistic trainees. The obligation to consider reasonable adjustments extends to the workplace as well as clinical settings. Relatively simple adjustments – such as installing dimmable lighting or giving more explicit guidance on tasks and responsibilities – can make an enormous positive difference. It is not an exaggeration to say that in some cases, such accommodations are career-saving.

The Royal College of Psychiatrists recently published its new Equality Action Plan, which sets out how we will achieve greater equality for College members, staff, patients and carers. Autism, and other neurodevelopmental conditions such as attention-deficit hyperactivity disorder, are within the scope of the plan. However, we recognise that more work needs to be done in the domain of neurodiversity disability support. In consultation with neurodivergent members, the College has recently identified the following three priority areas.

(a) Supporting reasonable adjustments for all members who need it: the College itself must set an example in implementing reasonable adjustments for its own disabled staff and use its influence over employing mental health organisations to comply with equality law.

(b) Clear statements from the College supporting disability equality: the College must be visible and active as an organisation that welcomes equal participation of individuals with disabilities, including those with neurodevelopmental conditions.

(c) The College being an inclusive organisation for its members: for example, ensuring that all online content including learning material and publications, conferences and events are accessible for people with disabilities.

As our members are mental health and neurodevelopmental specialists, the Royal College of Psychiatrists is in a strong position to be a leader and trendsetter amongst the medical colleges in the field of neurodiversity support and equality. McCowan et al have provided a timely reminder of the difference such support can make to individual lives.

Declaration of interest

None

References

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Welcome signs of the road ahead for autistic doctors and patients

We wholeheartedly thank and congratulate the authors and the Royal College of Psychiatrists on this response to our editorial piece. Not only for autistic psychiatrists, but for all of our colleagues who are neurodivergent and those with other disabilities.

We welcome the publication of the three vitally important priority areas for the disability section of the College Equality Action Plan. These priorities clearly and firmly signal a move to improve inclusion and support reasonable accommodations and are in line with the positions of the General Medical Council and Medical Schools Council. An accessible and inclusive College fosters retention of the existing workforce and supports ongoing recruitment – a priority of the inspiring Choose Psychiatry campaign.

We have received messages of support and thanks from autistic and other neurodivergent doctors, who now feel that there is hope of being valued and supported with reasonable accommodations where needed and may now consider disclosing autism or other neurodivergence. The College is in a strong position to lead in this area and neurodivergent colleagues from other specialties hope that their Royal Colleges will also act.

There have also been messages of congratulation and hope from those outside the medical profession who have seen our editorial with its clear message of common autistic strengths on offer alongside the request for reasonable support. They understand, like us, that the College response is a very significant and welcome change that ripples outwards in our approaches to autistic patients and into society.

We are grateful to the College for actively listening and meeting with us and our neurodivergent colleagues, and we look forward to collaborating further to effect change as soon as possible. We continue to bring much to the profession and are proud to work alongside all of our colleagues in a full CIRCLE.

Declaration of interest

All authors are members of Autistic Doctors International (peer support, education, advocacy and research).

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