



THE INSTITUTE OF
LEADERSHIP
& MANAGEMENT



**Workplace Neurodiversity:
The Power Of Difference
Part 1: Lived Experiences Of
Neurodivergents**

In Collaboration with



The Institute of Leadership & Management is the professional membership body for an active international community of over 40,000 leaders, managers, coaches and mentors. We believe inspirational leadership holds the key to personal fulfilment, social wellbeing and economic prosperity. By connecting like-minded people, we aim to influence and inform and be the source of pioneering thought leadership and commentary in our field.

 @institutelm
www.institutelm.com

Contents

Our research: why now?	4
Highlights	11
Findings	12
Conclusions	32
Advice for neurodivergents	33
Methodology	35
References	36

Our research: why now?

It is estimated that 15% or more of the population (at least 3 out of every 20), has a neurodivergent condition (ACAS, 2019) which includes autistics, dyslexics, dyspraxics, dyscalculics and people who have Attention deficit hyperactivity disorder (ADHD) or Tourette's syndrome (descriptions of each condition can be found on the following pages). However, reports suggest that neurodivergents are often under-represented in the workforce and under-employed (CIPD, 2018; GMB, 2018).

For example, it is estimated that only 16% of people with an autism diagnosis are in full-time employment, and only 32% have some form of paid work (NAS, 2016). This is in contrast to 47% of the UK's disabled population and 80% of the UK's non-disabled population having full-time employment (NAS, 2016).

People with neurodivergent conditions have a range of strengths and talents (see Table 1),

which, along with their unique perspective of the world, can make them assets to many organisations (Matuson, 2019).

Each person with one or more of these conditions will have a selection of the traits that are used to diagnose their specific condition, some to a greater extent and some to a lesser extent, no two are the same and no two have the same strengths or challenges (CIPD, 2018). Indeed, neurodivergents are an underutilised and untapped talent that are often discriminated against due to stereotyping and misinformation that drive behaviour, often through unconscious bias.

While neurodivergents face unique challenges doing some types of activities and in certain work environments and cultures, often very simple adaptations to both the physical environment and behaviours can be both inclusive and enabling while having little impact on neurotypical colleagues (CIPD, 2018; GMB, 2018).



What is neurodiversity?

The term neurodiversity, first coined in the 1990s by Australian sociologist Judy Singer, recognises that there are individuals in our society who are neurologically different to the majority of the population (Singer, 1999).

Singer's work emphasised that people with these previously ignored neurological differences were habitually overlooked and discriminated against.

In her model, neurodiversity was added to the pre-existing categories of discrimination of class, gender, race and physical disability.

This relatively recent model of disability, generated by Singer, challenges the majority assumption that we all experience the world in similar ways, when in fact there are significant differences in the way we:

- sense the external environment (see, hear, touch, smell etc.)
- sense the internal environment (temperature, balance, pain, proprioception)
- feel and manage emotions
- process information and manage information
- use different aspects of our memory

Singer initially focused on autism and recognised that autistic individuals bring unique traits that are an important and probably crucial part of human biodiversity.

More recently, the definition of neurodiversity has been expanded to include neurotypes beyond autism spectrum conditions. As well as Autism the definition of neurodiversity now includes ADHD and Attention Deficit Disorder (ADD), Dyscalculia, Dyslexia, Dyspraxia and Tourette's syndrome. Some expand the definition even further to include acquired brain injury and certain mental health conditions, but these go beyond the scope of this research.

Neurodivergent conditions and definitions

Neurodivergents are identified through a set of clinically defined “deficits”; these characterise neurodivergents in comparison to neurotypical individuals. It is recognised, but rarely stated, that neurodivergents often

Condition descriptions based on clinical definitions

Attention deficit hyperactivity disorder/ attention deficit disorder (ADHD/ADD)

Includes traits such as inattentiveness, hyperactivity and impulsiveness (NHS, 2019a; GMB, 2018).

Autism (including Asperger’s, pathological demand avoidance and autistic spectrum condition)

Presented as non-typical traits and behaviours that affect how individuals experience the world. Individuals may communicate differently, have difficulty understanding non-autistic people, have sensory hypersensitivities, take longer to understand certain forms of information, undertake repetitive behaviours, or become anxious in unfamiliar situations (NHS, 2019b; GMB, 2018).

Dyscalculia

Affects the ability to acquire arithmetical skills. Dyscalculic individuals may have difficulty understanding simple number concepts,

have unique attributes and capabilities. Despite broad labelling, it is important to remember that no two people with one condition are alike (CIPD, 2018).

lack an intuitive grasp of numbers, and have problems learning number facts and procedures (The Brain Charity, 2019; GMB, 2018).

Dyslexia

Primarily affects the skills involved in accurate and fluent word reading and spelling, a dyslexic may experience other challenges with tasks such as sequencing, processing information and working memory (NHS, 2019c; GMB, 2018).

Dyspraxia

Affects physical coordination, which causes a person to perform less well than expected in daily activities for his or her age, and appear to move clumsily (NHS, 2019d; GMB, 2018).

Tourette’s syndrome

Causes a person to make involuntary sounds and movements called tics. Less than 10% of people who have Tourette’s syndrome have “coprolalia” a form of Tourette’s that results in involuntary swearing and comments. (Tourettes Action, 2019; NHS, 2019e).

Additional definitions

Neurotypical/ Neurotypicalism

Describes people whose brains function and process information in the way that society expects (Bewley & George, 2016), it includes all people who do not have any neurodivergent conditions.

Neurodivergent

A person who has neurology that differs from the “typical” or majority of the population, and has one of the conditions listed above (may also include forms of illness and acquired brain injury which are beyond the scope of this research) (CIPD, 2018; GMB, 2018).

Neurodivergence

The state of being neurodivergent (GMB, 2018).

Allistic

A person who is not autistic (it may include people with other forms of neurodivergence).

Neurominority

A group of people who have a form of similar innate neurodivergence, and together make up a minority group (e.g. autistics might form one neurominority, and dyslexics another).

Research in context



































This is the first of two research reports exploring neurodiversity in the workplace.

In this report we focus on the lived experiences of people who have neurodivergent conditions, comparing their experiences with the perceptions of neurotypical colleagues. This research provides new insights and understanding about the daily working lives of people from neurominorities, their inclusion in the workforce and adaptations that organisations can make to tap into the underused talent.

Together, our paired research reports reveal that many people who have neurodivergent conditions experience exclusion, discrimination and damaging stereotyping within the workplace.

The partner report explores the self-reported attitudes of people towards neurodivergents in contrast to the focus here on neurodivergents’ lived experiences and their neurotypical peers’ perceptions. In this report we discover that while some neurominorities are better accepted and accommodated than others, people with all forms of neurodivergence experience exclusion to a greater extent than their neurotypical peers perceive.

Table 1: Prevalence and notable reported strengths of neurodivergent conditions referenced in this report (ACAS, 2019; TOURETTES ACTION, 2019; THOMPSON, 2018; SCIENCE DAILY, 2007; BRAIN HE, 2019; WEB MD, 2019; RUZICH, ET AL., 2015)

Autism 2% of the population	ADHD/ ADD 4% of the population	Dyscalculia 7% of the population	Dyspraxia 5% of the population	Dyslexia 10% of the population	Tourette's 1% of the population
Intense/ hyper focus 	Working under pressure 	Practical ability 	High levels of literacy 	Ability to think in 3D 	Process language faster than general population 
Visual skills 	Intense energy & completing urgent tasks 	Intuitive ability 	Often good at strategic thinking 	Strong verbal skills 	Enhanced language skills 
Values driven; integrity and honesty 	Multitasking/ task switching 	Often good at strategic thinking 	Holistic thinkers 	Strong visual thinkers 	Often have enhanced memory 
Creativity & problem solving 	Creativity & problem solving 	Creativity & problem solving 	Creativity & problem solving 	Creativity & problem solving 	Enhanced self control 
Ability to work unsupervised 	Visible enthusiasm 			Good at maths & mechanical thinking 	Find it easy to pick up new skills 
Analytical & critical thinking 	Perseverance 			Analytical & critical thinking 	
Determination 	Good memory and observational skills 				
Observational skills 					



Highlights

People who have neurodivergent conditions consistently report worse experiences than neurotypical colleagues perceive their experience to be. There are certain neurominorities whose experiences are worse than other neurominorities:

- Neurotypicals (people without any of the conditions stated) believe that the workplace is far more inclusive to neurodivergents than it is reported to be by people with these conditions
- Autistics consistently report worse experiences compared to other neurominorities, this is generally followed by dyscalculics and people who have ADHD/ADD. In most areas, dyslexics and dyspraxics fared better than other neurodivergents
- According to autistics, organisations do not encourage behaviours that are inclusive, and only approximately half of organisations do this according to dyscalculics and people who have ADHD/ADD
- According to the majority of diagnosed autistics, and around half of dyslexics, dyscalculics and people who have ADHD/ADD, organisations do not ensure that staff behave inclusively towards neurodivergents in a way that is enabling
- Reasonable adjustments are not made for neurodivergents according to diagnosed autistics, a view supported by half of dyscalculics and diagnosed dyslexics
- The majority of diagnosed autistics, dyspraxics and dyscalculics report that people in their workplaces behave in ways that exclude them, while just under half of dyslexics and people who have ADHD/ADD report the same
- Fewer than half of autistics report that workplaces encourage reasonable adjustments in procedures to be inclusive
- Over half of dyscalculics and people who have ADHD/ADD report that workplaces encourage procedures that are inclusive
- Half, or more, of respondents from each neurodivergent group report that the workplace asks employees if they need reasonable adjustments for being neurodivergent
- Over half of all respondents report that the workplace makes adjustments to the physical environment to accommodate neurodivergent employees

Findings in depth

Lived experiences of neurodivergents are worse than the perception neurotypical people have of inclusion

Research participants were asked seven questions about inclusion of neurodivergents, these were placed on a six-point Likert scale and participants were asked the extent to which they agreed (strongly agree, agree or slightly agree) or disagreed (slightly disagree, disagree, strongly disagree) with each statement. Neurotypical people (those without any of the listed conditions) were asked for their perceptions, while neurominorities (both with formal diagnosis and undiagnosed) were asked to report on their lived experiences. In the initial analysis (Figure 1) we show the proportion of people from each neurominority and the neurotypical population who agree with the statements to any extent.

We found that neurotypicals believe that the workplace is far more inclusive to neurodivergents than neurodivergents report; over 70% of neurotypicals reported they

agreed with each statement. In contrast, autistics reported the worst experiences ranging from only 34% agreeing that the workplace encourages inclusive behaviours to 59% reporting adaptations to the physical environment. This was closely followed by dyscalculics and people who have ADHD/ADD, between 46% and 65% of these neurominorities agreed with each statement. In most areas (not all), dyslexics and dyspraxics fared better than other neurodivergents but their experiences were still worse than the perceptions of neurotypicals.

Each of these questions is examined more closely below, using statistical analysis (see Methodology) to compare the experiences of neurominorities with the perceptions of neurotypicals.

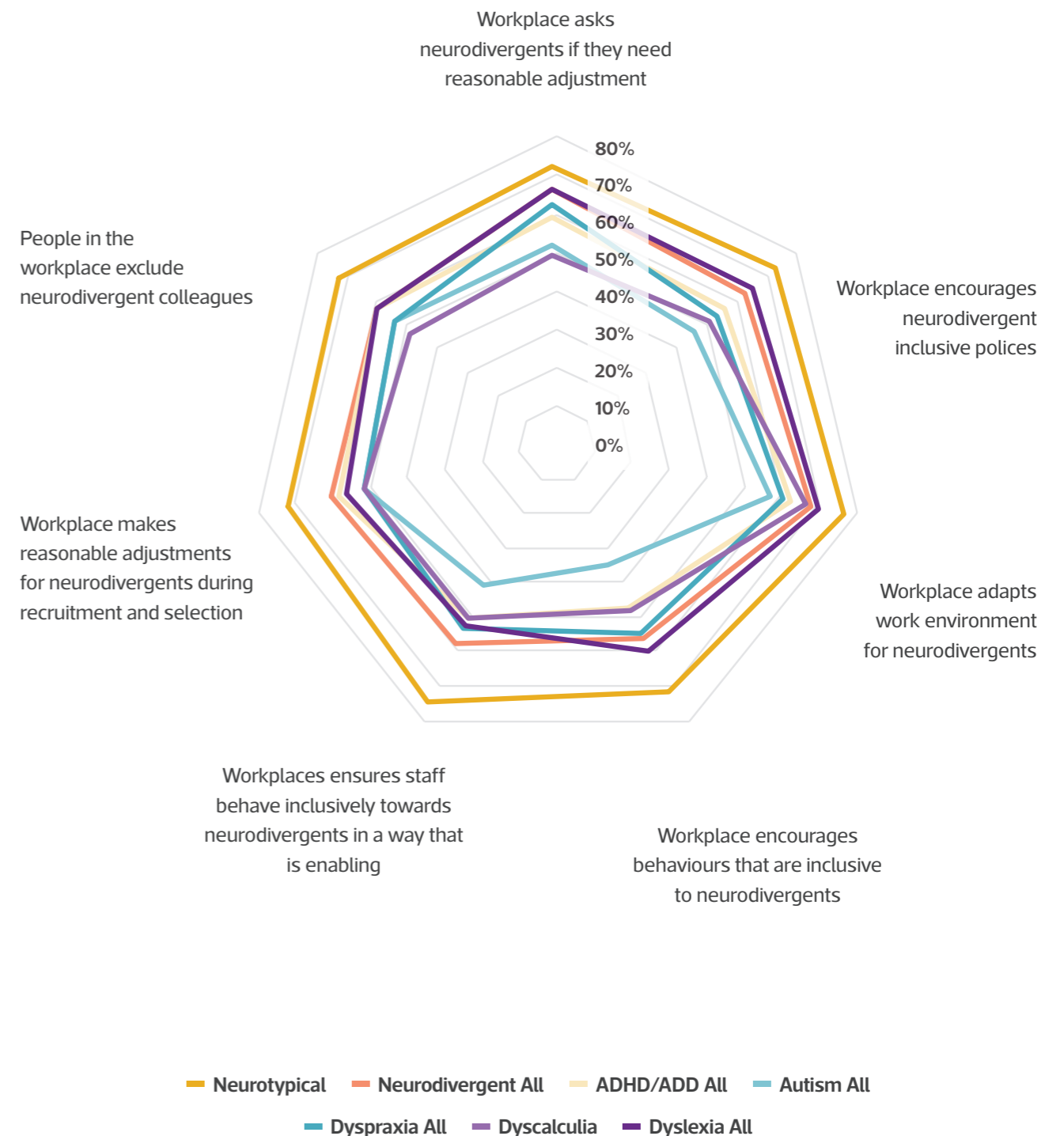
“I believe there is an awareness around neurodiversity, but still a stigma that surrounds it. It wouldn’t surprise me if there were a high number of employed people with a neurodiverse condition that didn’t make their employer aware in order to avoid awkward situations, or potential discrimination”.

neurotypical male, age 18-30, team leader working in education setting

“I am not yet ready to disclose my neurodiversity at work due to concerns over how attitudes might change to my ability to do my work and due to hearing a number of disparaging comments towards autistic individuals from members of staff”.

diagnosed autistic female, aged 41-50, team leader working in education setting

Figure 1 Inclusion of neurodivergents in the workplace, Lived Experiences Of Neurodivergents and perceptions of neurotypicals (percentage of people who agree with each statement to any extent)



The extent to which organisations make reasonable adjustments by encouraging behaviours that are inclusive of employees with neurodivergent conditions

For those who have a neurodivergent condition there are behaviours that can be more inclusive in the general work environment: for autistics who are often very literal, this might mean using direct language; for a dyscalculic it might be refraining from asking to solve maths in their head or work out colleagues' contributions to a social meal out; for others it may be as simple as not engaging in teasing or banter that relate to their traits, but rather creating a culture where they are accepted on equal terms with neurotypical colleagues.

Although 71% of neurotypicals (NT), stated their organisations encouraged behaviours that are inclusive of neurodivergents, the lived experience was somewhat less favourable (Figure 2). Only 34% of autistics reported that their organisations encourage inclusive

behaviours, analysis of the two populations showed the responses were statistically relevant to a 99% confidence interval. Statistical analysis comparing the experiences of each neurominority with neurotypicals' perceptions, were statistically more negative (with the exception of dyscalculics, as the number of dyscalculic participants was too low for the tests to detect a statistical difference).

Around half of dyslexics, dyscalculics and people who have ADHD/ADD reported their organisations were inclusive, while 59% of dyslexics reported organisations encouraged inclusive behaviours, but this is still lower than neurotypicals report and is statistically relevant.

Figure 2 Proportion of each population agreeing with the statement "my organisation encourages certain behaviours that are inclusive of employees with neurodivergent conditions"

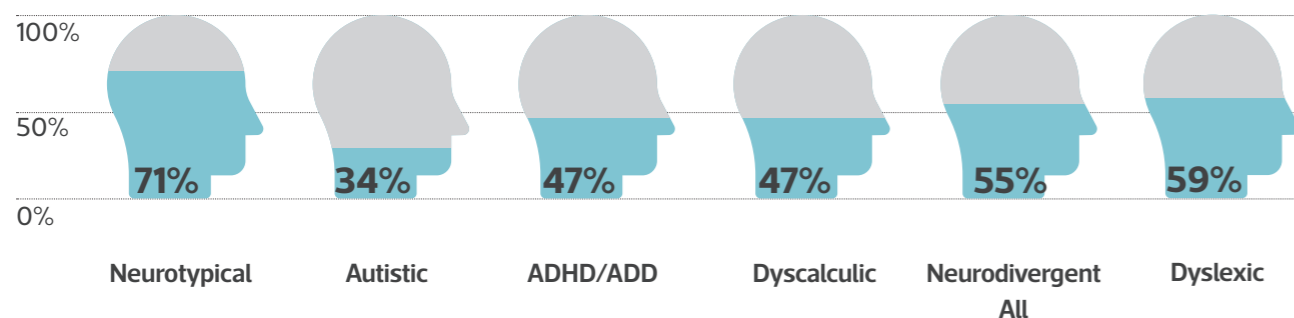
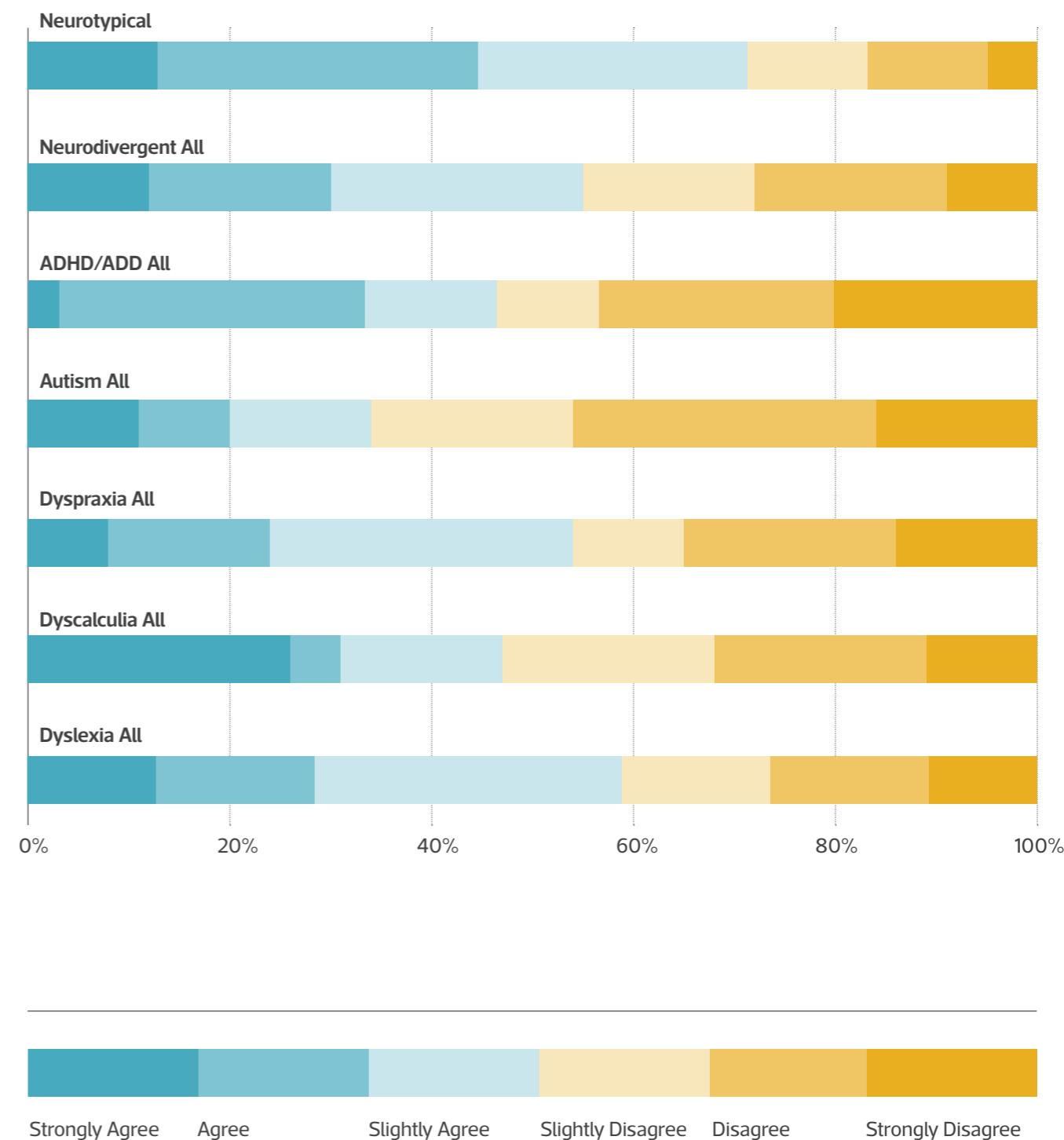


Figure 3 My workplace makes reasonable adjustments in encouraging certain behaviours to be inclusive of employees with neurodivergent conditions





"I have been recently diagnosed with ASD and I have made my managers and HR aware. It is a small company and they are good with adjustments and are flexible with me anyway (I'm a single parent with an ASD/PDA/ADHD child). I have been employed previously by a company who were not so understanding. I told my then team leader and HR manager that I have Asperger's and they didn't know what it was and were not interested to find out either."

autistic female, aged 41-50, working in IT

"If I react in a certain way that may not be deemed 'appropriate', my line manager will give me the regular disciplinary procedures without taking into account that I cannot help it. She has in the past threatened to terminate my employment contract because of the way I have reacted to something in the workplace and sent me home. Only to call me back up and apologise, as she realised it was related to my condition. It upsets me because it makes me feel as though I am a bad employee and am not doing my job properly. However, I know I am good at my job. It is just that my behaviour gets affected sometimes".

autistic and ADHD female, aged 18-30, working in local/national government

"It is a very difficult area to discuss openly due to the little knowledge people have generally and the ignorance and often fear that mental health/behaviour issues often cause. People will make adjustments for openly seen illnesses such a flu, affected limbs etc. but not so with 'unseen' issues".

autistic male, 51-60, working in education



My workplace ensures that all staff behave inclusively towards neurodivergent employees in a way that is enabling

This question asks if an organisation encourages behaviours that enable neurodivergents to do their jobs.

While neurominorities may experience social inclusion in the workplace, or not (examined above in Figures 2 and 3), this is not necessarily the same as inclusive behaviours that enable someone from a neurominority to excel in their job. For instance, inclusive behaviours could include avoiding the use of metaphors with autistics in meetings and chairing meetings in order to give each person individual opportunity to consider their input, formulate their ideas and speak (so the autistic does not have to concentrate so hard on social cues). Or it might be using verbal communication rather than written communication or keeping written communication to minimal bullet points for

dyslexics and people who have ADHD/ADD. Each neurotype has unique characteristics, and small adjustments of certain behaviours can make significant differences in either enabling or disabling them.

The majority of neurotypicals believe their organisations ensure staff behave in enabling ways (74%), neurominorities reported otherwise (Figures 4 and 5).

Only 28% of diagnosed autistics reported experiencing that staff behave in an inclusive way that is enabling to them, compared to 54% of undiagnosed autistics (Figure 5) Around half of all dyscalculics (50%), dyspraxics (54%), dyslexics (52%) and people who have ADHD/ADD (50%) agreed that staff behave inclusively towards them in a way that is enabling.

Figure 4 Proportion of each population agreeing with the statement "my workplace ensures that all staff behave inclusively towards neurodivergent employees in a way that is enabling"

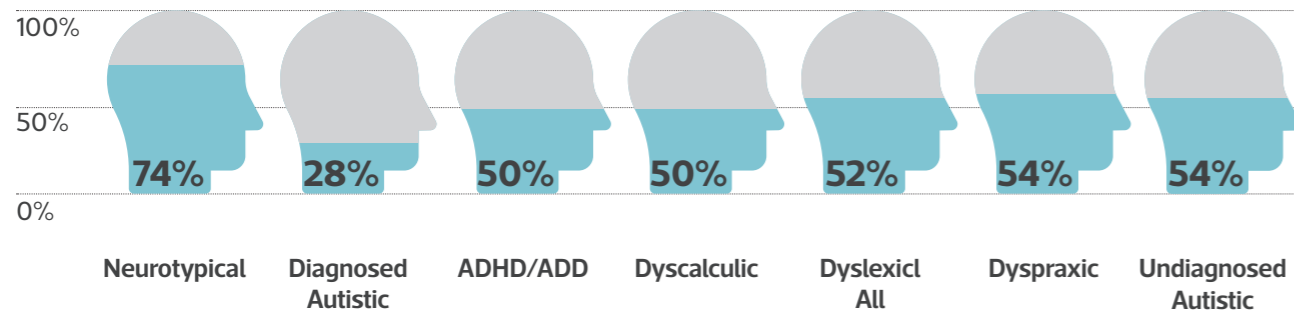
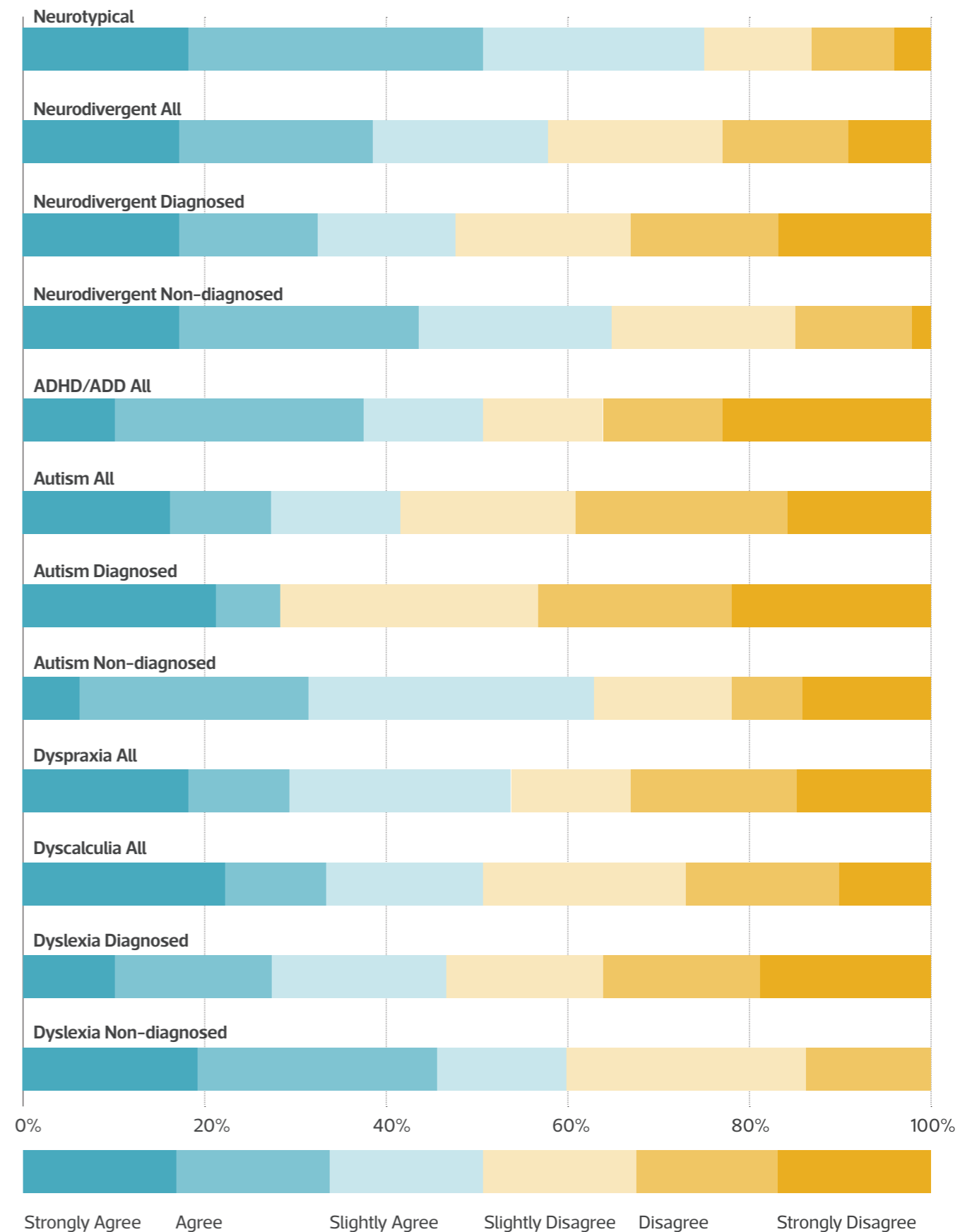


Figure 5 My workplace ensures that all staff behave inclusively towards neurodivergent employees in a way that is enabling



Does the organisation ask employees if they need reasonable adjustments for being neurodivergent?

Employers fared better in response to the statement, “my workplace asks employees if they need adjustments due to being neurodivergent”; 74% of neurotypicals agreed (Figure 6); 22% slightly agreed, 35% agreed and 17% strongly agreed (Figure 7).

However, fewer from each neurotype, compared to neurotypicals, reported that their employers asked if they needed adjustments for being neurodivergent. Only the autistic population, where 53% stated they were asked if they needed adjustment, held any statistically significant difference. As before, there were not enough dyscalculic responses to undertake statistical analysis.



Figure 6 Proportion of population agreeing with the statement “my organisation asks employees if they need reasonable adjustments for being neurodivergent”

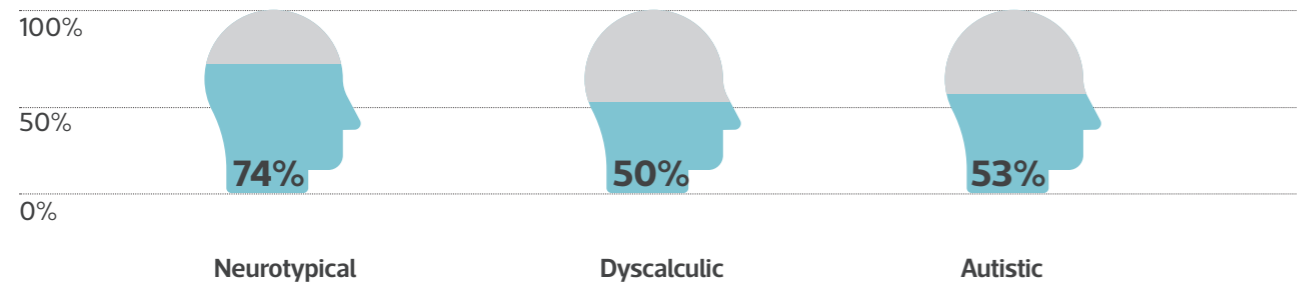
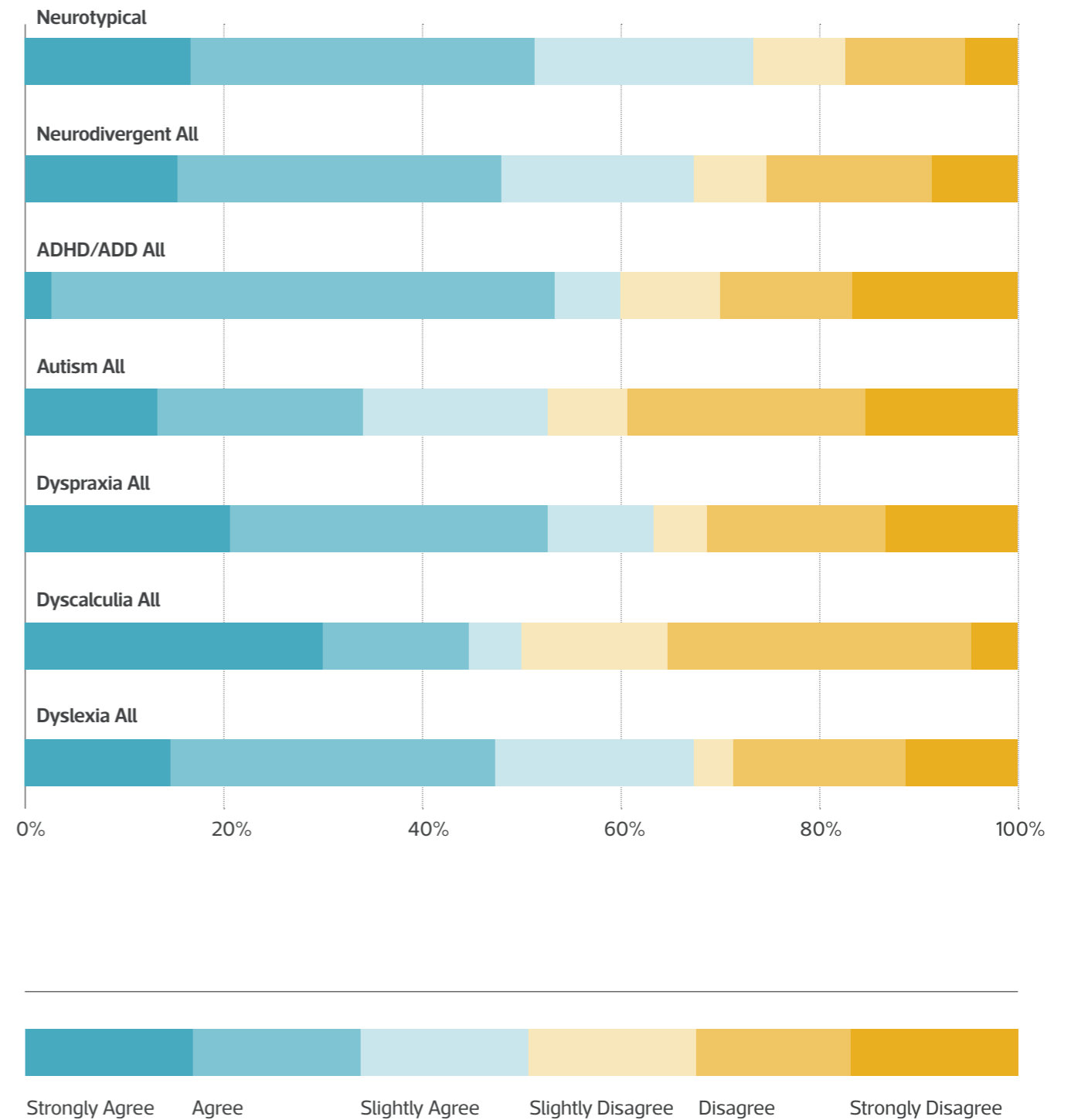


Figure 7: My workplace asks employees if they need reasonable adjustments due to being neurodivergent



Does the organisation make reasonable adjustments for neurodivergent candidates during recruitment and selection?

Recruitment and selection processes present challenges for most people, let alone neurominorities. Selection tests that place candidates under artificial time pressures that they would not normally face in the job role can place neurodivergents at a disadvantage due to different processing speeds and abilities, compared to neurotypicals. Interviews and recruitment assessments may not reflect the everyday role in which neurominorities may well excel, but they are disadvantaged in the recruitment process and therefore discriminated against.

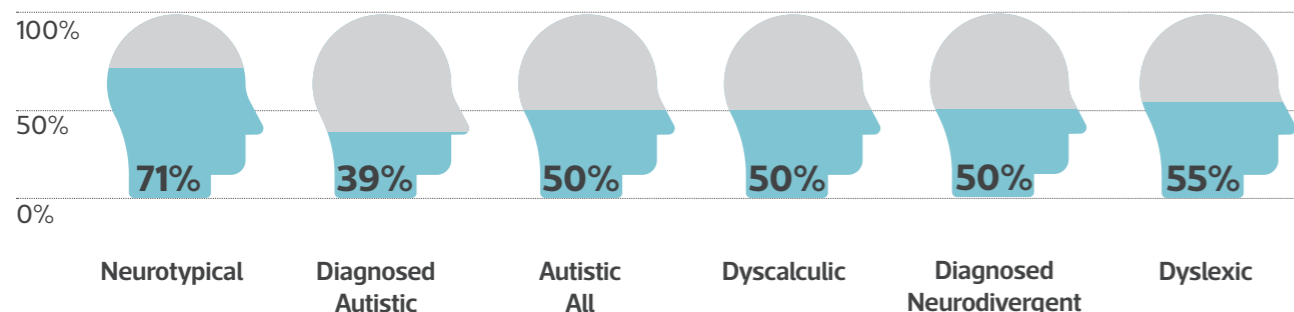
Tasks requiring rapid word or number processing can disadvantage dyslexics and

dyscalculics while those using unfamiliar computers and physical tools can impair dyspraxics. Tests requiring high level of intense focus may disadvantage some people with ADHD, while others may benefit from this depending on the profile of their traits. The interview process itself, where one is presented with unfamiliar questions, given little time to cognitively process and where there are high expectations of eye contact, can cause underperformance in autistics. People are often aware of the need to make adjustments for physical disabilities (such as allowing accessible devices or additional time), here we examine if adjustments are made for neurominorities.

During recruitment and selection processes 71% of neurotypical respondents felt that reasonable adjustments were made for neurominorities. However, only 39% of diagnosed autistics reported this was the case, there was a statistical difference between the two populations, and 50% of all autistics. Just over half of dyslexics (55%) and half of dyscalculics (50%) reported adjustments being made in recruitment and selection, there was a statistical difference between the dyslexic and neurotypical responses but there were not enough dyscalculics to run statistical analysis (Figures 8 and 9).

Fewer dyspraxics (61%) and people who have ADHD/ADD (57%) reported adjustments being made, than neurotypicals. Neurodivergents who had any form of diagnosis for one or more condition responded statistically differently to neurotypicals in their experience of reasonable adjustments being made during recruitment and selection processes. In this case, people believing themselves to be neurodivergent but not having a diagnosis (65%) were more likely to say that adjustments were made during recruitment and selection and did not report in a way that was statistically different from neurotypicals.

Figure 8 Proportion of each population agreeing with the statement "my organisation makes reasonable adjustments during recruitment and selection"



"I feel more training needs to be made available linked to these matters. At times within the workplace there is an expectation of how someone should behave and if one person does not fit that i.e. act in a professional manner especially when they are looking to move up the ladder. People's individual diversity is not taken into account."

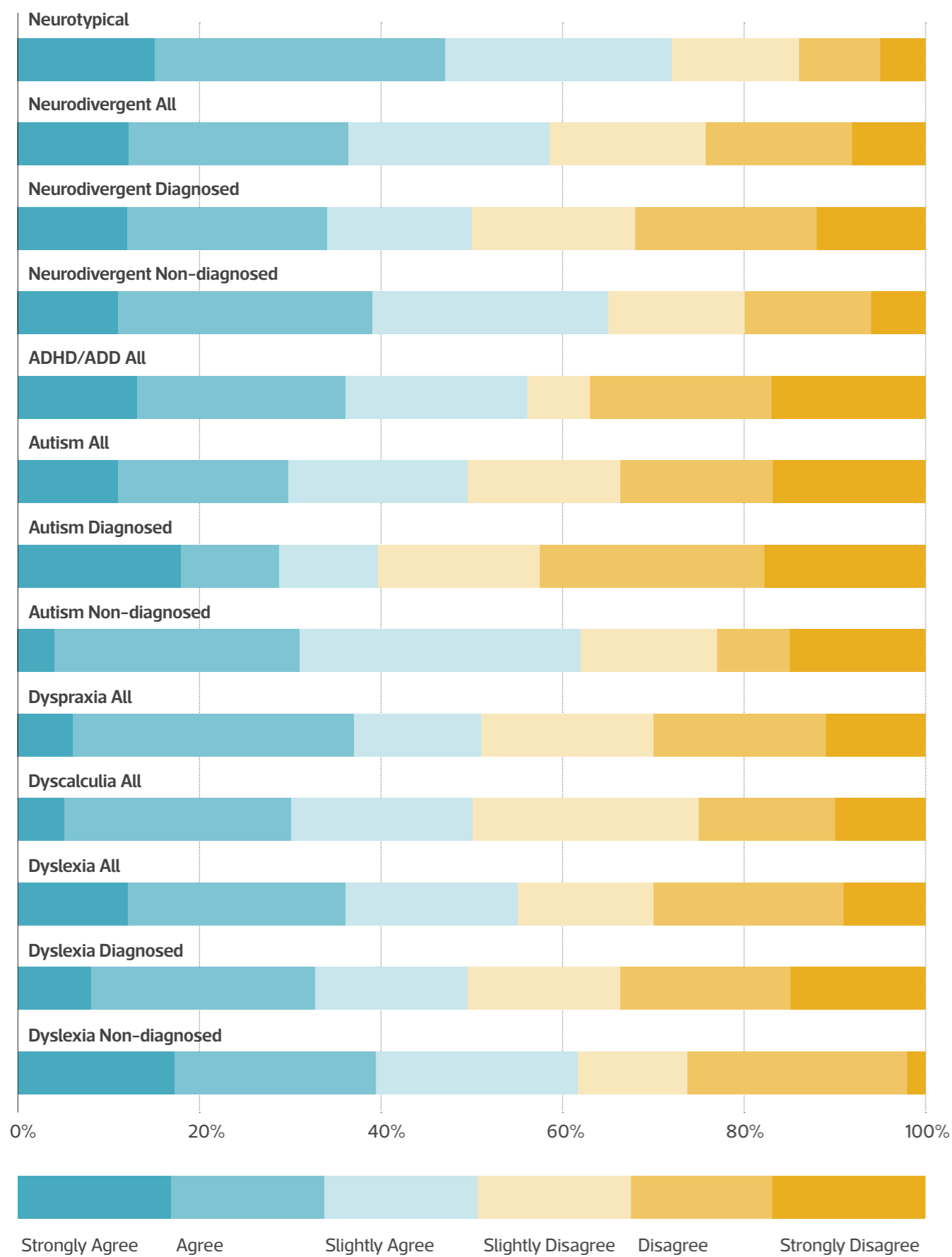
Autistic female, aged 31-40, working in the third sector.

"Within our recruitment process we ask about special help/needs, but I feel this is aimed more towards well known disabilities and maybe dyslexia which has become more publicised in recent years.

The question is asked but there is no emphasis on neurodivergent conditions, however we have an inclusive policy and I do believe should the issue arise there are certainly no obstacles that would not be removed to assist inclusivity and equality"

Neurotypical female aged 41-50 working in engineering, /manufacturing/ construction

Figure 9: My workplace makes reasonable adjustments for neurodivergent candidates during recruitment and selection



“The majority of our roles are patient-contact focused. We currently have three individuals that are diagnosed as dyslexic as ambulance crew which have a series of measures in place to support them with their record keeping. We have had a number of volunteers supporting our logistics team with autism and dyspraxia, these roles had reasonable adjustments easily made. We have not been proactively recruiting these individuals but have been proactively removing what would sometimes have seemed barriers such as literacy and numeracy testing, group team selection days etc. for roles that do not specifically need them”.

Neurotypical male, aged 51-60, working in the third sector in human health/ social work

Do people in the workplace behave in a way that excludes neurodivergents?

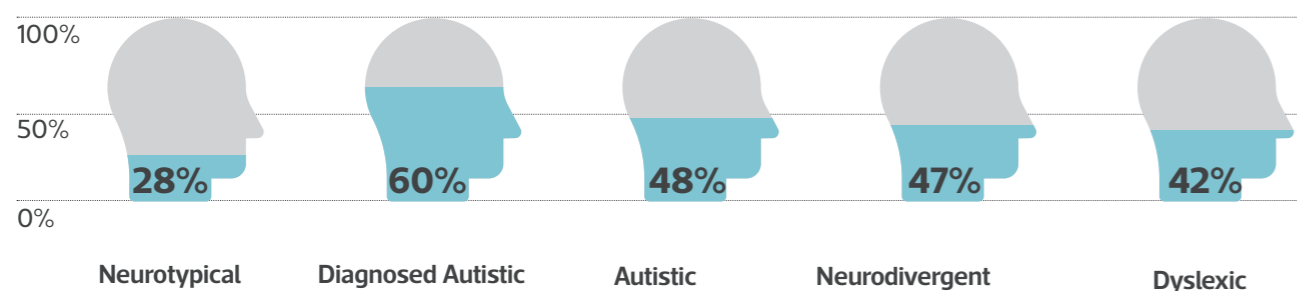
This question explores whether neurodivergents feel explicitly excluded (the summary answers for this question are inverted on Figure 1). Only 28% of neurotypicals believe that people in the workplace behave in a way that excludes neurodivergent colleagues (Figure 10). However, the majority of diagnosed autistics (60%), diagnosed dyspraxics (69%) and dyscalculics (53%) report that people in their workplaces behave in ways that exclude them (Figure 11).

Just a little under half of dyspraxics (47%) (including diagnosed and undiagnosed), dyslexics (42%) and people who have ADHD/ADD (42%) also report exclusion; the

responses from dyslexics are statistically different from the responses from neurotypicals, as are responses from the entire dyspraxic population so we can be confident that dyslexics and dyspraxics are experiencing greater amounts of exclusion than neurotypicals perceive.

The differences between people who have ADHD/ADD and neurotypicals are not statistically relevant so we cannot be certain there is a difference between neurotypical perceptions and lived experiences on ADHD/ADD, although the lower sample size of people who have ADHD/ADD could impact the statistical analysis.

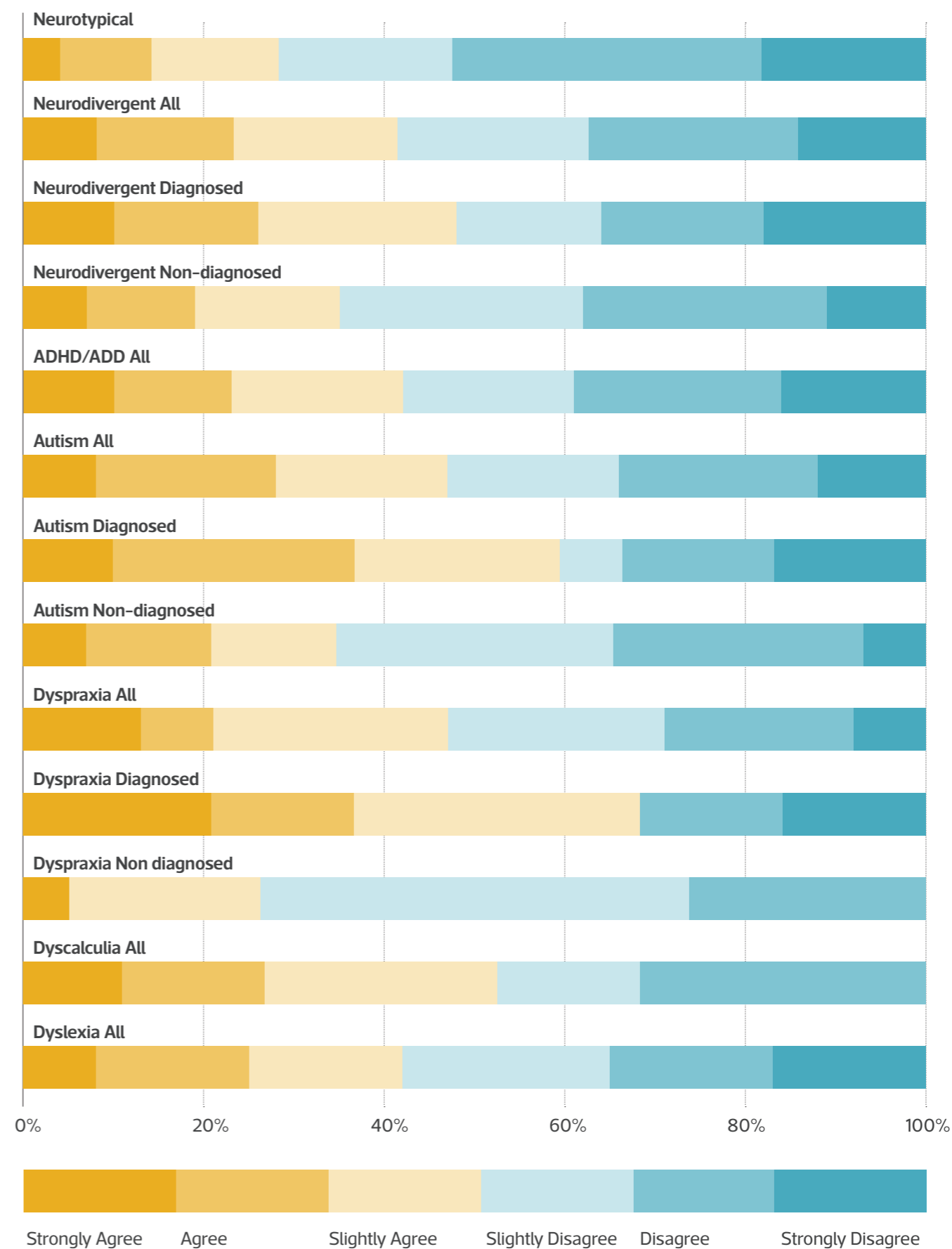
Figure 10: Proportion of each population agreeing with the statement "people in the workplace behave in a way that excludes neurodivergents"



"We are treated as if we are stupid. My company has equal opportunities, but they do not act upon this. Instead, work was taken off me when I told them about my diagnosis. The office was too loud with full of laughter and constant chit-chat. They treat me as if I am unable to do my work. They never treated me as stupid until I disclosed my autism diagnosis"

Autistic, ADHD/ADD male, aged 41-50, working in engineering/manufacturing/construction

Figure 11: People in the workplace behave in a way that excludes neurodivergent colleagues

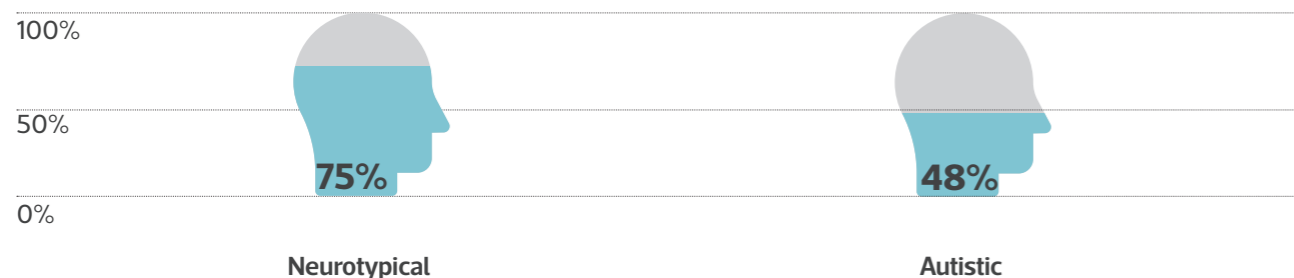


Does the workplace make reasonable adjustments in encouraging certain procedures, to be inclusive of employees with neurodivergent conditions?

Fewer than half of autistics (48%) report that workplaces encourage reasonable adjustments in procedures to be inclusive, compared to the majority of neurotypical respondents (75%), statistical analysis confirms that this difference is significant. People who have not had their neurodivergence confirmed through diagnosis, report more positively, with 70% saying that the procedures are inclusive of

neurodivergents. Half of dyslexics (50%), and a little over half of dyscalculics (56%), dyspraxics (55%), and people who have ADHD/ADD (59%) reported that the workplace make reasonable adjustments, encouraging inclusivity in procedures. The responses from other neurodivergents were not statistically different from the perceptions of neurotypical respondents. .

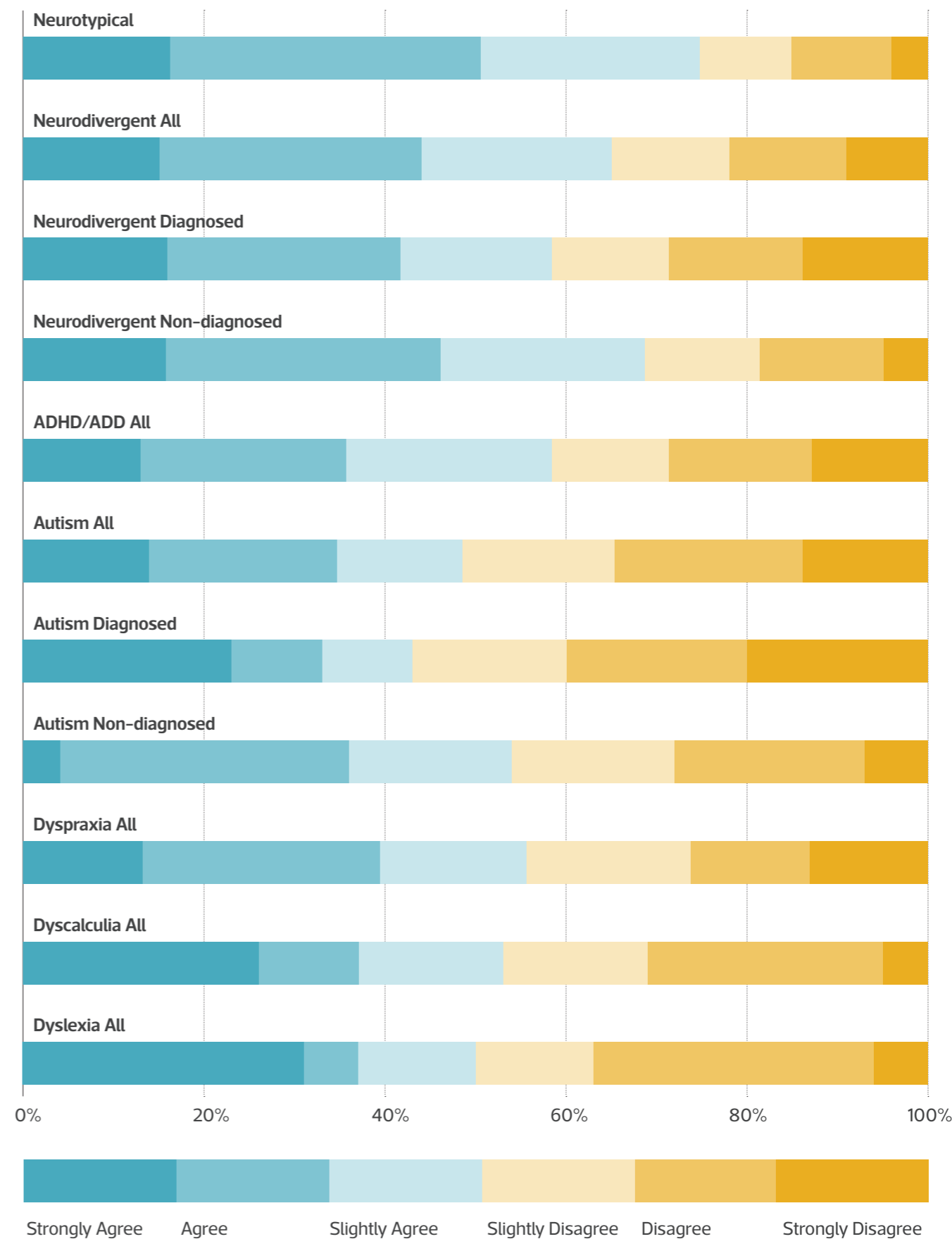
Figure 12: Proportion of each population agreeing with the statement “my organisation makes reasonable adjustments in encouraging certain procedures, to be inclusive of employees with neurodivergent conditions”



“I currently manage two people with dyslexia and in one case it is more challenging than in the other. I sometimes struggle to bridge the gap, but perseverance wins through, I think. I must check my impatience and must get better at remembering that communication is only as effective as how it is received rather than how it is intended and be more creative in how I explain things. I manage people on a future leadership scheme and the leaders of the future must reflect the variety of staff who will be employed. I believe the onus is on me to be a better manager to this future leader and harness her skills - she passed all of the assessments so she must have it”.

Neurotypical female, aged 41-50, working in local or national government

Figure 13: My workplace makes reasonable adjustments in encouraging certain procedures, to be inclusive of employees with neurodivergent conditions



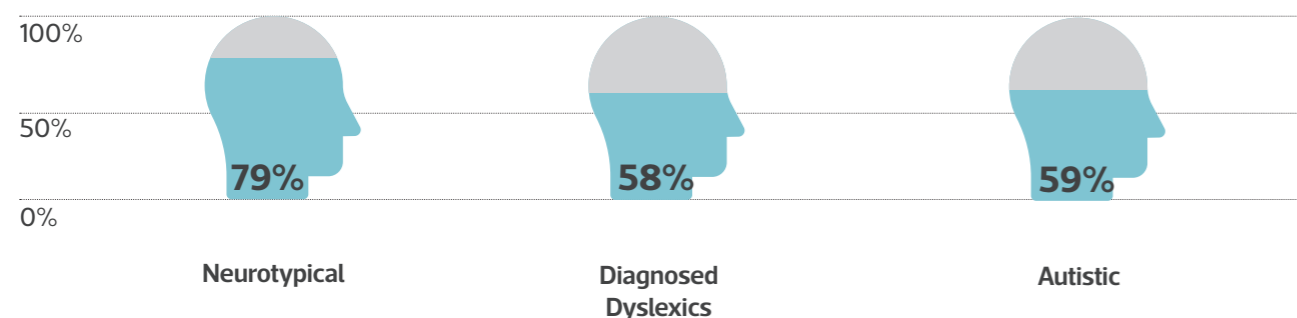
Does the workplace make reasonable adjustments to the physical environment for neurodivergent employees?

Half or more respondents from each neurominority report that the workplace asks employees if they need reasonable adjustments for being neurodivergent, with 89% of non-diagnosed dyslexics, compared to 79% of neurotypicals reporting adjustments are made (Figure 14 and 15).

Autistics fare worse, with just 59% reporting that adjustments are made, however this is an improvement on adjustments being made to be inclusive (Figure 14). Autistics experiences are worse than neurotypicals' perceptions, confirmed by statistical tests. Dyspraxics report the worst experience with just over

half (53%) stating that adjustments are made to the physical environment, but due to the distribution of the responses and relatively low sample size this is not statistically different to neurotypical responses. Diagnosed dyslexics' (58% reporting adjustments were made) experiences are statistically worse than neurotypicals expectations (Figure 14 and 15). The other neurominorities reported that inclusive behaviours were encouraged, to a lesser extent than neurotypicals (ranging from 62-70% agreeing with the statement), but these populations were not statistically different from neurotypicals. .

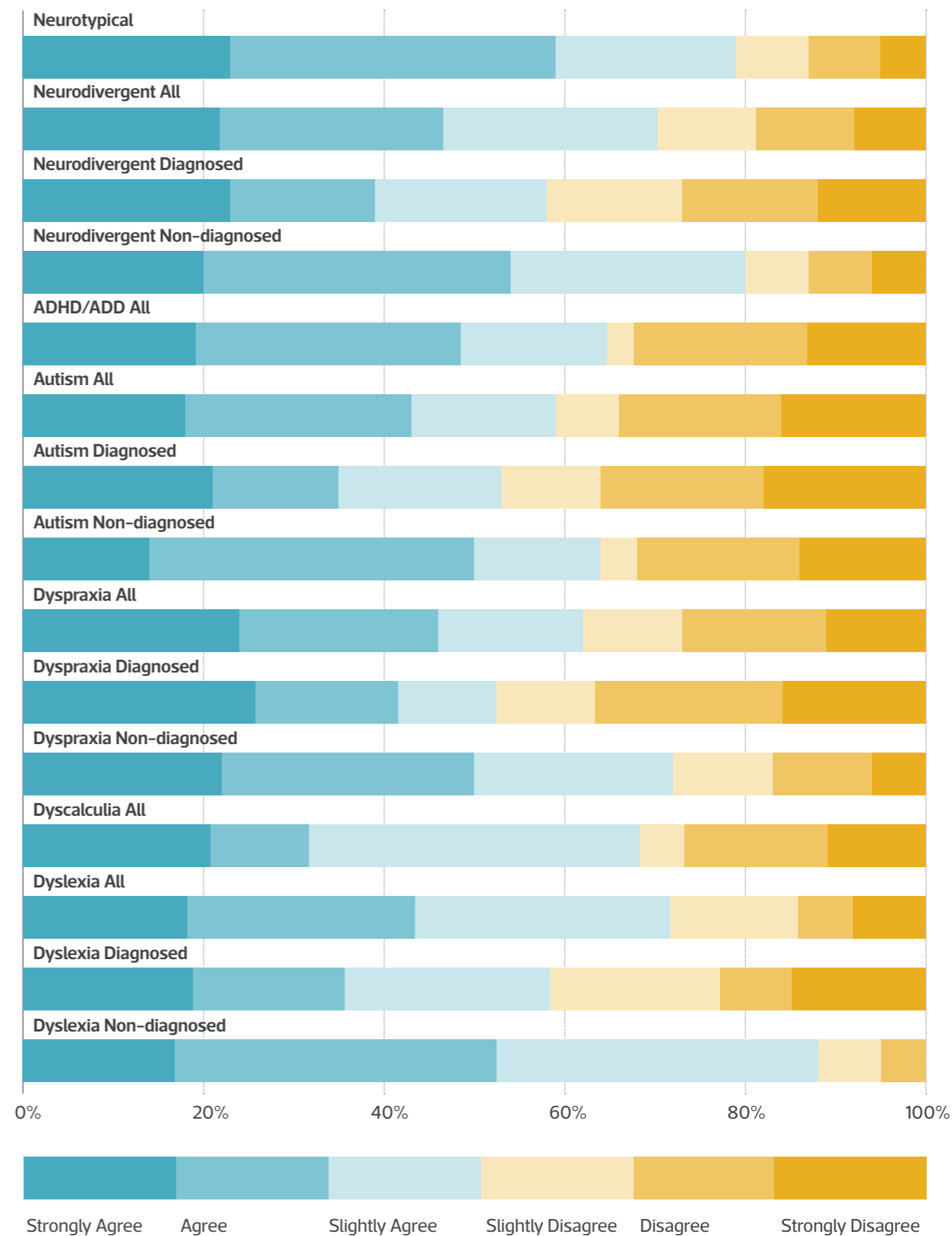
Figure 14: Proportion of each population agreeing with the statement "my workplace makes reasonable adjustments to the physical working environment for neurodivergent employees."



"We currently employ team members that have ADHD, autism, dyscalculia and dyslexia. My reasons for marking out Tourette's regarding recruitment, is that all team members are customer facing. Where we can deal proactively with the above-mentioned conditions, we would not be in a place to provide sufficient supervision of a team member with Tourette's". .

Neurotypical female, aged 51-60, working in retail

Figure 15: My workplace makes reasonable adjustments to the physical working environment for neurodivergent employees (examples might include fixed desks, screen filters, adjusted lighting, quiet spaces)



Conclusions

Each neurominority reports worse experiences across the range of questions when compared to the perceptions neurotypicals have of inclusion. Overall, dyslexics report a better experience in the workplace than other neurominorities and autistics report the worse experiences.

Organisations perform much better in the areas of physical and environmental adjustments. Behaviours towards neurominorities, and creating adjustments that encourage positive and inclusive behaviours towards neurominorities are lacking.

Neurominorities frequently report mental illness, such as depression and anxiety (ACAS, 2019; GMB, 2018), which is attributed to erosion of confidence, exclusion and bullying. Quotes from research participants are included throughout this report and illustrate their experiences of exclusion and changes in behaviour of colleagues towards them following disclosure of diagnosis.

Others choose not to disclose due to fear of bullying/exclusion or witnessing other negative behaviours, and in these situations are therefore unable to request reasonable adjustment.

Comments from neurotypical respondents often indicate that they assume neurominorities are a burden in the workplace, incapable of working independently or safely, and are in need of close supervision. This is not the case; neurodivergents are as diverse and varied as neurotypicals, often bringing unique skills and attributes that are of significant benefit to organisations. There are many who emphasise the sound business case of employing neurodivergents (ACAS, 2019; CIPD, 2018; GMB, 2018; Matuson, 2019).

Some of our participations also reported that they feel their career opportunities have been limited by perceptions of their neurodivergence, with neurotypicals offered opportunities that they are not, due to their condition. Others reported that support and inclusion in their organisations is focused on people undertaking repetitive, routine and junior positions.

Several stated there is limited opportunity for career progression due to assumptions of incapability relating to their conditions rather than demonstrable attributes. The assumption of incapability was repeated by around one third of neurotypical respondents.

Advice for neurodivergents

Advice for neurodivergents in discussing reasonable adjustments for remote working

At the time of publication, many are facing new challenges with working at home due to the Covid-19 Pandemic. Home working environments are not always ideal and may pose additional unique challenges to neurodivergents.

Just as with normal every day working, neurodivergents are entitled to reasonable adjustments to enable them to do their jobs when they work at home.

This advice was developed following the research, in collaboration with Infinite Autism and Asperger's and Autism for Adults UK, with additional reference to ACAS (2019) and GMB (2018). The advice focusses on addressing some of the barriers neurodivergents experience and aims to help managers provide support and identify reasonable adjustments for neurodivergents working at home.

Approaching the discussion

It can be very difficult to highlight that you face challenges at work due to having a neurodivergent condition; this research demonstrates that neurodivergents frequently experience both exclusion from behaviours of colleagues and difficulties in getting reasonable adjustments made for physical aspects of their roles.

Following the research neurodivergents told us it can be very difficult to know how to approach discussions with a line manager and

to talk about challenges they face; some told us they were misunderstood and others that they feared discrimination.

Ideally speak directly to your line manager and ask for a meeting to specifically discuss reasonable adjustments. If you feel unable to approach your line manager then seek support from HR. It might also be possible to have a peer/colleague or professional advocate support you if you have difficulty in communicating the challenges you experience.

Before any meeting to discuss reasonable adjustments take time to think about the things that are difficult or causing problems and try to think of solutions that will enable you. Write these down in preparation.

The manager should aim to keep a record or minutes of conversations discussing reasonable adjustments, if not record these yourself and send them to your manager (and if you feel appropriate copy to HR) as a record to check progress and agreed actions to support of you.

It may also be beneficial to ask to be referred to Occupational Therapy for a review of your needs. Alternatively you might want to ask for an external neurodivergent mentor or assessor to support you in identifying challenges in daily activities and develop optimal solutions.

Your organisation may be able to implement adjustments directly, or they may need to consult with an occupational health professional who will work with you to assess your needs and make recommendations.

Questions you might want to ask yourself before a meeting to discuss reasonable adjustments

Before any meeting discussing accessibility and reasonable adjustments try to prepare; these questions aim to provide support for such discussions, they are not exhaustive and there may be other items you need to discuss. As well as identifying problems try to think of a potential solution. It may also be helpful to ask your manager and colleagues if they notice any differences.

- Are you experiencing any sensory issues such as; glare from computer, too much noise, difficulties with standard design templates/ layouts, challenges with lighting?
- Do you have a suitable desk and chair, keyboard and mouse for work?
- Do you have software that supports your needs? Examples might include software for; text to voice, voice to text (dictation), mind mapping, planning, organisation, maths and illustration/drawing, or other needs
- Do you need printer, paper, or have stationary needs (sticky notes, coloured folders, organisers, specific pens/pen holders etc) to help you access your work?
- Do you benefit from additional support from another person in elements of task management, organisation, or other aspects of your job?
- Is the way your manager and other colleagues communicate with you accessible; is written/visual information or spoken word more accessible, do you benefit from short lists, is verbal or written communication easier for you, do you need more thinking time?
- Are you being asked to communicate in a way that enables you, or are you being asked

to produce verbal or written communication in a way that makes work harder?

- Are meetings managed in a way that you can participate equally with others, is there a structure that is accessible, do you find it hard to get your voice heard, would it help for someone to pause the meeting for you to think and make your point, are you getting cut off when you have not finished what you are saying?
- Do you benefit from notice and scheduled meetings/discussion, do you process better with spontaneous meetings/discussions?
- Do you find talking to someone on a video call easier, does watching videos of others make it harder for you to process and follow what others are saying, does holding meetings over a forum where you can type make it easier for your to collate and share your thoughts, does a discussion forum that is text only make things a lot harder for you to share your thoughts?
- Are you able to take suitable breaks?
- Are policies and procedures inclusive and supportive?
- If you are in a customer-facing role are there any aspects that pose greater challenge to you?
- Do you feel fully included or are you excluded as a member of the organisation?
- Do you face any social difficulties, e.g. do you feel compelled to engage with others, are you self-conscious, are you able to be your authentic self, have there been communication breakdowns
- Is there anything else in the physical work environment, work culture or interactions that is having a negative impact on your physical or mental health, or that makes it harder for you to do your job?

Methodology

During September 2019 The Institute of Leadership & Management undertook an online survey; 1156 respondents participated in the research, mostly based within the UK. Participants were asked a series of Likert item questions relating to the inclusion of neurodivergents in the workplace. Comparisons were made between the responses of different neurodivergent populations and the neurotypical respondents. Results were presented in a simplified way as a percentage of people either agreeing or disagreeing with each statement. We asked people to state if they had confirmed neurodivergence through diagnosis, or if it was undiagnosed (access to diagnosis is often poor, many people live aware that they have a condition but never have formal assessment due to accessibility or personal reasons).

Due to the relatively low numbers of responses from each neurominority, we undertook statistical analysis to compare their experiences with the perceptions of neurotypical research participants. For statistical analysis the Likert items were

converted into a 6-point number scale (strongly disagree 1 to strongly agree 6). The Mann-Whitney U test was carried out to determine if the differences of two populations (neurotypical compared to each neurominority) responses held statistical relevance. There were too few responses from people who have Tourette’s syndrome to include them in analysis, and with only 20 responses from dyscalculics, these data does not hold statistical relevance but is included as indicative.

In addition, participants were offered the opportunity to contribute further perspectives through a non-directed, open, free text question.

The survey was conducted in line with the Market Research Society (MRS) Code of Conduct. All responses were anonymous, but respondents were asked if they would be willing to be contacted for PR purposes and were also incentivised to participate in the research.

Table 2: Number of responses from each neurotype within the research.

	ADHD /ADD	Autism	Dyspraxia	Dyscalculia	Dyslexia	Tourette’s Syndrome	Neurodivergent any type	Neurotypical
Total claiming yes (diagnosed or not)	33	61	39	20	98	4	185	971 (calculated by absence of condition & absence of prefer not to say response)
Yes diagnosed	8	30	19	3	54	2	91	
Yes undiagnosed	25	31	20	17	44	2	94	

References

- ACAS. (2019). **ACAS: Neurodiversity in the workplace.** The UK's Advisory, Conciliation and Arbitration Service (ACAS) Working for everyone: <https://archive.acas.org.uk/neurodiversity>
- Brain HE. (2019). **Dyscalculia for Students.** <http://www.brainhe.com/students/types/dyscalculiaforstudents.html> Last updated 18 December 2019
- CIPD. (2018). **Neurodiversity at work.** London: CIPD. https://www.cipd.co.uk/Images/neurodiversity-at-work_2018_tcm18-37852.pdf
- GMB. (2018). **Neurodiversity in the workplace: Toolkit- First edition.** GMB Union. <https://www.learningdisabilitytoday.co.uk/union-creates-toolkit-to-help-employers-support-neurodivergent-workers>
- Matuson, R. (2019). **Hidden Talent: The Case For Hiring Neurodiverse Candidates.** Forbes. <https://www.forbes.com/sites/robertamatuson/2019/10/30/hidden-talent-the-case-for-hiring-neurodiverse-candidates/#5892aed2768a> Last updated 20 October 2019.
- NAS. (2016). **Autism Employment Gap. London:** National Autistic Society. <https://www.autism.org.uk/get-involved/media-centre/news/2016-10-27-employment-gap.aspx>
- NHS. (2019a). **Attention deficit hyperactivity disorder (ADHD).** <https://www.nhs.uk/conditions/attention-deficit-hyperactivity-disorder-adhd/> Last updated 2 December 2019.
- NHS. (2019b). **What is autism?** NHS: <https://www.nhs.uk/conditions/autism/what-is-autism/> Last updated 2 December 2019.
- NHS. (2019c). **Dyslexia.** <https://www.nhs.uk/conditions/dyslexia/> Last updated 2 December 2019.
- NHS. (2019d). **Dyspraxia (developmental co-ordination disorder) in adults.** <https://www.nhs.uk/conditions/developmental-coordination-disorder-dyspraxia-in-adults/> Last updated 2 December 2019.
- NHS. (2019e). **Tourette's syndrome.** <https://www.nhs.uk/conditions/tourettes-syndrome/> Last updated 2 December 2019.
- Ruzich, E., Allison, C., Chakrabarti, B., Smith, P., Musto, H., Ring, H., & Baron-Cohen, S. (2015). **Sex and STEM Occupation Predict Autism-Spectrum Quotient (AQ) Scores in Half a Million People.** PLOS one, 10(10), e0141229.
- Science Daily. (2007). **Children With Tourette's Quicker At Certain Mental Grammar Skills.** Science Daily. <https://www.sciencedaily.com/releases/2007/07/070713131417.htm>
- Scope. (2019). **Social Model of disability.** Scope: <https://www.scope.org.uk/about-us/social-model-of-disability/> Last updated 12 December 2019.
- The Brain Charity. (2019). **Dyscalculia.** <https://www.thebraincharity.org.uk/how-we-can-help/practical-help/information-advice/a-z-of-conditions/35-d/637-dyscalculia> Last updated 2 December 2019.
- Thompson, H. (2018). **People with Tourette's may find it easier to pick up new skills.** New Scientist. https://www.tourettes-action.org.uk/storage/downloads/1522229004_new_scientist_procedural-memory.pdf Last updated 7 March 2018.
- Tourettes Action. (2019). **Tourettes Action: What is Tourette Syndrome?** <https://www.tourettes-action.org.uk/67-what-is-ts.html> Last updated 16 December 2019.
- Web MD. (2019). **How common is dyscalculia?** Web MD: <https://www.webmd.com/add-adhd/childhood-adhd/qa/how-common-is-dyscalculia> Last update 18 December 2019.



THE INSTITUTE OF
LEADERSHIP
& MANAGEMENT

Inspiring great leadership. Everywhere.

**We're on a mission to
inspire great leadership**

Join us by:
Collaborating on research activities
Connecting with like-minded people at our free webinars
Becoming a member
www.institutelm.com/join