

2025 Neuroinclusion Survey themes and trends

Throughout the 2025 neuroinclusion survey, we included questions that enabled respondents to talk more broadly about the topics covered. We knew we couldn't possibly cover all potential ideas or perspectives in the survey's default answers, so tried to offer opportunities for nuance and unexpected responses.

Among the 229 responses we received overall, we also received detailed comments or feedback in high numbers for the survey sections on workplace adjustments, company culture & psychological safety, diagnosis experiences and parenting neurodivergent children. Common themes, expressed needs and example quotes for each are provided on the following pages.

Several trends emerged across all sections of the survey where people were allowed to share their experiences fluidly, such as;

- **Systemic barriers:** Many challenges stem from organisational or societal structures that are not aligned with neurodivergent needs, whether in the workplace, healthcare, or education.
- **Desire for autonomy and trust:** Across employees and parents, there is a strong emphasis on flexibility, choice, and being treated as capable adults.
- **Impact of visibility and culture:** Psychological safety and inclusion are heavily influenced by cultural understanding, role modelling, and proactive management.
- **Cumulative stress and harm:** Poorly designed processes, delays, or lack of support accumulate over time, contributing to burnout, disengagement, or exclusion.
- **Increasing awareness and demand for change:** There is a growing recognition of neurodiversity, but this has not yet been consistently translated into effective practice. Employees and parents are increasingly vocal about unmet needs and the practical steps organisations could take.

Every year, in addition to our questions about the current state of culture in the workplace, we also ask respondents how workplace culture has changed in the past 12 months. Our 2024 survey showed broad, gradual improvements in inclusivity overall, with employees of GAIN members more likely to rate their company as "much more inclusive" and less likely to say inclusivity had rolled backwards. This year, however, 15% of respondents noted a backward swing in cultural inclusivity in their workplace, with a further 34% noting no measurable change.

Several comments hint at the underlying cause of this, and highlighted the broader societal and political environment as a factor influencing workplace culture and inclusivity. Recent political developments in both the UK and the USA, including anti-trans legislation and attacks on diversity initiatives, were described as creating anxiety and uncertainty, particularly for neurodivergent individuals whose experiences intersect with other marginalised identities. Participants noted that rollback of DEI progress or political hostility

toward inclusion can directly impact organisational culture, reduce willingness to disclose neurodivergence, and limit the practical support available.

Example quotes:

- “It is hard to know how safe it is to disclose or ask for flexibility given the current political climate – there seems to be less tolerance for anything that isn’t ‘traditional’ and it worries me for our ND colleagues.”
- “Recent laws in the US and anti-trans measures here in the UK make me question whether my workplace will continue to prioritise inclusion, and it has already made some managers more cautious about supporting neurodivergent employees.”
- “I’ve noticed a pullback from previous DEI initiatives; it feels like progress is being rolled back, and I am concerned this will affect access to adjustments and reasonable support for my colleagues and myself.”

Implications for employers include the need to reaffirm commitment to neurodiversity and inclusion, ensure policies and procedures remain protective even in politically uncertain times, and proactively communicate a culture of safety and support to employees. Organisations should recognise that broader societal shifts may exacerbate anxiety or reduce disclosure, and plan interventions accordingly.

To review the themes from survey comments in detail, you can use the headings on the next page to help you navigate to specific topics or themes that interest you. Note, we still need to complete our full analysis of the rest of the survey content, but wanted to release this early report of some content that we have managed to analyse so far.

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Adjustments Processes

Physical Environment & Sensory Safety

Core need: Workspaces that do not cause sensory overload and exhaustion.

Common issues raised

- Harsh lighting, bright light, glare (especially in winter)
- Noise, open-plan offices, lack of quiet space
- Scents, temperature variation, and lack of sensory-aware facilities management
- Hot-desking and uncertainty about where to sit
- Lack of accessible local hubs

Requested changes

- Assigned or permanent desks that can be personalised
- Less open-plan, more quiet or low-stimulation areas
- Noise reduction materials, muted colours, hearing loops
- Better-informed facilities staff
- Dedicated spaces for decompression
- Consideration of travel, public transport, and office location
- Local hubs for those who don't thrive in full-time home working

Underlying theme

If you want us in the office, make it bearable and safe for our nervous systems.

Example quote

“my biggest sensory struggles tend to be with noise and bright light. I'm able to mitigate these to a degree with sensory aids, but when I end up in an environment where both are highly overstimulating, even with sensory aids it is still very draining and there's not much that can be done besides putting me in my own secluded, dedicated office”

Flexible & Trust-Based Ways of Working

Core need: Autonomy over where, when, and how work is done.

Common issues raised

- Mandatory office attendance despite evidence it causes harm
- One-size-fits-all working patterns

- Remote working framed as a “preference” rather than an adjustment
- Office-first decisions ignoring ND data and lived experience

Requested changes

- Full flexibility to work remotely when needed
- No mandatory attendance quotas
- Recognition that different neurotypes need different setups
- Relaxed, individualised approaches to working patterns and career paths

Underlying theme

Treat us as adults who understand how we work best.

Example quote

“to not have mandatory office attendance - be free to work from home all week if i feel its best for my concentration levels for my workload that week. I find being in the office tricky when I really need to concentrate as it is so noisy and so many distractions where as at home I can focus better and get my head down.”

Reasonable Adjustments: Access, Process & Normalisation

Core need: Adjustments that are easy to access, effective, and not stigmatising.

Common issues raised

- Exhausting, adversarial adjustment processes
- Poor coordination between HR, IT, managers, and external providers
- Managers lacking understanding of ND-related needs
- Adjustments making people feel “singled out”
- Decision-makers not present in adjustment discussions
- Equipment being recommended without ND knowledge

Requested changes

- Clear, joined-up processes across departments
- Independent assessments
- Decision-makers present in adjustment meetings
- Faster, less bureaucratic approvals
- Adjustments being normalised so individuals don’t feel “different”
- Independent review of performance and absence systems (e.g. Bradford Score identified as harmful)

Underlying theme

Reasonable adjustments shouldn't require extraordinary resilience to obtain.

Example Quote

"For reasonable adjustments / different working styles to be more normalised. I have various reasonable adjustments and they do really help, but I regularly feel like the odd one out, like there is a spotlight on me, and like I am being too sensitive or demanding."

Education, Training & Shared Responsibility

Core need: Neuroinclusion as an organisational competency, not an individual burden.

Common issues raised

- ND employees expected to educate others
- Managers lacking basic understanding of ND, burnout, and double empathy
- Generic training that reinforces stereotypes
- Colleagues misinterpreting communication style as attitude or intent

Requested changes

- Mandatory ND education for people managers
- Broader neuroinclusion training for all staff
- Coaching for teams on how to work with ND colleagues
- Training that focuses on working practices, not just diagnoses
- ND involvement in designing training content

Underlying theme

Adjustments are a two-way process – not something ND people should carry alone.

Example Quote

"Better education of ND for anyone who is a people manager. It was not my responsibility to explain what burnout was while I was signed off sick or had to fight to have an absence changed from "stress/mental health" to "autistic burnout"."

Management Practice, Power & Accountability

Core need: Safe, fair, and informed management.

Common issues raised

- Bullying, harassment, and microaggressions
- Managers dismissing ND experiences

- ND employees forced to raise concerns about managers in unsafe settings
- Performance management tools penalising ND traits
- Decisions overridden after meetings

Requested changes

- Independent review of managers' decisions and conduct
- Clear accountability for bullying and harassment
- Performance systems that distinguish ND traits from "poor performance"
- Safer escalation routes
- Removal or reform of harmful metrics (e.g. Bradford Score identified as a source of harm)

Underlying theme

Neurodivergence should never make someone more vulnerable to misuse of power.

Example Quote

"Independent review of PIP's to ensure they are not symptoms of diagnosed conditions.
Independent review of Manager's decisions and whether they are doing their job properly."

Strengths-Based Role Design & Career Development

Core need: Being valued for capability, not judged against a rigid job mould.

Common issues raised

- Being forced into roles or tasks that conflict with neurotype
- Lack of recognition of ND strengths
- Career paths designed for a narrow definition of success

Requested changes

- Strengths profiling for ND employees
- Task and role design based on individual capability
- Flexible career paths
- Recognition that "can't do X" often comes with "exceptional at Y"

Underlying theme

Stop fitting people into boxes – design work around people.

Example Quote

"Instead of fitting the person into a job 'box', it would be amazing if they looked at the strengths of the individual and decided how best to use them. An ND person could complete

a strengths profile & work could be allocated to fit. There are some things that I can't do but there are others that I can do extremely well.”

Culture, Belonging & Psychological Safety

Core need: A workplace where ND people don't feel like a problem to be managed.

Common issues raised

- Feeling spotlighted or “too demanding”
- Internalised ableism and minority stress
- Organisations claiming to be ND-friendly without lived reality
- Lack of visible ND role models
- Fear of disclosure

Requested changes

- Normalisation of different working styles
- ND-specific employee groups not framed as disability-only
- Senior ND role models
- Safer disclosure practices
- Active management of microaggressions and exclusion

Underlying theme

Inclusion is about belonging, not just policies.

Example Quote

“My employer prides itself on being a neurodiversity-friendly organisation. It's not. It talks the talk but doesn't walk the walk.”

Assistive Technology & Equipment

Core need: Tools that genuinely support neurodivergent working.

Common issues raised

- Poor processes for identifying assistive tech
- Inappropriate recommendations
- Delays and approval barriers
- Guilt-inducing cost framing

Requested changes

- Clear pathways to assess and provide assistive technology
- ND-informed recommendations
- Faster approvals
- Desktop options and specialist equipment where needed

Underlying theme

“The right tools remove barriers – the wrong process creates new ones.”

Example Quote

“Having the assessment by someone who doesn't sell the equipment and not having to go through them with my line manager as he doesn't understand the difficulties I experience. It was awful and I didn't take up any of the recommendations. (They also include the cost which makes you feel bad) I selected one IT change but there was an issue getting it approved. I was offered an alternative, but I googled it and it said not recommended for people with ADHD. I said this to IT and they said the company they use suggested it.”

Diagnosis Experiences

Long, Exhausting, and Unequal Diagnostic Pathways

Core need: Timely, accessible, and fair diagnostic processes.

What people described

- Years-long NHS waiting lists
- Regional “postcode lottery”
- Services being withdrawn mid-process
- Private diagnosis as the only viable option

Example Quote

“Diagnosis is a very long process. I have been waiting for several years having come to the understanding I am neurodivergent. The process to get diagnosed for me is drawing to an end, but the process and length of time can be very confusing and therein, stressful.”

Financial Barriers & Pay-to-Access Care

Core need: Diagnosis and treatment not dependent on ability to pay.

What people described

- Private diagnosis as the only route
- Ongoing costs for medication and reviews
- Inability to afford assessment or treatment

Example quote

“Difficult to get any help or diagnosis without paying”

Late Diagnosis & Lifelong Impact

Core need: Earlier recognition and understanding to prevent cumulative harm.

What people described

- Diagnosis in 40s, 50s, or later
- Grief for “lost years”
- Reframing a lifetime of being labelled lazy, difficult, or odd

Example quote

“Diagnosed with ADHD and Autism in my 50's at the end of my career”

Validation, Relief, and Self-Understanding

Core need: Recognition that diagnosis brings meaning, not just a label.

What people described

- Diagnosis as deeply validating
- Increased self-compassion
- Making sense of lifelong experiences

Example quote

“I found diagnosis a strange thing - it felt really validating in adulthood to be able to understand why I am the way I am, and why sometimes things feel super hard compared to everyone else seemingly "breezing" on through life. I do find it a challenge to talk about though, people seem to think that ADHD diagnosis is a fad or a trend, and that "everyone has a bit of ADHD", so it can feel a bit minimising - almost as though people see your diagnosis as an attempt as an excuse, rather than a cause to understand.”

Emotional Cost, Trauma, and Harmful Experiences

Core need: Trauma-informed, respectful diagnostic practices.

What people described

- Cold, dismissive clinicians
- Gender bias
- Being forced to frame experiences as “deficits”
- Diagnosis processes causing distress

Example quote

“The men carrying out the autism diagnosis were incredibly cold, rude and patronising. I found the process very traumatic as a result and it upsets me whenever I think about it. The person diagnosing ADHD didn't believe that females could have it.”

Self-Diagnosis as Necessity (Not Preference)

Core need: Legitimate recognition of self-identification where systems fail.

What people described

- Self-diagnosis due to barriers
- Frustration at lack of credibility
- Self-diagnosis as a survival strategy

Example quote

“I had to diagnose myself with Autism and then push for testing in order to receive my formal diagnosis.”

Stigma, Fear, and Disclosure Risks

Core need: Reduction of stigma and real-world consequences of diagnosis.

What people described

- Fear of being dismissed or minimised
- Worries about migration, work, or being taken seriously
- Diagnosis seen as a “trend” or excuse

Example quote

“I have considered formal diagnosis but there is still a stigma in many ways (including certain countries not allowing you to emigrate with a diagnosis) and I don't feel that the process would necessarily benefit me. I don't need support I can't get myself and having the formal diagnosis doesn't change what I need in my personal and professional life. Self

diagnosis does come with its own issues however and many people think that it's not valid and do not take it seriously."

Diagnosis as a Gateway (or Barrier) to Support

Core need: Diagnosis to enable help, not create new obstacles.

What people described

- Diagnosis required for medication or adjustments
- Diagnosis without follow-up support
- Support disappearing once employment status changes

Example quote

"I went through formal assessment and diagnosis for ADHD but can't bring myself to do the same for Autism as I found the process challenging, from filling in forms to having to talk through experience and highlight my differences it didn't feel nice having to talk about my "deficits" in order to get a formal label and therefore access to medication for my ADHD. For Autism I know that even if I obtained a formal diagnosis there is no support or care available in my NHS trust area so there seems little point when I can get Adjustments based on my ADHD diagnosis."

Company Culture

Performative Inclusion ("Talk the Talk, Don't Walk the Walk")

Core need: Inclusion that translates into action, not branding or optics.

What people described

- DEI as a tick-box exercise
- Inclusion used for reputation rather than change
- Good policies with poor or inconsistent implementation

Example quote

"We 'talk the talk' but don't really 'walk the walk'. There is a lot of info on the intranet but it's out of date & there are often broken links. We will make reasonable adjustments to the point that it becomes inconvenient to the company, and beyond that point we are expected to get on with it."

Psychological Safety & Fear of Disclosure

Core need: Environments where being open does not result in harm, or career risk.

What people described

- Fear of being open about neurodivergence
- Disclosure backfiring
- Increased scrutiny, judgement, or exclusion after disclosure

Example quote

“I actively do not tell my team due to implicit bias and potential unwanted backlash from it.”

Bullying, Discrimination & Misuse of Power

Core need: Protection from bullying and discriminatory management practices.

What people described

- Line managers weaponising ND diagnoses
- Micromanagement
- Performance processes used punitively
- HR failing to intervene

Example quote

“My line manager and leadership are using my autism and adhd against me which has caused me a lot of distress, anxiety and needing to take time off sick for stress and depression.”

Manager Capability as the Weakest Link

Core need: Neuroinclusion competence at management and senior leadership level.

What people described

- Large gap between organisational intent and manager behaviour
- Managers dismissing ND needs
- “Manager discretion” undermining consistency

Example quote

“We have excellent policies (some of the best in the industry) but implementation can be sketchy depending on the leaders.”

ERGs and Networks Carrying the Burden

Core need: Properly resourced, supported, and valued ND networks.

What people described

- ERGs founded and run by ND employees
- Emotional labour and burnout
- Lack of senior sponsorship or organisational backing

Example quote

“I personally run all the neurodiversity awareness and networks in my company. I get some help from my immediate wellbeing colleagues, but very little from management or the company as a whole. I have presented several training sessions on ND myself and work with our internal ND community to improve education, understanding and acceptance. I am currently experiencing burn out from working excessive hours trying to support my community and also because as an ADHDER I am more likely to take on extra work compared to my peers and they just let me do more and more until I end up ill.”

Unequal Access to Adjustments & Resources

Core need: Adjustments that are real, usable, and equitably applied.

What people described

- Adjustments only granted if cheap or convenient
- Low-sensory spaces as an afterthought
- Barriers to remote or flexible working

Example quote

“It seems that request for reasonable adjustments are only if they don't cost the company anything.”

Culture Regression & External Pressure

Core need: Stability and commitment to inclusion even during change.

What people described

- DEI being deprioritised due to US politics, restructuring, or acquisitions
- Inclusion efforts rolling backwards
- Loss of “culture carriers”

Example quote

“DEI was brilliant and progressive but now it's being hushed and rapidly going backwards.”

Pockets of Safety Exist — But Are Fragile

Core need: Inclusive cultures that are systemic, not luck-based.

What people described

- Small teams or managers creating safe environments
- Fear that this support would not exist elsewhere
- Inclusion dependent on individuals, not structures

Example quote:

“As someone with a disability, I feel safe and supported at my workplace. I would actually probably be fearful to leave as I know other workplaces aren't as supportive.”

Exclusion Through “Good Intentions”

Core need: Moving beyond ignorance-based harm.

What people described

- Inclusion framed as intent rather than impact
- ND people excluded “for their own good”
- Work withheld due to assumptions about capacity

Example quote

“I feel that work is being kept away from me because my managers thinks I'll get "overwhelmed" or "flustered".”

Intersectionality Intensifies Risk

Core need: Recognition that neurodivergence does not exist in isolation.

What people described

- Compounding effects of being ND plus trans, disabled, low-paid, or marginalised
- Organisational risk management prioritised over people's safety

Example quote

"I am trans, and I have within less than a year working at my current employer seen a trans exclusionary bathroom policy come into effect. This is despite no formal government guidance or mandate to do so, My company care more about their own legal protection, and do not care that they have moved that risk onto transgender members of staff every time they go to the toilet. I worry that I will be apprehended every time I go to the toilet. This added to my neurodivergence is a nightmare."

Support for Parents and Carers of Neurodivergent Children

Parent/Carer Peer Support & Community

Core need: Connection with other parents and carers who understand lived experience.

Specific desires:

- Peer support forums or discussion groups (online and in-person)
- Opportunities to "compare notes" and share strategies
- Feeling understood and less isolated

Example quote:

"Knowing that there are people who can relate and understand the struggles of parenting a neurodivergent child can mean so much. The community feel when people open up about their experiences is immense."

Expert Guidance & Specialist Support

Core need: Access to professional expertise to guide decision-making and support.

Specific desires:

- Access to specialist neurodivergent psychologists
- Guidance on navigating education, healthcare, and social services
- Expert-led webinars, workshops, or Q&A sessions
- Support on specific conditions (ADHD, Autism, OCD, Misophonia, FASD)

Example quote:

"Practical Guidance: Step-by-step advice for navigating education, healthcare, and social

services specific to neurodivergent children. Tips on managing day-to-day challenges would be very valuable. ... Having access to expert advice would be great.”

Educational Support & Advocacy

Core need: Help parents navigate educational systems and advocate effectively.

Specific desires:

- Advice for managing EHCPs, SEN support, and school refusals
- Information on strategies schools can adopt to support ND children
- Guidance on supporting children who are late-diagnosed or undiagnosed
- Support for transitions into adulthood and employment

Example quote:

“Navigating SEN support for children is such a minefield, you may already offer this but I’m not aware – a contact point for any advice on situations, for example where support refusal from LA occurs, how to get that overturned etc... knowing how to pitch it to get the right support.”

Work-Life Balance & Flexible Employment

Core need: Flexibility to manage professional responsibilities while caring for ND children.

Specific desires:

- Flexible working arrangements for parents of ND children
- Examples or advice on how parents have balanced work and caregiving
- Career support, apprenticeships, and graduate opportunities for ND individuals

Example quote:

“Flexible working around having a child with a diagnosis. The pressure attached to being a working mother with a young child with a neurodiverse need can be a lot. I can’t physically be in the office as much as others. Whilst my line manager is great with understanding and flexibility, SLT would prefer everyone back in the office 4 days a week. I just cannot make that work if it is enforced.”

Practical Resources & Tools

Core need: Tangible materials and guidance to help parents support their children.

Specific desires:

- Guides, toolkits, and step-by-step resources for day-to-day parenting
- Tools for communication with ND children and managing emotional wellbeing

- Curated content hubs for mental health, sensory needs, and independence

Example quote:

“Practical resources – guides on navigating education systems, workplace flexibility, and mental health support. Peer support networks – opportunities to connect with other parents/carers for shared experiences and advice. ... Having these available both virtually and in-person would make a big difference.”

Awareness & Early Education

Core need: Widespread understanding of neurodivergence to reduce stigma and increase support.

Specific desires:

- Education for schools and teachers about ND conditions
- Information parents can share with schools to support children
- Raising awareness so ND needs are normalised in workplaces and society

Example quote:

“I would like to see more support and education being made available to schools or information that parents can share with schools around neurodivergence. Children are our future and not all teachers provide the necessary support and strategies to SEND children so how are the children themselves expected to understand themselves or others. ... It also needs to start at an earlier age so that by the time our children enter the workplace, neurodivergence in the workplace will be the norm and more accepted rather than questioned.”