



Autism Act 2009 Committee

Corrected oral evidence

Monday 2 June 2025

2.45 pm

Watch the meeting

Members present: Baroness Rock (The Chair); Lord Addington; Baroness Browning; Lord Elliott of Mickle Fell; Baroness Goudie; Baroness Hodgson of Abinger; Lord Hope of Craighead; Baroness Pitkeathley; Baroness Ritchie of Downpatrick; Lord Scriven; Lord Wigley.

Evidence Session No. 15

Heard in Public

Questions 101 - 109

Witnesses

[I](#): Sir Robert Buckland KC, Ex-chair, Buckland Review of Autism Employment; Professor Amanda Kirby, Chair, Neurodiversity employment academic panel; Sir Charlie Mayfield, Chair, Keep Britain Working review.

Examination of witnesses

Sir Robert Buckland, Professor Amanda Kirby and Sir Charlie Mayfield.

Q101 **The Chair:** Good afternoon and welcome to this public meeting of the House of Lords Committee on the Autism Act 2009. In this evidence session, we will hear from witnesses about the key barriers to enabling autistic people to find and stay in work, and effective ways to overcome those barriers. We are delighted to be joined in person by Sir Robert Buckland KC, former chair of the Buckland Review of Autism Employment; Professor Amanda Kirby, chair of the expert academic panel on neurodiversity and employment; and Sir Charlie Mayfield, chair of the Keep Britain Working review. You are all very welcome and thank you very much for coming. Our evidence sessions are on the record, which means that they are broadcast and a written transcript is taken for subsequent publication. The list of members' declared interests has been published on the committee's website.

Having made that introduction, I will now ask the first question. Each of our witnesses today has been commissioned by Government to carry out a review into work and health, focusing respectively on autism, neurodiversity, and ill health and disability. It would be very helpful if you could each outline what you have been asked to do, and why. Sir Robert, in answering, please outline the main findings of your Buckland review. Professor Kirby and Sir Charlie, please outline the scope of your work and your emerging findings. If I may, I will start with Sir Robert.

Sir Robert Buckland: Thank you very much indeed, Lady Rock, and I am very grateful to you and the committee for giving me this opportunity to speak to the review that I was asked to conduct in 2023, which was published at the end of February last year. In essence, it was motivated by a combination of two things: first, my long-standing interest in this issue, as a former member of Parliament, a Minister, and a parent of a now young adult who is autistic and has a range of comorbid disabilities; and secondly, as a result of my own experiences, working both with the criminal justice system and more generally in employment, and seeing some of the frustrations and obvious barriers that exist out there when it comes to employment for autistic people. And there are clear barriers. The figures are still distressingly worrying, with only about three in 10 autistic adults having a job of any type, out of about 700,000 to 800,000 people with a diagnosis. That is below the disability average of five out of 10 and, of course, way below the average of people without identified disabilities.

It is not because the majority of autistic people do not want to work. It is because they either find difficulty in getting employment or, when they are in employment, have roles for which they are overqualified and very often underpaid. In conducting my independent review, I worked not only with civil servants at the DWP, but also with our leading autism research charity here in the UK, Autistica. We decided to call for evidence on the barriers, and then come up with a range of practical solutions or suggestions that could unblock some of the barriers specifically related to

autism. There was some debate about whether we should widen it to neurodivergence or neurodiversity. In the end, it was felt that focusing on a particular cohort of people was perhaps effective. Inevitably, there was a wider read-across to neurodivergent and neurodiverse people, but that was the rationale.

It is interesting that none of the recommendations that we came up with—and there are 19 in total in the report—involves new legislation or a request for massive amounts of finance from Government. It was the review's opinion, on the basis of the evidence that we collated, that a lot of the issues relate to cultural barriers and problems, and a fear or reluctance on the part of employers to take on or promote people who have autism, which is the result of a range of different reasons. Where we found lived experience and best practice among business and industry, it was usually because individuals or groups with a motivation or a background in autism—perhaps family experience or similar—decided to take direct action and make that jump. The results in those areas were very productive indeed.

We bunched our recommendations into different categories. First, we looked at initiatives to raise awareness and reduce stigma, and to capitalise on productivity. We felt that a renewed campaign was necessary to refocus employers on the benefits of employing autistic people, but working with autistic representational organisations and employer-facing organisations to do so. We suggested promoting the neurodiversity employers index, devised by Autistica, which is an extremely useful guide for businesses which might struggle, or not have the wherewithal or the resources, to manage what to them might seem like a risk, frankly. This is particularly relevant for SMEs which do not have HR departments and are very hard pressed in getting on with the business of business.

We also suggested that working with larger national or multinational organisations to develop small pilots of good practice would be another way of embedding what we saw as promising results. Then, under the heading "Supporting autistic people to begin or return to a career", we came up with four recommendations, most notably the promotion of supported internships. Time and time again in the evidence, there was a very strong steer that the value of supported internships for autistic people was immense, and it often made the difference between them not getting the opportunities they deserved and then crossing the bridge into some form of employment. We felt that the change that the DfE was then piloting for an entry route to supported internships for disabled people without an education, health and care plan should be speeded up. Let us not forget that there is a large cohort of people without a diagnosis who might not identify as neurodivergent or autistic, or who perhaps do not wish to have that identification, and we have got to respect that.

The promotion of apprenticeships was seen as a key part of this approach to supporting people into work. In looking at existing programmes, we found that Access to Work, for example, while beneficial, was very slow

and cumbersome in many respects, and not really tailored to the immediate needs of supporting people into work. We felt that more needed to be done to sharpen up its effect and role.

In relation to recruitment practices, we felt that working with, for example, the Recruitment and Employment Confederation was a key recommendation, because many SMEs, of course, do not directly recruit; they rely on the agencies which dot the high streets of every town and city in Britain. Working with a representative confederation of recruiters seemed to us to be a very important way to get things right at the first opportunity—when there is sifting, for example, or establishing the type of questions that are asked in an interview, or the type of interviews that are conducted. We felt that these are all key indicators for the removal of the initial barriers that cause so much anxiety. Those who are not diagnosed may be anxious, but for autistic people you can magnify that many, many times.

We also addressed the issue of how Disability Confident needs, in our view, to be developed. We felt that it was not as widespread or profound as it should be, and that much more work needed to be done. On supporting autistic people already in the workplace, we identified that working with another important representative body, the Chartered Institute of Personnel and Development, was going to help promote their *Neurodiversity at Work* guidance published in 2018, which we felt was very good guidance on developing neuroinclusive organisations.

In summary, this was a set of 19 practical recommendations that were really designed to try and get into the weeds of this issue. There has been so much general talk about the desirability of increasing productivity and reducing economic inactivity. We felt that it is now time for real action, and we need to see cultural change among employers and the general economy if we are really going to make progress on this very difficult issue.

The Chair: Sir Robert, thank you. The recommendations were published a year ago, and as a committee, we are looking at the Autism Act, but also at the strategy and its implementation from 2026 onwards. How do you feel about the progress of your recommendations and how they have been received?

Sir Robert Buckland: I think they have been well received. It is fair to say that the new Government have received them well. I met Ministers in the new Administration in October last year. Others on the panel will talk about their contribution to the workstreams that the new Government have asked of them. My simple plea is that, in these recommendations, we have the building blocks for practical action. In particular, I want to see the task group that we recommended be created in pursuance of these goals set up and led by somebody who can command respect and support from autistic people. It is essential, if we are to improve that three-out-of-10 statistic, to get weaving and working, and a task group, in our view, was a way of holding feet to the fire and monitoring progress.

Professor Amanda Kirby: Thank you for inviting me here today. I was appointed as chair of the independent expert academic panel on neurodiversity employment by the Department for Work and Pensions and commissioned to develop evidence-based recommendations to improve employment prospects for neurodivergent people—a wider remit than autism, building on the excellent work by Sir Robert Buckland. The starting point was looking at who is included in that, because it is a broader remit. We are looking at neurodivergent individuals, who come under what that umbrella determined. We have included conditions such as ADHD; autism spectrum condition; developmental co-ordination disorder, which is also known as dyspraxia; dyslexia; dyscalculia; developmental language disorder; and tic disorders. We have also talked about and looked at the evidence around acquired brain injury. There are reasons for that. We have looked at the intersectionality and the evidence around co-occurrence, which is high. Many people with autism do not come with just autism; that is really important. If we are to support people in workplaces, understanding their overall needs, not just the label alone, is incredibly important.

Building on the evidence of lower start disparities in employment among individuals who are on the autism spectrum or autistic, we wanted to see the research base—the evidence base—across neurodivergent traits and conditions, not just in one area. The panel's role is to examine employment outcomes across all types of neurodivergence, building on the review and looking at where we are now. We wanted to also look at intersectionality, where the gaps are in terms of females and gender, and at different sizes of organisations, including not just large-scale organisations but SMEs and where individuals are self-employed.

We are starting to gather the evidence; I have not come here today with the evidence. We are in the middle of sifting all the research and pulling that together, and the idea is that we will have a report in late summer. We are doing the work at this present time, so I will present bits of it to you today.

The Chair: That is extremely helpful, thank you.

Sir Charlie Mayfield: I am leading the Keep Britain Working review for the Government. The exam question we are looking at is: how can we tackle the issue of economic inactivity? Specifically, what can employers do to tackle the causes of economic inactivity due to ill health and disability in the workplace? What should the Government do to support and encourage or require employers to perform that role? It is obviously in the context of a rising economic inactivity level. The review is called "Keep Britain Working", not "Get Britain Working", so our primary focus is on people who are in work but, inevitably, in the course of the work we are doing, we are clearly overlapping somewhat with the challenge of how you get people into work as well. While it is not the primary focus, it is something we have considered.

We began in earnest in January, and we are due to report in the autumn, probably around October. We are right in the midst of the review. We are

conducting it in three phases: in essence looking at why, what and how. The “why” phase was from January through to the middle of March. In essence, it was a question of looking at the data, assessing the scale of the issues and understanding the dynamics within them. We have since then been in the “what” phase, where we are looking at what needs to be done about it. During that phase, we are doing some pretty intense engagement work with a vast array of different people. We have held over 100 meetings across the country with people with lived experience, including of autism, with neurodiverse groups and those with learning difficulties, et cetera.

We have done a lot of work with employers, obviously, given that that is the remit of the review, with a particular focus on small and mid-sized employers, again, across the country, and spending time talking to line managers: people who are managing people rather than just leading those businesses. We have also conducted some international study visits; we have done quite a lot of desktop work on the international picture and how other countries are approaching these issues; and we also carried out some visits to Denmark and the Netherlands, which were extremely useful for understanding the practices and the approaches.

Within the context of this review, although these numbers are not specific to autism, the participation rates for people with disabilities and ill health in the UK versus the Netherlands and Denmark are quite different. Here, we have a figure of about 47%. In the Netherlands, it is about 60%, and in Denmark it is 75%.¹ They are doing much better than us in getting people with various conditions into work and staying there. I am obviously happy to say more about some of the findings as we come on to further questions.

Q102 Lord Addington: What are the comparative benefits and limitations of examining access to employment through a lens of either autism, neurodiversity or ill health? What do you think the relationship between these approaches should be, and how have you worked together in practice on this? Professor Kirby, could you set out how your panel is defining neurodiversity and neurodivergence, including which conditions you are considering? What role does the concept of neurodiversity play in employment policy and what that role—sorry, what role should it play? Says the dyslexic.

Professor Amanda Kirby: Thank you for the question; I will try to break it up into the parts that you have asked me about, which is the different lenses. Each lens brings something valuable and different, and

¹ Note from witness: While the general point is correct and the Denmark and Netherlands stats are correct, the exact UK figure has been taken from a different source. To keep everything from the same source, figure 2 on page 10 of this report [CHWL international report - final.pdf](#), shows that the UK looks to be around 53%, rather than 47%. The chart does show that the UK is among the countries where the employment rate for people with health limitations has deteriorated the most since 2018, despite showing strong improvements prior to the pandemic (it was about 65% in 2018).

that is really important. We have heard about the review focusing on autism. An autism-focused approach allows for targeted interventions and awareness building, but it risks siloing support and does mean that a diagnosis needs to be present, which is a challenge we have. Many people do not have a diagnosis of autism and may not be able to get one. They may have other diagnoses that they might miss out, or they might be worried about disclosing or sharing that information because they are not sure about the reception it will have.

On neurodiversity and neurodivergent perspectives, terminology is a wonderful thing. We have long had a debate over what neurodiversity is, but the concept we are using is that we are all neurodiverse. We all have different brains, and our brain cells are connected in multiple different ways. Some people diverge away from the social norm in the way that employers typically attract and retain talent. We are looking at individuals. We are focusing where the research has been done typically, looking at dyslexia, autism and ADHD in the workplace. We have had to go back and have a look at conditions specifically, because even though we understand that co-occurrence is the rule rather than the exception, and that overlap across conditions is very common, a lot of the work has been done, typically, in silos.

The neurodiversity and neurodivergent perspective offers a strengths-based discussion. It includes a strengths-based cross-condition perspective, but the downside of that is that it can lack specificity, so then we have a general problem of who we are talking about and how we focus on particular needs. When it comes to legal protection and access to support for those with the most complex needs, the message could be diluted. It comes with some challenges as well.

The third bit is disability and health. We are looking at disability and health and thinking about the Equality Act and disability protection, but not everyone who is neurodivergent considers themselves to be disabled, so that is another challenge we have here. Many autistic females, for instance, have not been diagnosed and may not disclose, so it is a challenge. We are looking at those three levels and how that plays out to the guidance that we are providing and the research that is present at the moment.

Sir Robert Buckland: That is a really important question. The place to start is to look at the fact that it is no coincidence that, for example, autistic people find it particularly difficult to enter or stay in the workplace. It is not a horrible coincidence; it is definitely rooted in the condition and the particular aspects of the condition that come up against some severe obstacles. Interview is the first example I can give you. Where I think your question really has force, is that it is then tempting to try to create a system that is designed around the disability or the condition, which I do not think is the right answer. In the review that we published, we talk about universality by design.

For example, if you are adjusting an interview process, why not adjust it anyway for everybody? There is no doubt that, if you are to really spread

the benefit, you have to think about people who are not diagnosed—people who do not have an EHCP in childhood or a diagnosis in adulthood, or who perhaps do not, as Amanda said, identify themselves as autistic or as having a condition and do not particularly want to be looked at like that.

Therefore, the question for the employer should not be “Are you autistic?” but “What are your needs?”—frankly, you can ask anybody in the workplace what their needs are. Through that, you can then establish the right working environment, the right workplace and the right patterns of work. Why does it have to be a 9 to 5 role if, for example, travelling in the rush hour is particularly difficult for somebody with sensory needs? Those sorts of questions are then answered in a way that helps everybody. This rising tide, universal approach will benefit both people who identify with a condition and people who do not. I hope that answers your question, Lord Addington, about the dangers of just trying to pigeonhole people. Looking beyond the condition—looking at the workplace and how it is shaped for individual need—seems to me a better approach.

Professor Amanda Kirby: We have seen that sometimes it can be confusing to employers to say, “What condition have you got? What do you need?”, rather than asking: “What task are you doing and what is the environment you are working in?” The universal design approach looks at the context rather than the label. Otherwise, you are assuming ability or lack of ability, which is a problem. A checklist approach does not seem to work.

Sir Charlie Mayfield: I defer somewhat to my colleagues’ greater expertise of the specific issues in relation to autism. Generally, though, I would say that three major findings have come out of this phase of the review. The first is that there is a tremendous amount of fear in this whole landscape, both of individuals to disclose because they are concerned about potential discrimination, all sorts of issues and simply how it would be received, and among employers—including line managers—who do not want to say the wrong thing or cause offence, let alone give reason to create a dispute or claim. It is a very real fear. We could come on to this, but one of the real truths is that a lot of employers do not employ people whom they perceive as risky. It is as simple as that. That is a major factor that we have to be clear we are facing in the UK.

The second big area for us is that there is relatively little support of a practical and easily accessible nature for employers and employees who are navigating ill health, disability and neurodiversity and autism within the workplace. These are difficult and complex issues to handle and so, of course, if there is not much support available, they often do not get handled very well and therefore can get worse. When they do get worse, very quickly distance opens up between the employer and the employee, which does not encourage or facilitate a rapid or successful return to work. In fact, it has exactly the opposite effect.

The third big area from the work that we have done is the real lack of good and effective data. That is not to say that there is not a lot of data around, but it is not aggregated in a form which makes it easily understood. The real issue from that is that human health is, by its nature, complex. We are complex human beings, and that will always be the case. However, without good data, we are all to some extent pulled in different directions all the time by people who have very legitimate interests. It is very hard to be strategic about how one addresses this issue, which makes the situation we have got, which is difficult, harder to handle.

Q103 Lord Addington: To come back to Sir Robert's point about dealing with needs first, over the diagnosis, have you found problems with people not understanding why they have to meet the needs if they do not get a diagnosis or a reason? I have some experience in this field. It is a case of thinking, "Why should I?", and, even if it is something as basic as using a voice-operated system on a computer, saying "Why should I change the room around or put a screen in place so that somebody does not get noise on the microphone?" How would you handle it when someone says: "This is a small change, but why should I?"

Sir Robert Buckland: This really gets to the nub of the human experience. The evidence we found was that, for a lot of people, the disclosure is never made because it is felt that it will be a problem and a stigma in the process of getting a job. If a disclosure is made, it is often after the job is offered, which is fine but perhaps makes things a bit more difficult, because those early weeks of a new job are often the time when things can go really badly wrong. Let us face it, you are in an unfamiliar environment and your stress levels will be high anyway—that is when mistakes can be made. If you have an employer who is not aware, they will not be able to make the appropriate adjustments to make the beginning of the job a success. Looking at the openness question, again, we found that only about 35% of autistic employees are fully open about being autistic in the first place. Disclosure is a big thing.

What is the answer to that? I go back to the point I made about universality. Amanda has already made the point that we should look at it with a task-based approach. For an interview for a practical job, instead of sitting in a room such as this and having an academic interview, get down into the workplace and demonstrate the role that is being advertised so that the person can roleplay and do something practical in order to fully understand from the get-go what is required of them. That is good practice generally, whether you are autistic or neurodiverse or not.

Professor Amanda Kirby: The principles of universal design are practical and deliverable. I think what is confusing for the employer is when they sometimes think you need to have a diagnosis to put adjustments in place, so there is a delay, which loses confidence with the individual as they are not having that conversation about their needs early in the process. Then there is distrust, leading to fear by the employers, who think, "I am not going to take somebody else on because

that has been a poor experience". By having universal design principles, making sure that interview processes are as inclusive as possible, we have those conversations early in the employment life cycle and help those who are disclosing, those who do not have a diagnosis and may not be sure, and those who do but may have had poor experiences before. Having that conversation means that the employer is trying to get the best out of the employee for everyone, so it actually has a win-win outcome.

Q104 Baroness Hodgson of Abinger: I want to pick up on what Sir Charlie said about fear. I assume that a lot of employers interviewing people would prefer somebody without rather than with problems, who would come in, do the job and not make ripples. Should there be some kind of incentive to broaden your scope in this way? I absolutely take your point that, when people have a label, sometimes they are not seen as suitable for job advancement and promotion. It is a complex issue.

Sir Charlie Mayfield: There is often a real issue that the balance of incentives—not financial ones—is weighted against people who are different getting a job in the first place. Honestly, no amount of Equality Act or legislation will change that unless one addresses the actual cause of the fear, which is that the person I might employ, who might be fantastic but looks risky, could be a problem down the track. It is also very important to make a distinction between large businesses that have resources and the majority of businesses, for which the majority of people work in the UK, that do not. We have been in groups where people have been very honest. They have said, "If I've got employee A who is brilliant but looks risky, or employee B who's average but does not look risky, I cannot afford to take that risk, so I will choose employee B". It is heartbreaking, but I cannot tell you the number of times I have heard people say that. I was in a meeting in Scotland with somebody who was registered blind. She said very quietly at the end of our session, "I was 49 before I got my first job and I had five degrees". That is the reality that we face.

You are absolutely right: we have to think very seriously about how we balance that up. Interestingly, and it is somewhat surprising, part of the reason why Denmark achieves a higher participation rate is that it is very easier to fire people, so if somebody hires someone who has a difference that might be problematic, they are not worried about that in the same way that an employer might be in the UK because it is relatively easy to terminate the contract. The difference is that that person is caught by a much stronger safety net, and there is a much greater and more structured level of support to support that person into alternative employment. It is a very different system but it addresses the fundamental point you are making about the balance of risk.

The Chair: We will move on to Lord Hope's question, because we are coming on to barriers now. That leads on very nicely.

Q105 Lord Hope of Craighead: My question is about barriers. What is the evidence on the main barriers to entering work for autistic people, people

who are neurodivergent, and people with a disability or health condition, including and perhaps especially during the transition to adulthood? I have a particular question to you, Sir Charlie, if you would not mind: what are the main barriers to people in each of these groups on re-entering work, assuming they had to leave work for one reason or another and are trying to get back into it? What should the Government, employers and others do to overcome these barriers?

Sir Charlie Mayfield: I do not want to repeat what I said, but the fear issue is, in my view, the biggest and most significant barrier. Then there are others to do with the availability of easily accessible advice and support. If, for example, an employer, particularly a small or mid-sized employer, employs somebody with autism, although there are pretty good resources out there to support them—advice, guidance and what have you—it is often not immediately available to the person who really needs to have it in their hands at that particular moment. We have to get our minds into the fact that we are in the workplace at this stage and it is very much about human reactions. There is no time to consult a website and then come back and say, “Oh, how about this, then?” It is very difficult to get the level of awareness up, particularly among that audience. It comes back to the previous question about incentives: are we creating incentives for employers to be good and better employers? There is perhaps scope for us to do more around that.

On entry and re-entry, again, it is less a barrier but more of an enabler, but I very much agree with what Sir Robert said about supported internships—actually, more than just supported internships but work coaches and people who are present in the workplace, acknowledging that there will sometimes be difficulties in employing somebody with autism. You would then have that person with the expertise available in the workplace. Again, an example from another place we went to in Denmark was an organisation that organises all that for employers. In that case, it had 25 of its people with learning difficulties working for a local supermarket which employed three work coaches, who were there all the time. The employment of those three work coaches enabled those 25 people to work as full-time employees in that supermarket very successfully. It is really about how we remove the fear and provide support in a timely and efficient way.

Lord Hope of Craighead: What about re-entering work? Is there a problem with people who have tried it and been discouraged, or have been taken out of employment for some reason? Are they a different category or is it all part of the same problem?

Sir Charlie Mayfield: It is broadly the same. The issue is, though, that once somebody leaves the workplace, the longer they are absent from it, for whatever reason, the chances of them returning successfully reduce very quickly indeed. That is largely to do with their self-confidence and how that can be eroded once they become distant from work. Again, there are quite a lot of practical things we could be doing. You cannot say this universally, but in general it is a very bad idea, when somebody leaves work, for them to become disconnected from work, yet a lot of

advice, for example, will say, "Do not contact this person". We have a system that creates distance at a time when you really should not have it.

There are also insufficiently clear requirements for people to take proactive steps to bring people back into work, or indeed to plan a re-entry into work. Again, other countries that do this well have a very simple requirement that, after a certain period of absence, there has to be a meeting between the employer, the employee and a qualified professional—in the case of autism, that would be the employer, the employee and a qualified person who understands autism—to create a plan for a return to work, including whatever adjustments are required to support it. That is a requirement in other countries; it is not necessarily a requirement here.

Lord Hope of Craighead: What period do they have in mind? How long?

Sir Charlie Mayfield: The one I am thinking of is six weeks. I think you could probably shorten that.² It depends on the resources that you have available to make that happen.

Professor Amanda Kirby: One of the things we are looking at is the precarious nature of a lot of employment among individuals who are autistic and neurodivergent. Research is coming out showing that they are twice as likely to be in precarious roles and 10 times more likely to be in temporary employment. That plays to what Sir Charlie was just saying, which is that inconsistency and not being able to sustain employment means that, when you leave it, you lose confidence. The challenge is also with the employer not having conversations early on to put adjustments in place. There are often small, low-cost or no-cost adjustments that could be put in place, but there is a fear of saying the wrong thing. Having coaches in place who can navigate those conversations and help put the adjustments in place early on would make a big difference.

We are pulling the research together. Like I said at the beginning, there is a lack of research in a lot of areas, especially when we look at SMEs and smaller organisations and seeing what works. Looking at coaching and really thinking about getting employers to understand that the adjustments might not be high cost and can be implemented easily would make a big difference to increase confidence, to continue to have those conversations and to not let people leave. Once they have left, it is hard to get them back in again.

Lord Hope of Craighead: Do you have anything to say about the transition to adulthood?

Professor Amanda Kirby: That is something we are really looking at. Transition and preparation into employment are incredibly important for

² Note from witness: In Denmark there is a rule that 'Within the first four weeks of your absence due to illness, your employer must invite you to an interview to work out how and when you can return to work.' [Danish sickness benefit | Nordic cooperation](#)

those individuals who already have education, health and care plans, who we know about and are targeted. To have that transition into work placements, job carving, and opportunities to practise the skills they require to go into job placements early seems to be a significant challenge. We are not targeting those individuals. There are also a lot of young people who do not have education, health and care plans, who then do not have any transition or preparation. They are the ones who often miss out completely. We are looking at those who are going through the criminal justice system and youth offending at the edges of society, who may well have high rates of neurodivergent traits, which we know, but are less likely to have formal diagnosis in place. They are doubly disadvantaged, from that point of view.

Sir Robert Buckland: Building on the professor's point, this is not just an economy issue; it is a criminal justice issue as well. There is no doubt that the prevalence of, in particular, young offenders with either diagnosed or undiagnosed neurological conditions is, frankly, a result of a failure of the system to educate them, to identify their health needs or to help them into work. Therefore, this is a public safety issue as well in terms of how we should look at it.

Lord Hope asked about barriers to employment. In our review, we found that, according to a study conducted by the Institute of Leadership—whose data is about five years old but I still think is probably relevant today—50% of managers surveyed expressed discomfort with the idea of hiring disabled people. In particular, 69% of employers thought that the cost of making workplace adjustments was a barrier, and 67% thought that the practicalities of making workplace adjustments were a barrier. Nearly half had concerns about the application process and its accessibility. A lower figure, but still concerning, was the 29% strike rate in terms of concern about whether a disabled person could do the job.

You can see from those figures that there is a real issue as to perceived risk, to develop Sir Charlie's point. I suppose it can be described as a fear of the unknown. Yet, conversely, where you get examples of good practice, the results are dramatically different. We have been talking about supported internships. I can give you an example. DFN Project SEARCH is a charity providing one-year supported internships. Of its graduates, 94% completed the programme and 60% moved into full-time jobs. Those who are employed are working an average of 25.4 hours per week, and the average starting salary for graduates was above the minimum wage, as opposed to a lower wage, which is very often the case for people with an identified condition coming into work. We found very clear evidence that that type of targeted approach can really make a difference.

Lord Hope of Craighead: Did you follow up as to whether the people in that very successful group remained in employment?

Sir Robert Buckland: That is a very good point. I do not have the figures before me, but I know that the retention rates are high. The experience of many employers when it comes to autistic adults is a very

positive one. Autistic people tend to be very loyal. They get on with the job. They will follow the instructions and do what is asked of them, and they are committed. Time and time again, we heard this really positive evidence about the experiences in many different walks of life, from insurance right through to more blue-collar types of work, that autistic people make good workers. That message has to resonate time and time again.

The Chair: We will be hearing from DFN Project SEARCH as a witness next week, so that is incredibly helpful, thank you. Baroness Browning and Lord Scriven have some supplementaries.

Q106 **Baroness Browning:** I am not sure whether Sir Charlie or Professor Kirby is the person to answer this, but what is the role of the Government in all this, through places such as Jobcentre Plus, for example? We have not heard them mentioned. We have heard a lot about the private sector and employers, of course, but I recently took a 50 year-old woman who has an Asperger's diagnosis, plus some physical disabilities, into Jobcentre Plus. She has been out of work for two years through physical ill health and is desperate to get back into work; she was in paid employment. But we discovered when we walked through the door that because she is in receipt only of PIP, a disability benefit, and not an unemployment benefit, Jobcentre Plus could offer her no advice, support or help in getting into work. She was turned away. I do not know whether either of your reports will cover the role of Jobcentre Plus, but I was pretty disgusted. Is this something you can throw any light on?

Sir Charlie Mayfield: I am certainly not an expert. Because we are doing Keep Britain Working—I feel embarrassed saying that because it sounds like a cop-out and that we are not worried about people who are not in work when of course we are—our focus is not primarily on job centres, which are getting people into work; it is more about how we keep people in work in the first place. However, I think there is a more general need to value participation in this country. We all acknowledge, I am sure, that participation is a good thing, but as a central core, or lodestone, to policy development, including welfare, et cetera, I think there is an opportunity to craft that in there in a way which is not really present at the moment. Again, when you look at other countries, there is much greater clarity about the importance of participation, and there is often a greater alignment of the various systems, benefits and support structures that are in place to achieve that outcome. There are things that we could improve here which would lead to that, one of which might be the role of Jobcentre Plus.

I know that the Department for Work and Pensions is looking very hard at how we can use and mobilise Jobcentre Plus much better to get more people into work and be less "You don't qualify". I am sure that your point of view would be met with great sympathy by the Ministers, but it is not something that we are focusing on directly.

Professor Amanda Kirby: We are looking at the evidence base around the international classification of functioning World Health Organization

activity and participation frameworks, where research has been done in autism, ADHD and other conditions. It plays to that point of looking at and valuing activity and participation and seeing how they can improve outcomes.

The other part, going back to Sir Robert Buckland's point about universal design, is how we ensure that when you walk through the door of Jobcentre Plus and other places they are as inclusive as possible and understand the needs of individuals, whether they have a diagnosis or not. That will mean embracing them and looking at their needs—to go back to that again—rather than their diagnosis as such.

Q107 Lord Scriven: An absolutely fascinating and important point that you have touched on is risk, and I think you talked about cultural difference. You have been able to identify good practice. I am sitting here thinking: how is this scalable? What are the barriers and what are the key issues to make this scalable, rather than just small examples of good practice? What are your views on that?

Sir Robert Buckland: We came up with recommendations in our report about how to spread the use of the Autistica neurodiversity index, for example. It is a very simple and easy-to-use guide that organisations large and small can use as their checklist to make sure that they are doing the right thing and not making the obvious mistakes that are clear to those of us who are tutored in it but are not to the uninitiated.

It is tempting to say, "Perhaps we should legislate on this", but I think that that would be counterproductive. Some of the messages that we have heard today—Sir Charlie made some very interesting points about other countries—is that however well-intentioned rights-based legislation might be, it can have perverse countervailing effects and result in people retreating into their trenches and thinking, "I just can't take the risk in this legal minefield. I've got to be very careful. I owe a duty to my existing employees and shareholders, or the people I work with, to make sure that the business is a success". That is entirely understandable. It is not a matter of criticism; it is an observation about human affairs.

Therefore, it seems to me that it is a combination of things. Using that type of index-based approach has had results in other areas of activity, such as equality of opportunity for women employees, and other types of diverse employment. It has worked. But, secondly, to build on the point made in answer to the previous question, let us not forget that, when the Government created universal credit, they also created universal support. The universal support programme is designed to provide internship support and advice and to work with the individual to get them into that much-needed job. The previous Government announced a scale-up of universal support, and this Government have also made important commitments about scaling it up. Your committee might want to have a look to see how far that is going, because it seems to me that, bearing in mind that it is now 10 years since universal credit came in, universal support has lagged behind its sister in many respects. That is missing from the overall approach that I think we need to be taking.

Lord Scriven: Charlie, you had a very wry smile while I was asking that question. What was going through your mind?

Sir Charlie Mayfield: That is exactly the question we are addressing and grappling with at this moment. We are right in the midst of it. I said that we are doing “Why? What? How?”; we are in the “what” and about to start moving into the “how”, which will look at this issue considerably.

I think that this—we should be careful how we define “this”—can be done. While we cannot copy other countries, we can see how active and determined labour market policy can drive dramatically different outcomes. I have already mentioned Denmark a couple of times. In the Netherlands, for example—again, I am slightly off-piste in that this is not about autism—in the late 1990s, they were talking about a crisis of participation or economic inactivity. Over the course of five years, between about 2000 and 2005, they more than halved the rate at which people were flowing from the workplace into long-term economic inactivity. They have held that level pretty much all the way through, with a slight blip up in recent years but nothing like what we have seen. So it can be done.

How do you scale it? First, you have to be clear about the importance of participation as an economic priority. The conditions are really beginning to lend themselves to that reality. We were in Scotland last week, where the team from the Scottish Government were saying that their absolute focus in terms of labour market policy is participation. We have succeeded enormously in getting more women into work. We have had a lot of immigration boosting the workplace, but that will now be less going forward so we have to figure out how to have more people working. It has to be a top priority. I think the Prime Minister effectively said that too, in saying that the goal is to get back to 80% participation.

You then come to the grittier elements of how you do it. While I cannot give you an answer just yet, the areas we are looking at very hard include looking at this through the lens of a customer journey, from the point where somebody has not joined the workplace through to the point where they do. Hopefully, they stay in it and their health is maintained or even enhanced during the course of that employment. How do you then handle situations when people inevitably get ill, and how do you ensure that people stay in work during that period as far as possible? Then when they have an absence, how do you handle it well?

Within that, we are thinking about how you create redeployment opportunities. There are situations where people are employed to do a particular job and they become unable to do it. Right now, legally, we kind of pitch the rights of the individual against the reality of the workplace. Again, that just adds to the fear and complexities that employers have to handle. It is part of the fear issue that I mentioned. Customer journey is key.

We have to look very seriously at what support we provide for employers and employees. We have spent a lot of time talking to GPs, including the

royal college, and I have yet to find a GP who tells me that the fit note system really works. In fact, mostly it is the opposite. I could tell you lots of stories about how incredibly difficult it is for GPs to perform that role. I was talking to somebody the other day who said to me, "Look, the person sitting in front of me may be your employee, but they are my patient and I have to treat them. I am actually required to treat them as my patient, not as your employee".

In the Netherlands, where you have effectively a company doctor-type scheme, the same person would say, "I am looking at that person and thinking 60% about the individual, 30% about the company and the employer, and 10% about society". It is a very different philosophy, within a system which has explicit requirements to create return-to-work plans that are then supported and monitored regularly. There is a lot we can do around systems and support that we need to think about how we put in place. You then have questions about how you pay for it and how you do it. We are going to grapple with all those things.

A third element is the importance of incentives and sanctions. People get a bit uncomfortable about this, but the truth is that if we want to have better outcomes then we also have to think seriously about how we incentivise those outcomes and sanction people when they have not done so. We have to some degree a lowest common denominator problem here, which is that some of the statutory provision is very low, which therefore means that you cannot possibly sanction somebody. Again, in the Netherlands, you get paid basically your full salary while you are off sick, but if you do not engage in the plan to get you back to work then you very quickly lose 40% of that money. If somebody is off sick in this country on statutory sick pay, you really cannot sanction them because they would starve and then they are really going to be ill. So we have a lowest common denominator problem. Having said that, a lot of people in this country get paid a lot more than statutory sick pay when they have sickness absence, so we have to think about incentives and sanctions.

We have to think very hard about what we do nationally versus locally or sectorally. One of the things we have found very strongly is that a lot of people are trying to solve this problem already. It would be a gross mistake to say, "We have shown up, and you can all stand down and stop trying hard". There are a lot of people doing some really quite good stuff; it is more about how we scale those up. This local versus national consideration is incredibly important.

Q108 Lord Elliott of Mickle Fell: What is the evidence on emerging and possible future trends in employment for autistic people, people who are neurodivergent, and people with a disability or health condition? What are the drivers of these trends? How should the Government and employers respond to these trends?

Sir Robert Buckland: If I was speaking to you about 10 years ago, I would be saying that only about two out of 10 autistic adults had a job. It has crept up to a princely three. How long are we going to wait until it gets up to five out of 10, which is the disability average? That is why I

was very keen to see a task group set up, because as a result of a debate I had on the review back in April 2024, at the end of the last Parliament, there was a very good exchange between me and the man who is now the Minister, Sir Stephen Timms, my great friend and colleague.

We agreed that the setting of some targets would be a very helpful way to concentrate minds. Targets and deadlines can be deadly sometimes, but without that sort of ambition and idea about progress I worry that we will just muddle through. We will see a slight increase, but not on the scale and pace needed not only for the lives of individuals concerned but also if we are to make a dent in this economic inactivity statistic. We are not talking about a few thousand people here; my review identified about 680,000 adults who have a diagnosis. Then you add the penumbra of many hundreds of thousands more who, for the reasons we have discussed this afternoon, do not have a diagnosis or seek to be identified in that way, and are still struggling. When you put all this together, you suddenly think. "Gosh, we can really move the dial here if we get moving and make a dent in these figures".

Tempting as it is—we have already dealt in part with this—to use the label and say that we can just deal with autistic people, that covers a whole variety of different conditions. You might have at the top end a university graduate, clearly able and brilliant, who just finds difficulty in adjusting to a social situation and cannot get through the social processes that are involved in interviews, for example, and the sort of relationships you have to build in an office or on a shop floor. Then, as the professor said, at the other end you have people with many comorbid conditions. They might have a learning disability or a physical illness as well as a diagnosis of autism. Here the risk question that Sir Charlie identified becomes a really intractable and difficult one.

At that end, we have to be quite honest about the scale of ambition and what can be achieved. A generation ago we used to have Remploy factories where people worked, but very often that was their role and they were parked there for life. There was an understandable feeling that that was not great, because progression surely has to be part of the life of a disabled person as much as it should be for the rest of us. We have to be realistic; it may well be that, for some people, getting to a certain level will be where they are happiest and most fulfilled. That is great, but unless you can devise a system that can reflect the aspiration we all have, no matter our abilities, I worry that we will go back to that Remploy-type scenario, which I do not think disabled people want to go back to.

Disabled people want the same access to mainstream life as everybody else. It is not too much to ask. The sort of approach that we can take, either through improvements in the way in which we coach and support people into work, would be through the DWP and its agencies. And in the private sector, what the economy and business can do, that combination can really change lives. That is why we have to keep going back to this cultural change and talking to the representative bodies—the ones that

we identified in my review—that can really help drive and make a difference.

Professor Amanda Kirby: We have seen a balance of increasing awareness around the terms we did not even talk about—neurodiversity or neurodivergent traits and conditions—a few years ago. The language has changed. One of the things that has also changed is that language is permeating across health, education and justice, as well as employment. That is the first time that we have actually seen some common language introduced, but also potentially causing some confusion because we need terms to be agreed and defined in the same sort of way. What has happened is that we have rising awareness and more people coming forward. There are two things going on here. We have long waiting lists for diagnosis because people believe they need a diagnosis to get help and support in the workplace. Also, the workplace is concerned about increasing tribunals, a fear that if I employ somebody then it may be difficult. So we have two things going on rapidly at the moment.

I have been delivering the City & Guilds Neurodiversity Index for the last three years, a report where we have gone out to 1,000 employers and employees who are neurodivergent. We have reported the findings and looked at a barometer of change during that time. One of the things that is important is that, with rising awareness, we still have employers reporting a lack of knowledge. Some 39% of employers reported a lack of knowledge and 30% reported a focus on other priorities. So, going back to what you were saying, if it is easier for me to take somebody who does not have to have adjustments, then it is easier. I have other things to think about. Also, 25% said that cost was also a barrier.

Those are really important messages we need to listen to and try to evidence practical ways throughout the employee life cycle, from recruitment all the way through to retention, in which managers can have practical ways of making those adjustments and seeing that they are enabled and capable of doing so. Using employee support networks, we have modelled ways of doing that and demonstrating it. That helps people to see that it is possible. Then it is a question of showing employers of all sizes what works. There is nothing better than having examples of good practice to show: “Yes, I could do that as well.” The more we can share those examples of good practice of what is working at all sizes of employment is going to make a big difference. We have to reduce the fear that it is very complicated and costly. A lot of that is having those conversations with employees early and not delaying them.

On staying in work, we need to make sure there is progression in those individuals who should be progressing. We have seen examples of things like reverse mentoring, which has had a good impact in changing people’s attitudes, and to show the potential of somebody to work and progress. Understanding people’s lived experiences have been powerful lessons gained over the past few years. We should continue to learn from these lived experiences as well in different sectors and sizes of organisations.

Sir Charlie Mayfield: I will be brief. In terms of trends, we should be clear. We are seeing a rising wave of ill health and disability that is getting bigger and bigger. That is driven particularly by mental health issues among young people and musculoskeletal issues among older people. Within that, there is a lot about neurodiversity and actually about autism, even though the numbers may be smaller. They are all contributing to this rising wave. The analogy I offer is that that wave is then crashing on what I have described: fear, lack of system, and complexity/lack of data. The results are that the water is going in a chaotic way all over the place, and not necessarily to where we want it to go. So radical change is needed. Fundamentally, although this is a bit glib, the workplace needs to become a healthier place—a place that is protective, enhances health and preserves people in work for longer.

I give one short stat on that and on the workplace playing a bigger role in that capacity. If you are one of the 2 million people who are now in contact with the NHS mental health services, the average waiting time to be seen is 389 days.³ During that time, most probably your condition is going to deteriorate, particularly if it is stress and anxiety or earlier-stage mental health issues. There is a lot of evidence to say that being in work is protective and positive for your mental health. Yet we have a system that in most cases means people will be signed off work and separated from employment, which is probably one of the best things they could be doing. Employment is not perfect and we need to do more to make sure that it is a more supportive environment. But currently the system is not generating the outcome, and we really need to think quite differently. We have a view that health is something to do with the individual and the NHS. It really needs to become a greater concern for employers as well, with proper support.

The Chair: Our final question is a very broad one from Lord Wigley in terms of the challenges and the answers for this committee. Perhaps I could ask you to keep it as brief as you can.

Q109 **Lord Wigley:** Thank you for your evidence, which has been fascinating. The committee is considering what the Government should do to improve support for autistic people to find and stay in work following the end of the autism strategy for 2021 to 2026. What should the Government prioritise?

Sir Robert Buckland: Getting it right in the DWP and in terms of what jobcentres can and should be doing for adults who either have an identified condition or disability or who, for whatever other reason, are not in work. Therefore, the universal support programme that I mentioned earlier is something I would really focus on in order to try and pull together access to work. Disability Confident and all these initiatives have been laudable but with all too limited an effect in this area. That is

³ Note from witness: This figure is specifically for children and young people, see: In 2023/24, children and young people faced an average waiting time for treatment of [389 days](#).

[Data Decoded: Charting the Trends and Costs of Declining Mental Health in the UK](#)

what the Government should be doing. I would not recommend a whole raft of legislation or a crock of gold on this. That is what the Government should be doing but, I emphasise again, it is for the economy and wider business also to see the potential here rather than always seeing the risk.

Professor Amanda Kirby: I would say broadening the autism strategy to a neurodiversity employment strategy but maintaining the momentum on closing the autism gap. We need to recognise that autism does not come alone. It is important that support should not hinge on a diagnosis, otherwise we are going to leave behind a swathe of individuals who do not have a diagnosis but require support. You talked about delays in mental health but in some places there is a 14-year waiting list for an ADHD diagnosis in adults. We need to ensure that we are thinking about a universal design process, and ensuring training and support. I think we need to bolster adult autism support services for those who have been diagnosed. They are likely to have more significant and complex needs and we need to ensure that they have the support in places especially at points of transition for those who have an EHCP when transitioning from education to employment. It will be incredibly important that we do so.

Lastly, we must really think about healthcare inequalities. We cannot separate that out of those who are out of systems, homeless, out of jobs and in the criminal justice system, where there are high rates of neurodivergent traits. If we want to get them into employment, we really need to make sure there is universal design and that the principles of getting them into work and maintaining that are really targeted. That starts upstream in education.

Lord Wigley: Thank you for being so focused.

Sir Charlie Mayfield: I will try and be brief if not focused. We have to reduce the system—with a small “s”—of employment that is currently discriminating against disabled people and people with differences, obviously to varying degrees. That is because of the way in which employers perceive the risk of employing people with those differences. If we really want change, we have to address that issue and increase the support. So it is a question of reducing the risk that employers perceive in employing people with disabilities, neurodiversity and various conditions, and increase the support provided for them.

Lord Wigley: If I may, I will add one supplementary. Sir Charlie, you mentioned many times the experience of other countries. Would this committee be missing a trick if we do not look down that avenue?

Sir Charlie Mayfield: It is definitely extremely valuable to see how other countries have tackled these issues. Having done a study visit, we could share some more details on that, including examples. One has to be careful not to assume there is an opportunity simply to copy what happens in another country, because a lot of what happens there is the result of decades, if not centuries, of social, economic and political progress, and the environment in which these things have been created. But it certainly opens your eyes to the possibilities and what can be done.

It has been helpful to us in terms of inspiring our thinking and stimulating that around the possibilities of how one could go about tackling these things. I am far more vocal as a result of seeing some of the practices and what real support looks like. We are much clearer about what that looks like now, having gone and had a look. I do not think we will copy either of those countries completely but we will certainly be pretty vocal in the review about what could be done and the potential impact of those actions.

Lord Wigley: Thank you all three—and thank you, Sir Robert, for the hard work that you have done over a period of time, which we greatly appreciate.

The Chair: I echo all those thanks from Lord Wigley. Thank you to our three expert witnesses. We are incredibly grateful to you. This is a topic that has both breadth and depth. I am grateful to you, Sir Robert, for all the hard work that you have done in the review, and hugely looking forward to the work that Sir Charlie and Professor Kirby are doing. We should be very interested as a committee to see anything that you felt that you were able to send us. Apologies if we have overrun but there is a lot to cover. Obviously, if there was anything that you felt we have missed, if you or your teams wanted to write to us, we would be very grateful to receive that. We are grateful for the insight and the thoughtful discussion. We will continue in a moment with our second evidence panel but, in the meantime, this session is concluded and the meeting is briefly suspended.