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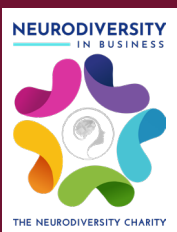
Neurodiversity at Work 2023

Demand, Supply and a Gap Analysis

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2022 Neurodiversity in Business Report Commission.
Sponsored by Rolls Royce, McDonalds and Sage

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Rolls Royce is proud to have sponsored the first national state of the sector survey into neurodiversity at work.

The findings, laid out clearly in this report, will help HR and line managers across the UK and beyond in their endeavour to unlock neurodivergent potential in their businesses.

The advice is practical, grounded in solid evidence and with clear signposting to the priorities of supporting aspirations, wellbeing, and making tailored adjustments.

Mary Fitzpatrick
Head of D&I at Rolls-Royce



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Foreword

Neurodiversity in Business has supported over 500 of the world’s leading organisations to develop, improve and share practices and initiatives to support neuroinclusion in the workplace. Our industry forum encourages our members to build on each other’s success promoting neuroinclusive workplace cultures, fair access to opportunities in recruitment and retention of neurodivergent employees. We have made considerable progress. Yet we have done so through trial and error and relying on the lived experience of neurodivergent self-advocates working to address barriers they have overcome. The next steps towards a neuroinclusive world will require more rigorous and comprehensive understanding of practice to inform a vision for the future.

Neurodiversity in Business is proud to partner with Birkbeck, University of London to embark on this journey to undertake and promote this best in class research of current neurodiversity practice. We sincerely thank our sponsors Sage, McDonalds and Rolls Royce for their generous support. The insights gained from this study will inform the next generation of inclusion initiatives in workplaces nationally. We have established that neurodiverse talents are unique and are making a case for specialist talent and career pathways. We have also identified which adjustments work, where employers need to concentrate their efforts and gaps in understanding which we need to tackle next. This research serves as a springboard for further research to continue producing the insights upon which advances of the future will be built through genuine co-creation involving employers, employees and the communities at the heart of our efforts.

- Dan Harris, CEO Neurodiversity in Business





Acknowledgements

This survey was commissioned by the Neurodiversity in Business (NiB) Charity in 2022, who in turn were sponsored by Rolls Royce, McDonald's and the accounting software firm, Sage. NiB gratefully acknowledge this support.



The Birkbeck research team would like to thank all volunteers who gave their time to comment and review the survey and who helped us promote this work.

We thank all our respondents. There are several papers to come out of this research; your voice will be heard.

Finally, a huge thank you goes to Meg, our researcher on this project. Meg is a whiz with R (a stats programme) and worked through nights and weekends to make a tight budget and tight time-frame 'work'. We watched in amazement and are immensely grateful.



Executive Summary

“t’ain’t what you do, it’s the way that you do it, that’s what gets results,” sang Ella Fitzgerald in 1939, a refrain that summarises the findings of this survey.

1117 people responded to our questions between November 2022 and January 2023: 127 employers and 990 neurodivergent employees / workers. We analysed their responses by demographics: neurominority diagnosis, gender, race, age, LGBTQ+. Our employer responses indicated a high level of engagement with neuroinclusion, from which we infer that we have captured a snapshot of best practice in the UK currently, and that their comments may not be reflective of the UK as a whole. Employers and employees agree on neurodivergent staff strengths, such as creativity, innovation and focus, suggesting that neurodivergent employees are valued at work. Strengths need to be harnessed and supported. The challenges reported across neurodivergent conditions vary and deserve attention, substantiating a case for tailored adjustment and support.

We focused on two outcomes: employee intention to leave/stay in an organisation, retention and wellbeing. Levels of wellbeing are very low in this sample and warrant urgent attention. A proactive rethink needs to put wellbeing and inclusion at the heart of corporate strategy. We found that career progression and psychological safety were critical for retention and wellbeing, more so than the provision of accommodations alone. The results support a focus on manager training, equipping frontline managers with the knowledge and confidence to navigate employee experience, training and provision of supports.

Wellbeing and inclusion need to be embedded into corporate strategy and policy, and their importance supported through top-down role modelling in conjunction with support for bottom-up initiatives.



There was room for improvement in employer confidence to provide neuroinclusion. Employees and employers diverged significantly regarding where to glean knowledge about neurodiversity. There was confusion as to whom should be engaged to provide support, advice and training. We highlight the danger of employees turning to potentially unreliable and misleading sources of information. Organisations need to focus on streamlining the commissioning of (both internal and external) referral pathways. Our findings also signal a need for professional bodies to better signpost and improve their resources through the utilisation of contributions based on real life experience and ensuring that resources are both workplace contextualised and neurodiversity-affirming.

We posit that the four key priorities for the neurodiversity in business movement are to:

- ◆ Make wellbeing and inclusion for everyone, including ND workers, a pillar of corporate strategy to harness diverse talent
- ◆ Objectively evaluate and promote the effectiveness of adjustments to find out what works for whom, and how quality of provision can be benchmarked
- ◆ Focus on relationships, in particular psychological safety and line manager confidence
- ◆ Consider how policies and practices can develop careers and ambitions beyond surviving, to thriving



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1.0 Introduction

There is no regular survey which benchmarks UK neurodiversity practice at work. Yet, there is an urgent need to find out what is happening in practice. Neurodiversity is gaining in prominence as a buzzword in organisational practice with specific programmes springing up; yet, we witness varied levels of organisational practice and support. Employee experience at work drives performance and productivity, as well as job sustainability, inclusion and mental wellbeing. Work makes a huge contribution to our overall wellbeing, our social and financial health and even our life expectancy (1).

Historically, neurodivergent (ND) people have been disproportionately excluded from work, even when compared with other disabilities (2), yet inclusion is key for the 'future of work' (3). But what is an effective strategy for neuroinclusion at work? We aimed to gather robust evidence towards answering this question.

Birkbeck's Centre for Neurodiversity Research at Work, a neurodiverse team of workplace psychologists, developed and conducted this business research in conjunction with Neurodiversity in Business, a group of advocates and HR specialists. This report details our approach, a summary of our key learnings and the breakdown of responses to the questions. The full data and analysis will be submitted to academic journals and peer reviewed later this year, after which we will publish any additional insights.



1.1 Our Terminology

We know that words matter for the neurodiversity discourse. For clarity, we agreed the following terms:

- ◆ Literally, Neurodiversity refers to the breadth of human cognitive functioning, including both those whose cognition is typical and atypical, in line with Judy Singer’s original concept. We recognise that her idea was simply to give a name to the emerging civil rights movement by and for neurologically labelled “others” and to augment the intersectional category of “disability”.
- ◆ We use the term Neurodiversity as an abbreviation of the Neurodiversity Paradigm
- ◆ We used the term ‘neurodivergent’ in our survey, abbreviated as ND, and in reporting, to refer to individuals with one or more of the typically included neurotypes / conditions.
See page 13 for a list.
- ◆ We use the term neurominority/ies to name groups of people with specific conditions or groups of conditions.
- ◆ We also use the term or ‘neurotype’ to describe the different conditions, for example dyslexia is a ‘neurotype’.
- ◆ We refer to dyslexic neurotypes in the report, rather than ‘dyslexic people’ or ‘ADHD people’ because the majority of our respondents have more than one neurotype.
- ◆ We refer to the group who responded to our survey as the ‘sample’ because in research you gather a ‘sample’ of a ‘population’. We refer to individuals who responded as ‘people’, ‘respondents’ and ‘participants’.
- ◆ In our report, we mainly use identity first language, such as ‘ADHD-er’ or ‘autistic people’ since this is the preference of all participating in the co-production exercise.

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1.2 Our Research Aim

Our overall aim is to inform employers, concerning the needs of ND employees. We want to enhance our understanding by reporting on 'what works', including the strengths ND people bring, and how current neurodiversity practice is related to a range of important business outcomes, including intention to leave and wellbeing. We document challenges experienced by employees and employers so that future activity can be targeted and prioritised. We identify gaps between supply and demand.

We hope that organisations far and wide will engage with our findings. Our results will also be informative to those with lived experience seeking to self-advocate in employment and as part of employee resource groups. This is because our report provides a snapshot of what is happening in practice and provides insight into the strengths which ND people bring, as well as identifying how challenges can best be supported.

Because we intend to further investigate these data and present them for peer-reviewed, academic publication, we need to avoid 'self-plagiarism' and therefore this report contains the only the headline 'need to know' data for employers. Further publications will follow with a more sophisticated statistical analysis, as well as theoretical framing.



Judy Singer

Pioneer of the neurodiversity concept

“ The Neurodiversity Movement has achieved its goal of widespread recognition, and has generated an entire “Inclusion Industry”, until now wildly unregulated. Any individual or enterprise can claim Neurodiversity expertise or add “Neurodiversity Inclusiveness” to their mission statements. I congratulate [Birkbeck, Nancy, Almuth] for their bold initiative to rein in this “Wild West” runaway. By embarking on a project to set benchmarks for effective Neuroinclusion, they give business enterprises, academia and the neurodivergent community tools to evaluate the efficacy of their policies.”

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2.0 Our Approach to Survey Development

In order to develop a robust approach to collecting this data, academics and practitioners worked together to agree on:

- ◆ The questions we needed to ask, and their format. For example, for which aspects we could use existing questionnaires and for which aspects we had to write our own survey questions;
- ◆ Wording and language – was this clear and acceptable?
- ◆ Usability and design concerns; how we laid out the questions on the screen.

We then developed a draft survey containing closed and open questions and obtained ethical approval from Birkbeck. To capture both perspectives, the survey had two branches: one for employers and one for employees. We then piloted the survey with 23 respondents online who were a mixture of employers, people with lived experience and specialists in survey design. We then held an information session for the community, where some participants made further suggestions. Accordingly, we clarified some of the instructions and amended some survey questions.

The survey was distributed via social media, with specific invites to under-represented groups via relevant online communities and charities. The survey opened in November 2022 and closed in January 2023. People took on average 14 minutes to complete the survey, which indicates that most people experienced it as straightforward and accessible. We collected data anonymously and individual results were not shared outside the research team, who are the three named authors of this report.



2.1 Demographics

We had completed responses from 1,117 people: 990 employees and 127 employers. Representation across race, ethnicity, company size and age were broadly in line with the UK population and labour market; these are reported in more detail in each section.

We asked people if they identified as neurodivergent rather than asking whether they had a formal diagnosis. This was to reduce the impact of structural inequalities related to race, class and gender in accessing professional support in the UK and was also a condition for our ethics approval (as asking for experience of a formal diagnosis is considered sensitive data).

In our previous research, people who are self-diagnosed have not reported statistically significantly different results to formally diagnosed people (4,5).

We had responses from a reasonable number (between 30 and 611) of all neurominorities, including:

ADHD | Autism | Dyscalculia | Dysgraphia | Dyslexia | Dyspraxia | Mental Health conditions | Tic disorders

Only 370 reported one diagnosis; 328 reported two; 190 people reported three. This pattern supports the view that co-occurrence is common, as employees are more likely to report several diagnoses.

We show the breakdown by condition in Table 1.

Neurotypes Reported	Overall (N=985)
Attention Deficit Hyperactivity Disorder (ADHD)	611 (62%)
Autism	499 (50.7%)
Dyscalculia	75 (7.6%)
Dysgraphia	18 (1.8%)
Dyslexia	224 (22.7%)
Dyspraxia	151 (15.3%)
Mental Health Conditions	318 (32.3%)
Tic Conditions (incl. Tourette Syndrome)	31 (3.1%)
Other	80 (8.1%)
Prefer Not to Say	8 (0.8%)

Table 1. Neurotypes reported in our survey sample.

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The data included an over-representation of women (67.2%), which is typical for survey data. We had high levels of transgender people (5.6%), non-binary (5.7%) and lesbian, gay, bisexual, queer plus (LGBTQ+: 37.7%) which is more than the UK in general.

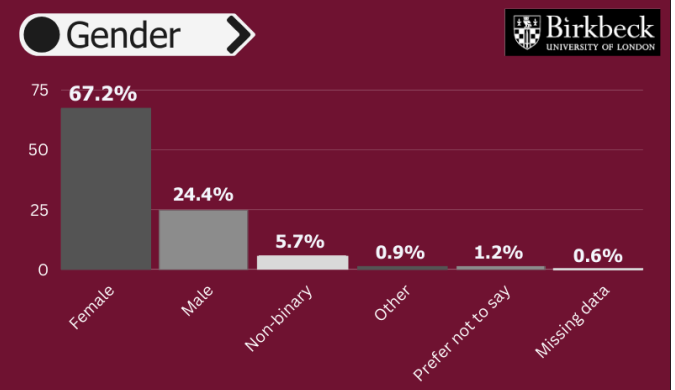
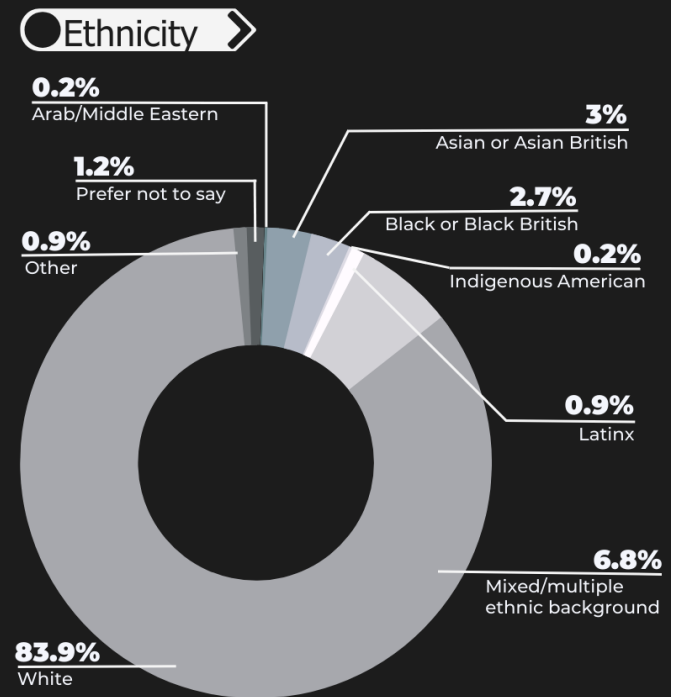
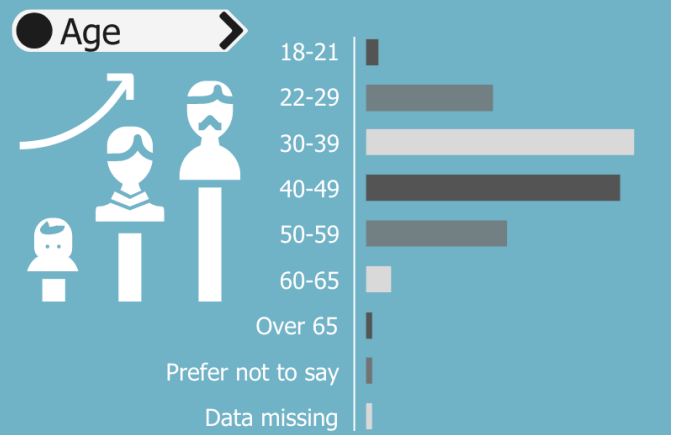
Prevalence of LGBTQ+ people is known to be higher in the neurodivergent community (6). We had higher rates of ADHD and Autistic people respond, compared to other neurominorities.

Some industry sectors are over-represented, including banking and professional services compared to transport, construction, and retail. This is because we collected the data online to ensure wide access and reach, which can make people who don't work in offices less likely to respond.

To mitigate any negative impacts in our analysis, we have adjusted it to account for over-representation of certain groups where needed (we call this 'weighted averages').

We adjusted the averages to take account of the fact that numbers vary in different categories and checked that there were no significant differences between under-represented groups and the majority.

Employee Demographics





3.0 The Structure for the Key Insights from Employees

We start with documenting experiences of strengths, challenges and adjustments by employees as we need this data to inform inclusive practice in organisations. We then look at differences by condition. This is important to identify priorities and who might be vulnerable.

Next, we consider career satisfaction because research and practice have typically looked at labour force participation for neurodivergent people, but failed to consider what happens after recruitment. We then turn to people’s intention to leave; retention being a key topic for all employers, so we need to understand the drivers. Finally, we report data on wellbeing.

We report a range of other experience questions which we asked in order to understand what is driving the key metrics on careers, intention to leave and wellbeing. Full details on the exact questions in each category are in the appendix (available on request).

In summary we asked about:





3.1 Neurodivergent Strengths and Difficulties

We offered people a list of things which neurodivergent people may do well and asked them to indicate which of those applied to them, as shown below. Employees’ hyper-focus, creativity and innovation feature particularly highly, as do processing detail, authenticity, visual reasoning and long-term memory.

The initial ranking will have been influenced by the high percentage of autistic and ADHD neurotypes in our sample. However, we weighted the averages, which means that we accounted for uneven numbers in the categories and the pattern remained, indicating that the experience of hyper-focus and creativity are common across a range of neurotypes (see Table 2).

Strengths reported by neurodivergent people

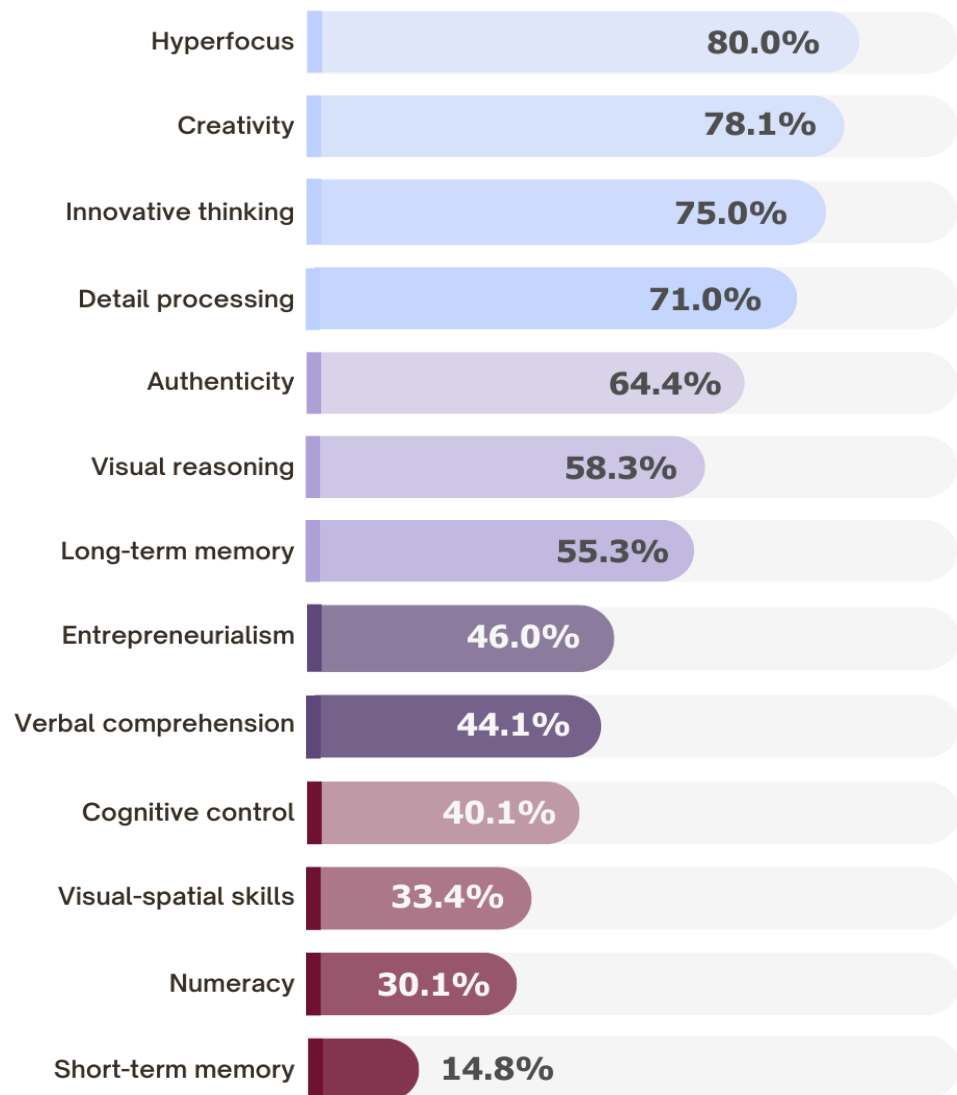


Table 2. Strengths reported by neurodivergent people.

Weighted averages by type of ND(N=985)



The struggles and challenges were consistent across neurotypes for most, but specific skills such as literacy, numeracy and fine motor control were more prevalent in those with dyslexia, dyscalculia and dyspraxia, respectively, as you would expect.

Challenges reported by ND people

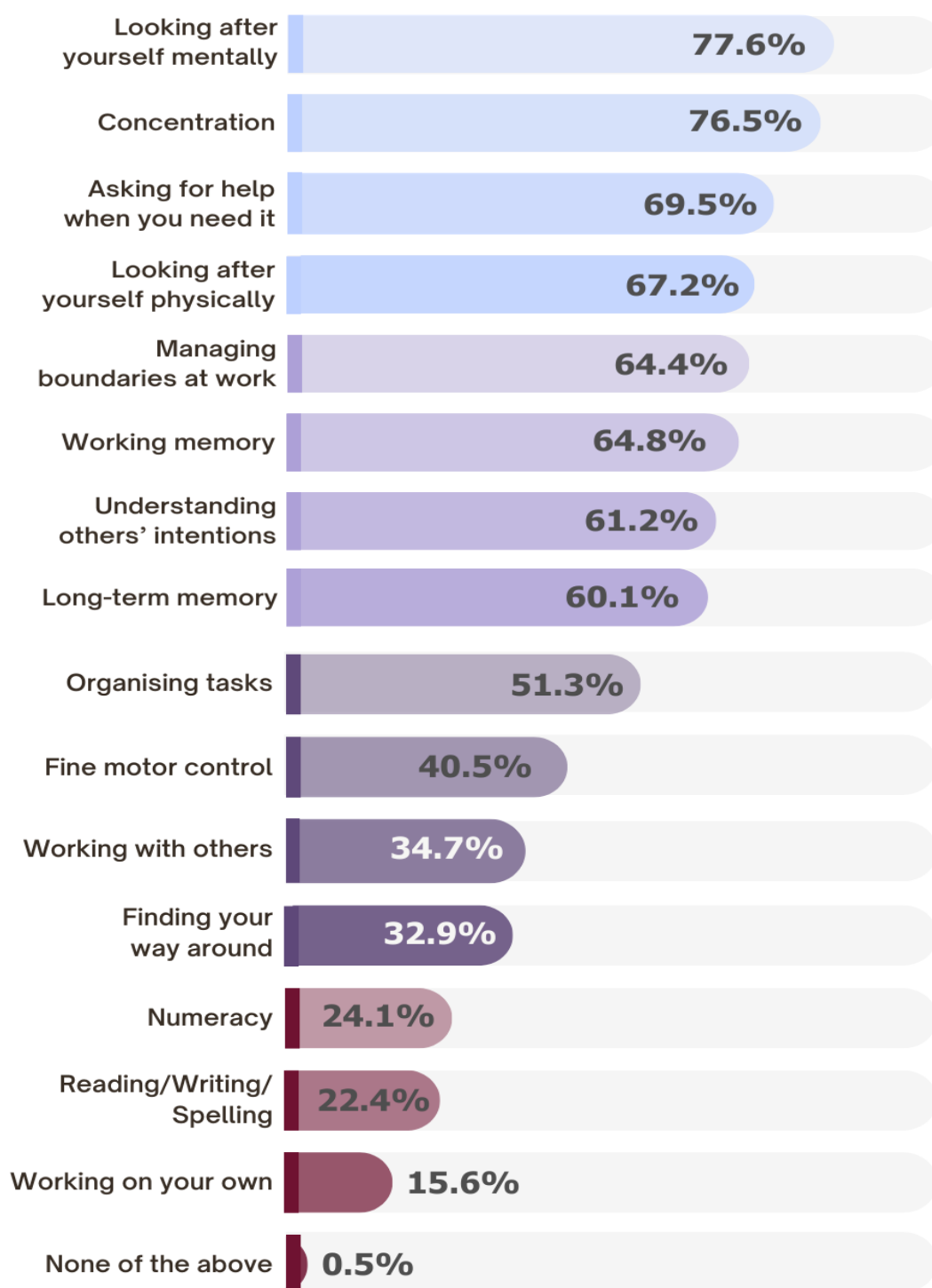


Table 3. Challenges reported by ND people.

Weighted averages by type of ND (N=985)



3.2 Adjustments and Accommodations

We asked employees if they had access to adjustments and, if so, what these were. Only 295 participants (29.9%) declared that they currently had any formal adjustments in place. By formal, we mean that the individual has asked for or been offered them as an additional feature of their employment.

Many adjustments are available to all employees, we term these 'informal adjustments' and they were reported as present for much larger numbers of respondents. Nevertheless, the number of formal adjustments is much lower than we would have expected. We report the data from those who had adjustments as follows below: Environment and Procedures, Specialist Work Strategy Coaching, and Assistive Technology (AT) adjustments. Note that we did not enquire as to the quality of coaching or AT induction training.

	Overall (N=985)
Take frequent work breaks	
Yes	779 (79.1%)
No	205 (20.8%)
Do part of the work from home	
Yes	879 (89.2%)
No	41 (4.2%)
N/A (e.g., work cannot be done from home)	63 (6.4%)
Flexible schedule	
Yes	712 (72.3%)
No	271 (27.5%)
Adapt work rules, policies or procedures	
Yes	628 (63.8%)
No	348 (35.3%)
Make changes in workplace arrangement	
Yes	464 (47.1%)
No	293 (29.7%)
N/A (e.g., work exclusively from home)	227 (23.0%)
Change the noise levels (including wearing headphones)	
Yes	609 (61.8%)
No	159 (16.1%)
N/A (e.g., work exclusively from home)	215 (21.8%)
Change the intensity of the lighting	
Yes	182 (18.5%)
No	583 (59.2%)
N/A (e.g., work exclusively from home)	217 (22.0%)
Have a private office or space enclosure	
Yes	281 (28.5%)
No	477 (48.4%)
N/A (e.g., work exclusively from home)	226 (22.9%)

Table 4. Available adjustments: Environment and procedures.



	Overall (N=985)
Text-to-speech software	
Yes	120 (12.2%)
No but use their own	92 (9.3%)
No and do not use their own	581 (59.0%)
N/A in this line of work	191 (19.4%)
Speech-to-text software	
Yes	132 (13.4%)
No but use their own	98 (9.9%)
No and do not use their own	575 (58.4%)
N/A in this line of work	179 (18.2%)
Mind-mapping software	
Yes	157 (15.9%)
No but use their own	99 (10.1%)
No and do not use their own	595 (60.4%)
N/A in this line of work	134 (13.6%)
Specialist spell checker	
Yes	112 (11.4%)
No but use their own	168 (17.1%)
No and do not use their own	571 (58.0%)
N/A in this line of work	133 (13.5%)
Dual screen or reading stand	
Yes	463 (47.0%)
No but use their own	150 (15.2%)
No and do not use their own	304 (30.9%)
N/A in this line of work	67 (6.8%)
Software to support organisation and time management	
Yes	219 (22.2%)
No but use their own	181 (18.4%)
No and do not use their own	523 (53.1%)
N/A in this line of work	60 (6.1%)
Coloured overlays, printing reading materials out on coloured paper etc	
Yes	75 (7.6%)
No but use their own	82 (8.3%)
No and do not use their own	670 (68.0%)
N/A in this line of work	155 (15.7%)
Whiteboard, pin board, coloured post it notes etc	
Yes	234 (23.8%)
No but use their own	283 (28.7%)
No and do not use their own	379 (38.5%)
N/A in this line of work	85 (8.6%)
Specialist training to use technological adjustments	
Yes	98 (9.9%)
No	762 (77.4%)
N/A in this line of work	121 (12.3%)
Change the font or size of at least the main reading material	
Yes	832 (84.5%)
No	124 (12.6%)
N/A in this line of work	26 (2.6%)

Table 5. Available adjustments: Technological adjustments.

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	Overall (N=985)
Specialist work strategy coaching for	
Memory issues	62 (6.3%)
Organisational issues	116 (11.8%)
Time management issues	119 (12.1%)
Literacy	47 (4.8%)
Numeracy	35 (3.6%)
Communication	145 (14.7%)
Wellbeing	311 (31.6%)

Table 6. Available adjustments: Coaching.

It is good to see that, for those who reported adjustments, frequent breaks and home working were high on the list; however, specialist coaching support for organisation and time management, for example, was less frequently reported. Wellbeing was the most common coaching topic, which is likely to reflect separate wellbeing initiatives, rather than neurotype-specific wellbeing coaching which accommodates cognitive differences.

Provision of adjustments **differed by the size of the organisation for some adjustments** as, for example, people working in small firms were far more likely to be able to adjust lighting or have a private office space.



	1-9 employees (N=69)	10-100 employees (N=137)	101-500 employees (N=129)	501-1000 employees (N=77)	1000+ employees (N=571)	Overall (N=985)
Frequent work breaks	59 (85.5%)	104 (75.9%)	95 (73.6%)	58 (75.3%)	462 (80.9%)	779 (79.1%)
Do part of work from home	64 (92.8%)	108 (78.8%)	112 (86.8%)	70 (90.9%)	525 (91.9%)	879 (89.2%)
Flexible schedule	62 (89.9%)	89 (65.0%)	81 (62.8%)	55 (71.4%)	424 (74.3%)	712 (72.3%)
Adapt work rules, policies or procedures	48 (69.6%)	81 (59.1%)	76 (58.9%)	51 (66.2%)	372 (65.1%)	628 (63.8%)
Make changes in workplace arrangement	42 (60.9%)	70 (51.1%)	56 (43.4%)	32 (41.6%)	263 (46.1%)	464 (47.1%)
Change noise levels	43 (62.3%)	83 (60.6%)	78 (60.5%)	44 (57.1%)	360 (63.0%)	609 (61.8%)
Change intensity of lighting	30 (43.5%)	35 (25.5%)	22 (17.1%)	7 (9.1%)	88 (15.4%)	182 (18.5%)
Private office or space enclosure	32 (46.4%)	38 (27.7%)	32 (24.8%)	21 (27.3%)	157 (27.5%)	281 (28.5%)
Specialist work strategy coaching for						
Memory issues	7 (10.1%)	10 (7.3%)	9 (7.0%)	1 (1.3%)	35 (6.1%)	62 (6.3%)
Organisational issues	10 (14.5%)	24 (17.5%)	13 (10.1%)	6 (7.8%)	62 (10.9%)	116 (11.8%)
Time management issues	9 (13.0%)	19 (13.9%)	15 (11.6%)	7 (9.1%)	68 (11.9%)	119 (12.1%)
Literacy	7 (10.1%)	6 (4.4%)	5 (3.9%)	7 (9.1%)	22 (3.9%)	47 (4.8%)
Numeracy	7 (10.1%)	7 (5.1%)	2 (1.6%)	2 (2.6%)	17 (3.0%)	35 (3.6%)
Communication	11 (15.9%)	19 (13.9%)	18 (14.0%)	10 (13.0%)	86 (15.1%)	145 (14.7%)
Wellbeing	14 (20.3%)	41 (29.9%)	37 (28.7%)	25 (32.5%)	193 (33.8%)	311 (31.6%)
Been provided with						
Text-to-speech software	8 (11.6%)	14 (10.2%)	11 (8.5%)	8 (10.4%)	79 (13.8%)	120 (12.2%)
Speech-to-text software	9 (13.0%)	19 (13.9%)	17 (13.2%)	9 (11.7%)	78 (13.7%)	132 (13.4%)
Mind-mapping software	13 (18.8%)	14 (10.2%)	18 (14.0%)	12 (15.6%)	100 (17.5%)	157 (15.9%)
Specialist spell checker	10 (14.5%)	14 (10.2%)	17 (13.2%)	9 (11.7%)	62 (10.9%)	112 (11.4%)
Dual screen or reading stand	25 (36.2%)	46 (33.6%)	61 (47.3%)	38 (49.4%)	292 (51.1%)	463 (47.0%)
Software to support organisation and time management	23 (33.3%)	29 (21.2%)	27 (20.9%)	20 (26.0%)	120 (21.0%)	219 (22.2%)
Coloured overlays, printing on coloured paper etc.	6 (8.7%)	8 (5.8%)	9 (7.0%)	8 (10.4%)	44 (7.7%)	75 (7.6%)
Whiteboard, pin board, coloured post it notes or similar	22 (31.9%)	38 (27.7%)	32 (24.8%)	17 (22.1%)	124 (21.7%)	234 (23.8%)
Specialist training to use technological adjustments	10 (14.5%)	18 (13.1%)	5 (3.9%)	6 (7.8%)	58 (10.2%)	98 (9.9%)
Able to change font or size of at least main reading material	59 (85.5%)	108 (78.8%)	107 (82.9%)	61 (79.2%)	496 (86.9%)	832 (84.5%)

Table 7. Availability of adjustments depending on the size of the organisation.



We asked the employees who reported that they had adjustments how helpful these were on a 5-point scale.

Their average responses are presented in Figure 1.

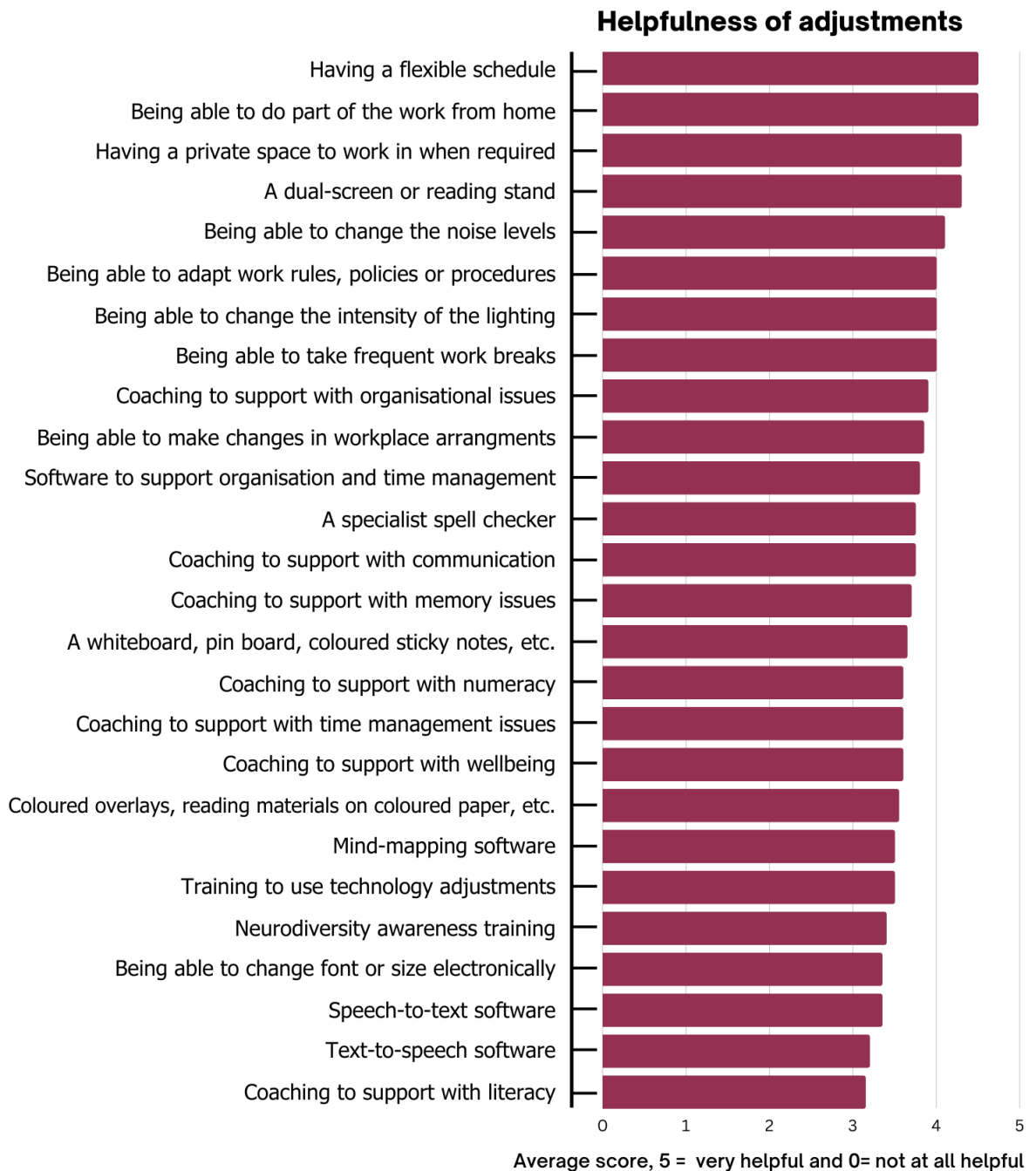


Figure 1. Helpfulness of adjustments and other provision as rated by those who use them.



Notably, adjustments are rated as helpful. Flexible work schedules, home working, private spaces, dual screens, adaptation of work rules, policies/procedures and being able to adjust noise and lighting featured highly. Coaching for organisational issues was rated as most useful, much more than coaching for wellbeing (although coaching for wellbeing was more common than other types of coaching). We note again that generalist wellbeing coaching may not compare favourably to specialist coaching as the cognitive aspects of wellbeing for ND people may not have been accommodated.

Regarding ease of access to adjustments, 463 participants (47.0%) indicated that they were able to speak directly with someone at work to access or alter adjustments. Only 115 respondents (11.7%) thought that the support they received was tailored to their individual needs to a large extent; 364 (37.0%) responded it was tailored to some extent, and 336 (34.1%) that it was not tailored at all. Out of the total sample of 985 people, 169 (17.2%) indicated that they received no support and so this question was not applicable to them.

3.3 Barriers to Disclosure

When asked about what barriers they faced to disclosing their neurodivergence and/or requesting support,

637 (64.7%) said that they were worried about stigma and discrimination from management.

542 (55.0%) were worried about stigma and discrimination from colleagues.

399 (40.5%) said there were no supportive and knowledgeable staff.

334 (33.9%) found existing supports inadequate or unhelpful.

289 (29.3%) responded that the support they needed was not provided.

224 (22.7%) did not know who to ask for help.

199 (20.2%) did not want to share confidential information.

179 (18.2%) did not have a formal diagnosis.

106 (10.8%) said they would rather do their job without supports.

142 (14.4%) said they had some other reason.

Only 111 respondents (11.3%) said they did not experience any barriers.

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As one of our respondents reported, stigma is a complex issue.



“ Stigma and fear of disclosure for the individual are a big barrier to making adjustments work and line managers are ill equipped or feel they don’t know enough and fear getting it wrong.

We also need to stress that fears of reprisal can be warranted. We had 35 responses from people who are currently out of work, on sick leave, opted for early retirement and so on. This is a comparatively small number but very important.

Once their colleagues witness that people are not supported, fear of disclosure and seeking support can become infectious.

“ I was dismissed from my job on ill capability health grounds after disclosing my disability. Even though I had worked there for over 12 years with top performance.





3.4 Neurodiversity Knowledge and Support

Using a 5-point scale, we asked those who had disclosed their neurodivergence to their organisations about the general level of knowledge of neurodiversity in their organisations.

We also asked how supportive their line manager and staff around them were regarding neurodiversity. Average responses are presented in Figure 2.

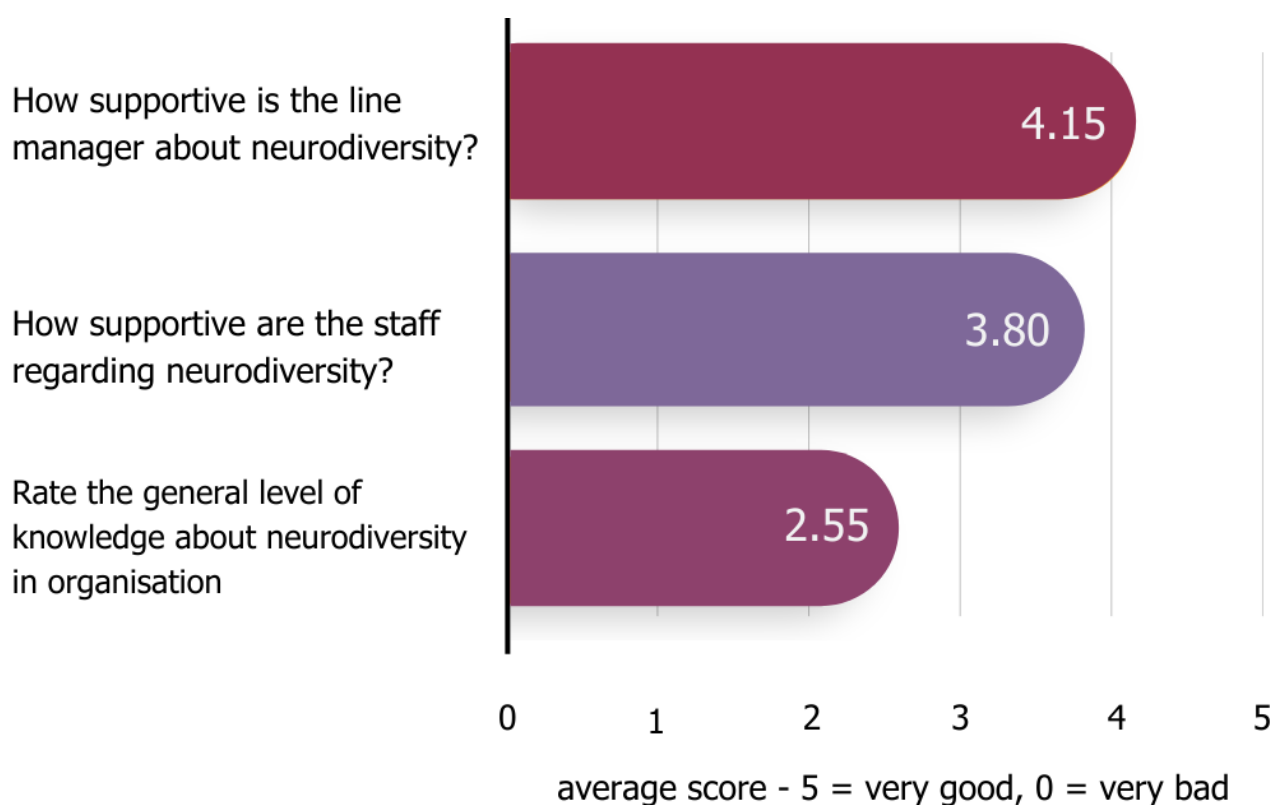


Figure 2. Knowledge about and support for neurodiversity in organisations.

Therefore, people rated the support they were getting higher than knowledge. This indicates a need for psycho-education because support without knowledge could potentially have unintended harmful consequences. The challenges reported by employees cannot be resolved by knowledge alone.

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4.0 The Outcomes: Careers, Intention to Leave and Wellbeing

We asked people to self-rate on several indicators to benchmark how they felt about their careers, their intention to stay with the company and their wellbeing. ND employees have historically had difficulties climbing the career ladder and getting promoted and remain under-represented at senior levels (7,8). This could be due to the way jobs in a hierarchy are designed for generalists, rather than specialists. Entry level and middle management roles are often reliant on being a good all-rounder, with strong administrative skills, self-organisation and compliance.

However, management skills are not reported as typical ND strengths and instead they cross reference with the challenges (see above). Conversely, success at senior management levels is dependent on the skills ND employees are reported to have, such as creativity and innovative thinking (see section above). The 'neurodivergent glass ceiling' that starts in early management due to this incongruity presents a challenge for job design and talent management. We need to understand how it affects ND individuals.

From a finance perspective, intention to leave or stay is a critical factor with a direct link to cost, namely the cost of rehiring, on-boarding and productivity loss. This has recently been estimated as equal to the individual's salary once hidden costs have been absorbed (9). While some level of staff turnover is healthy, loss of knowledge is particularly acute for specialist roles and skills.

Wellbeing at work is critical for employers, employees and the society at large. In the wake of the global pandemic, it is now, more than ever, an imperative part of corporate social responsibility for all employees, including ND'ers.



4.1 Career Satisfaction

We asked how people agreed with five statements about their career satisfaction. The results show that overall employment is adequate to the skill level and ability, but that people report less favourably about development and promotion opportunities:

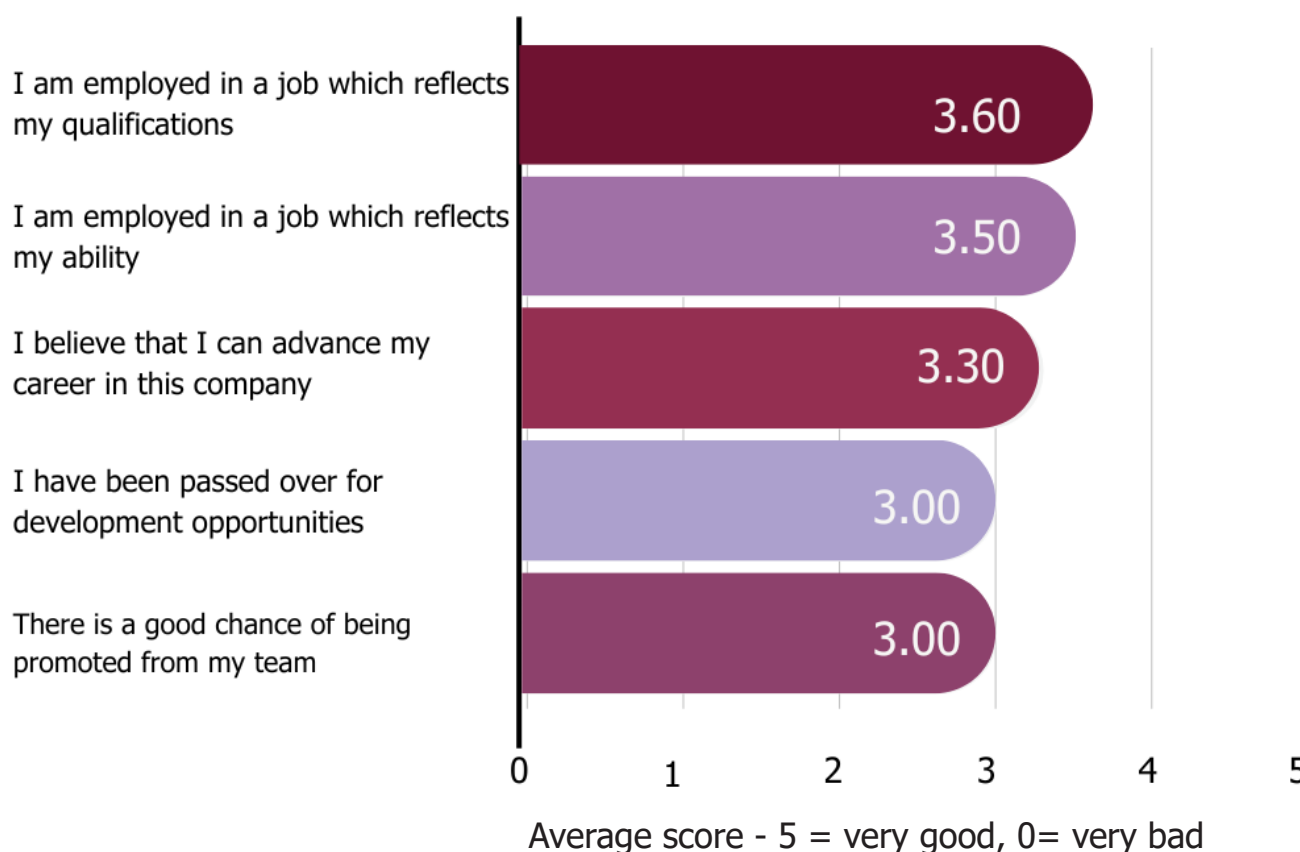


Figure 3. Participants' career satisfaction.

4.2 Intention to Leave

When we asked how likely it was that participants would **leave their current organisation** for a job in another organisation or a different type of work within the next 12 months, 251 (25.5%) responded it was very unlikely, 174 (17.7%) somewhat unlikely, 141 (14.3%) were not sure, 186 (18.9%) said it was somewhat likely, and 233 (23.7%) very likely.

Therefore, many of our respondents had extreme views; the distribution of scores had a peak at both ends, as shown in the table below. ND employees are feeling sure; they definitely know they're leaving or they definitely know they're staying. This means that if we can find out what is happening for the 25.5% of ND employees who are very unlikely to be leaving, we will have a good idea of what businesses can do to attract and retain ND staff. Conversely, we need to know what pushes people out.

Intention to leave

- Very likely to leave
- Likely to leave
- Neutral
- Likely to leave
- Very unlikely to leave

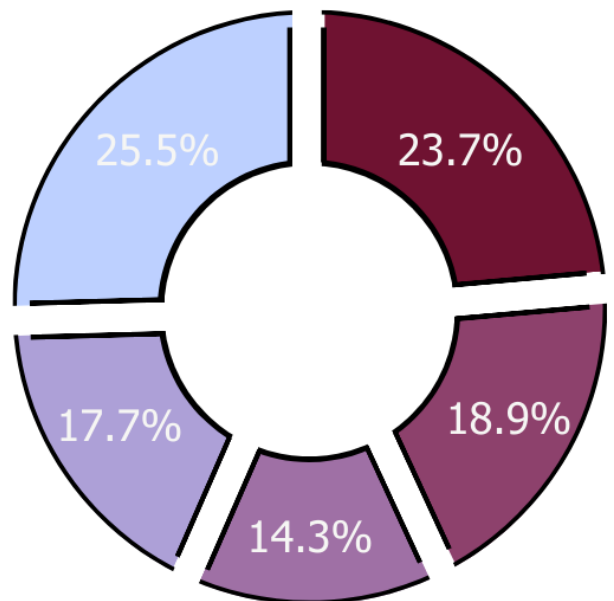


Figure 4. Intention to leave.

Intention to leave was negatively correlated with all the other experience variables, as you would expect; the worse the experience, the more likely the employee was to be seeking a change.

Intention to leave was higher for ADHD and dyscalculic neurotypes than other neurominorities. It was also higher for those with more than one diagnosis, so those with Tic Disorders and Autism, or Dyslexia and Dyspraxia.



	ADHD (N=611)	Autism (N=499)	Dyscalculia (N=75)	Dysgraphia (N=18)	Dyslexia (N=224)	Dyspraxia (N=151)	Mental Health condition (N=318)	Tic conditions (N=31)
Very Unlikely	147 (24.1%)	133 (26.7%)	13 (17.3%)	2 (11.1%)	64 (28.6%)	31 (20.5%)	71 (22.3%)	7 (22.6%)
Somewhat Unlikely	97 (15.9%)	88 (17.6%)	13 (17.3%)	5 (27.8%)	37 (16.5%)	31 (20.5%)	61 (19.2%)	8 (25.8%)
Neutral	84 (13.7%)	75 (15.0%)	12 (16.0%)	2 (11.1%)	33 (14.7%)	23 (15.2%)	45 (14.2%)	3 (9.7%)
Somewhat Likely	114 (18.7%)	83 (16.6%)	7 (9.3%)	1 (5.6%)	37 (16.5%)	24 (15.9%)	57 (17.9%)	3 (9.7%)
Very Likely	169 (27.7%)	120 (24.0%)	30 (40.0%)	8 (44.4%)	53 (23.7%)	42 (27.8%)	84 (26.4%)	10 (32.3%)

Table 8. Intention to leave by type of neurodivergence.

	1 (N=370)	2 (N=328)	3 (N=190)	4 (N=66)	5 (N=16)	6 (N=5)	7 (N=3)	8 (N=2)
Very Unlikely	104 (28.1%)	90 (27.4%)	32 (16.8%)	15 (22.7%)	7 (43.8%)	2 (40.0%)	0 (0%)	0 (0%)
Somewhat Unlikely	62 (16.8%)	61 (18.6%)	33 (17.4%)	13 (19.7%)	4 (25.0%)	0 (0%)	0 (0%)	0 (0%)
Neutral	52 (14.1%)	43 (13.1%)	32 (16.8%)	10 (15.2%)	2 (12.5%)	1 (20.0%)	0 (0%)	0 (0%)
Somewhat Likely	85 (23.0%)	54 (16.5%)	35 (18.4%)	11 (16.7%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Very likely	67 (18.1%)	80 (24.4%)	58 (30.5%)	17 (25.8%)	3 (18.8%)	2 (40.0%)	3 (100%)	2 (100%)

Table 9. Intention to leave by the number of neurodivergent conditions.

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Age, LGBTQ+ did not make people more likely to be considering a move. However, women were more likely to be seeking to leave than men or non-binary people. Turnover intentions were significantly higher for Asian, Black and Mixed Heritage respondents (we grouped these together as the numbers were small) compared to white respondents as shown below.

Turnover intentions by ethnicity

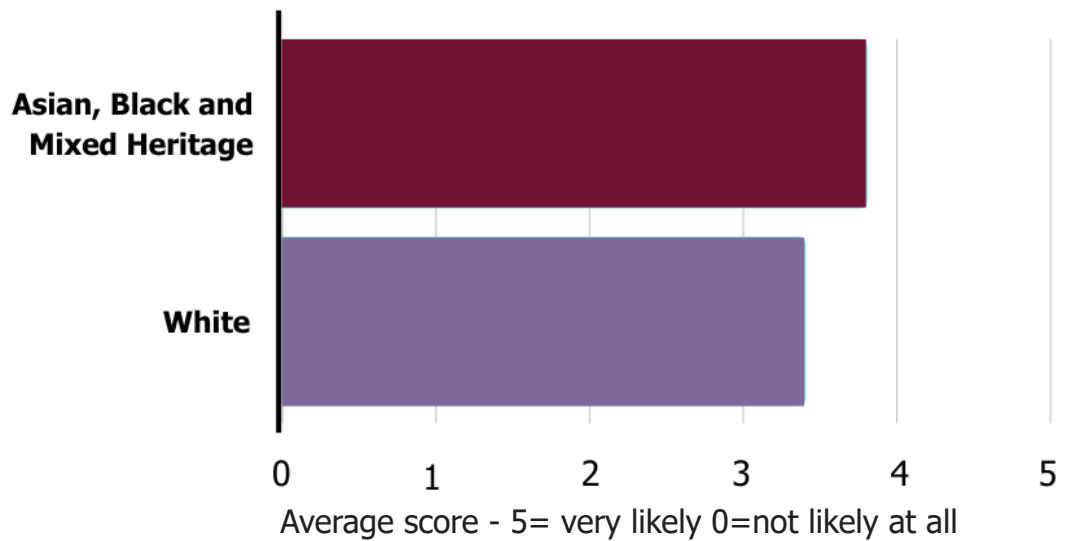


Figure 5. Turnover intentions by ethnicity

Next, we considered whether the adjustments provided made a difference, which they did. However, it was the experience of adjustments being tailored rather than the details of what was provided that made the difference.

Intention to leave with:

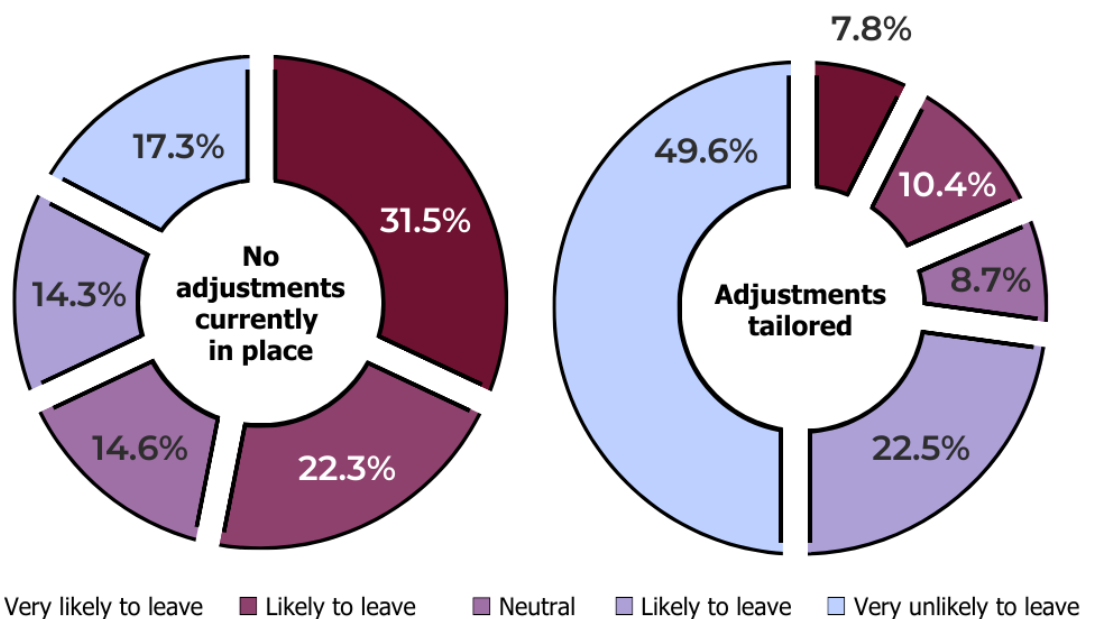


Figure 6. Intention to leave by adjustments.



49.6% of employees who had adjustments tailored to a 'great extent' wanted to stay with their current employer compared with only 17% of employees who did not have their adjustments tailored.

Indeed, having no adjustments at all leads to higher levels of intention to leave than being offered adjustments off the shelf, with no personalisation or engagement. People want to be heard, not just helped.

Employees are also more likely to want to leave when adjustments are not tailored at all.

We then looked at other experience outcomes and intention to leave to determine any patterns.

Boss's support, psychological safety and career satisfaction were the most important influences on intention to leave. We were surprised to note that these were significantly more influential than having tailored adjustments, general knowledge of ND and the support of colleagues . Career satisfaction was the most significant factor in predicting whether an ND employee was likely to stay in role.

Most important influences on intention to leave

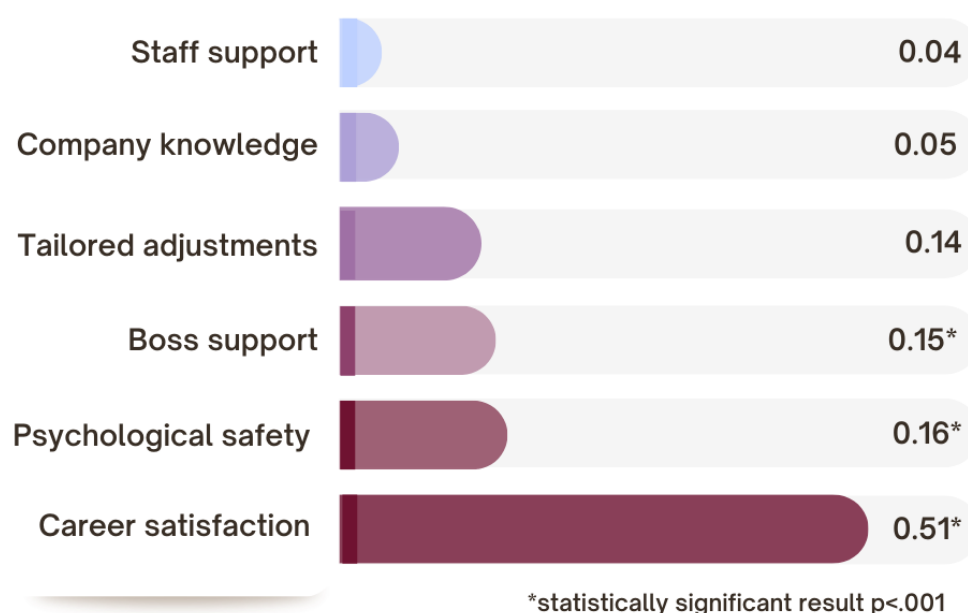


Figure 7. Most important influence on intention to leave.

We interpret these findings as an indication that ND employees want to be appreciated and valued for their skills, rather than just helped with any challenges. The absence of accommodations and adjustments was associated with higher levels of intention to leave, but on their own this was not definitive.

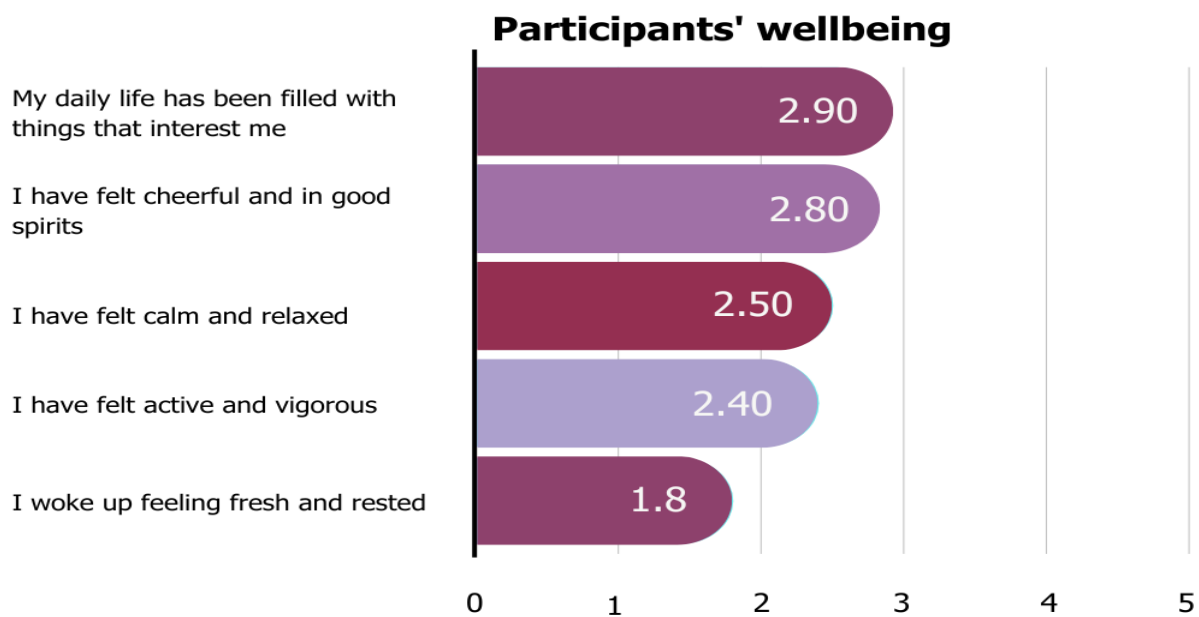


Psychological safety for ND people will involve feeling able to 'unmask' and be their 'authentic selves'; to be able to contribute without judgment to organisational learning, as well as having a clear, blame-free process to effectively handle any concerns. However, other research suggests that these factors are negatively impacted by racism, sexism and genderism (4), so psychological safety in particular needs to be viewed through an intersectional lens.

4.3 Wellbeing

We asked participants about their wellbeing in general. We must note that an average score of 2.02 across the whole sample is very low and indicative of low levels of wellbeing for neurodivergent people in general.

This survey is taken in a context where the whole population is reporting lower levels of wellbeing than pre-pandemic and, while we do not have direct contemporary comparisons for the UK as a whole, anyone scoring according to the average scores reported here would warrant referral to a professional for support. This is highly concerning from a health and safety perspective.



Average score - 5 = all the time, 0 = at no time

Figure 8. Participants wellbeing.



Wellbeing was more positive for those with dysgraphic, dyslexic and dyspraxic neurotypes than for ADHD and Autistic neurotypes. Those with Mental Health conditions and tic disorders fared worst.

	ADHD (N=611)	Autism (N=499)	Dyscalculia (N=75)	Dysgraphia (N=18)	Dyslexia (N=224)	Dyspraxia (N=151)	Mental Health condition (N=318)	Tic conditions (N=31)
Wellbeing								
Mean (SD)	1.92 (1.02)	1.94 (1.06)	1.82 (1.20)	2.17 (1.33)	2.15 (1.11)	2.02 (1.06)	1.79 (1.00)	1.77 (1.12)

Table 10. Wellbeing by type of neurodivergence

Non-binary people and women were reporting significantly lower wellbeing than men. There were no significant differences when we analysed by race or LGBTQ+.

Level of well-being

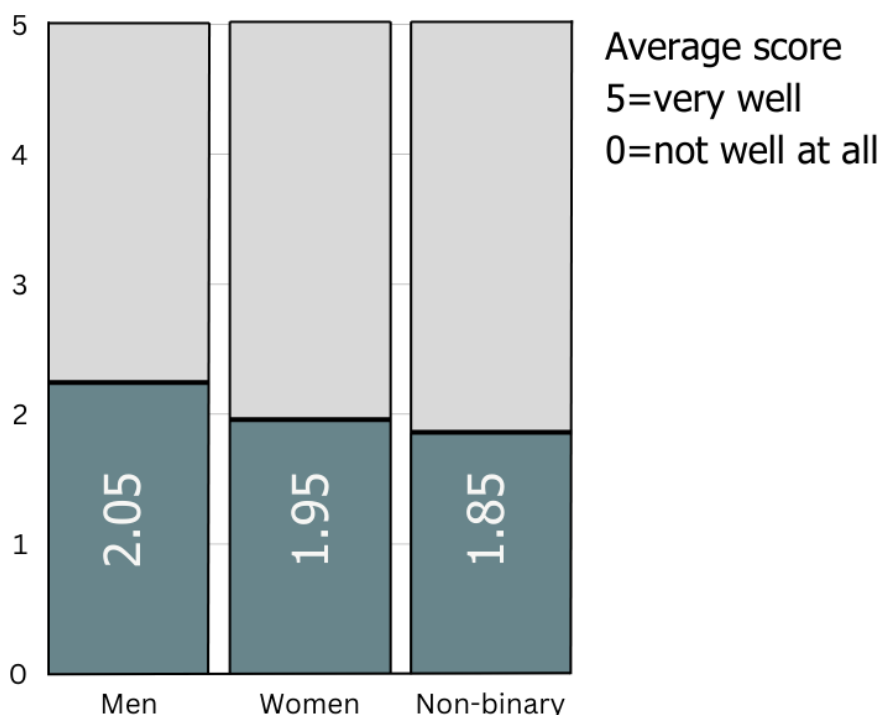


Figure 9. Level of wellbeing.

When we analysed the influence on wellbeing to see which elements made the most difference, we were surprised to find that, again, psychological safety and career satisfaction were significant, but adjustments and knowledge of ND were not.

Most important influences on wellbeing

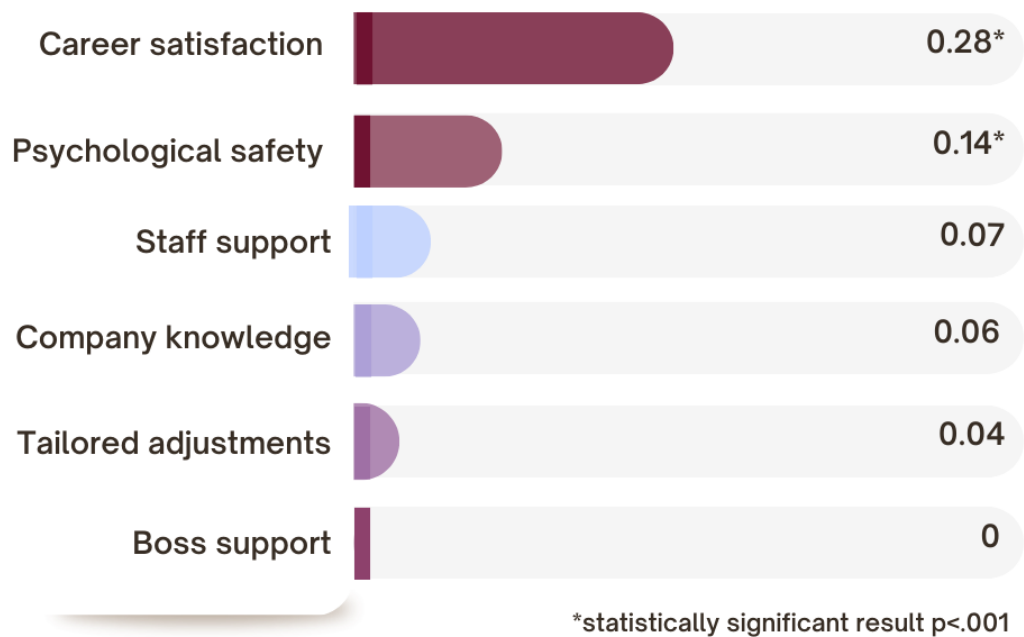


Figure 10. Most important influence on wellbeing.

For wellbeing, staff support more generally was weighted higher than having a supportive boss, indicating the importance that neurodivergent people place on 'fitting in' and feeling welcomed at work.



4.4 Patterns in the Data regarding Difference by ND Diagnoses

ADHD neurotypes were associated with significantly lower levels of all experience scores. People with attention difficulties (ADHD) and cognitive overwhelm are more likely to find contemporary workplaces, with constant notifications and 'chats' a drain on productivity and, thus, their experiences may be worsening.

We know little about how to support ADHD at work specifically, as there is not enough research on the topic.

Autistic and Dyscalculic neurotypes were associated with significantly lower levels of career satisfaction, psychological safety at work and wellbeing (but not with adjustments and support from their colleagues and boss).

Dyspraxic neurotypes and having a Mental Health condition was related to lower levels of career satisfaction. Those with a Mental Health condition also reported lower levels of wellbeing.

Dyslexic neurotypes fared better than people with other conditions on the measures in our survey. This might be due to considerable efforts to develop dyslexia inclusion over the years, as well as a more established body of research in this field which goes back to the 1990s. The results might also reflect the power of technology, since literacy difficulties are less of a hindrance now than they were ten years ago.



5.0 The Employer Perspective

This section reports the employer perspective. We asked how their organisation approaches neuroinclusion, presenting a cross-sectional snapshot of the picture in the UK, a baseline against which we can track the progress of neuroinclusion in future years.

Given that we recruited participants through the NIB network and publicity, our respondents were businesses who are engaged in neuroinclusion to a greater degree than the average in the UK, reflecting advanced practice, rather than general norms for the UK.

We asked:

- How do companies identify Neurodivergent employees?
- What the prevalence of ND is in their company (if known)?
- What is their overall staff turnover (in the organisation)?
- What is their turnover of Neurodivergent employees is (if known)?
- Which sources of support do they offer?
- What challenges do they experience when implementing adjustments?
- Which adjustments were available?
- Who did they source to deliver their ND awareness training?
- Whether their organisation had specific policies?
- Whether their organisation had signed up for standards and charters?
- Their confidence in the company's knowledge regarding neuroinclusion

Figure 11. Questions we asked employers.



5.1 The Types of Employers Represented

The employer responses represented a wide range of sectors and business sizes. We were under-represented in industries such as food, retail or transport and over-represented in other sectors, particularly technology. We had representation from businesses of all sizes, with a trend towards larger companies (>1000 employees).

Organisation size

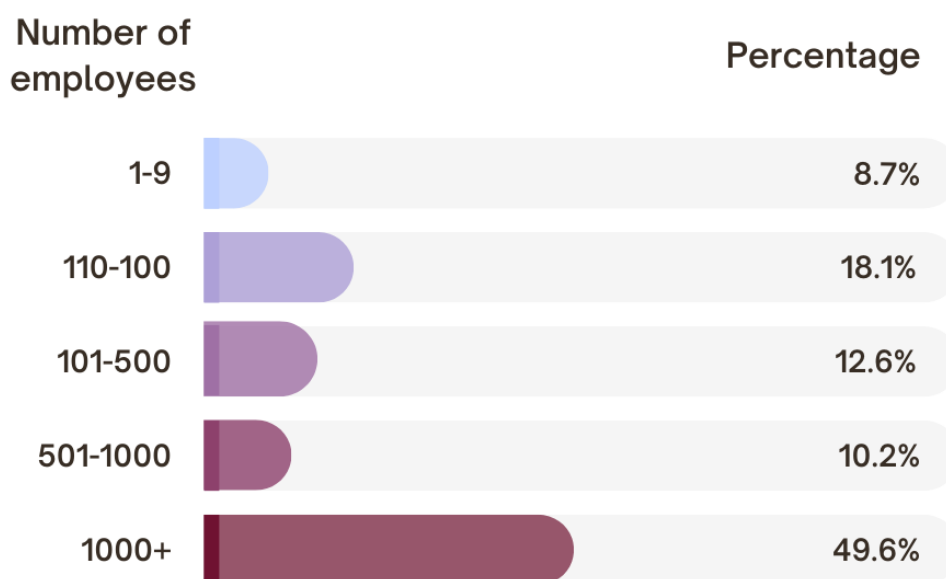


Figure 12. Organisation size

Out of the 127 participants, 31.5% also identified as neurodivergent.

Identified as neurodivergent

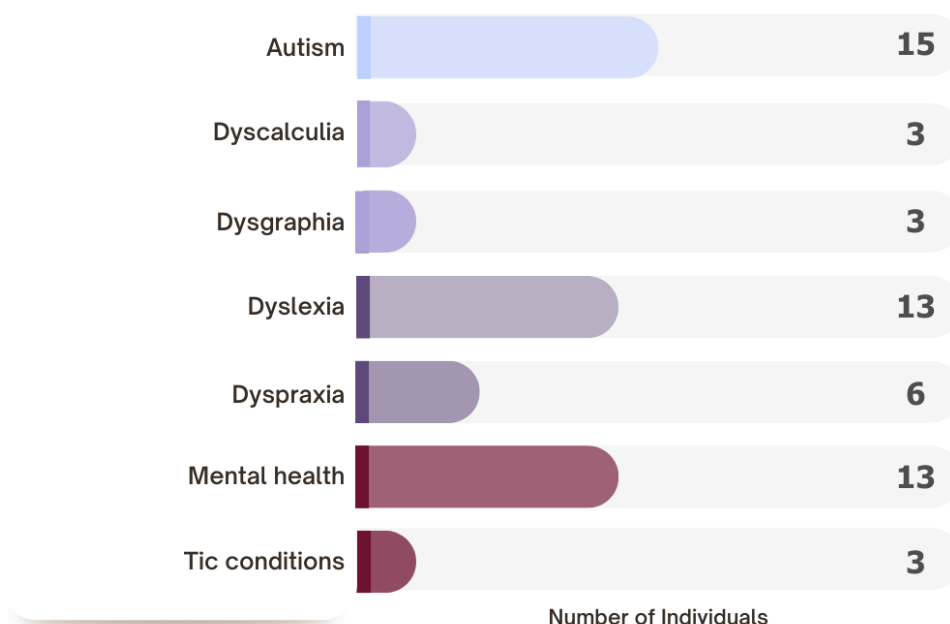


Figure 13. Identified as neurodivergent.

73% were women which represents not only the bias in women responding to surveys but also women in HR and diversity roles. The sample was 81% white, comparable with UK race prevalence. 6.3% were Asian, 3.1% were Black and 7.1% were mixed heritage, which is under-represented for Asian and Black but over for mixed heritage.

5.2 How Organisations Identify and Support ND

We've explored intention to leave and wellbeing because they are good indicators of psychological safety and wellbeing, which in turn predict productivity and performance and therefore have a clear correlation to organisational performance. However, feeling able to disclose disability is also a key marker of psychological safety and wellbeing (10).

In practice, many organisations choose to survey employees to ascertain the prevalence and disability as their starting point. However, because so many do not feel safe to disclose, such surveys are a better marker of progress than an initial place to understand needs. For this reason, we asked employers how they identify employees who may need support or adjustments.

Self-disclosure was the most popular method of identifying ND staff (78.8%). Only three people didn't collect any ND data (2.4%) and eight participants (6.3%) did not know how or if this was done.

Prevalence of Neurodivergent Employees

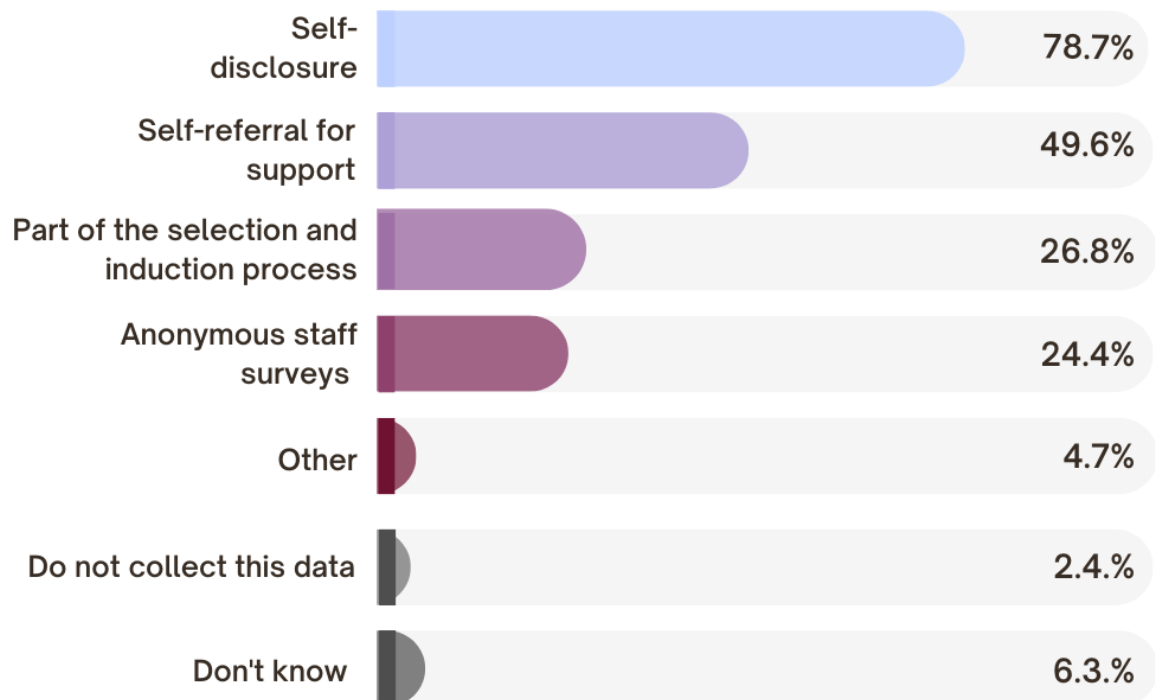


Figure 14. Prevalence of neurodivergent employees.



Only 56 respondents could accurately answer the prevalence of neurodivergent employees in their company. 25 people reported fewer than 10%, 22 reported between 10 and 50% and 9 people reported more than 50%. 95 respondents knew their company’s turnover as a whole and only 22 knew turnover for ND employees.

Staff Turnover over the past 12 months

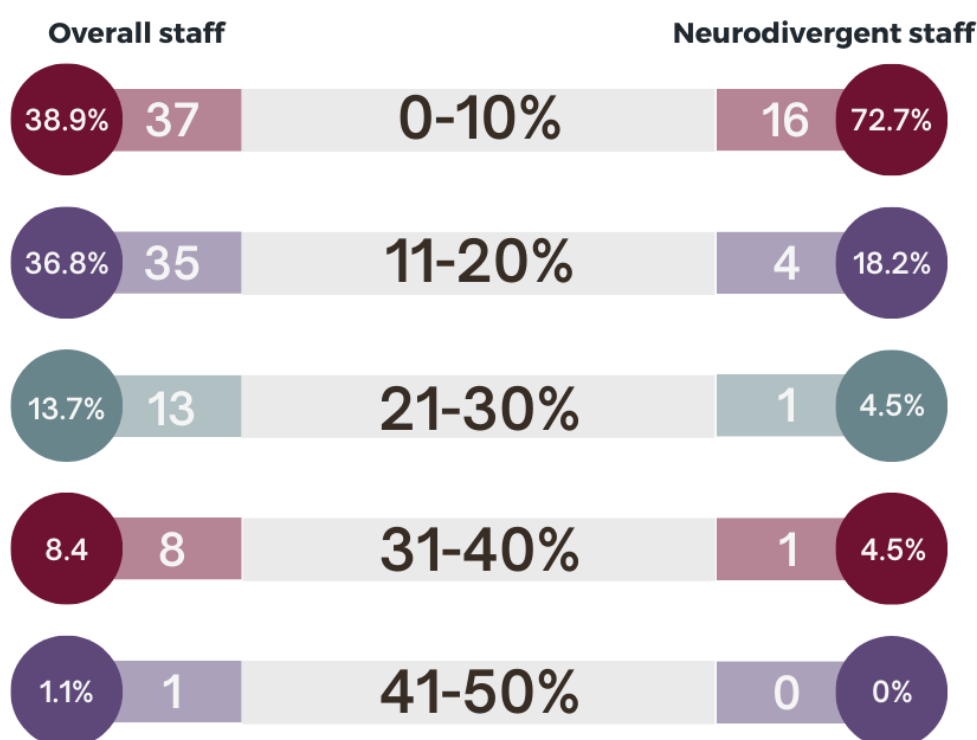


Figure 15. Turnover as a percentage of the workforce over previous 12 months.

The UK average turnover at the time of the survey was approximately 25%, so the responses are very positive. Generally, they indicate that the kind of companies who are taking neurodiversity seriously are also experiencing lower than average turnover, and that neurodivergent people may be less likely to leave than other groups of employees – this is a cautious assumption due to the low numbers.

Employers reported a wide range of adjustments, including environmental, provision of coaching support as well as tools and technology. Lack of disclosure was the major barrier (69.3%) and only 21.3% reported cost as a barrier. However, this may reflect the level of engagement in the employers and also the sample being somewhat weighted towards large employers with a bigger people budget, rather than being typical for the UK. We note that Access to Work, the government funded support for disabled people, often cover the cost of adjustments for smaller businesses, which may also help reduce cost as a burden.

5.3 Challenges in the Implementation of Adjustments

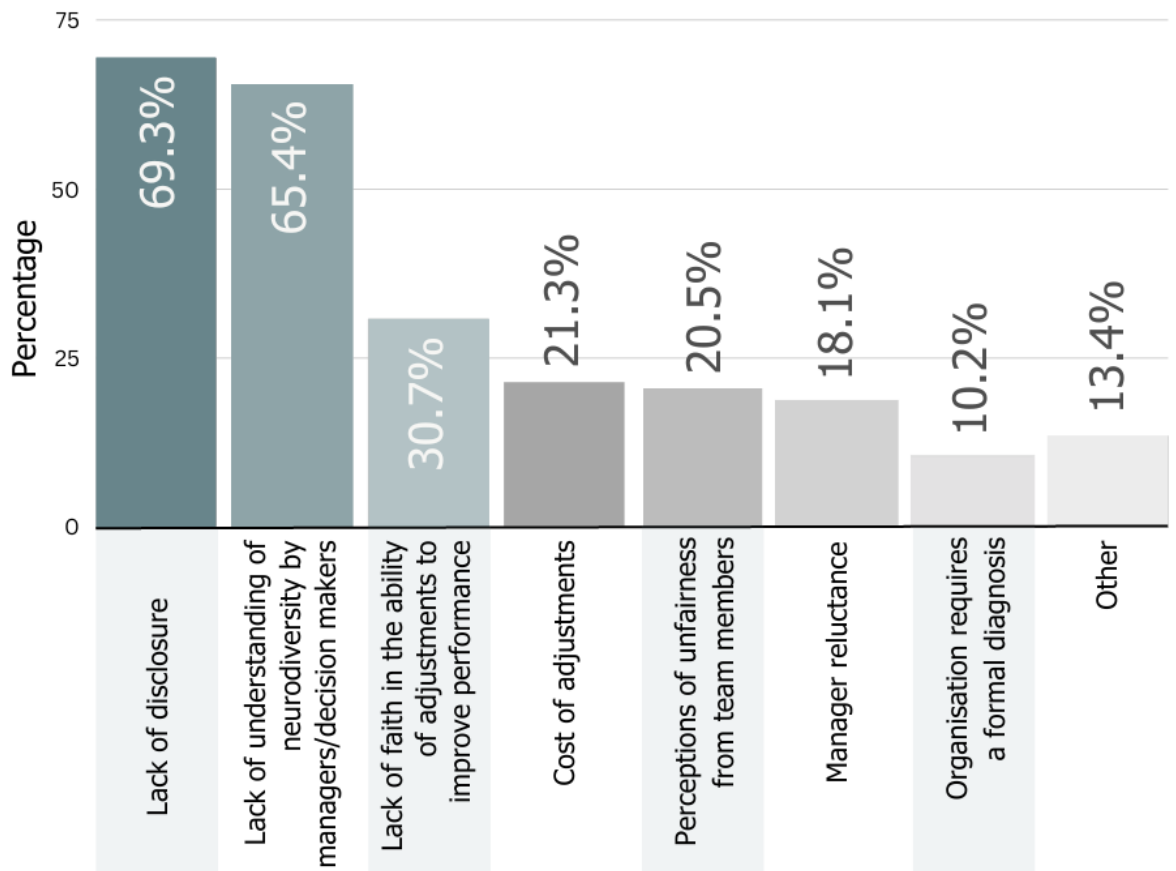


Figure 16. Challenges in the implementation of adjustments.

Given the findings from employees regarding the importance of first line managers and support from colleagues, there is some cause for concern. Managers are not convinced that adjustments help, some are reluctant to try, and others cite perceptions of unfairness from the team. Evaluating the implementation and impact of adjustments is a priority for researchers and employers in the sector. Preliminary data has shown that managers will report improvements in work performance following specialist coaching, but longitudinal evaluation of environmental, tools and technology is still lacking (11).

There are persistent prejudices against neurodivergent people with a 'hidden' disability leading to unfair comparisons with those who are 'more worthy' of support (12). Prejudices need to be addressed transparently to counteract subtle ostracism and undermining in social groups. Some neurodivergent people may be more susceptible to ostracism due to the difficulties in social communication and interactions, as self-reported in our data. These reports from employers converge with the report from employees that employers lack knowledge, in particular around the technical aspects of providing formal adjustments and what these are likely to achieve.



	Overall (N=127)
Take frequent work breaks	
Yes, available to all employees	110 (86.6%)
Yes, as part of a support plan	15 (11.8%)
Do part of the work from home	
Yes, available to all employees	96 (75.6%)
Yes, as part of a support plan	23 (18.1%)
N/A (e.g. work cannot be done from home)	4 (3.1%)
Flexible schedule	
Yes, available to all employees	86 (67.7%)
Yes, as part of a support plan (not available to all employees)	36 (28.3%)
Adapt work rules, policies or procedures	
Yes, available to all employees	80 (63.0%)
Yes, as part of a support plan (not available to all employees)	33 (26.0%)
Make changes in workplace arrangement	
Yes, available to all employees	71 (55.9%)
Yes, as part of a support plan (not available to all employees)	41 (32.3%)
N/A (e.g. employees work exclusively from home)	5 (3.9%)
Change noise levels (including wearing headphones)	
Yes, available to all employees	77 (60.6%)
Yes, as part of a support plan (not available to all employees)	30 (23.6%)
N/A (e.g. employees work exclusively from home)	4 (3.1%)
Change intensity of the lighting	
Yes, available to all employees	26 (20.5%)
Yes, as part of a support plan (not available to all employees)	30 (23.6%)
N/A (e.g. employees work exclusively from home)	6 (4.7%)
Private office or space enclosure	
Yes, available to all employees	51 (40.2%)
Yes, as part of a support plan (not available to all employees)	37 (29.1%)
N/A (e.g. employees work exclusively from home)	8 (6.3%)

Table 11. Available adjustments: Environment and procedures.

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	Overall (N=127)
Text-to-speech software	
Yes, available to all employees	28 (22.0%)
Yes, as part of a support plan (not available to all employees)	61 (48.0%)
N/A in this line of work	7 (5.5%)
Speech-to-text software	
Yes, available to all employees	30 (23.6%)
Yes, as part of a support plan (not available to all employees)	62 (48.8%)
N/A in this line of work	5 (3.9%)
Mind-mapping software	
Yes, available to all employees	23 (18.1%)
Yes, as part of a support plan (not available to all employees)	40 (31.5%)
N/A in this line of work	8 (6.3%)
Specialist spell checker	
Yes, available to all employees	24 (18.9%)
Yes, as part of a support plan (not available to all employees)	45 (35.4%)
N/A in this line of work	6 (4.7%)
Dual screen or reading stand	
Yes, available to all employees	68 (53.5%)
Yes, as part of a support plan (not available to all employees)	36 (28.3%)
N/A in this line of work	5 (3.9%)
Software to support organisation and time management	
Yes, available to all employees	43 (33.9%)
Yes, as part of a support plan (not available to all employees)	35 (27.6%)
N/A in this line of work	5 (3.9%)
Coloured overlays, printing reading materials out on coloured paper etc	
Yes, available to all employees	21 (16.5%)
Yes, as part of a support plan (not available to all employees)	63 (49.6%)
N/A in this line of work	5 (3.9%)
Whiteboard, pin board, coloured post it notes or similar	
Yes, available to all employees	62 (48.8%)
Yes, as part of a support plan (not available to all employees)	37 (29.1%)
N/A in this line of work	4 (3.1%)
Specialist training to use technological adjustments	
Yes, available to all employees	20 (15.7%)
Yes, as part of a support plan (not available to all employees)	58 (45.7%)
N/A in this line of work	6 (4.7%)
Change the font or size of at least the main reading material	
Yes, available to all employees	103 (81.1%)
Yes, as part of a support plan (not available to all employees)	13 (10.2%)
N/A in this line of work	1 (0.8%)

Table 12. Available adjustments: Technological adjustments.



	Overall (N=127)
Specialist work strategy coaching for	
Memory issues	28 (22.0%)
Organisational issues	44 (34.6%)
Time management issues	49 (38.6%)
Literacy	35 (27.6%)
Numeracy	31 (24.4%)
Communication	50 (39.4%)
Wellbeing	76 (59.8%)

Table 13. Available adjustments: Coaching.

5.4 Awareness Raising and Training

In this sample, 60 respondents reported that their companies were providing awareness training. The people delivering the training were split between those with lived experience (35%), external professionals (59%) and in-house training (34.6%), with many providing training from more than one type of expert. It may be useful for readers to know that different types of training serve different purposes. Management research on diversity training effectiveness suggests that lived experience and in-house training leads to changing attitudes, but that external professionals are more likely to lead to changes in behaviour (13).

A blended approach is recommended; those with lived experience should be invited to bring authenticity and depth, whereas in-house training should bring knowledge and facts specific to the workplace and external trainers can bring up to date knowledge about neurodiversity generally and 'what works' across organisations more broadly.

	Overall (N=127)
Awareness training with someone with lived experience	45 (35.4%)
External professional - HR professional	22 (17.3%)
External professional - Psychologist	20 (15.7%)
External professional - Medical professional	12 (9.4%)
External professional - Educator	32 (25.2%)
External professional - Other type of professional	11 (8.7%)
In-house training from a colleague	44 (34.6%)

Table 14. Providers of training.

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- 7.0
- 8.0
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5.5 Barriers to Disclosure and Reasonable Adjustments

We asked employers how they find out about barriers to disclosure, and 21 responded to this open text question. The majority collected qualitative ad-hoc rather than aggregated data. Good practice was highlighted for example in the response below.

“ We are set up for accessibility from the recruitment process through to the starter information and beyond. We discuss neurodiversity in the recruitment process to ensure applicants feel safe and understand we are always looking to be as accessible as possible.

We ask if there are any issues and adjustments we can make and then use that information to further improve our processes.



5.6 Prevalence of Policies

117 people (92.1%) reported having an Equality, Diversity and Inclusion policy. However, only 60 people (47.2%) reported that this included disability and, further, only 29 people (22%) included a focus on neurodivergence.

53 people reported that they were working towards the Disability Confident scheme. Other charters mentioned were Race Equality (16.5%), Stonewall (14.2%) Valuable 500 (7.1%), Dyslexia Friendly Employer (6.3) and Athena Swan (2.4%).



Prevalence of Policies

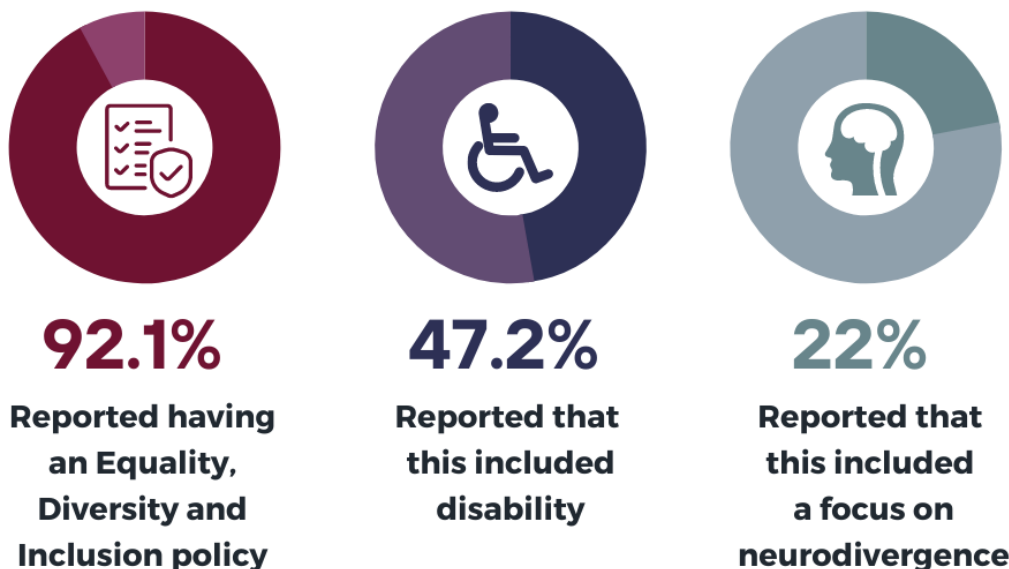


Figure 17. Prevalence of policies

Overall, the respondents reported their confidence in their ability to support staff as strong at the individual level (3.79 out of 5) and less strong in managing change (3.03/5) and exits (2.94/5). Notably, a weaker area for employer confidence was in career development and successful planning (3.10/5), yet we know that this is important for employees.

How confident are you that you are able to provide effective neurodiversity inclusion



Average score - 5 = very confident, 0 = Not at all confident

Figure 18. Confidence in providing effective neuroinclusion

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5.7 Good Practice

We asked employers about concrete examples of good practice for which we received 77 responses. The responses signpost that a holistic approach is beneficial, and we illustrate identified themes with quotes where relevant:

Structural support:

Flexible and hybrid working, as well as sensory-friendly environments tailored to need.

Active support for Mental Health and wellbeing:

e.g. Mental Health breaks and advocating for medical support; making welfare and Mental Health an open discussion topic:



We talk openly about welfare, Mental Health, issues experienced and then offer direct support from a range of sources to our teams”

Employee resource groups and networks:

Active support for communities, provided they are well resourced and not compensating for the lack of adjustment specialists or experienced HR/managers.

Good inclusive job design:



Our overall approach is to look at job design, skills and expertise and organisational need. From there, we identify the best collective outcomes to attract, develop and retain our ND talent”

Specialist and neurodiversity-friendly career pathways:

Supported through availability of adjustments from recruitment to on-boarding, as well as job design, training and development.



Commissioning specialist advice and ensuring transfer of learning:

e.g. to ensure that work station assessors are trained in neurodiversity.

The power of informal accommodations:

A number of respondents highlighted that these come with no additional cost but make all the difference to perceptions of inclusion and belonging.



Some of the more unofficial measures are actually in some ways more effective - which means channels on platforms such as Teams or Slack, asking others for their experience of a situation and how they approached it, or giving a scenario and asking for support, or just generally disclosing info - e.g. I am having a bad day, is anyone free for a chat.

Also the ADHD community have body-doubling buddies, and if none are available then some folks will simply ask if anyone is available to do some body-doubling. Allowing open communication and channels along with communication is a very low-maintenance way of enabling support where sometimes the ND community feels more comfortable simply talking to each other and speaking to somebody who understands the challenges.

Have also implemented interview skills recently around ND but this is a much wider topic around inclusivity in interviewing, and applies across the board”



6.0 Gap analysis

We asked several questions of both employees and employers to benchmark the extent of agreement (indicating a strong best practice) and disagreement (indicating a useful learning point). We asked the following questions:

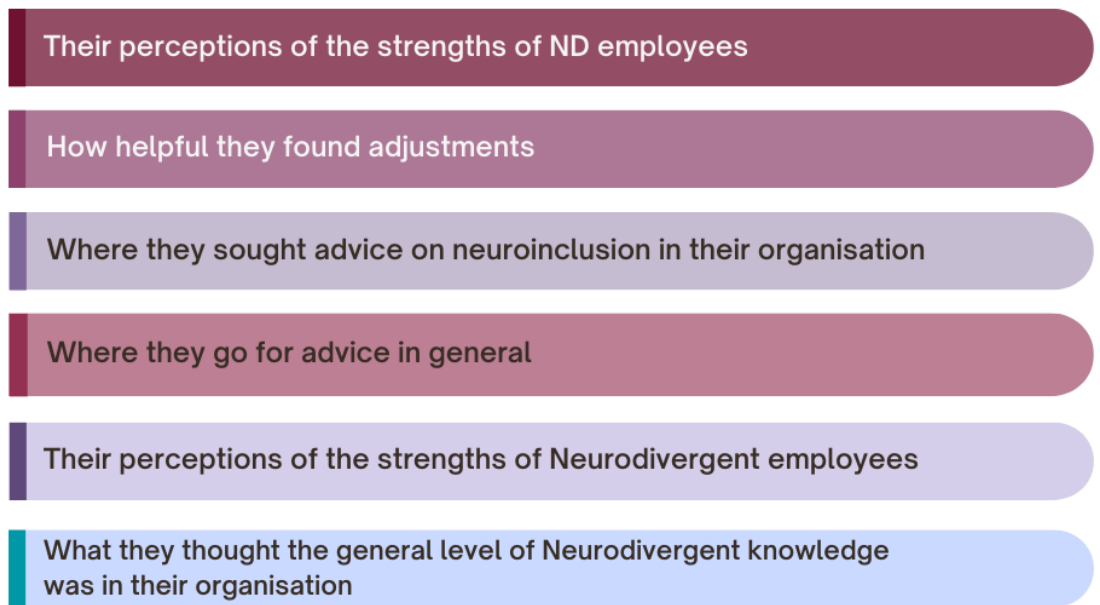


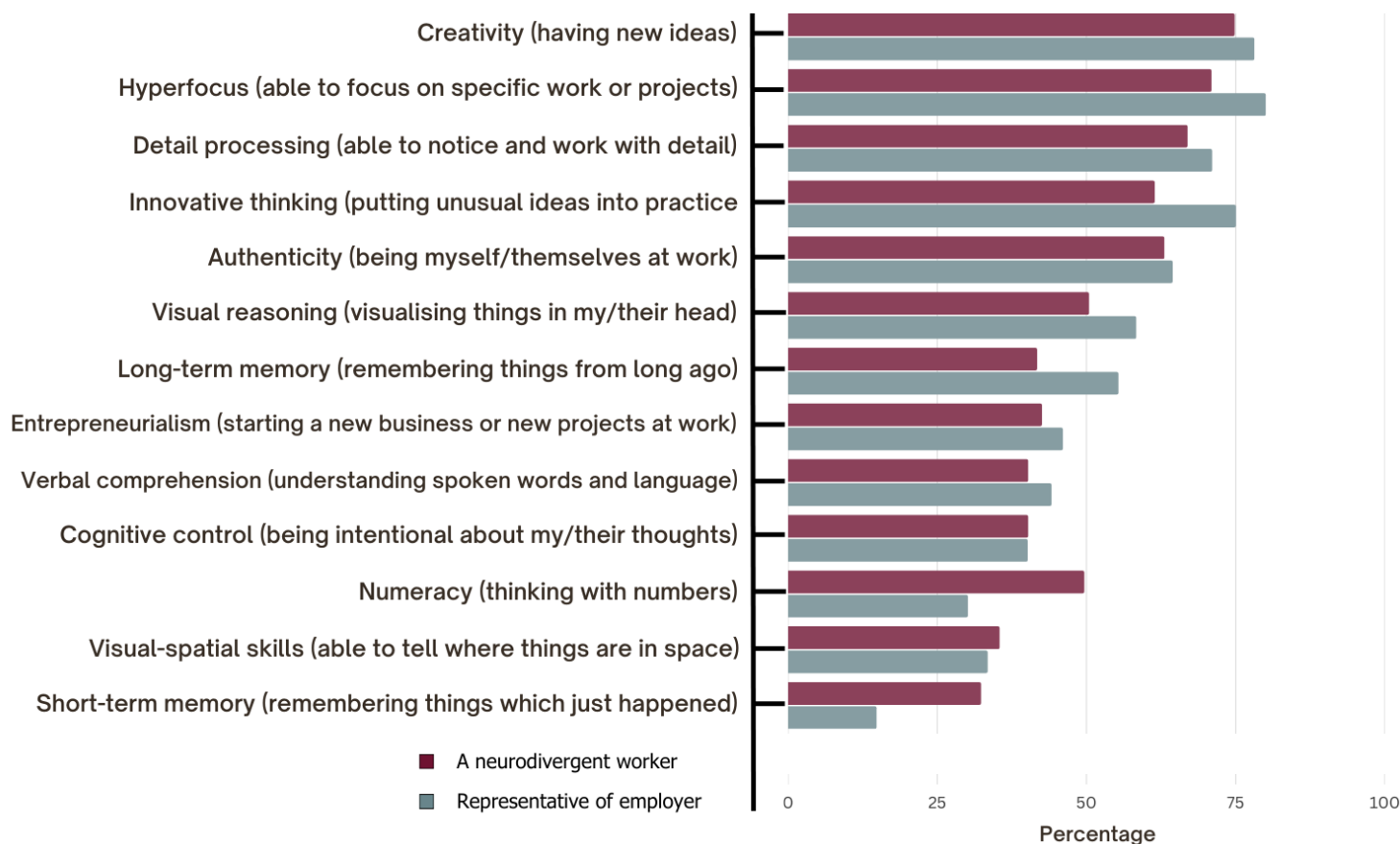
Figure 19. Questions asked of employers and employees.

6.1 Neurodivergent Strengths at Work

We asked employers to rate the strengths of their neurodivergent employees and compared these to those the ND employees had self-reported. Overall, their views were as shown below. Employers reported a lot more faith in their employees' short-term memories and numeracy skills. Employees reported higher levels of creativity, hyper-focus, innovation and long-term memory ability.



Views of employees and employers on the strengths of neurodivergent people



(e.g. BDA, ADHD Foundation, National Autistic Society, Dyspraxia Foundation)

Figure 20. Comparing strengths reported by employers and employees

This quote beautifully illustrates the business benefits of an ND workforce and harnessing these strengths:



Loyalty is our reward! When ND staff are met with understanding and a positive working environment where they are allowed to flourish they stay, leading to low staff turnover and loyal, committed staff. Also an understanding of accessibility. Having ND people working on our marketing for example. Understanding what works to aid dyslexic people to read our posts, providing image descriptions which help ND people as well as those visually impaired. Having diversity in the workplace leads to a better business 100%”





6.2 Helpfulness of Adjustments

Broadly, both employers and employees report adjustments as helpful, with average scores above three out of five for all adjustments, and over four out of five for some.

Adjustment Helpfulness

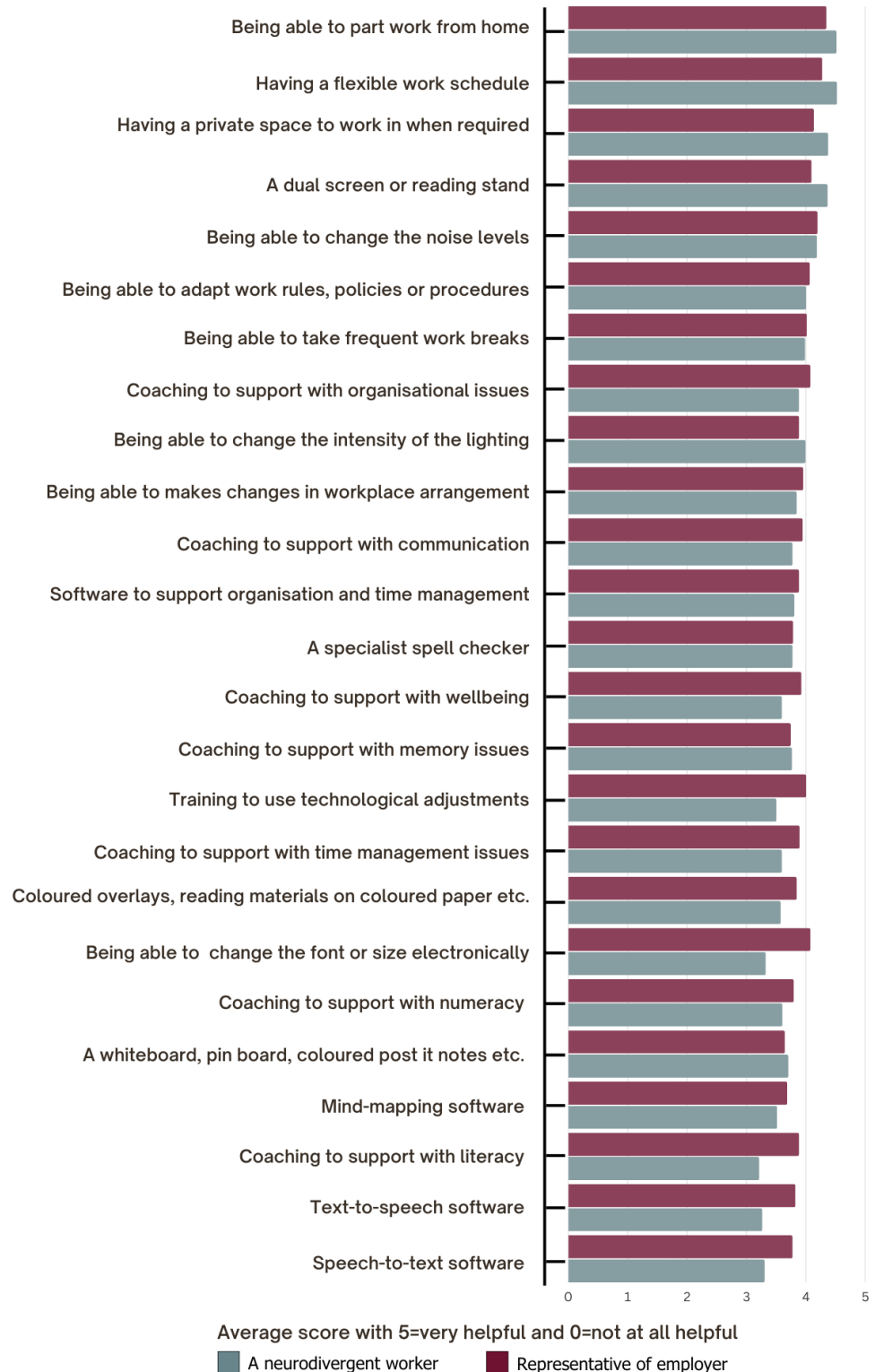


Figure 21: Comparison of helpfulness of adjustments.



Although employers rated coaching and adjustments as slightly more helpful than employees, these differences were not statistically significant and may reflect the disproportionate number of ADHD and Autistic people in our sample. Broadly, there is sufficient evidence to support the ongoing delivery of all adjustments, and a need to evaluate the impact of these over time. Currently, only coaching is supported as effective for long-term outcomes such as retention and promotion in research.

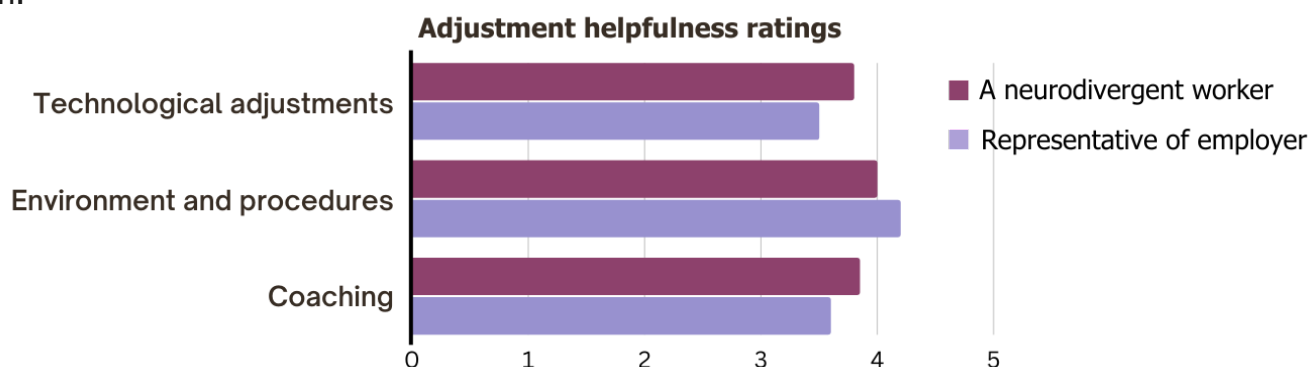


Figure 22: comparison of adjustment helpfulness ratings between employer and employees.

6.3 Where to go for Support

There were some important differences regarding where ND people went for support in their organisation versus where employers think they should be signposted. Both groups thought of line managers as the first port of call, which is reassuring and underlines the importance of training for line managers in disability inclusion at work. A small but similar number would approach an external reasonable adjustment specialist (7.9% ND employees, 9.4% employers). However, employers had more confidence in and knowledge of HR, Occupational Health and other in-house provision. 11.5% of ND employees didn't know who to approach, compared to 3.9% of employers.

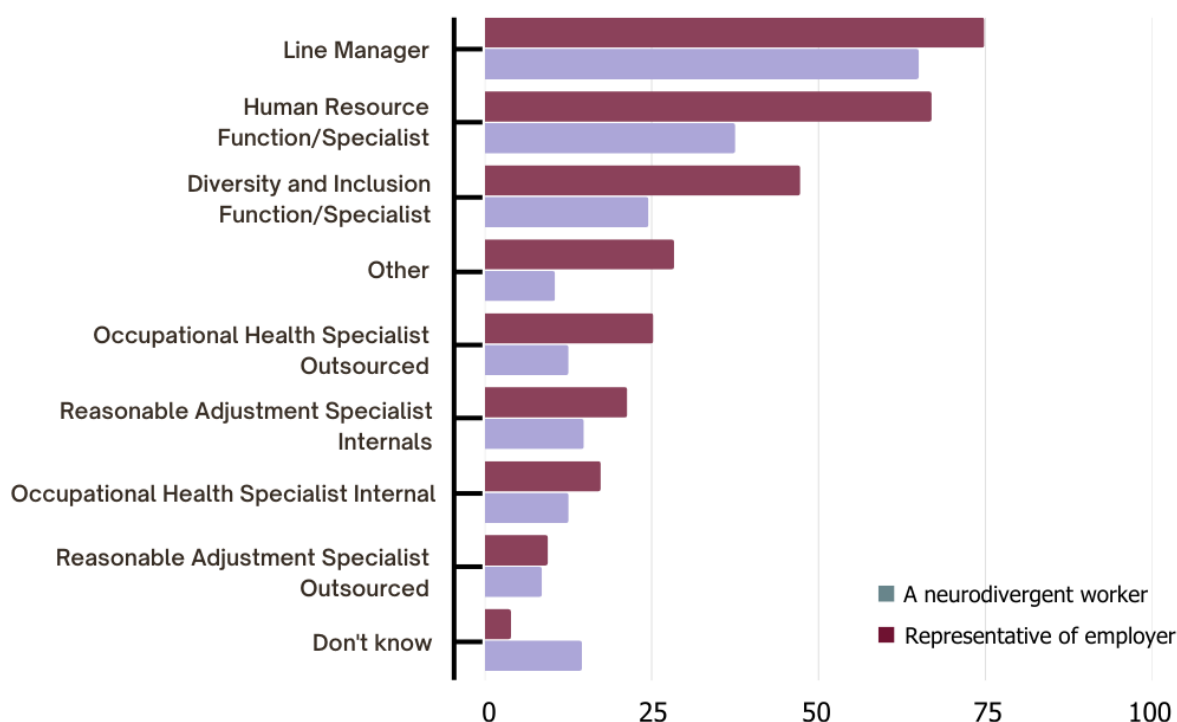


Figure 23: comparison of who employers and employees approach for advice and support.

6.4 Levels of Knowledge and Support

We asked how supportive staff are about neurodiversity and the general levels of knowledge in the business. Employers gave a more positive self-rating of both when compared to employees.

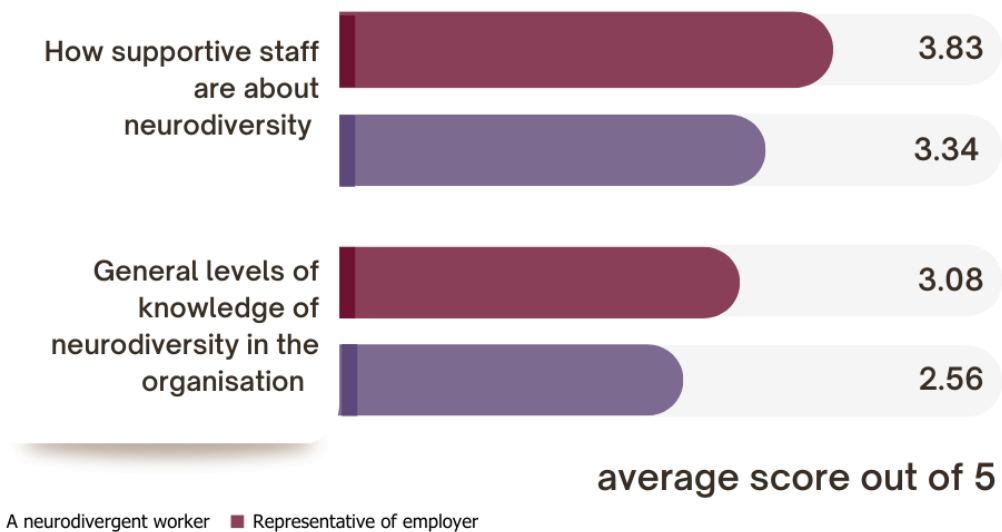


Figure 24. Levels of knowledge and support comparison.

To help us understand where this difference comes from, we present the data regarding the sources of information and support employers and employees turn to. We found a striking difference, with ND employees relying heavily on the internet and lived experience sites to access knowledge, compared to employers who are using a wider range and a blend of professional, advocacy and lived experience, as well as being less dependent on the internet.

Many 'official' sources of advice overlook trends in language and understanding, which people with lived experience find insulting and pathologising (14). These findings are a call to action for professional bodies and researchers to ensure that any documents actually land with the intended beneficiaries.



Sources of advice on neurodiversity

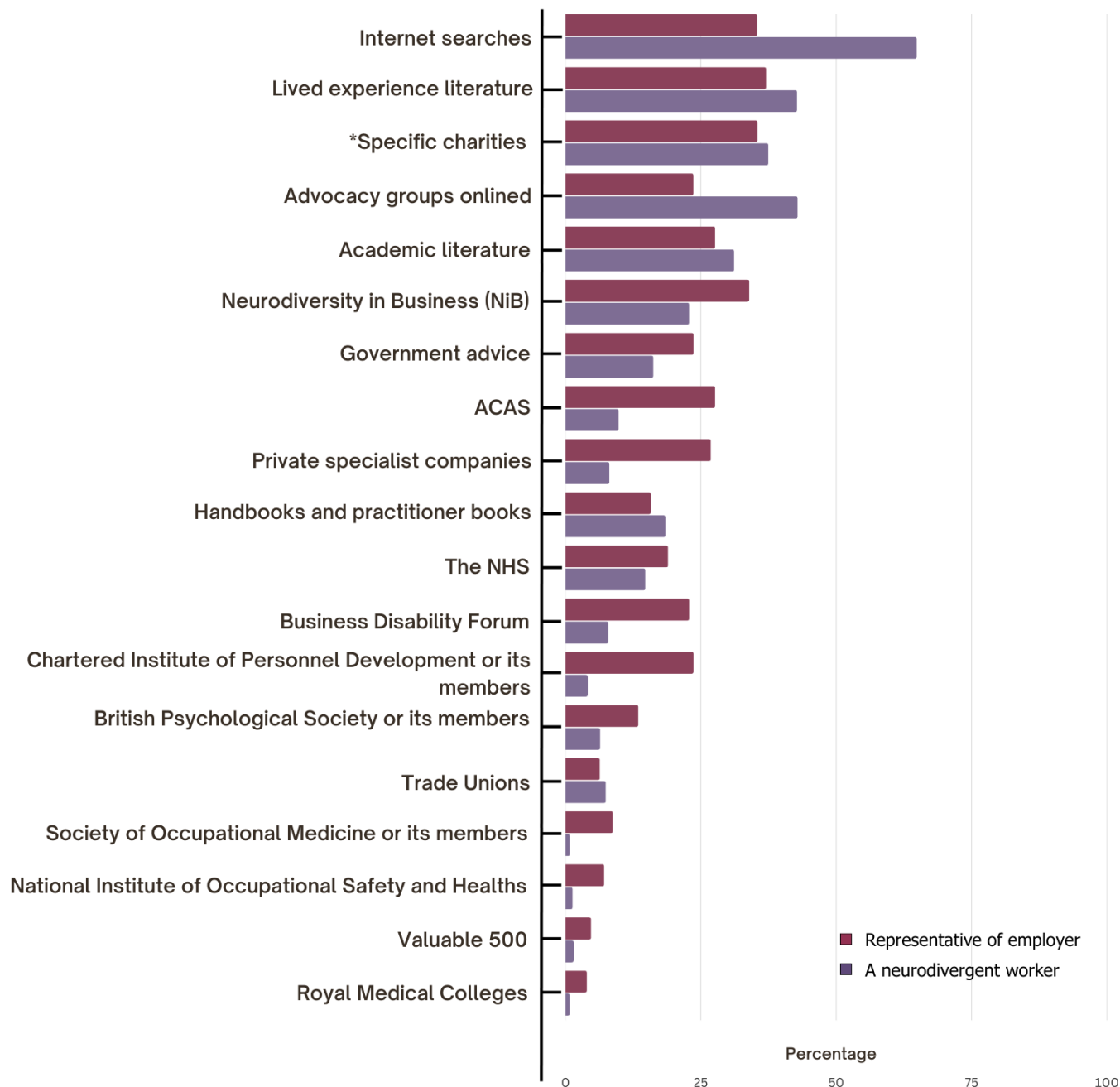


Figure 25: Source of knowledge utilised by employees and employers.

The differences in where and how employers and employees access knowledge are important given the nature of the internet and personalised algorithms. While an ND employee might assume that there is good advice for everyone on the internet, it is tailored to their preferences and so will likely offer advice with which they are already in agreement. Their line manager might have found a completely different line of information. The internet can therefore be very unreliable and reinforce different opinions, setting up 'us and them' conflicts in workplaces.

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Employee resource groups, working in partnership with HR and EDIB (Equality, Diversity, Inclusion and Belonging), can help curate knowledge for the business, which is respectful and incorporates the values of lived experience whilst avoiding inaccurate advice from a legal, technical and broader research perspective. Note also at this point that all neurominorities are not alike. So, the advice from Tic Conditions advocacy groups may miss elements such as Dyslexia-friendly text spacing, font and visual presentation. ADHD guidance might reinforce the importance of movement breaks whereas Autistic groups might recommend the importance of staying quiet.

6.5 Summary of Key Insights

Our analysis shows a number of trends that will help employers recognise the strengths neurodivergent employees bring to build and hone neuroinclusive environments, reduce turnover and increase wellbeing for employees:

- ◆ Recognise strengths in thinking, such as creativity and innovation and ensure a clear career pathway to harness these. Ensure that this is paired with nuanced understanding of challenges, to ensure that any activities address the needs of diverse and potentially vulnerable groups. Career progression is critical for retaining ND staff. Neurodiversity programmes and management initiatives that fail to consider how ND staff can move up and on from their initial appointment may not deliver long-term objectives for harnessing such talent and genuine inclusion.
- ◆ Adjustments that are appreciated and considered helpful from the perspective of employer and employees where they are in place. Our data shows a need for more widespread prevalence as a baseline, not privilege. Adjustments are relational, not transactional. Employees want more than a menu, they want to feel heard and valued.
- ◆ Intersectionality matters. Neurodivergent people of colour, women, non-binary and LGBTQ+ experience compound adverse impact regarding a range of outcomes and need to be represented when designing policy and programmes. This is in the businesses' best interest to ensure retention.
- ◆ Barriers to inclusion programmes are likely to be due to the knowledge and skills of managers, the attitude of colleagues, and creating a psychologically safe space for disclosure rather than cost issues.



- ◆ However, addressing knowledge and attitude gaps is currently a 'wild west'. We are over-reliant on the internet which lacks legal framing, quality control and appropriate workplace contextualisation. However we are also lacking in neurodiversity-affirming advice from professional bodies with an absence of benchmarking and quality assurance from charters or national standards.
- ◆ There is confusion about who to approach for support and a prevailing fear that disclosure will lead to stigmatisation from managers and co-workers. This indicates an urgent need not only to increase knowledge, but also to change hearts and minds.
- ◆ Line managers are key to making any adjustment, support or talent management process successful. They need company guidance, support and reliable advice on what to do, which has been vetted appropriately. Company guidance must include the perspective of disability law, wellbeing and stress management standards, human resource management capacity and lived experience in order to serve business needs and meet the requirements of ND employees.
- ◆ We found worryingly low levels of wellbeing. This is an urgent signpost for action to put people and their welfare at the heart of corporate strategy in the wake of the global pandemic.

7.0 Recommendations for Policy, Strategy and Practice

We structure our recommendations for policy, strategy and areas of practice. Please note these do not include recruitment. We signpost to the Westminster Achieve Ability Report for survey evidence on recruitment experiences (15).

7.1 Neuroinclusion Policy across Organisations and Data Monitoring

- ◆ We strongly recommend that NiB works with stakeholders to map recommendations for neuroinclusion policy onto existing kite-marks and charters, such as Disability Confident certification. This will identify communality and highlight where targeted and more specific policy is needed.
- ◆ Organisations need a uniform way of assessing ND prevalence and turnover data so that they can return each year and track this key performance indicator. Using these data gathered internally, diversity and inclusion managers and HR managers can make a good business case for disability inclusion more broadly.
- ◆ Create opportunities for ND employees to work with policy makers when implementing neuroinclusion – this is an organisational issue not a local issue.

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As stated by a participant:

HR believes neurodiversity and health and wellbeing is a “local” issue - difficult to convince them otherwise - yikes!”

7.2 Advancing Neuroinclusion Policy

- ◆ Make explicit pathways to leadership and seniority for workers which do not rely on a through route via line management, middle management success and/or generalist roles. Design jobs and roles accordingly.
- ◆ Ensure that capabilities such as creativity and innovation are rewarded and developed in talent and performance management.
- ◆ Put people at the heart of your strategy, setting clear goals for fostering wellbeing and inclusion, and business critical indicators such as intention to leave. Commit to transparent reporting.
- ◆ Employers need to focus on developing their confidence in creating neuroinclusive processes throughout the employee life-cycle with a specific focus on managing exits, change, career planning and performance management.
- ◆ Promote career satisfaction through job design, talent pipelines and mentoring groups. Focus on skills rather than traits.

7.3 Adjustments

- ◆ Adjustments are relational not transactional; ensure that there is a process for tailoring. Co-occurrence is common, highlighting the need for tailoring and supporting individual need further. This necessitates a proactive not reactive approach.
- ◆ The mere presence of accommodations is insufficient – ensure that there are explicit processes and benchmarking for reward and fostering talent, as well as monitoring outcomes.
- ◆ Adjustment quality is important. For example, the success of assistive technology will depend on quality of training provided with them. Coaching will be more effective with explicit neurodiversity specialism rather than generic wellbeing coaching.



- ◆ Review your process for allocating adjustments. Can employees negotiate if they need to? Who is organising adjustments and are they accessible? Can line managers be empowered, trained and resourced to provide a first line adjustment process that is personalised to the employee?
- ◆ Employers should increase their understanding of specific conditions. For example, ADHD suitable adjustments and how to provide support and inclusion for this group. Ask your people what they need and consult on solutions. Think about reducing multiple demands for attention that current communication technologies incur.
- ◆ Ensure a considered and transparent purchasing process. Consider including neurodivergent employees (for example through an employee resource group) on procurement panels evaluating suppliers.
- ◆ Routinely evaluate provision – support internal business research and share learning internally (and with the wider community as appropriate). More specifically, consider documenting the effectiveness of adjustments by recording what has been offered and cross referencing this against turnover and promotion rates.
- ◆ Use what our respondents reported as useful as a benchmark to see what works for your people. Remember that the perception of being accommodated has been found to be more important than the items. Run your own audit on how an employee would access different kinds of provisions and, importantly, how managers learn about their availability. From whose budget do they come?
- ◆ Never underestimate the power of informal adjustments, where people help each other and share knowledge.

7.4 Organisational Climate and Psychological Safety

- ◆ Actively foster an inclusive climate through knowledge sharing, signposting what good support looks like to make neuroinclusion a joint responsibility.
- ◆ Promote career satisfaction through job design, talent pipelines and mentoring groups.
- ◆ Develop a strategy for increasing psychological safety at work for all employees, ensure that it is intersectional and goes beyond the provision of a 'tick list' of purchases. This should also consider the needs of neurodivergent workers; for example, the negative impact of having to mask, and making it safe not to have to do so.
- ◆ Considerations of how to provide psychological safety and wellbeing should specifically highlight the needs of ADHD, Autistic, Dyscalculia employees and those with Mental Health conditions.

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7.5 EDIB and Intersectionality

- ◆ Take a holistic approach to EDIB which acknowledges all marginalised groups including disability and neurodivergence, as well as the impact of intersectionality.
- ◆ Consider the needs of neurodivergent women, who are known to be under-diagnosed and diagnosed later in life, therefore having less access to scaffolding and adjustments (1,10).
- ◆ Team spirit, morale and inclusion for ND people need to be actively addressed in inclusion policies. Neurodivergent people are more likely to have experienced social ostracism in education and so when social bonds are strong at work, it can be restorative and a game-changer for Mental Health.
- ◆ Include psychological safety in routine data monitoring of EDIB and wellbeing. Analyse if there are differences for ND people, or people with other protected characteristics. Consider if an intersectional employee resource group could be started or, if you have one, ask them to share insights.

7.6 Line Management Capacity and Organisational Support

- ◆ Ensure that line managers have the knowledge, skills and abilities to triage and refer as well as offer direct support and positive regard. In other words, up-skill line managers to effectively signpost, rather than expecting their employees to initiate contact with other professionals independently.
- ◆ Direct staff to access support in your business. Reinforce messaging through multiple channels including handbooks, staff training, management handbooks, company notice boards and direct communication. Be clear on who people can turn to for which issues.

7.7 Wellbeing

- ◆ Monitor wellbeing levels regularly and ensure that primary interventions are in place. Are jobs well designed for a neurodiverse workforce?
- ◆ Employees reported worryingly low levels of wellbeing which signals an urgent need for a proactive approach to foster wellbeing through a neurodiversity-affirming approach.



- ◆ Have pathways in place for referral to specialists who are trained to support ND people.
- ◆ Make wellbeing and Mental Health a topic for discussion, encouraging bottom-up initiative and role model right from the top.
- ◆ Ensure that wellbeing supports are neurodiversity affirming and acknowledge cognitive differences. A mindfulness program is not, for example, going to compensate for a literacy issue or ADHD.

7.8 Training and Development

- ◆ Ensure that all stakeholders are signposted to reliable information which has been vetted from a holistic perspective to comply with employment law, stress management standards and good training practice, but is also seen as relevant to communities, reflecting a representative range of neurotypes.
- ◆ Ensure a varied approach to training including from specialists and people with lived experience. Devise a selection process for prospective external training providers in collaboration with an ND employee resource group to ensure that lived experience requirements are captured alongside business requirements. Clarify clear training and development objectives and select providers with due diligence.
- ◆ Ensure that (adjustment) awareness training providers can talk confidently about the implementation and success of adjustments and that they can facilitate discussion of unfair comparisons in order to prevent subtle exclusion of specific groups or people.
- ◆ Professional associations need to ensure that any guidance issued is legally compliant, accessible, relevant and promoted to businesses to reach the right audience as well as neurodiversity-affirming from the perspective of those with lived experience.

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8.0 Implications for Research

There are clear implications for future research. We recognise that this piece of work is a snapshot. The over-representation of some conditions in our sample will have influenced responses. The data is what it is and brings meaningful insights, but we hope for broader representation in future work. It is the limitation of any survey that people can only answer the questions we asked. We hope that businesses and researchers will work together to ensure that any improvements and indeed progressive practice have a sound evidence-based footing. There are many more issues which need urgent research attention, for example:

Adjustment quality: what does 'good' look like? For example, we found that employees rated different types of coaching as more or less useful. We need to understand the quality of coaching and the level of specialism.

Personalised adjustments: how can we guarantee a tailored and informed approach to ensure that strengths are harnessed and challenges supported? How can we document an effective process of referral and support?

Stigma and prejudice: fear of stigma from management and colleagues prevails. How can negative views be addressed to foster mutual understanding? We need a multiple stakeholder approach to understand potentially complex dynamics from the perspectives of employer, employee but also colleagues.

Intersectionality: it is important to document trends about intersectional impact, but even more important to know what can be done in practice. Are there brave organisations out there who would offer themselves as a forum for affirmative action research?

The role of line managers: they are absolutely key as a first responder. We know that line managers are crucial for managing stress and wellbeing. But they need support, education, and to be clear about pathways for referral. Which specific knowledge, skills and attitudes need to be fostered?

Wellbeing: the low levels of wellbeing give rise for concern. Is this specific to ND populations or reflective of the wider UK population at large right now? We recommend a future survey to zero in on this and gather data from people who do not report as neurodivergent as a comparator, including managers and leaders.



Wider sampling: how can we reach non-office populations? This will be a challenge for research. With a more extensive budget, it might be an option, for example, to visit trade shows or conventions and collect data on the spot. We would also like to achieve more representative sampling across conditions in future research as ADHD and autism were over-represented in our sample.

Trends over time: how will neuroinclusion develop over time? It is our final but urgent recommendation to repeat this survey on a bi-annual basis to track trends over time, and pair this with other more focused research projects.

9.0 Conclusion - Four Future Priorities

We posit that the four key priorities for the neurodiversity in business movement are to:

- ◆ **Make wellbeing and inclusion for everyone**, including ND workers, a pillar of corporate strategy to harness diverse talent.
- ◆ **Objectively evaluate and promote the effectiveness of adjustments** to find out what works for whom, and how quality of provision can be benchmarked and shared.
- ◆ **Focus on relationships**, in particular psychological safety and line manager confidence, to foster joint responsibility.
- ◆ **Consider how policies and practices can develop careers and ambitions**, beyond surviving, to thriving.



We have self-developed metaphors for working at our best, making decisions, working at our worst and we use these models live to negotiate and make adjustments to one another.”

Appendix

The following data are available, upon request, from the authors.

Please contact A.McDowall@bbk.ac.uk

- ◆ Demographics for employees
- ◆ Demographics for employers
- ◆ Questions asked and top level results, including means, standard deviations and inferential statistics where quoted in this report.

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Birkbeck
UNIVERSITY OF LONDON

Neurodiversity at Work 2023

Demand, Supply and a Gap Analysis

More than 15% of people in the UK are neurodivergent – yet, there has been little discussion on mainstream channels on how to support neurodivergent colleagues at work. This is a shame because firstly, supporting neurodivergent colleagues is the right thing to do, but also, neuro-inclusive cultures are known to have a distinct impact on a business' creativity and profitability.

My hope for this research is that we are all able to immerse ourselves better in the lived experience of neurodivergent people, and take concrete steps towards building spaces and cultures where everyone can thrive

Amanda Cusdin, Chief People Officer for Sage Group

We're supporting this vital research because everyone deserves equal opportunities in life and at work – no matter how they think, feel or experience the world"

Mary Fitzpatrick, Head of D&I at Rolls-Royce

Professor Almuth McDowall C.Psychol.

Professor Nancy Doyle C.Psychol.

Dr Meg Kiseleva