

EMBRACING NEURODIVERSITY IN THE WORKPLACE

Professor Nancy Doyle, **Genius Within**
Richard Fisk and Constanza Cecchetti,
Addleshaw Goddard LLP



WHAT ARE WE GOING TO COVER?



Introductions

Neurodiversity at Work: Professor Nancy Doyle

My Experience: Constanza Cecchetti

Questions for the Panel: All

Closing slides and key takeaways

Neurodiversity at Work

Professor Nancy Doyle

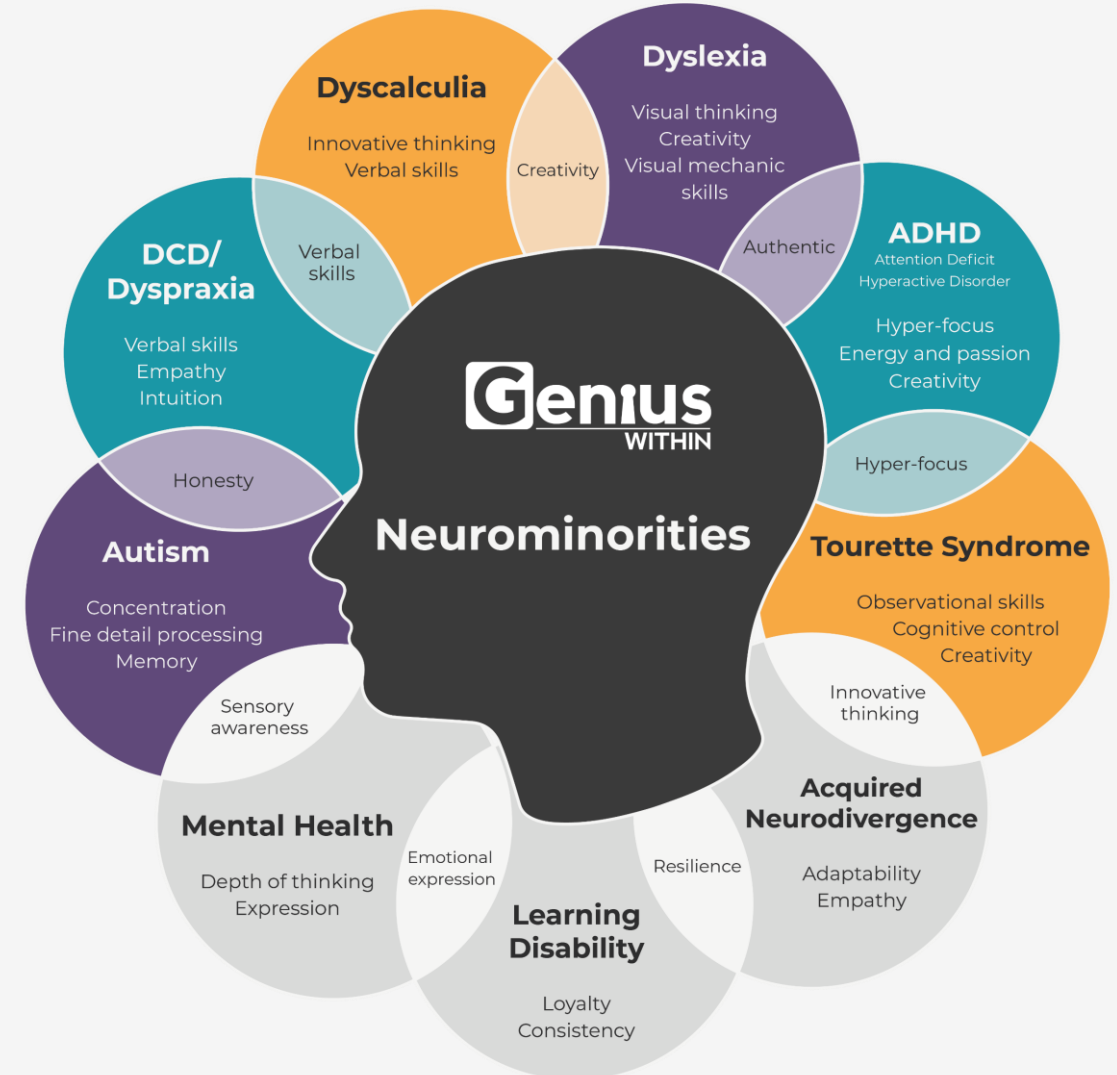
Chief Science Officer, Genius Within
Visiting Professor, Birkbeck College, University of London
Erstwhile Truant and ADHDer



Neurominorities

Whole population prevalence
estimated to be around

15-20%



History & Language of Neurominorities



Mid to Late 20th Century

- ◆ ADHD, autistic spectrum condition, dyslexia, dyspraxia, anxiety
- ◆ Looking for functional locations of difficulty

19th Century to Early 20th Century And before

- ◆ Word blindness, autism, hysteria, hyperkinetic or clumsy child syndrome
- ◆ Describing differences medically

Early

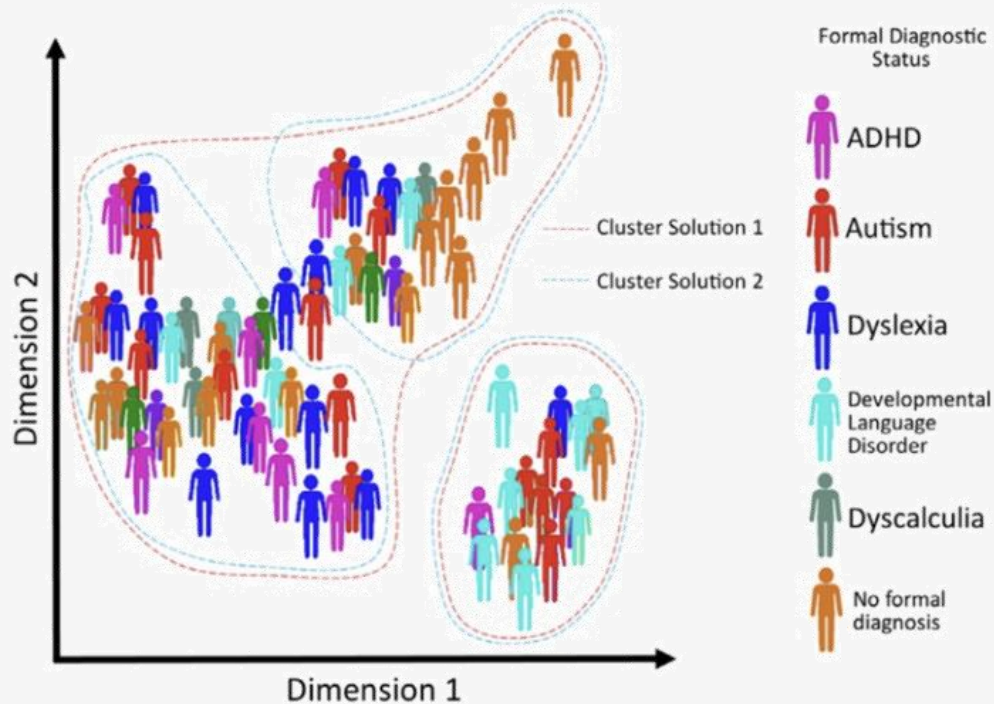
Mid

Now
& Next

21st Century

- ◆ Neurodiversity, Neurodivergence, Neurominority
- ◆ Dopamine, Noradrenaline & GABA
- ◆ Transdiagnostic Mapping
- ◆ Hyperconnectivity
- ◆ Hyper and hypo sensitivity

Three Diagnosis facts



(1) The Equality Act does not require diagnosis to make adjustments

(2) Diagnosis is unreliable (Astle et al. 2021)

Current 'labels' overlap and broadly cluster around difficulties in

1. Language
2. Executive functions
3. Social communication and emotion

(3) Diagnosis is sexist, racist and classist (Roman-Urrestarazu et al. 2021)

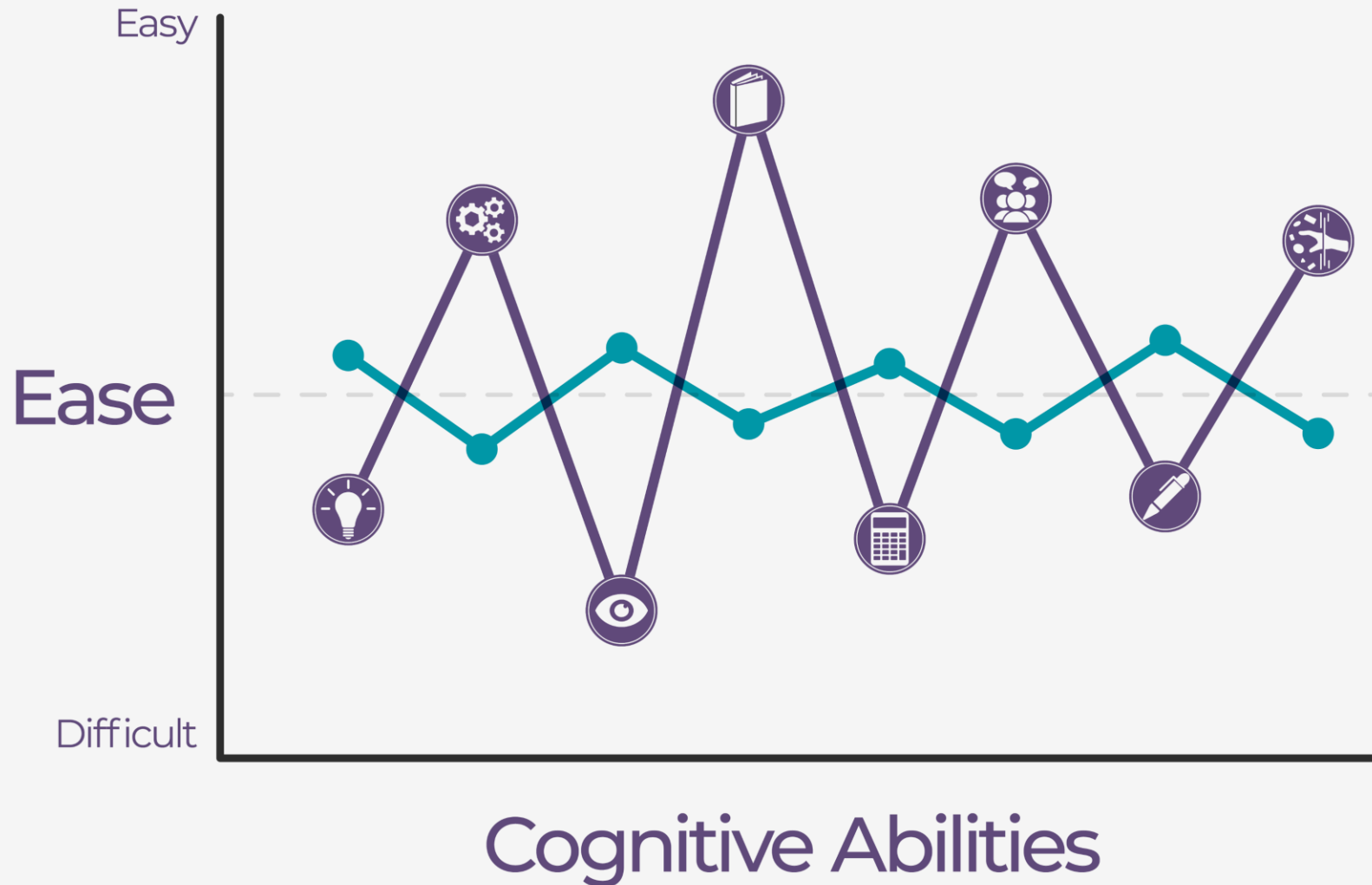
The questions on which we currently base decisions are gender and culture bound. For example:

"I like collecting details about things (for example cars, birds and trains)"

As well as the social expectations of behaviour such as eye contact and compliance.

In short – we do **not** know enough about this yet to program an algorithm.

The common thread: a spiky profile



“Specialist”
Versus
“Generalist”
Thinkers

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

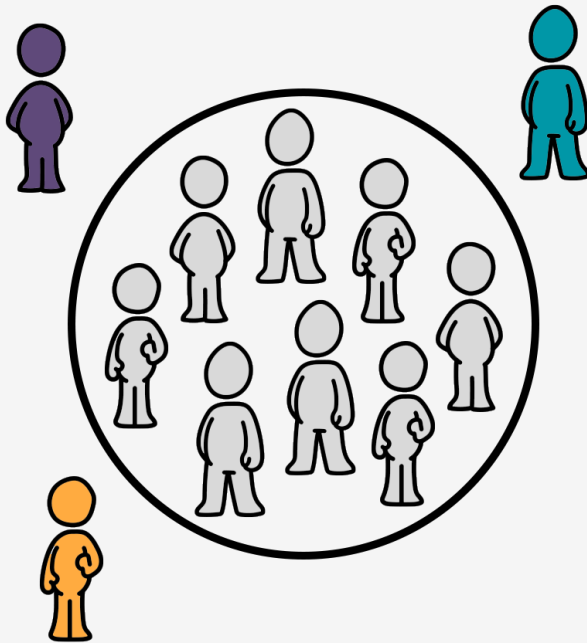


Please climb that tree!



Levels of inclusion

Exclusion

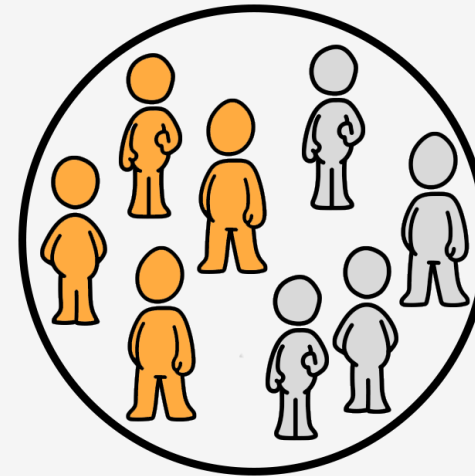


Compliance:
individual inclusion



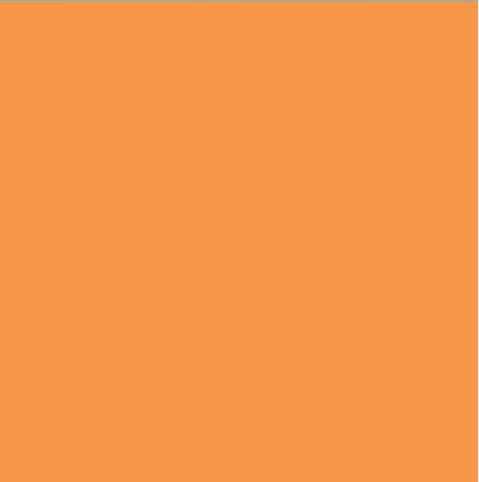
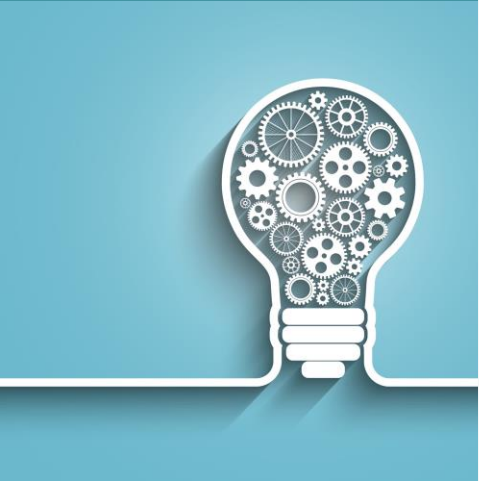
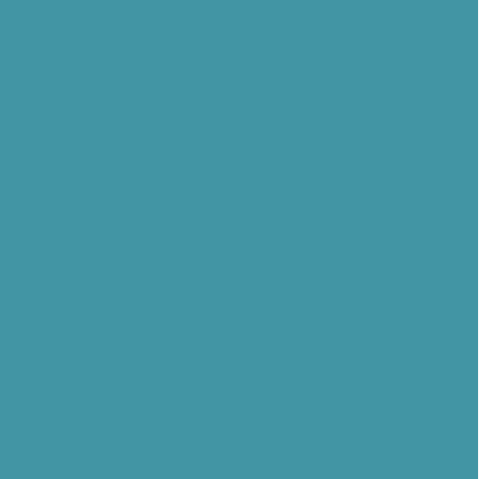
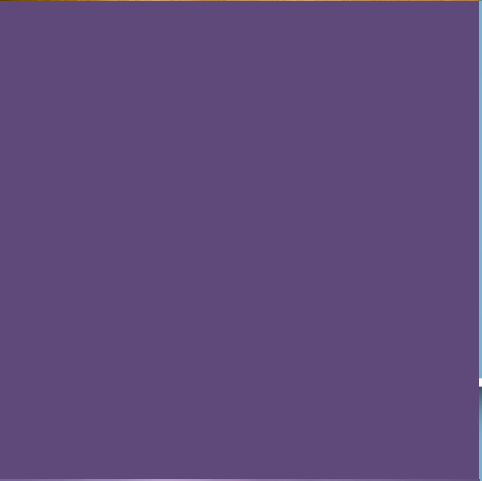
We are here

Deliberate:
Inclusion in teams



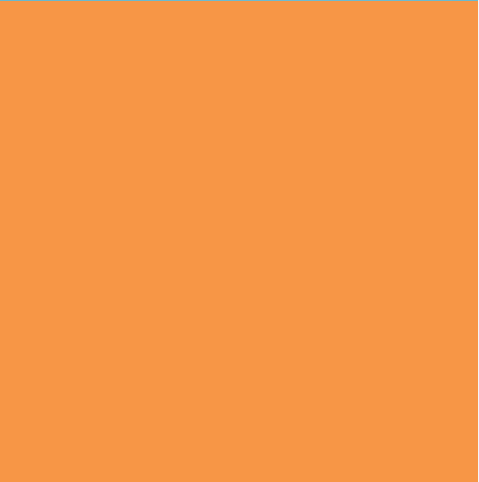
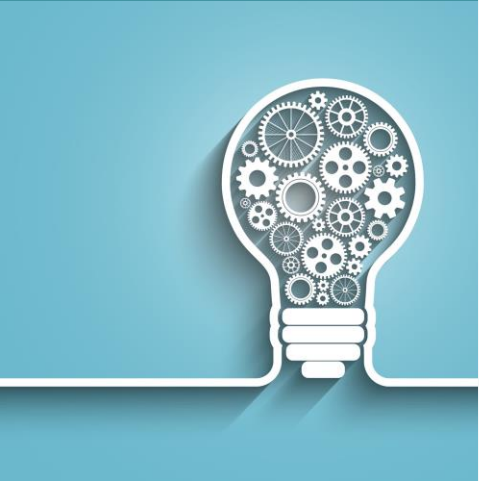
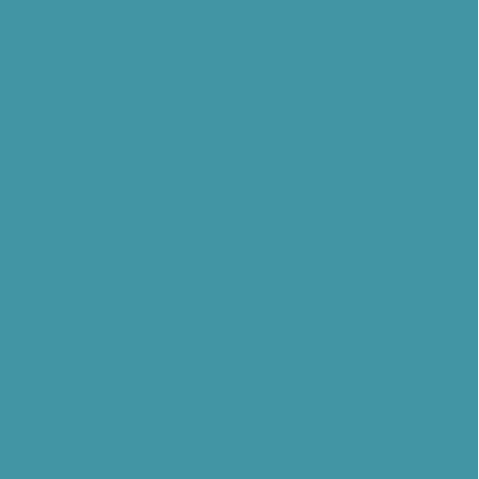
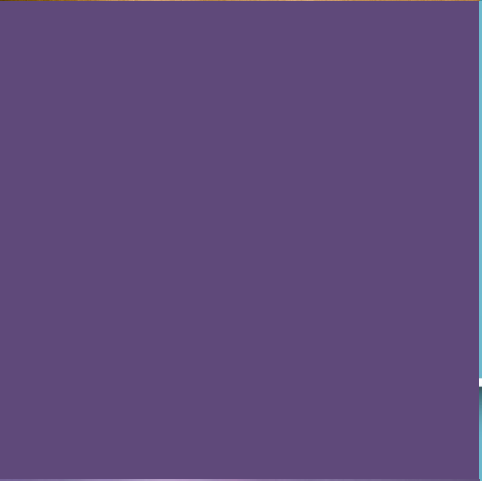
Systemic:
inclusion for all



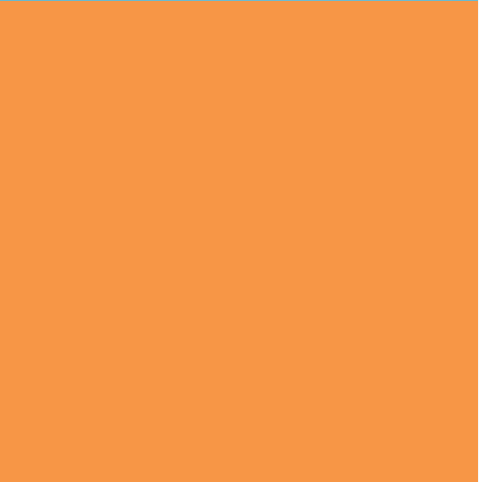
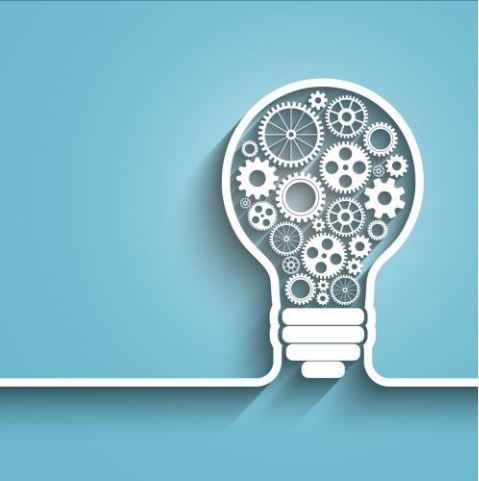
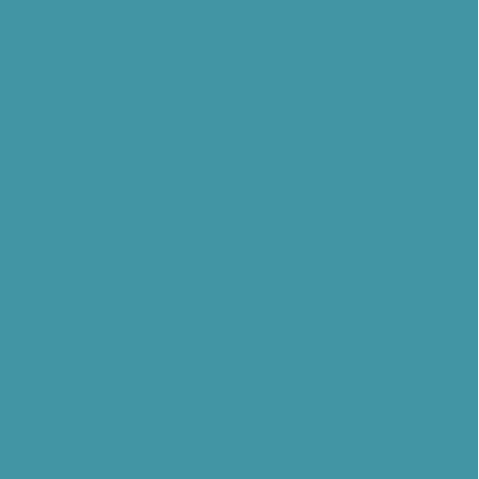
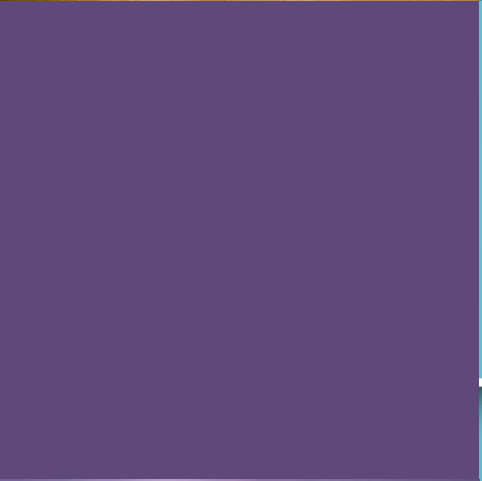


My Experience

Constanza Cecchetti, Addleshaw
Goddard LLP

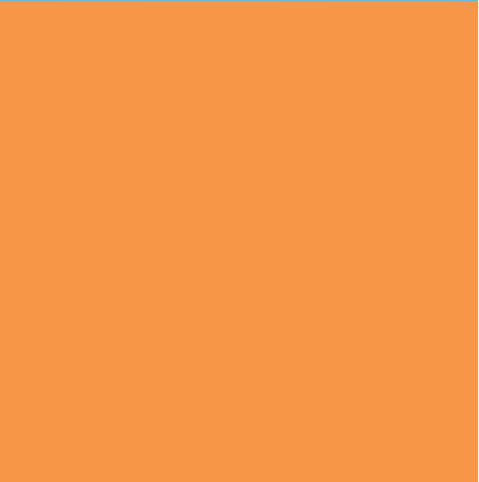
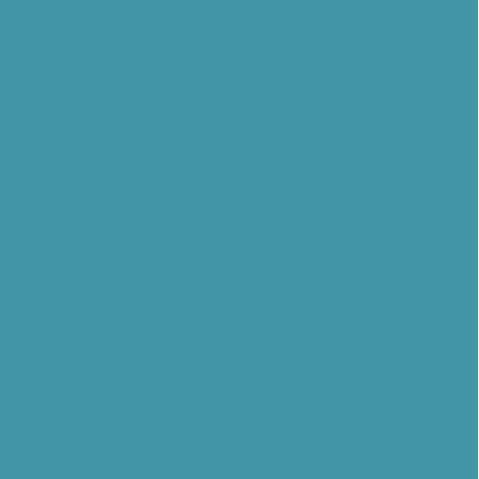
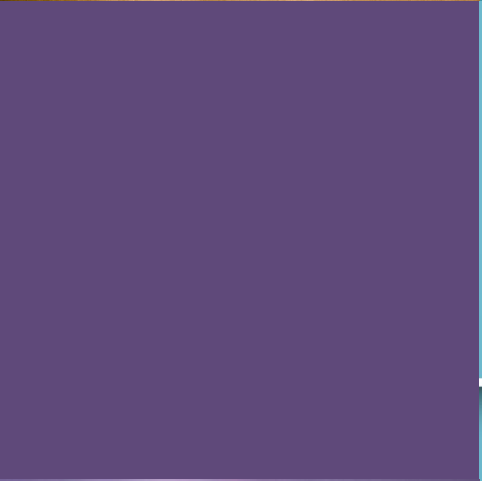


Questions for the Panel



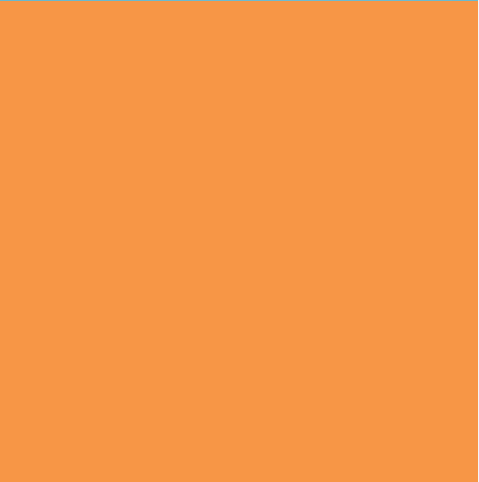
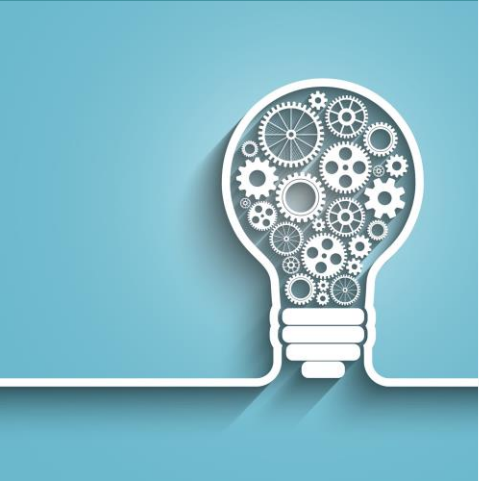
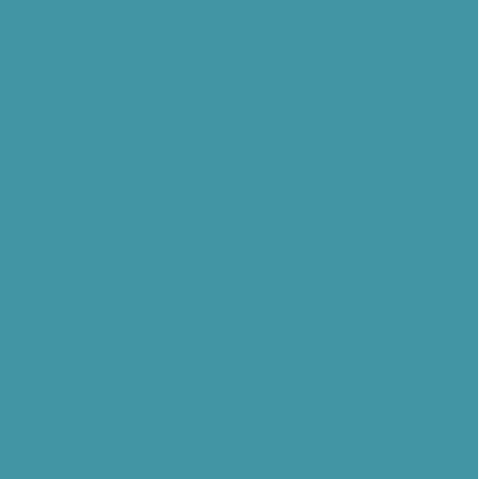
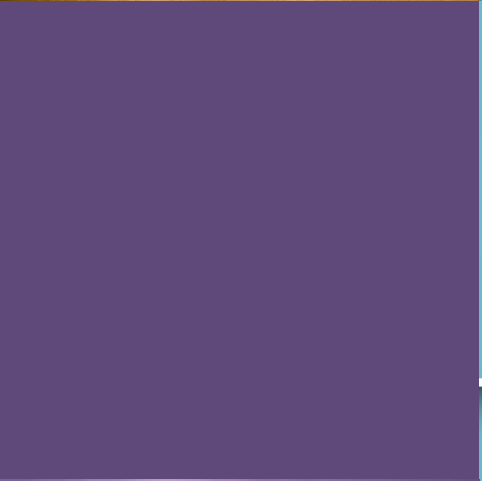
Question 1

How do I ask someone if they are neurodivergent?



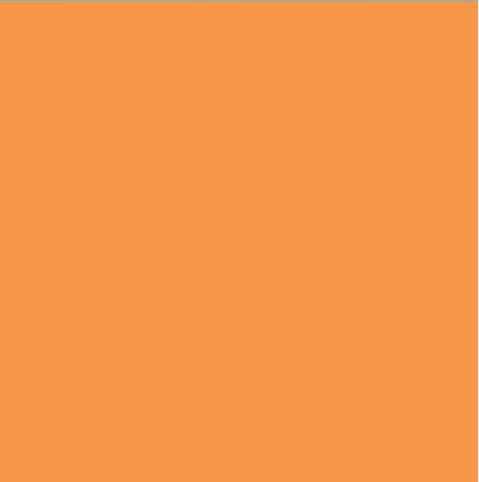
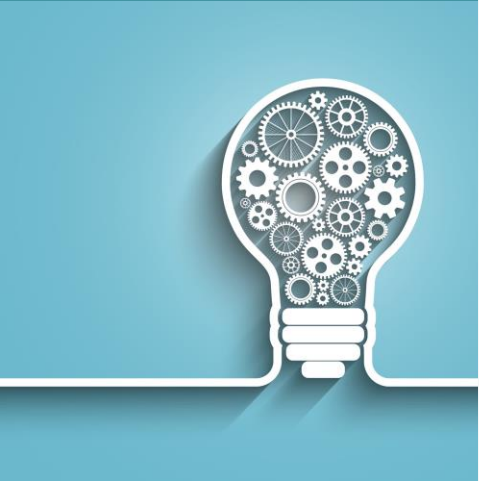
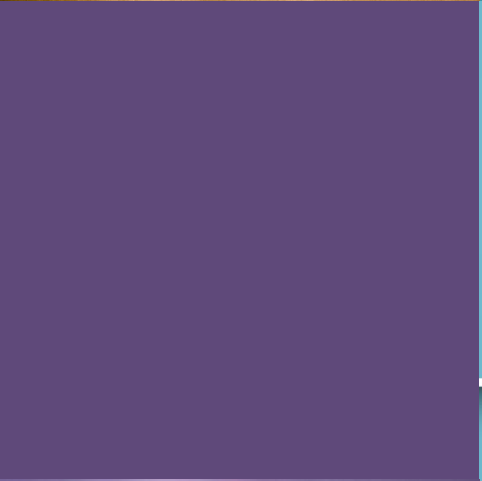
Question 2

With regard to neurominorities such as dyslexia, ADHD, autism - how important is a formal diagnosis for both the employee and the employer?

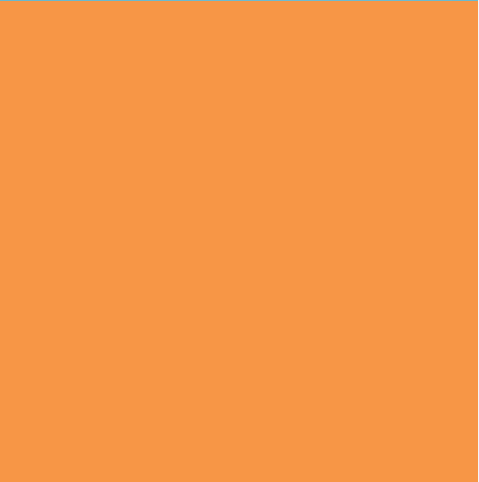
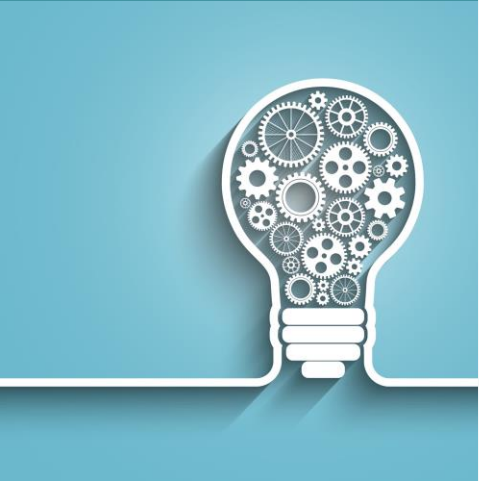
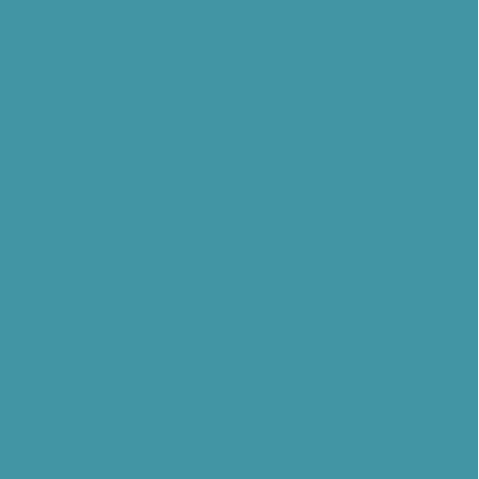
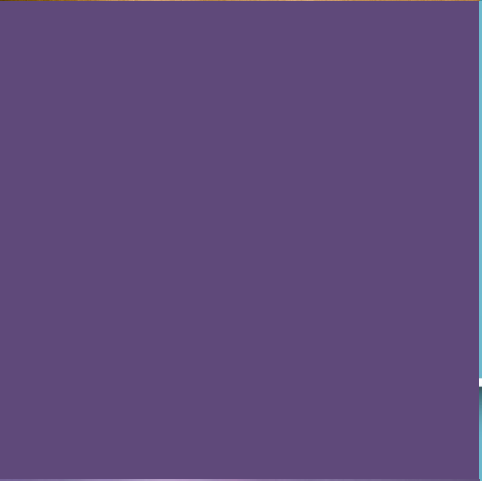


Question 3

What can employers do now to help make the workplace more accessible to all?



Questions?



Closing Slides

Neurodiversity in Business Research, in partnership with
Birkbeck, University of London

Process

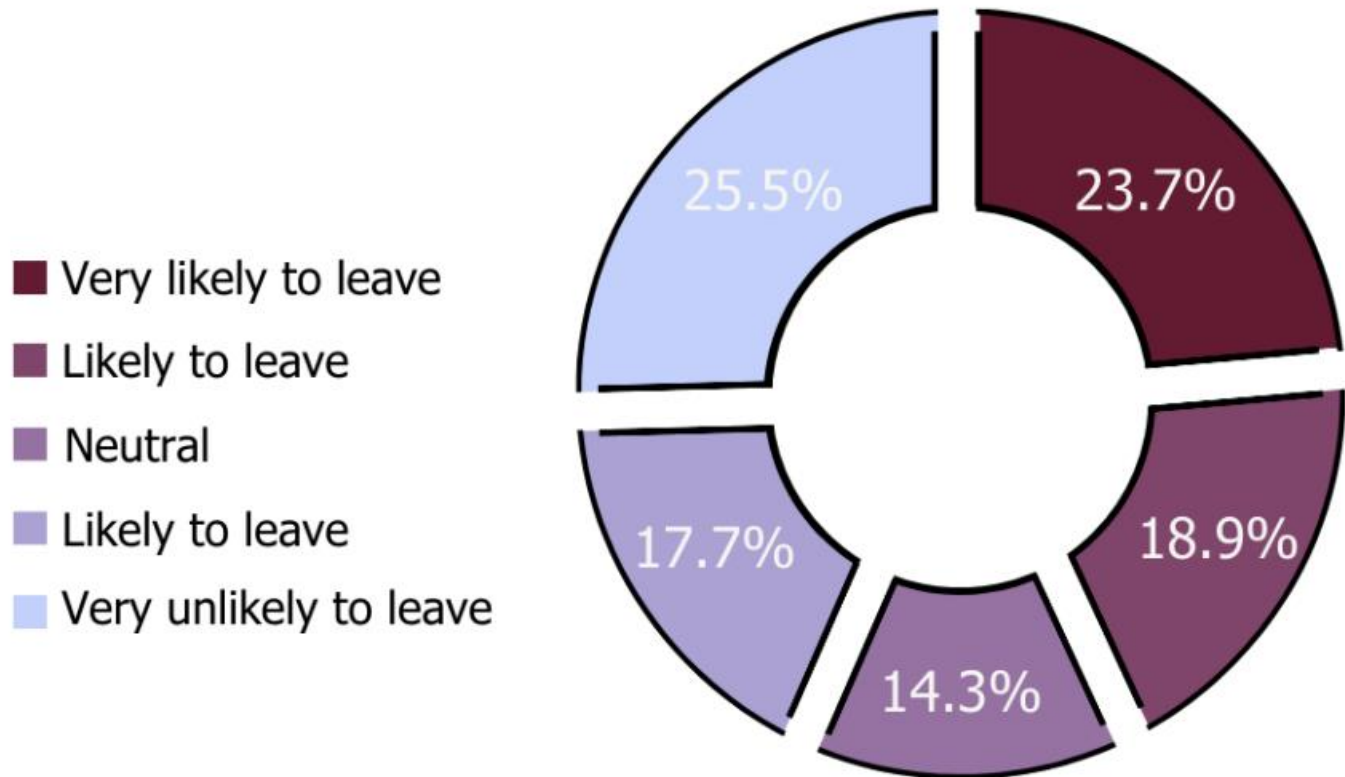
Neurotypes Reported	Overall (N=985)
Attention Deficit Hyperactivity Disorder (ADHD)	611 (62%)
Autism	499 (50.7%)
Dyscalculia	75 (7.6%)
Dysgraphia	18 (1.8%)
Dyslexia	224 (22.7%)
Dyspraxia	151 (15.3%)
Mental Health Conditions	318 (32.3%)
Tic Conditions (incl. Tourette Syndrome)	31 (3.1%)
Other	80 (8.1%)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

Table 1. Neurotypes reported in our survey sample.

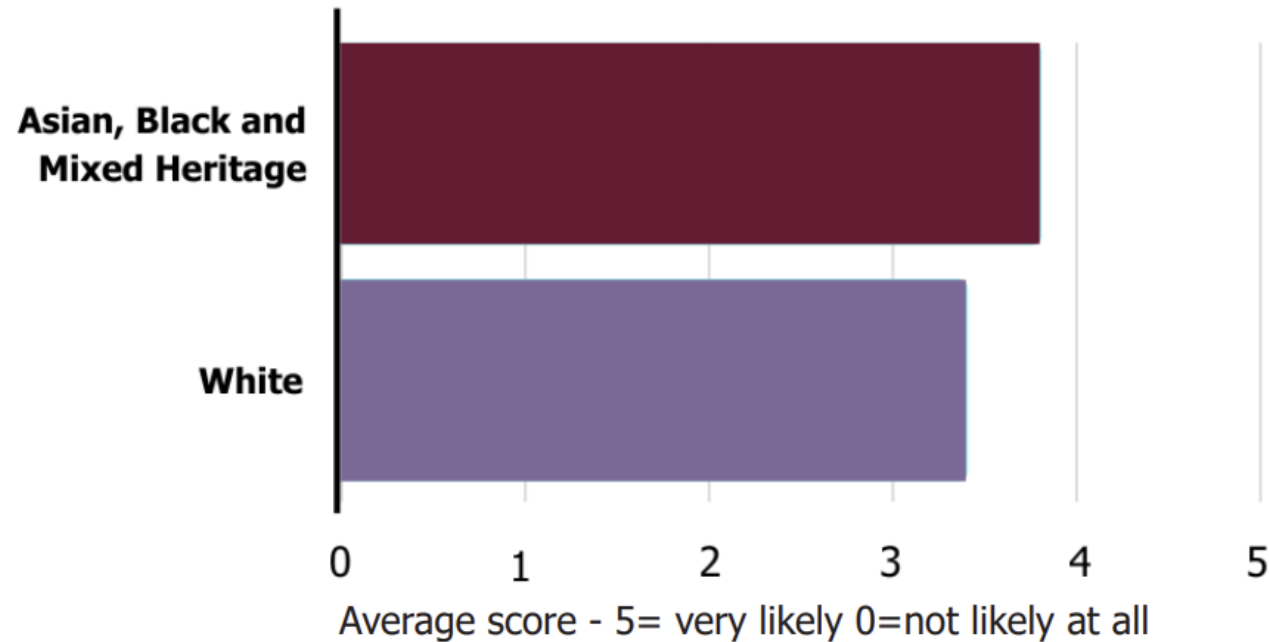
- Participatory Research – ND Researchers, ND stakeholder engagement, focus group pilot of research
- 1117 people completed Nov 2022 – Jan 2023
- 990 employees, 127 employers
- Demographics broadly in line with UK population
- Overrepresented by ADHD/Autism but corrected in analyses



Employee Intention to Leave



Intention to Leave by Ethnicity



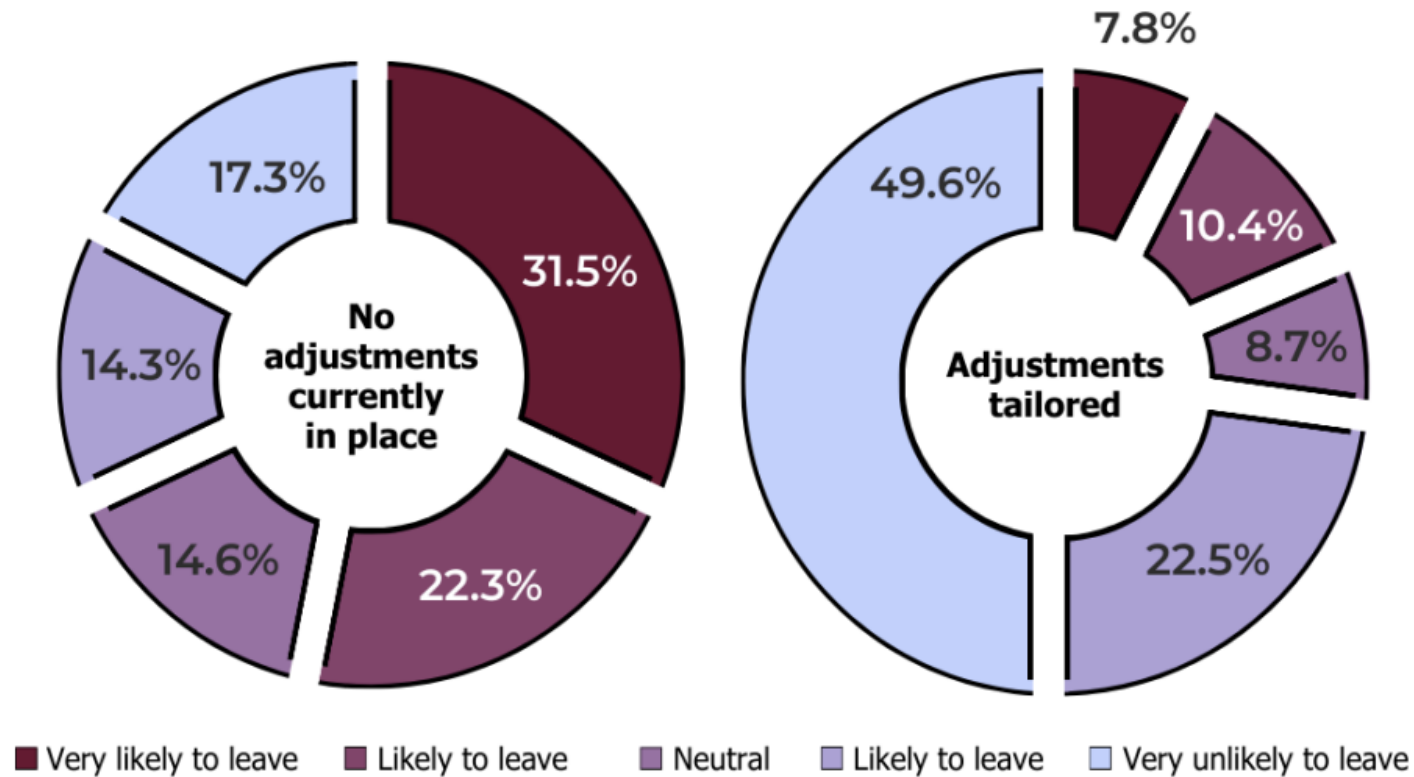
Women were also significantly more likely to be leaving than men or non-binary people.

Age and LGBTQ+ did not affect intention to leave.

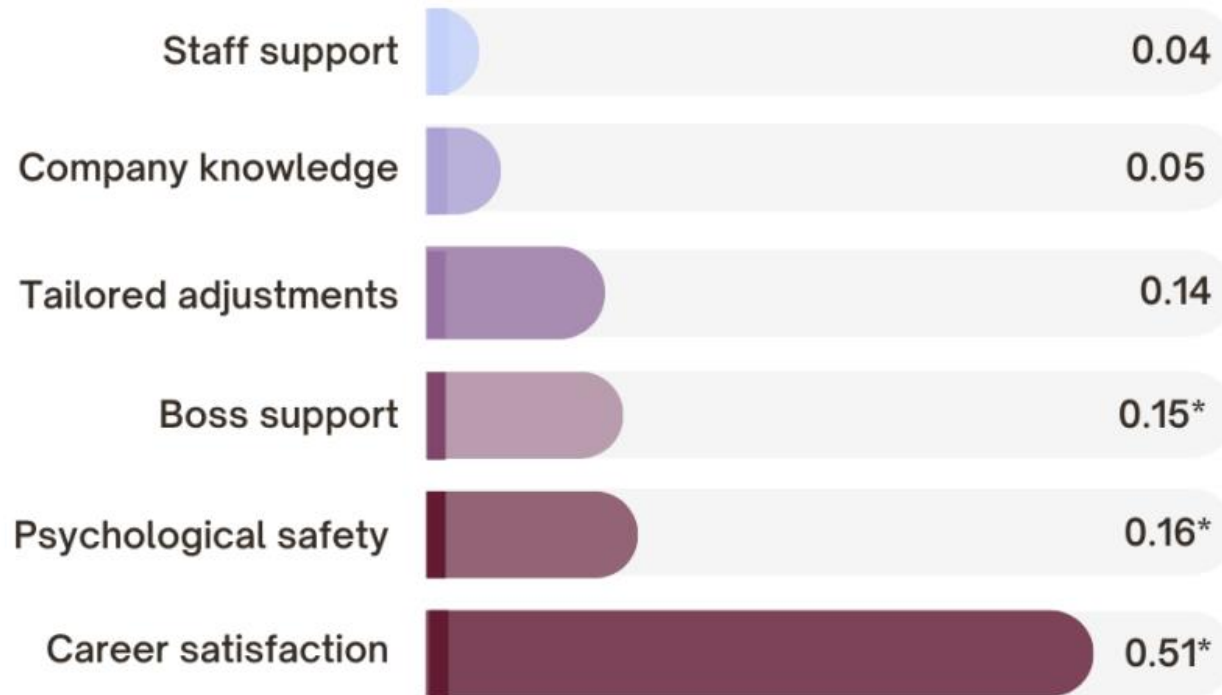


Do Adjustments Help Retention?

Intention to leave with:



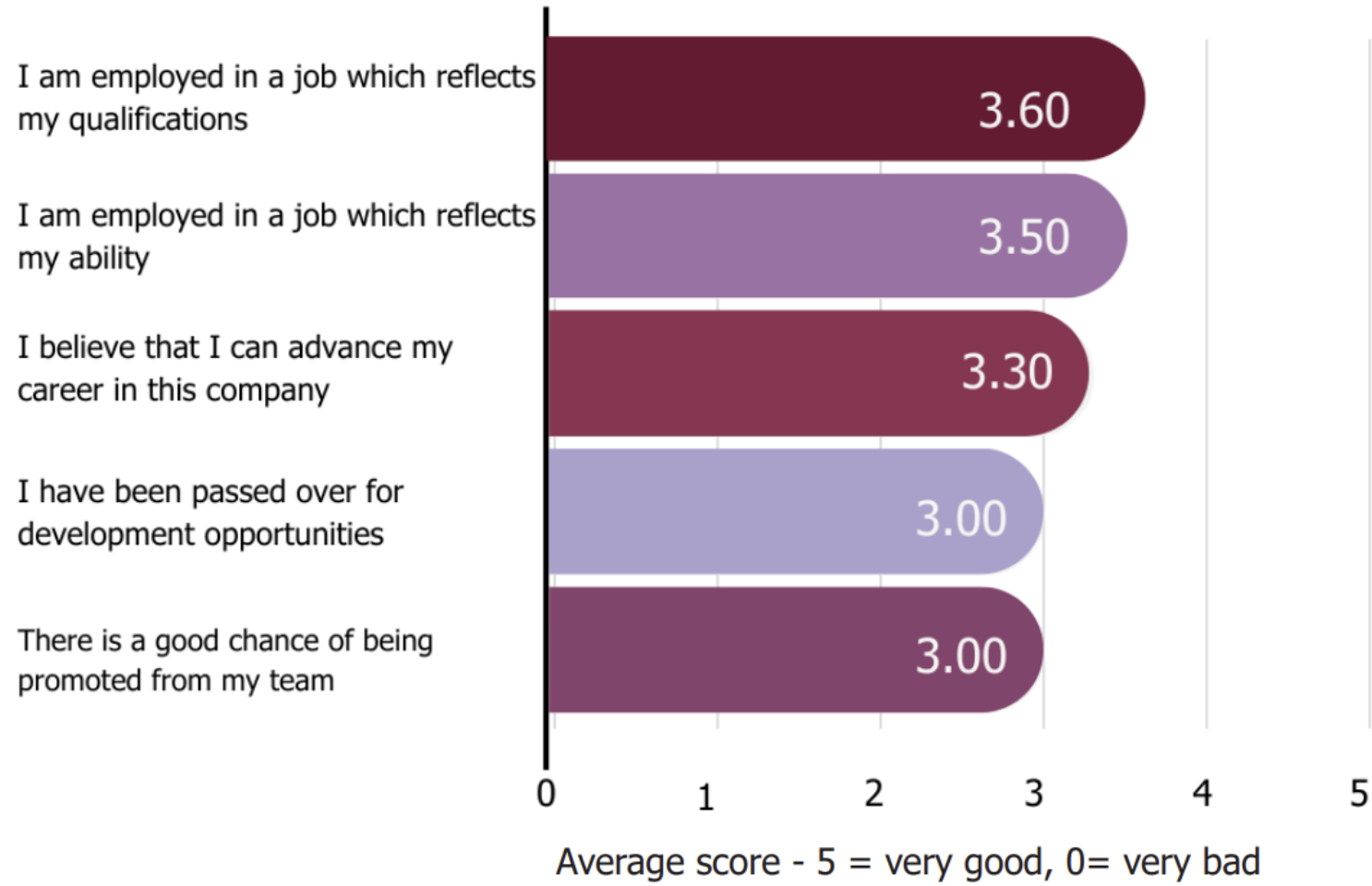
Which Aspects Most Affect Retention?



*statistically significant result $p < .001$



Career Satisfaction



..But Employers are Less Confident With Careers



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

Figure 18. Confidence in providing effective neuroinclusion



Five Takeaways

Adjustments are not dependent on diagnosis


Adjustments must be tailored to the individual, not off the shelf

Adjustments prevent demotivation, but being valued increases retention

Companies need focus on process, wellbeing, relationships, psychological safety

We need a scalable delivery mechanism to accommodate volumes

Genius Within



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