There needs to be a multifaceted approach to Autism that looks at people holistically.

We need more cutting-edge research done by autistic people that are free from ableistic bias and agendas. We need better understanding of how Autism presents differently in women, and ensure that diagnosis is readily available to any and all that seek it at any age, and not just those that are wealthy enough to pay for a private diagnosis. We need automatic screening for other types of neurodivergence and physical issues including but not limited to hypermobility/ low muscle tone etc and in late diagnosed woman screening for things like post-traumatic stress and autistic burnout.

We need better training in schools how to provide appropriate accommodations and protection from bullying as well as in the medical profession and government bodies.

Case in point just this year I had a doctor laugh at me and refuse to believe me when I said I was autistic.

I have had to return a child to home education after they were repeatedly physically assaulted at school and bullied, and I had someone from NDIA say that I was "only an aspie and not really that bad" when trying to reduce my child's NDIS package. When you are gaslit from every possible person in a position of authority, you know that there is nothing working well with our current system and it needs to be rebuilt from the ground up. The discrimination that happens to people with dynamic disabilities or invisible disabilities is beyond disgusting and needs to stop

First and foremost, we really need diagnostic tools created by the autistic community. As well as an acceptance that autistic people can have different priorities and preferences. We need to move away from the harmful deficit model of diagnosis. If you wouldn't put a neurotypical person in a room of neurodivergent people and assess their deficits in communicating in a neurodivergent manner, why do we do the reverse to neurodivergent people?

The ways schools teach as a whole should be coming away from a behaviouralist model, and be more flexible in how it teaches students and more inclusive. It's my understanding that neurotypical students can benefit from strategies that work well with neurodivergent people, but neurodivergent people can't always learn the way neurotypicals do.

There have been "zero tolerance" policies on bullying in schools for 20 years or more, and yet bullying is still rife in the classroom and school yard.

Teachers need more training going into the profession and through continuous access to professional development to stay abreast of best practice.

The medical professional needs to be aware of, and better able to spot, neurodivergence and all it's comorbidities, as well as how to access best practice neuroaffirming therapy and supports.

But aside from that, doctors that specialise in womens health need to understand how neurodivergence impacts things like puberty, pregnancy, childbirth and peri/menopause.

All medical professionals need to understand how sensory issues impact attendance at hospitals and barriers to things like consent and self advocacy. Medical professionals need to realise that any person can have a reaction to anything, and not behave in an arrogant ableistic condescending manner.

There needs to be better support and accommodations in all medical environments that allow for autonomy and feeling safe - everything from lighting and background noise, to taking the time to explain procedures and answer questions.

There needs to be more support and accommodations in how students are assessed at school, and offered places in tertiary education facilities

There needs to be more support and accommodations when people are transitioning into and out of schools, jobs, relationships or losing someone close to them.

I think it's sad that the Government is trying to rush such a significant opportunity for positive change, and that policy on the run will be policy underdone. I've seen this time and again at a federal and state level of politics. I think my biggest fear is that an autism strategy will be too myopic.

I already see on a daily basis how things like the NDIS have been destroyed by the Liberal government, and how obscure and yet narrow what it will fund is. That they can't overlap on issues they deem to be a different department's problem. Having all these rules about the difference between clinical psychology and non-clinical psychology, and I fear this new autism scheme will become more of the same bureaucratic red tape that helps no one. Case in point. What happens if the government decided to allow more mental health care visits to a psychologist as part of the scheme? What happens if someone has autism and ADHD and post traumatic stress disorder? Will we have psychologists say "sorry we can't talk about that in today's session, because you are using autism funding and that issue isn't autism specific it's one of your other comorbidities so you need a different form or funding." This is why we need autistic people all the way to the top making decisions about the scheme, that understand all the intersectionality and nuance that is needed to create and implement such a strategy

We need to take a deep dive into understanding discrimination and ableisim, and actually hold people and organisations to account when they are discriminatory and ableistic - especially when those people are employed in disability sectors and government sectors, and there needs to be capacity to dismiss employees that work in government bodies who are behaving in discriminatory ways.

We need housing that is secure and safe that people can have choice and control and autonomy. At the moment my disability means I can't work. My husband and I rent in the private sector, and our landlord is taking possession of the house. There is a 2 year wait list for priority 1 emergency accommodation for public housing in Tasmania, and there is the large chance that our family will become homeless. When we already have double income professional couples that are homeless, then a family of unemployed autistics doesn't stand a chance in a housing crisis. The fact that Government policy has effectively "privatised" housing and is not building enough public housing for those with disability and need is a most inhumane and disgusting way to treat people with disability, that haven't had access to the same educational and employment privileges that their neurotypical cohorts enjoy. The fact that this year we have had economists say that for the economy to stabilise we need unemployment to rise shows that in a capitalist society we need "bottom feeders" to blame for why the middle and upper classes are struggling. The fact that the lower socioeconomic classes struggle because government policy is designed to keep the poor people poor is glossed over and ignored by most.

The fact that disabled people are living in poverty because we don't have the support we need to reach our potential and support ourselves, when we supposedly live in such a rich and "lucky" country, is pretty criminal.

I don’t doubt that if I’d been diagnosed early and been given the supports I needed at school and in the work place, I probably could have been a good psychologist or lawyer or academic. Instead I’m living in poverty, staring down the threat of being homeless within a year. And I have 4 neurodivergent children relying on me to keep a roof over head and food in their tummy. How can I even connect properly with autistic culture or community, when we are in such a dire circumstance struggling to survive each day?

I hope that properly informed people with lived experience will be able to make a difference, and that government will actively listen and not just make tokenistic gestures that lead to ineffectual policy.

I hope that you will pay attention to, and better support, carers in this strategy. So many of us with psycosocial disorders are dependant on our carers, and there currently isn’t enough support for them. They are an integral part of our access to community and advocacy, and it is vital that while we live in a flawed and ableistic society, that they are able to be supported for the work they do

And I hope you will follow the recommendations in research papers like this on

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10515546/pdf/10.1177_17455057231189542.pdf

‘Living in a world that’s not about us’: The impact of everyday life on the health and wellbeing of autistic women and gender diverse people

This research found that 53.3% of participants also had anxiety, 40% had depression 23% had complex post traumatic stress disorder and 30 had post traumatic stress disorder.

“One of the ways to ensure that we are supporting the needs of autistic women and gender diverse people is to include autistic people in research related to their health and wellbeing.87 Research has traditionally ignored the voices of autistic people, but there is an increasing focus on community-driven research, and research conducted by autistic academics.88 It is also important for future research to look at autistic identity through an intersectional lens,89 to ensure that the needs of all autistic people are supported. Future research should also focus on developing autistic led models of wellbeing, as traditional models have focused on areas that are valued by society, such as employment or participation in society. This is consistent with understanding autism from the neurodiversity paradigm, which outlines that an autistic person’s life should be fulfilling despite not fitting with conventional norms or societal expectations.30,90”

If we want a true national autism strategy, then we need to look beyond the ableistic bias that demands that we conform to conventional societal expectations, and instead create a system that allow us to find and focus on our strengths and offer support in the areas that we struggle with, and is something that will allow us to reach our fullest potential while being able to improve health and wellbeing outcomes.