



# Objectives

- Introduction to Neurodiversity
- Workplace Impact
- Supporting Colleagues

# Intersectionality

“the interconnected nature of social categorizations such as race, class, and gender as they apply to a given individual or group, regarded as creating overlapping and interdependent systems of discrimination or disadvantage.”

- Oxford Dictionary



**Knowing what makes you who you are will help you navigate relationships and experiences. Sharing these insights will help others understand you.**





**We are  
walking  
around in  
our bubble**



**When our  
bubbles  
collide, what  
do you allow  
others to see?**

**What do you  
take time to  
see?**

# Understanding Neurodiversity

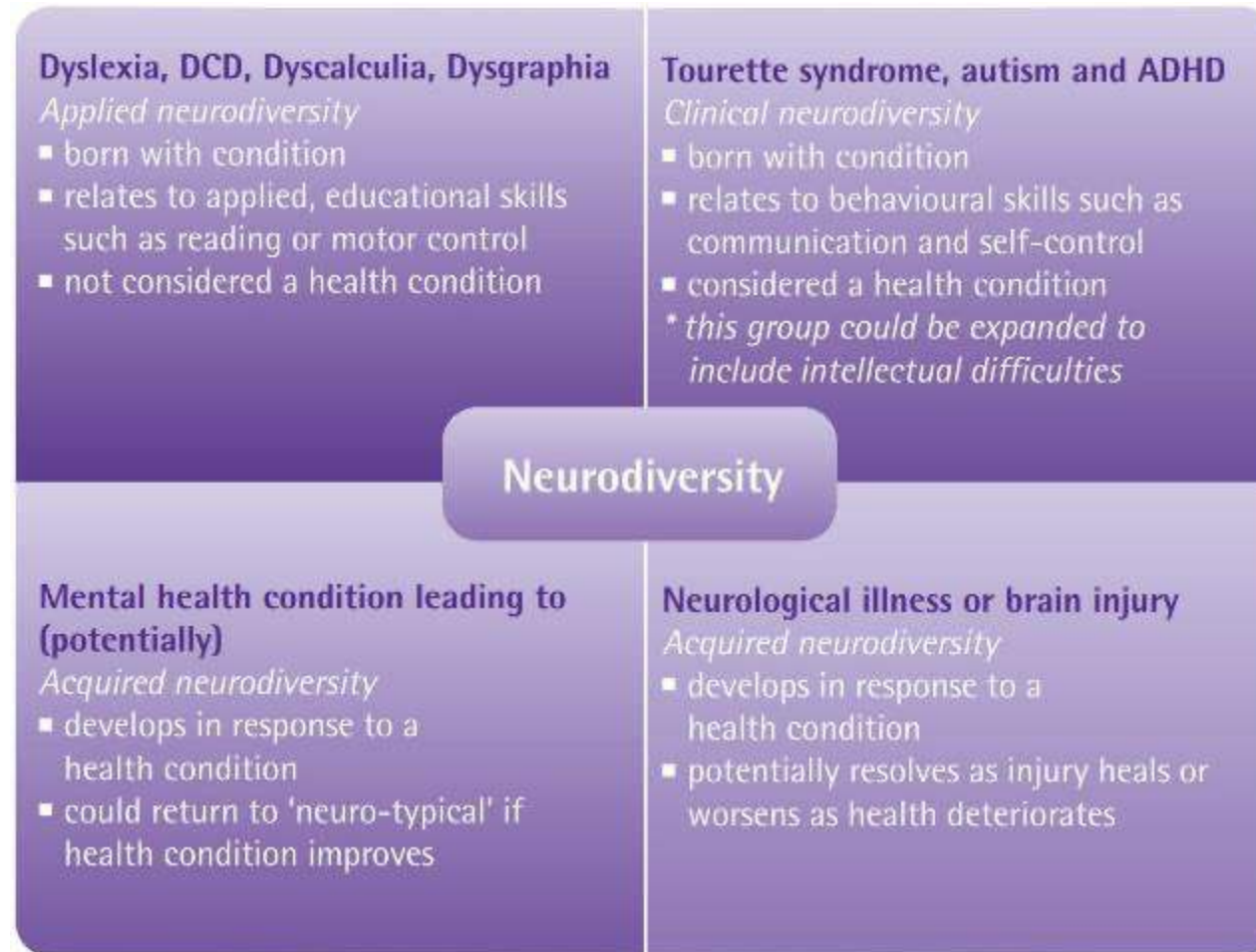
- Neurodiversity is “the variation and differences in neurological structure and function that exist among human beings, especially when viewed as being normal and natural rather than pathological [i.e., disability or impairment]” *Dictionary.com*
- Includes Autism Spectrum Disorder (ASD), Attention Deficit Hyperactivity Disorder (ADHD), Dyspraxia, Dyslexia, Dyscalculia, Tourette Syndrome or other mental variations considered disabilities under the Americans with Disabilities Act of 1990

# Understanding Neurodiversity

- Just because someone thinks differently does not mean they are deficient or likely to produce poor work
- Neurodiverse people can and do contribute significantly to the working world



# Recent research has grouped these neurodiverse conditions into four key categories:

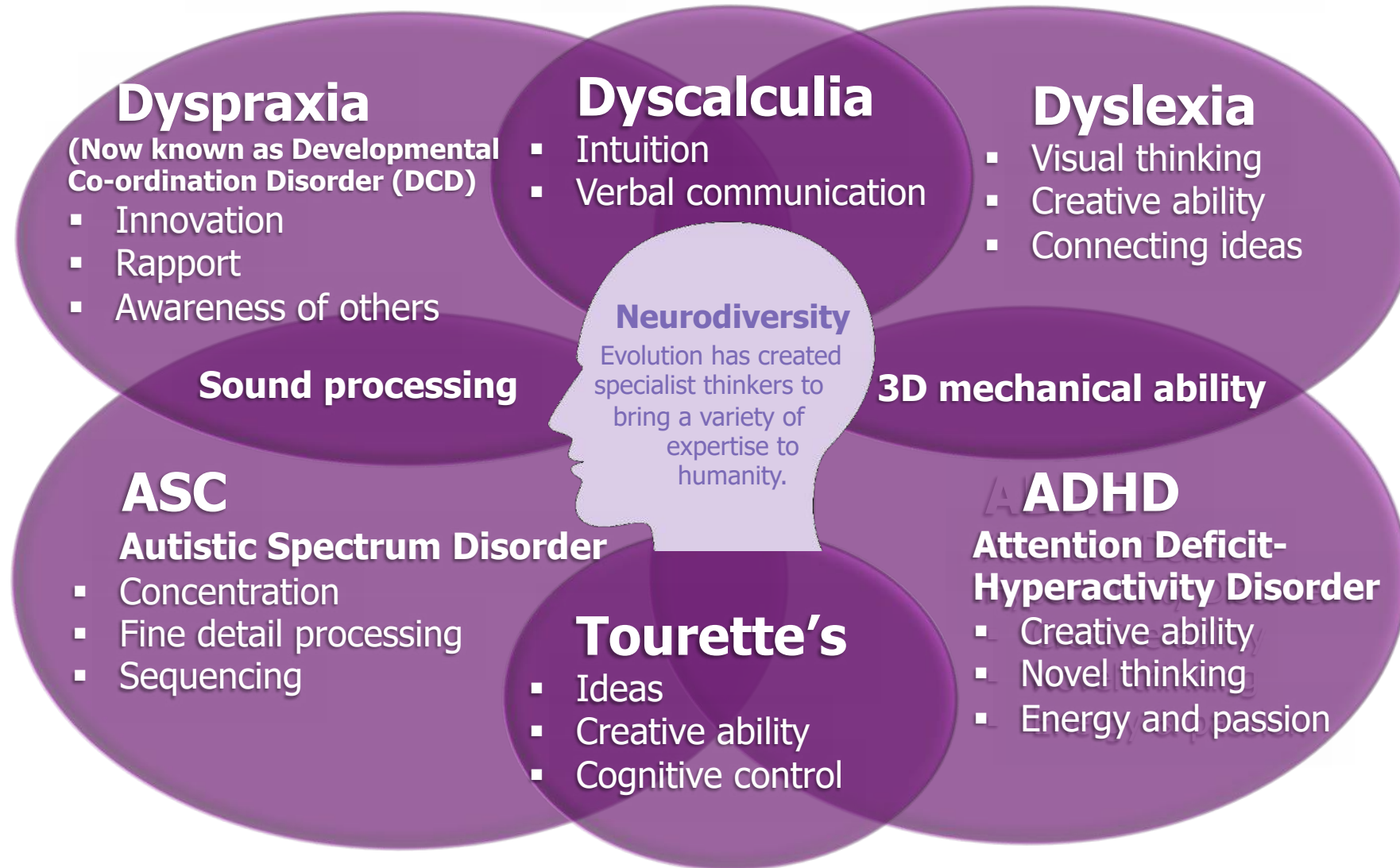


*From Psychology at work:  
Improving wellbeing and  
productivity in the workplace,  
Weinberg, A & Doyle, N, 2017.*

# Hidden Disability

Applied	Clinical	Acquired (transient)	Acquired (Chronic)
Dyslexia, DCD, Dyscalculia, Dysgraphia	Tourette Syndrome, Autism, & ADHD	Mental health condition leading to [potentially]	Neurological illness or brain injury
<ul style="list-style-type: none"><li>• Born with condition</li><li>• Relates to applied, educational skills, such as reading or motor control</li><li>• Not considered a health condition</li></ul>	<ul style="list-style-type: none"><li>• Born with condition</li><li>• Relates to behavioural skills such as communication and self control</li><li>• Considered a health condition</li><li>• This group could be expanded to include intellectual difficulties</li></ul>	<ul style="list-style-type: none"><li>• Develops in response to a health condition</li><li>• Could return to 'neurotypical' if health condition improves</li></ul>	<ul style="list-style-type: none"><li>• Develops in response to a health condition</li><li>• Potentially resolves as injury heals or worsens as health deteriorates</li></ul>

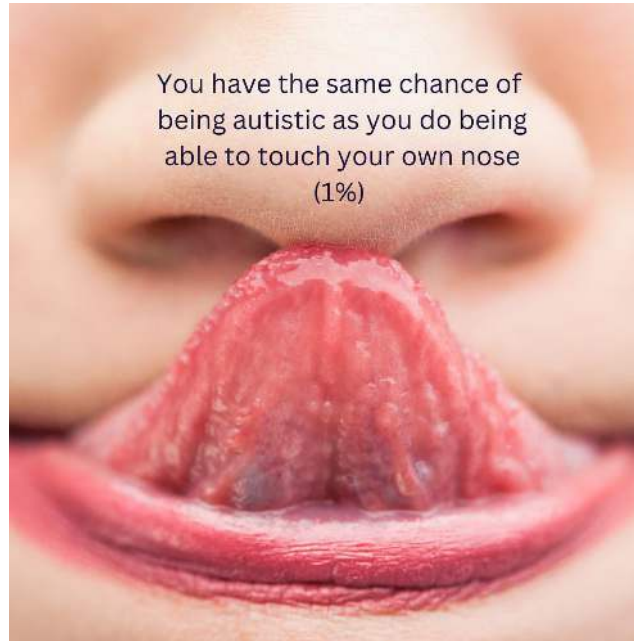
# Overlapping Neurodiverse Conditions



Based on the highly original work of Mary Colley, DANDA

# What are the odds?

You have the same chance of being autistic as you do being able to touch your own nose (1%)



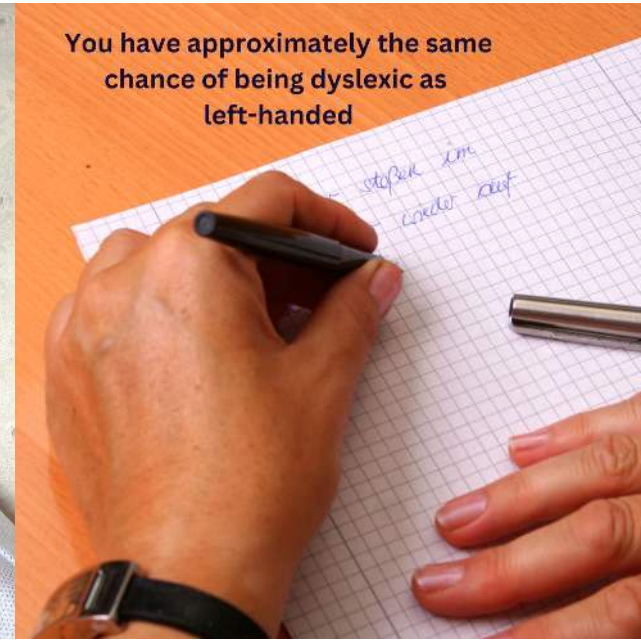
Tourettes is more common than having green eyes.



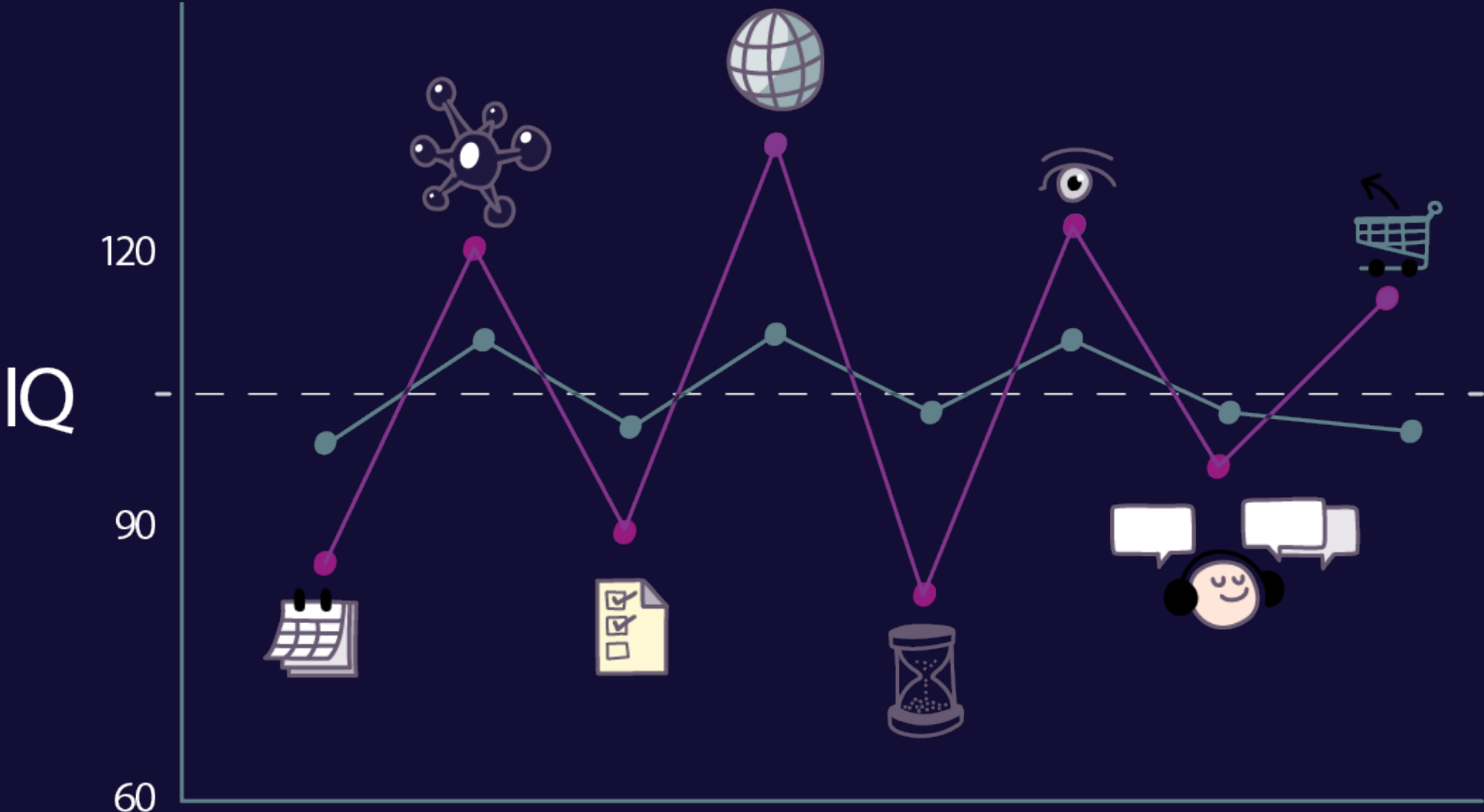
Dyspraxia is as common as red hair (2%)



You have approximately the same chance of being dyslexic as left-handed



Neurodiverse people have abilities which are 'out of balance', with significant differences between their strengths and difficulties.



Neurotypical individuals have similar abilities in all areas.

# Strengths



## Perceptual Reasoning

Define project goals

Visual and mechanical thinking

Identifying the bigger picture

Noticing patterns or that something is different



## Verbal Reasoning

Ability to ask the right questions

Articulate the point

Explain and describe concepts

Making links between ideas and advanced constructs



## Processing Speed

Focusing attention: visually scanning and sequencing new information

Making quick decisions on detailed text or code like information in the moment



## Working Memory

Hold onto details of you what you have seen or heard, long enough to act on it

Processing several thoughts or actions at one time

# History & Language of Neurominorities

## 19<sup>th</sup> Century to Early 20<sup>th</sup> Century

Word blindness, autism, hysteria, hyperkinetic or clumsy child syndrome



## Mid to Late 20<sup>th</sup> Century

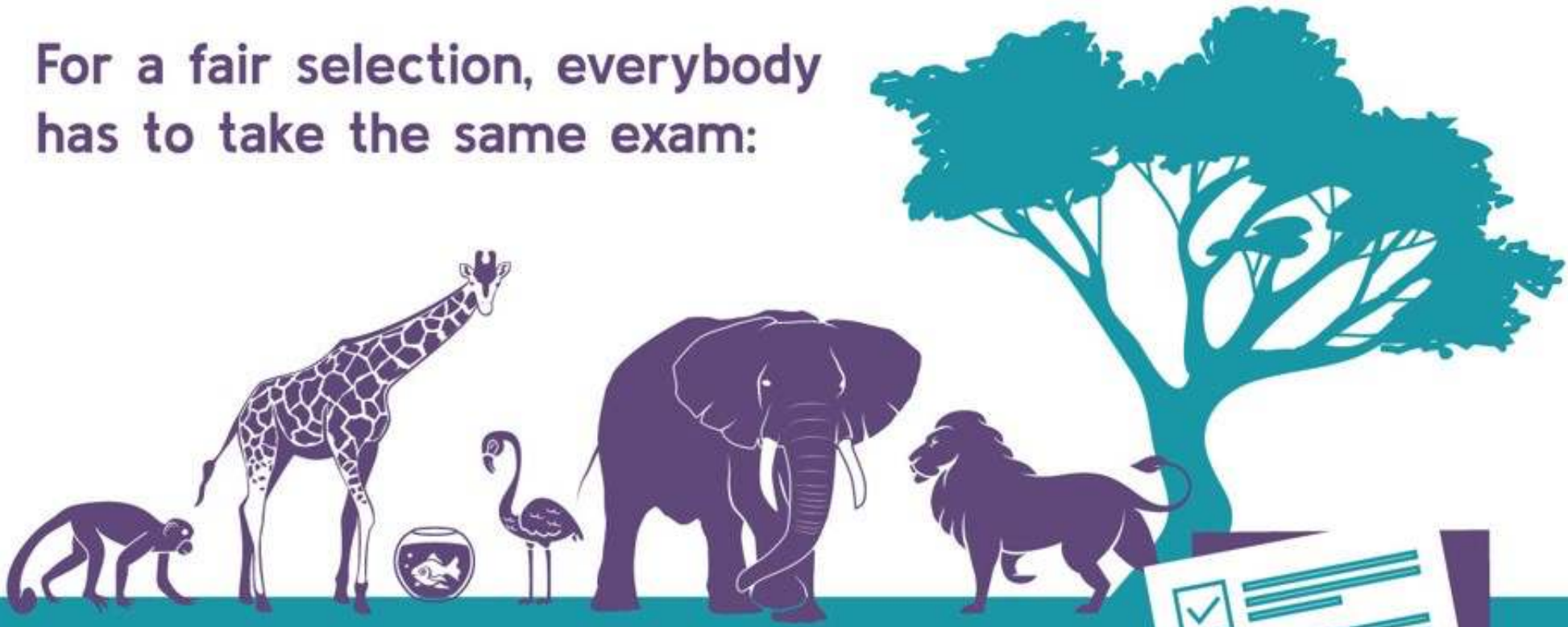
ADHD, autistic spectrum condition, dyslexia, dyspraxia, anxiety



## 21<sup>st</sup> Century

Neurodiversity, Neurodivergence, Neurominority  
Dopamine  
Noradrenaline  
Hyperconnectivity  
Hyper and hypo sensitivity

For a fair selection, everybody  
has to take the same exam:



Please climb that tree!





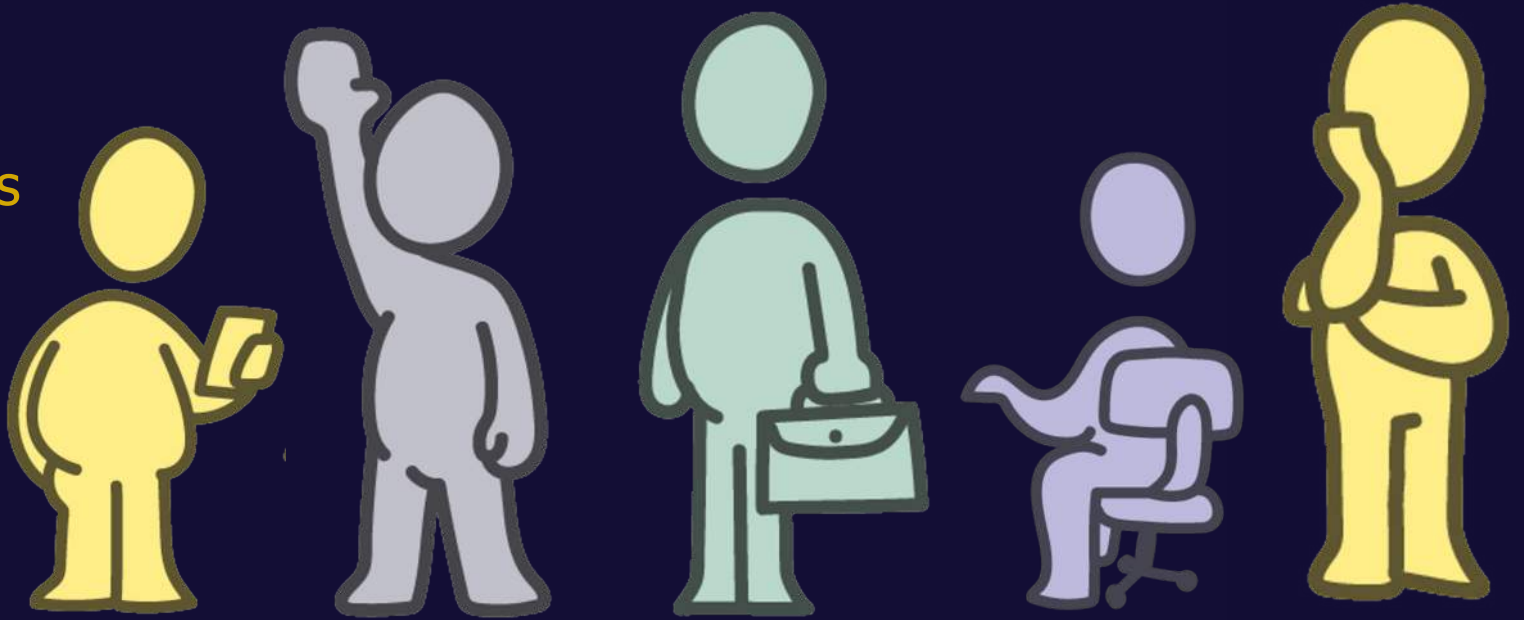


# Direct Discrimination

Making assumptions about capability and treating differently as a result

Failure to make reasonable adjustments

Victimisation or harassment



**We are all different – so the best support is individualised**

# Indirect Discrimination



In the first image, it is assumed that everyone will benefit from the same supports.  
They are being treated equally.



In the second image, individuals are given different supports to make it possible for them to have equal access to the game.  
They are being treated equitably.



In the third image, all three can see the game without any supports or accommodations because the cause of the inequity was addressed. The systemic barrier has been removed.

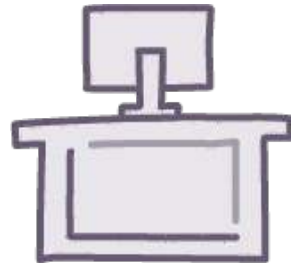
## Executive Functions Coaching

(memory, concentration, time management, etc)



## Literacy Coaching

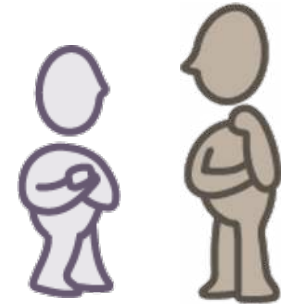
## Assistive technology



## Workstation adaptations

## Schedule flexibility

**Supervisor input**  
(e.g. regular specific feedback, co-coaching)



**Formal training**  
(in-house or commissioned)



## Environmental flexibility

*Source: Doyle 2017 & 2019*



**improvement in productivity**  
(manager rated)

**self-rated**  
**improvement in performance**



**promotion rate**



**job retention rate**

**Thank you!**

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**Resources**

**Scan here!**

