



Introduction to neurodiversity



Royal College of Nursing, IEN Network,
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Dr. James Richards, Edinburgh Business
School, Heriot-Watt University

Professor Kate Sang, Edinburgh
Business School, Heriot-Watt University

Contact: j.richards@hw.ac.uk

Overview – Part I

Definitions and terminology

Statistics

Common workplace problems

Social model of disability

Good practice

Case study: Supporting Emma

Sources of support

Definitions and terminology



Neurodiversity – This is the idea that cognitive conditions, such as autism, ADHD, dyslexia and dyspraxia, are natural variations in the way people think and process information. The term recognises both the difficulties that people who have these conditions may encounter in the workplace and the unique strengths that can derive from thinking differently.

Neurodivergence – Workers may be described as neurodivergent if they have a cognitive profile that is different to that of the average or typical person. For example, a dyslexic person may be said to be neurodivergent.

Neurotypical – This is a term sometimes used to describe people who are not neurodivergent.

Social model of disability – Says neurodivergent people are disabled because society and workplaces are organised for the benefit of neurotypical people. Under this model, employers should change their environments, policies and cultures to remove barriers faced by neurodivergent workers.

Source: GMB (2018)

Statistics



- An estimated 1 in 7, some say 1 in 5, are neurodivergent (15-20 per cent)
- Co-occurrence of neurodivergent conditions common
- 1 in 10 (10 per cent) dyslexic
- 1 in 100 to 1 in 50 (1-2 per cent) autistic
- 3 in 100 to 5 in 100 (3-5 per cent) dyspraxic
- 3 in 100 to 4 in 100 (3-4 per cent) ADHD/ADC
- 30-40 per cent unemployment rate for neurodivergent adults
- Around 22 per cent of autistic adults in employment
- Underemployment estimated as common but hard to measure



Common workplace problems

- Unemployment
- Underemployment
- Discrimination
- Rhetoric of “equalities”
- Bullying and harassment
- Capability
- Discipline
- Dismissal/resignations
- Stigma
- Voiceless
- Wider exclusion (beyond workplace)



SOCIAL MODEL OF DISABILITY



The Social Model of Disability



The Social Model of Disability states that the oppression and exclusion people with impairments face is caused by the way society is run and organised.

Good practice



- Good general people/HR management practice, e.g., job security, autonomy, staff representation, trust and voice mechanisms
- See the Equality Act 2010 is the starting point/minimum
- Employee representation/advocacy, e.g., neurodiversity staff network, ideally involving recognised trade unions/professional bodies
- Consider gender and other defining characteristics of the workforce
- Conduct equality impact assessments when work is changed/re-organised/new building or facilities are commissioned
- Train line managers *and* team members

Case study: Supporting Emma

Emma is a postdoctoral researcher in epidemiology but has previously worked in animal health which meant she was rarely working with other people, but she had to move into her current role as she has long term conditions which made fieldwork impossible. You are Emma's mentor, and she has come to speak to you as she has had a serious falling out with her current line manager who believes she is not being honest with him, and he is also frustrated that the project is not running to time. Emma is very distressed as she tells you that she repeatedly has arguments or disagreements with different line managers, and she does not know how to proceed. You ask Emma why she thinks that this problem has followed her from her jobs industry to her current job in epidemiology. Emma tells you that she is a very straightforward person who 'tells it like it is' and previous line managers have found this communication style confronting but also that they *'think I've got some information that I haven't got, or they've misinterpreted something I've said because they think I've said something that I haven't said'*. Emma attributes this preferred communication style to being autistic. Emma spoke to her head of school about her current line manager who agreed that there should be neurodiversity training made available but that many of the managers would be resistant to undertaking training, in part because of the high workloads they experience. Emma shares with you that she has had to move to part time working as she cannot cope with the stress of working in an open plan office nor with the administrative tasks that she struggles to understand for example, claiming expenses. Emma also does not understand the line management structure within her employer, nor who she should speak to for reasonable adjustments. She notes that she would really benefit from some administrative support and perhaps her own office and then she would be able to work full time. Emma is very worried about her future career as she feels line managers do not want to work with her as they do not understand her communication style.

Questions/discussion points

- 1) What measures could be put in place for Emma to support her to return to work full time and make good progress with her work?
- 2) How could Emma's line manager be supported to accommodate Emma's preferred communication styles?
- 3) What could be done to make the line management and support structures clearer for all employees?



Sources of support

- ✓ Neurodiversity staff network
- ✓ Staff/union representative, e.g., equality rep or disability champion
- ✓ Neurodiversity ally
- ✓ Civil society organisation, e.g., British Dyslexia Association, National Autistic Society
- ✓ Neurodiversity trained HR professional/occupational health or line manager

Question: What can be accessed in your organisation?





QUESTIONS AND ANSWERS



Neurodiversity and gender

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Professor Kate Sang, Edinburgh
Business School, Heriot-Watt University

Dr. James Richards, Edinburgh Business
School, Heriot-Watt University

Contact: k.sang@hw.ac.uk

Overview – Part II

Gender and neurodiversity

(Peri)menopause and neurodiversity

Menstrual health and neurodiversity

Good practice

Case study: Supporting Catherine

Sources of support

Gender and neurodiversity

- The experiences of ND women and trans/non-binary people in the workplace remains poorly understood
- For many women they are diagnosed later in life (following their children's diagnosis)
- May face isolation and disbelief if they do disclose at work (male norm of autistic person)
- An area neglected in much of the extant work and requires more intersectional research and policy

Tina is an autistic academic in her 50s who achieved a diagnosis after her son was diagnosed. Tina recounts her feelings of isolation in the workplace and her dislike of small talk and networking which she feels are essential to career progression. Importantly Tina feels lonely '*I've never had a friend*'

(Peri)menopause and neurodiversity



- There is a growing (but limited) body of research which suggests that neurodiversity can impact the experiences of (peri)menopause
- Autistic women may find the perimenopausal transition particularly problematic (Mosely et al 2021):
 - Covering the long journey of our participants to recognising autism in adulthood;
 - Menopausal awareness and perceptions;
 - Symptoms and their impact; and
 - Ways that a neurodiverse menopause might differ from the norm [sic].
- Some evidence that autistic women may perpetuate sexist narratives of menopause although other research (e.g., Karavidas and de Visser, 2022) disagree

Menstrual health and neurodiversity



- Autistic women and girls may experience particular challenges in managing menstrual blood, and other sensory issues as well as emotion regulation
- Much of the research draws on parents' and carers' reports rather than lived experiences
- ADHD symptoms may be exacerbated at certain points of the menstrual cycle

Good practice



- Poorly researched area – so very hard to find good practice
- Note that neurodivergent people, including autistic people, are more likely to be transgender than neurotypical people - communications should be inclusive
- National Autistic Society suggests:
 - Provide information clearly and without ambiguity in a range of formats (including visual)
 - Provide information on what menstruation is, what products to use and how, self-management of symptoms, where toilets are and how to use them
 - Support use of technology to help with self-management e.g., apps which may help track menstrual cycle

Case study: Supporting Catherine

Catherine works as a teacher and is living with Polycystic Ovarian Syndrome and Pre-Menstrual Dysphoria Disorder (PMDD). Catherine is also autistic. She tells you that her PMDD is very debilitating and in the run up to her period she feels like the 'shittiest person on earth'. However, she also tells you that she is experienced in masking her autism, and consciously uses this skill to mask the emotional symptoms of PMDD so she can function at work. As you speak to Catherine, she discloses that she really struggles during her period with executive functioning but doesn't feel that she can talk to her colleagues to ask for help as that would be seen as oversharing.

Later in your discussion Catherine tells you that she is perimenopausal and although HRT has regulated her period, it has not helped with irritability which she attributes to being autistic. However, she also tells you that she struggles to form relationships at work as she doesn't understand '*normal rules of female socialised behaviour*' which has prevented her from being part of menopause support groups at work.



Sources of support

- ✓ National Autistic Society
- ✓ Balance Menopause
- ✓ University of Edinburgh guide for parents and carers https://www.ed.ac.uk/sites/default/files/atoms/files/periods_and_neurodivergent_children.pdf





QUESTIONS AND ANSWERS

Resources (with hyperlinks)

[Booth, J. \(2019\) A social model of disability at work.](#)

[Chartered Society of Physiotherapy \(2021\) Reasonable adjustments neurodiversity case study.](#)

[GMB \(2018\) Neurodiversity in the workplace: Thinking differently at work \(authored by Turner, L and Andrew, N.\).](#)

[NEU \(2022\) Social model of disability.](#)

[National Autistic Society – menstruation](#)

[Prospect \(undated\) Neurodiversity.](#)

[Richards, J, Sang, K, Collins, J & Canduela, J 2023, Closing the Fair Work Gap: An Intersectional Fair Work Framework for the Autistic Workforce.](#)

[Richards, J., Sang, K., Morgan, C., Olungbenga, A. \(2022\) Building a network to transform unions to represent the neurodivergent workforce \(TURN\): Context, key findings, conclusions and next steps for TURN, Conference Report, 1 September.](#)

[Royal College of Nursing \(2022\) Neurodiversity guidance: For employers, managers, staff and students.](#)