DELEGATE WORKBOOK

Neurodiversity Awareness

Pictures and short words.
It follows the presentation, in order.



Matt Gupwell

Neurodiversity Consultant,
Trainer and Speaker

ThinkNeurodiversity.co.uk

Scan to save my details

MY NAME

MY ROLE

DATE

WELCOME

How to use this workbook

How to use this workbook

Write or draw in the boxes

No right or wrong answers

Keep it. Use it after today

Today: 4 sessions

Session 1
Neurodiversity, Mindset and Language

Session 2
Understanding Neurodivergent Colleagues

Session 3
Support and Reasonable Adjustments

Session 4
Putting it into practice

Look for these in the workbook

Write or draw here **Tick the box** MY SIGN **Write or draw how you sign it**

MY NOTES

What to expect



Facilitator: Matt Gupwell
Neurodiversity Consultant, Trainer and Speaker. Neurodiversity advisor for Nottingham University Hospitals NHSFT.

What to expect

Real examples and time to think

No knowledge needed before today

Honest questions are welcome

By the end I can

Understand neurodiversity
Person first

Use simple, practical tools
At every stage of work

Feel confident
In inclusive conversations

WHAT I WANT FROM TODAY

Words: take away 'neuro'

Take away the word neuro. Neuro = Brain

WORD WITH NEURO		WITHOUT NEURO	HOW DO I SIGN IT?
Neurodiverse / Neurodiversity All brains together	→	**Diverse / Diversity**	MY SIGN
Neurodivergent One person. A brain that works differently	→	**Divergent**	MY SIGN
Neurotypical / Neuronormal A brain that works in the expected way	→	**Typical / Normal**	MY SIGN
Neurodistinct Another word some people prefer	→	**Distinct**	MY SIGN
Neuronormative Systems built for one 'normal' way of thinking	→	**Normal**	MY SIGN
Neurotype / Neurotypes The type of brain a person has	→	**Type / Types**	MY SIGN

More words: take away 'neuro'

Some words are formal. Some are only used by people about themselves. Not sure? Ask the person.

WORD WITH NEURO		WITHOUT NEURO	HOW DO I SIGN IT?
Neurominority A group with brains that work differently from most	→	**Minority**	MY SIGN
Neurotribe / Neurotribes People who share a neurotype	→	**Tribe / Tribes**	MY SIGN
Neurospicy / Neurospiky Big strengths and big challenges	→	**Spicy / Spiky**	MY SIGN
Neuroqueer Rejects 'normal brain' expectations	→	**Queer**	MY SIGN
ND Short form	→	**Neurodivergent**	MY SIGN
AuDHD Autistic and has ADHD	→	**Autism + ADHD**	MY SIGN
Neuroinclusive Designed for all kinds of brains	→	**Inclusive**	MY SIGN

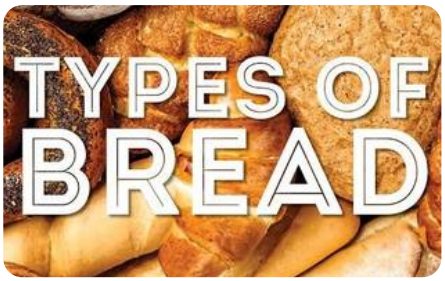
What Bake Off can teach us



Bake Off



Bread?



Many types

Same word: bread.
Different pictures in our heads.

We all hear the same word

We each picture something different

Be specific. Check understanding.

WHAT I PICTURED

WHAT I NOTICED ABOUT OTHERS

TODAY'S PLAN

Session 1 plan

Slides 11 to 12

Session 1: Neurodiversity, Mindset and Language

- **Neurodiversity: True or False?**
- **Definitions and terminology**
- **Workplace well-being and ND**
- **ND in the 2025 workplace**
- **Diagnosis: a question of privilege**
- **Categorisation of conditions**
- **Condition explanations**
- **Superpowers or disabilities?**
- **The role of social media**
- **Becoming an effective ally or advocate**

MY NOTES

TODAY'S PLAN

Sessions 2, 3 and 4

Slides 13 to 15

Session 2: Understanding Neurodivergent Colleagues

- Late discovery: a common path
- Diagnosis: what it means at work
- Masking, unmasking and skill regression
- Performance and life after diagnosis
- The choice to tell others (disclose)
- Emotional and sensory needs with EEES™

Session 3: Support and Reasonable Adjustments

- Equality Act: disability and discrimination
- Key people in support
- Understanding the duties
- What reasonable adjustments are
- Putting adjustments into practice
- Support across the employment cycle
- Culture-led communication

Session 4: Putting it into practice

- **Team planning and action**
  Group work: next steps for your role and team
- Questions and answers

Aims and a note

Aims of today



1. Increase understanding



2. Promote inclusion



3. Provide practical tools



4. Encourage allyship and advocacy

Please note

Professional guidance

General information only. For personal support, ask a qualified professional.

Checked by experts

Evidence-based and verified.

Real insight

Lived experience, learning and research.

WHAT I MOST WANT TO LEARN

Neurodiversity: True or False?

Tick what you think now. We check the answers after.

1	**Neurodiversity only means ADHD, autism and learning difficulties like dyslexia.**	☐ True	☐ False
2	**Neurodivergent people usually struggle with focus and organisation.**	☐ True	☐ False
3	**Neurological differences are a natural part of human diversity. They are not deficits.**	☐ True	☐ False
4	**Neurodivergent conditions are disabilities in law.**	☐ True	☐ False
5	**Most neurodivergent people can easily outgrow their challenges with therapy and medication.**	☐ True	☐ False
6	**Only people with a formal diagnosis (autism or ADHD) are neurodivergent.**	☐ True	☐ False
7	**Under the Equality Act 2010, adjustments are only made when a person asks.**	☐ True	☐ False
8	**Neurodivergent people have superpowers that other people do not.**	☐ True	☐ False

True or False: answers

Check your ticks. Write what surprised you.

1 ✗ **False**
Neurodiversity means all human brains. Everyone is part of it.

2 ✗ **False**
Some do. Many do not. Every person is different.

3 ✓ **True**
Differences in how brains work are natural. They are not faults.

4 ✗ **False**
Neurodivergence and neurodiversity are not conditions, so they cannot be tested. A condition can be a disability if it meets the legal test (Session 3).

5 ✗ **False**
Neurodivergence is lifelong. Support helps, but people do not grow out of it.

6 ✗ **False**
Many people are neurodivergent without a diagnosis.

7 ✗ **False**
Employers should think ahead and remove barriers before anyone asks.

8 ✗ **False**
It puts pressure on people and hides real challenges. Everyone has strengths and challenges.

WHAT SURPRISED ME

Four moments (1 and 2)

Hold on to your thoughts. We come back to these later.



NOTICE THIS?

Moment 1

- **Someone is always late. Every time.**
- **Even with reminders. Even with help.**

- **How does it feel?**
- **Do you think they do not care?**

MY EXAMPLE AND WHAT I THOUGHT



NOTICE THIS?

Moment 2

- **Big news arrives. An illness, injury or emergency.**
- **You still go to work the next day.**

- **Did you say nothing?**
- **Did it make the job harder?**

MY EXAMPLE AND WHAT I THOUGHT

Four moments (3 and 4)

Hold on to your thoughts. We come back to these later.



NOTICE THIS?

Moment 3

- **You go somewhere new.**
- **After minutes you feel 'off'. The light? The layout? Many people?**
- **Did it change how you coped?**
- **Did it change how you felt with others?**

MY EXAMPLE AND WHAT I THOUGHT



NOTICE THIS?

Moment 4

- **You are very upset or angry.**
- **One sense feels stronger. You notice other people less.**
- **What does this tell you now?**

MY EXAMPLE AND WHAT I THOUGHT

What do the words mean?



Neurodiversity

The natural variation in the way all human brains work. It includes all ways of thinking.

Neurodivergent

A brain that works differently from typical.



"Neurodivergent just means a brain that diverges."

Kassiane Asasumasu, autistic advocate

Matt's definition

A person who thinks, feels, understands and processes information differently from the medical idea of normal. Whatever the cause.

IN MY OWN WORDS

Why language matters

Clean language

- Ask open questions
- Make neutral statements
- Use their own words
- Do not add your own meaning

Neuroinclusive language

- Respects neurodivergent people
- No stereotypes. No 'othering'
- Focus on strengths. Less stigma
- Space to say what is needed

A PHRASE I HAVE HEARD THAT COULD LAND DIFFERENTLY

Say less of this



- ✕ **"Are you sure you need adjustments? You seem fine to me."**
- ✕ **"You don't look disabled."**
- ✕ **"Everyone struggles with focus sometimes. You just need to concentrate more."**
- ✕ **"That's normal. Everyone finds X hard sometimes."**
- ✕ **"This is just how we do things. You'll have to adapt."**
- ✕ **"I know someone with [condition], and they don't have any problems with this."**

These doubt the person, make their experience smaller, or end the conversation.

WHICH ONE HAVE I HEARD? HOW DID IT FEEL?

Try saying this



- **"What support do you need to work comfortably and well?"**
- **"How can we adjust this to make it more accessible for you?"**
- **"Would it help if I sent this in a different format?"**
- **"We have step-free access and live captions. Would any other adjustments help?"**
- **"Would you like a short break, or shall we keep going?"**
- **"I do not know much about ADHD. Could you help me understand what it means for you at work?"**

These are open. They put the person in charge.

A PHRASE I WILL USE

Time lost at work

Data from 2024 to 2025: Health and Safety Executive (HSE) Labour Force survey.

40.1 million

working days lost to work-related ill health and injury



of ill health days are stress, anxiety or depression

22.1 million

days lost



of ND employees report ND-related time off*

Over half

of ND employees

*Most often signed off with stress, anxiety or depression. Surveys: CIPD, Brain in Hand, City and Guilds.

Millions of days lost, because ND staff felt:

- **Misunderstood**
- **Bullied**
- **Overlooked**
- **Like a problem**
- **Scared to ask for help**

WHICH NUMBER OR FEELING STAYS WITH ME?

What ND people say

Zurich UK research, November 2024

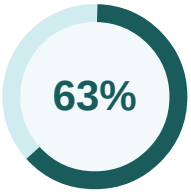
Hiring



discriminated against by a hiring manager



feel they cannot or should not disclose



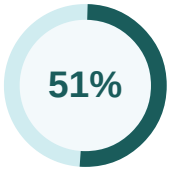
say employers see ND as a 'red flag'

2025 Neurodiversity Index

Support



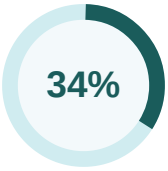
not satisfied with employer support



took time off because of ND



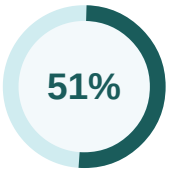
had no adjustments for caring duties



felt well supported at work

2026 Neurodiversity Index

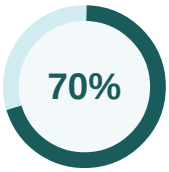
Support



had no consistent support when they asked



waited 3 months or more for adjustments



say caring for family affects their work



felt well supported from day one

Awareness is growing. Support is not keeping pace.

WHICH NUMBER SURPRISED ME?

A moment to pause

Before we go further

Which figure struck you most? Why?

MY THOUGHTS

Has someone you work with been off sick in a way that might connect to this?

MY THOUGHTS

Anything to come back to later? No need to share it now.

TO COME BACK TO

Psychological safety

Psychological safety is crucial to a supportive workplace.



Safe to speak up

Ideas, questions, worries, mistakes



No fear

No embarrassment, rejection or punishment



Trust and respect

Open talk, new ideas, teamwork

It goes both ways. A manager can say: "I do not know much about this. Can you help me understand?"

A TIME I FELT SAFE TO SPEAK UP. WHAT HELPED?

A TIME I DID NOT FEEL SAFE. WHAT WAS MISSING?

Sorting conditions

Do not look anything up. List as many as you can under each heading.

Can run in families

GENETICALLY HERITABLE

Learning differences

SPECIFIC LEARNING

Mental health

MENTAL HEALTH CONDITIONS

Happens later in life

ACQUIRED NEURODIVERGENCE

How well do I really know these?



How many could I spot just by watching someone?

Number



How many do I understand day to day for that person?

Number

Notice the gap. You do not need to be an expert on every condition. You need to understand what it means for each person. That is what Which Means What™ is built on.

Conditions: runs in families

Genetically heritable (can run in families)

Autism	ADHD	ODD
OCD	Tourette's	Dyslexia
Dysgraphia	Dyscalculia	DCD
GAD	SAD	Schizophrenia
Bipolar, BPD, EUPD	Eating disorders	Addiction

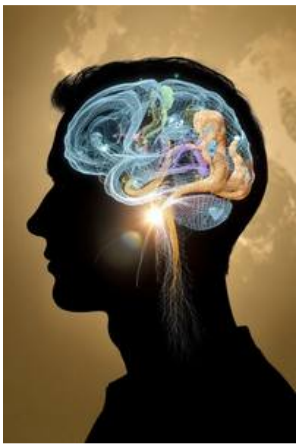
ODD oppositional defiant disorder
OCD obsessive compulsive disorder
DCD developmental coordination disorder
GAD generalised anxiety disorder
SAD social anxiety disorder

Specific learning difficulties

1. **Dyslexia**
   Reading and spelling
2. **Dyspraxia (DCD)**
   Movement and coordination
3. **Dyscalculia**
   Working with numbers
4. **Dysgraphia**
   Handwriting

NOTES

Conditions: mental health



Mental health conditions

- **Stress**
- **Anxiety**
- **Depression**

Other mental health conditions

ADHD: some agree, some do not	Oppositional defiant disorder	OCD
Schizophrenia	Personality disorders	Mood disorders
PTSD / CPTSD	Anxiety disorders	Panic disorders
Eating disorders	Addiction	

Many conditions fit in more than one group. The labels overlap. We focus on the person, not the label.

NOTES

Conditions: acquired

Acquired neurodivergence: happens during life

Brain injuries	**Fetal alcohol spectrum disorder**	**PTSD / CPTSD**
Epilepsy	**Strokes**	**Neurotoxicity**
MS	**ME**	**Addiction**
Chemotherapy	**Parkinson's**	**Alzheimer's**
Dementia		

Neurotoxicity damage from toxins **MS** multiple sclerosis **ME** myalgic encephalomyelitis (chronic fatigue syndrome)

Also affects how the brain works



Perimenopause and menopause

Natural or medically caused.

Sensory processing difficulties

Hormonal changes

NOTES

My guesses: how many people?

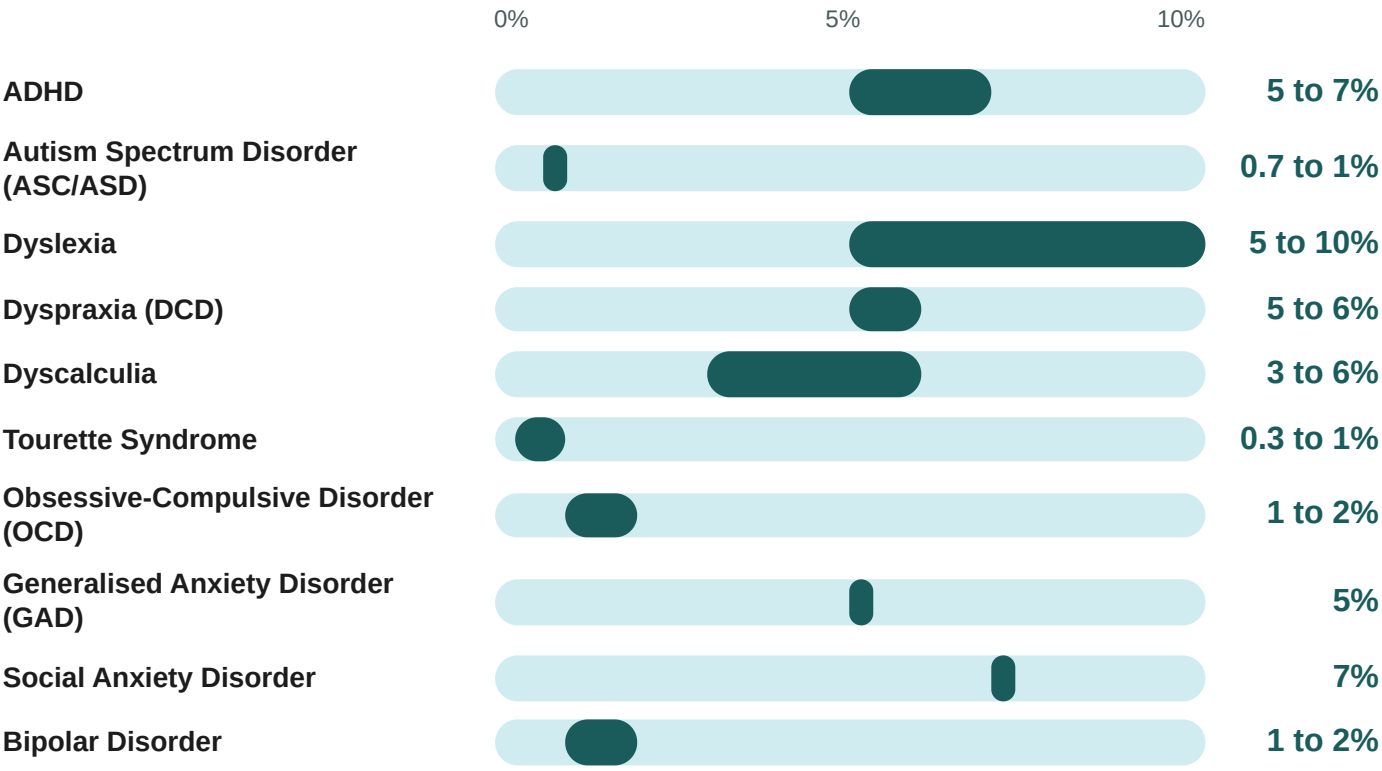
Write your best guess. What percentage (%) of people have each one?

ADHD	**My guess %**
Autism Spectrum Disorder (ASC/ASD)	**My guess %**
Dyslexia	**My guess %**
Dyspraxia (DCD)	**My guess %**
Dyscalculia	**My guess %**
Tourette Syndrome	**My guess %**
Obsessive-Compulsive Disorder (OCD)	**My guess %**
Generalised Anxiety Disorder (GAD)	**My guess %**
Social Anxiety Disorder	**My guess %**
Bipolar Disorder	**My guess %**

Keep your guesses. The real figures are next.

How close was I?

The estimated figures. Compare with your guesses.



WHICH FIGURE SURPRISED ME MOST?

Allyship and advocacy

Allyship

- Supports ND people day to day
- Empathy, awareness, practical help
- Speaks up for colleagues
- Less everyday bias

Advocacy

- Change across the whole organisation
- Policy and awareness campaigns
- Bigger, longer-term change
- Equal rights and opportunities

ONE THING I CAN DO AS AN ALLY

ONE CHANGE I COULD ASK FOR AS AN ADVOCATE

Understanding colleagues and clients



Six questions for this session

- Did many people not know as children?
- Why can diagnosis cause confusion at work?
- Masking, unmasking and skill regression
- Performance problem, or life after diagnosis?
- What if they do not want to tell you?
- Supporting people with EEES™

QUESTIONS I HAVE

EEES™

Four universal human lenses. **Not diagnoses.** You will recognise them all.

E: Executive Function

Planning, starting, putting things in order

Think back: Moment 1

E: Emotional Regulation

Managing feelings in the moment

Think back: Moment 2

E: Environment

Where we work: layout, noise, people

Think back: Moment 3

S: Sensory Processing

Light, sound, touch, smell, movement

Think back: Moment 4

How to use it

Notice a change in performance, communication or attitude → **Think: which EEES lens?** → **Have a supportive conversation: Which Means What™**

WHICH LENS DO I NOTICE MOST AT WORK?

EEES™: lenses 1 and 2

E: Executive Function

Planning, prioritising, starting, putting things in order, remembering while working

Moment 1

UNDER STRAIN YOU MAY SEE:

- Missed tasks
- Difficulty starting
- Looks disorganised, even with effort

WHERE HAVE I SEEN THIS?

E: Emotional Regulation

Managing feelings in the moment, especially under pressure

Moment 2

UNDER STRAIN YOU MAY SEE:

- Reactions that seem too big
- Emotional flatness
- Hard to recover from setbacks

WHERE HAVE I SEEN THIS?

EEES™: lenses 3 and 4

E: Environment

Where work happens: layout, noise, predictability, social demands

Moment 3

UNDER STRAIN YOU MAY SEE:

- **Avoiding places**
- **Lower work in some settings**
- **Inconsistent output**
- **Looks disengaged**

WHERE HAVE I SEEN THIS?

S: Sensory Processing

Light, sound, touch, smell, movement, and sensing inside the body

Moment 4

UNDER STRAIN YOU MAY SEE:

- **Tiredness**
- **Overwhelm**
- **Hard to concentrate**
- **Discomfort affects focus**

WHERE HAVE I SEEN THIS?

What it looks like

Struggle with EEES™ often looks like:

- Anxiety
- Stress
- Shutdown

↓ Long-term struggle leads to ↓

- Overwhelm
- Burnout
- Time off sick



HAVE I SEEN THIS? WHAT WAS GOING ON?

Why EEES™ works better

- **Support does not need a diagnosis**
- **The diagnosis does not need to be shared**
- **Needs can change day to day**
- **Start with empathy, not 'why?'**

Ask: "What is making this harder right now?"

Not: "What is wrong with this person?"

The takeaway: supporting through EEES™ means

- **Responding earlier**
- **Reducing escalation**
- **Changing the situation, not blaming the person**
- **Supporting without diagnosing**
- **Helping people feel understood**

Behaviour is communication. EEES™ helps us understand what is being said.

6, 15 and 20



Three very important numbers: sections of the Equality Act 2010

6

What counts as a disability

A physical or mental impairment with a substantial and long-term effect on normal day-to-day activities.

Long-term: 12 months or more, or expected to be.

15

Unfavourable treatment

No unfavourable treatment because of something connected to a disability.

Unless it is a proportionate way to reach a legitimate aim.

20

Reasonable adjustments

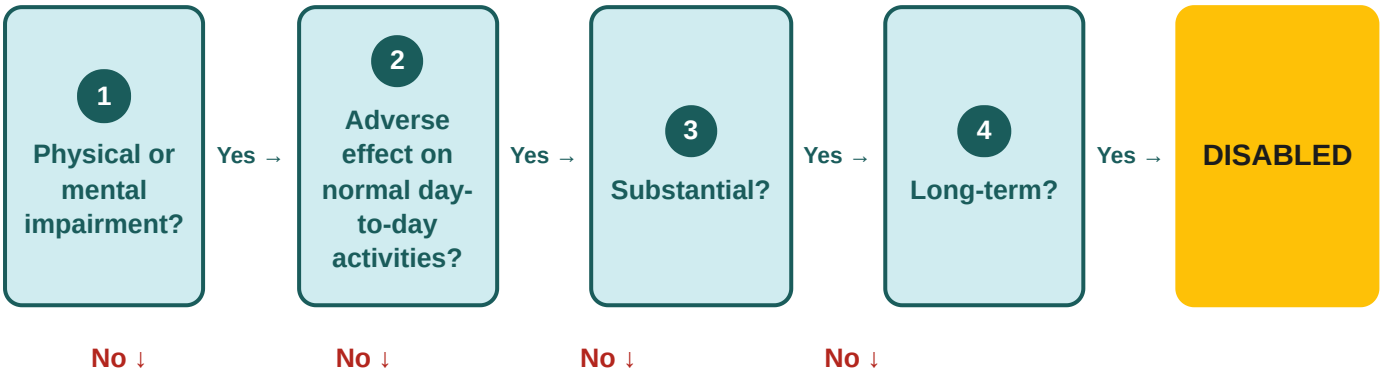
Employers must make reasonable adjustments. Think ahead and keep going.

Do not wait to be asked.

MY NOTES

Is it a disability? Four tests

Section 6, Equality Act 2010: the impairment must pass all four tests.



A No at any test ends the path. Deemed disabilities (such as cancer, HIV, MS) and excluded conditions are checked before these four tests.

Try it with a person you know (no names)

TEST 1 AND 2

TEST 3 AND 4

Reasonable adjustments

Changes to the workplace, a job role or a service, for disabled employees and customers.

Examples

- Step-free access
- Live captions
- Assistive software
- BSL interpreters

So everyone has an equal chance to

- Apply for work
- Do the job well
- Use services

AN ADJUSTMENT I HAVE SEEN WORK

What does 'reasonable' mean?

There is no fixed definition. Tribunals ask: did you take it seriously and think about it properly?

Effective
Does it remove the barrier?

Proportionate
Is the cost and disruption worth the benefit?

Equitable
Does it seriously disadvantage the business or other staff?

The key question: did you think about it and write down why? Or say no without proper thought?

AN ADJUSTMENT I COULD TEST WITH THESE 3 QUESTIONS

Three duties

More than one duty often applies at the same time.



DUTY 1

PCPs

Rules, policies and practices (written or not)

- Fixed hours
- Attendance trigger policy
- Verbal-only reviews



DUTY 2

Physical features

Barriers in the building

- Steps, no accessible entrance
- Open plan, no quiet space
- Lighting that cannot change



DUTY 3

Aids and services

Support that is missing

- Screen readers, assistive software
- Written instructions, meeting summaries
- BSL interpreters

Ask: What does this person need, in this situation, to be on a level footing?

A PCP AT MY WORKPLACE THAT COULD CAUSE DISADVANTAGE

What disabled people said

Big Disability Survey 2023

Telling people (disclosure)

- Fear of stigma after telling
- Seen as less capable
- Who else will know?
- Having to justify my needs
- Depends on trusting my manager

Getting adjustments

- Process feels bureaucratic and clinical
- Having to fight for basic support
- Fear the request will be denied
- Hard to explain needs without a diagnosis
- Culture does not change

WHICH ONE STANDS OUT FOR ME? WHY?

Which Means What™ (WMW™)

A neurodivergent, person-first, non-judgemental way to talk about support and reasonable adjustments.

1 Which

2 Means

3 What

WMW is not about

Can we fix it?

Or making the person feel like a problem to solve.

WMW is about

Understanding the other person's experience

Not knowing if, or which, condition they have.



WHAT DOES THIS CHANGE FOR ME?

WMW™ explained

We do not start by knowing there is a problem. We start with a question:

You feel disadvantaged by X, which means:

- What
- When
- Who
- Where
- How

This helps me understand their

- Context
- Concerns
- Challenges
- Coping strategies

Then build a toolbox



Many options to choose from

Pick up and put down at different times

MY TOOLBOX IDEAS

Try WMW™: managing deadlines



Someone finds deadlines hard. They ask for help.
Ask them:

What

When

Who

Where

How

MY TOOLBOX: OPTIONS TO PICK UP AND PUT DOWN

Recruitment: website and adverts

Tick what your workplace already does.

It starts with the website

Slide 91

- [ ] Accessible website design
- [ ] All policies on the site
- [ ] Adjustments to ask for, at every stage
- [ ] More than a tick box exercise
- [ ] Employees share their stories
- [ ] Real examples of adjustments
- [ ] Directions in different formats, with video

Job adverts and descriptions

Slide 92

- [ ] Plain, clear language
- [ ] Essential and non-essential tasks
- [ ] Invite adjustment requests
- [ ] Skills, not just qualifications
- [ ] A contact person for questions
- [ ] Welcome disabled and ND applicants
- [ ] Flexible working options
- [ ] Describe the work environment
- [ ] Clear, different ways to apply
- [ ] Employee networks

ONE THING WE COULD ADD

Interviews

Tick what your workplace already does.



- [ ] Offer adjustments upfront
- [ ] Share questions in advance
- [ ] Structured interviews
- [ ] Offer breaks
- [ ] Time to process
- [ ] Ask for feedback
- [ ] Share format, who and structure
- [ ] Choose how to communicate
- [ ] Quiet, well-lit space
- [ ] Clear, direct questions
- [ ] Explain the next steps

ONE THING WE COULD CHANGE

Onboarding and inductions

Tick what your workplace already does.

Onboarding: first day and week

Slide 94

- [ ] Accessible welcome pack
- [ ] Buddy or mentor
- [ ] Sensory-friendly workspace
- [ ] Clear documentation
- [ ] Assistive technology
- [ ] Open communication
- [ ] Kit ready on day one
- [ ] Flexible training formats
- [ ] Regular check-ins
- [ ] Team neurodiversity training
- [ ] Tailored induction plan

Inductions

Slide 95

- [ ] Personalised programme
- [ ] Multiple learning formats
- [ ] Realistic expectations
- [ ] Sensory breaks
- [ ] Support continues after induction
- [ ] Gather feedback
- [ ] Clear schedule
- [ ] Meet key contacts
- [ ] Personal passport
- [ ] Social integration
- [ ] Company culture

ONE THING WE COULD ADD

My toolkit

EEES™

- Executive Function
- Emotional Regulation
- Environment
- Sensory Processing

WMW™

You feel disadvantaged by X, which means:

- What
- When
- Who
- Where
- How

Behaviour is communication.
Ask: "What is making this harder right now?"

MY TOP 3 THINGS TO REMEMBER

Putting it into practice



Team planning and action

Next steps for my role and my team

1

NEXT STEP

2

NEXT STEP

3

NEXT STEP

WHO CAN HELP ME?

BY WHEN?

Questions and answers

MY QUESTIONS

THANK YOU FOR TAKING PART TODAY

Keep in touch



Matt Gupwell

ThinkNeurodiversity.co.uk

Scan to save my details

Open my blinq card and choose Save contact

WHAT I WILL DO FIRST