



# Neuroinclusive Practice

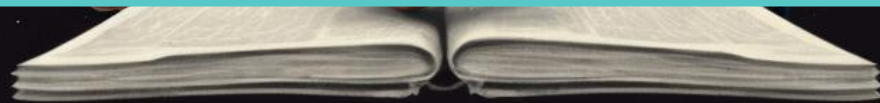


## **What we are covering**

- What is Neurodiversity?
- Prevalence
- Ableism
- Neuroinclusive Practice
- Being Trait Responsive
- Continue Learning
- Questions and Reflections



# **What is Neurodiversity?**



# Neurodiversity



**Neurotypical**



**Neurodivergent/  
Neurodiverse**

Mental Health

Irlen Syndrome

Dysgraphia

OCD

Dyspraxia

**Neurodivergent/  
Neurodiverse**

ADHD

Tourette Syndrome

Dyslexia

TBI

Intellectual Disabilities

Sensory Processing Disorders

FASD

Williams Syndrome

Dyscalculia

Downs Syndrome

Prada-Willi Syndrome

Autism

Epilepsy



## **Barriers to Diagnosis**

- Existing research
- Lower professional awareness
- Societal awareness
- Accessibility
- Diagnosis is a personal choice

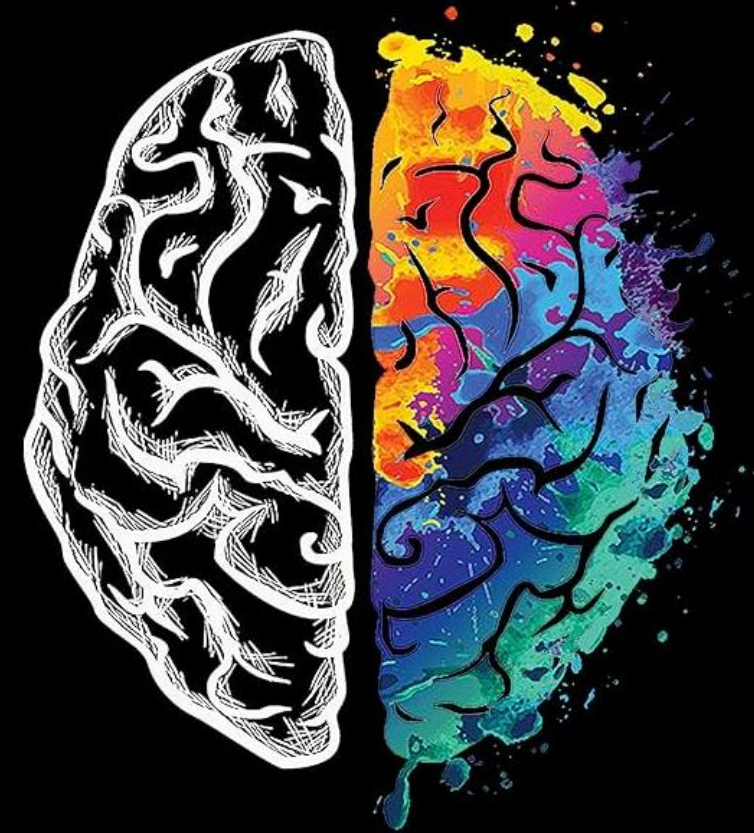
# Prevalence

Formal statistics of diagnosed people sit around 20-25%.

Research suggests 30-40% of the general population.

There is likely an **over-representation of neurodivergent people** accessing social services.

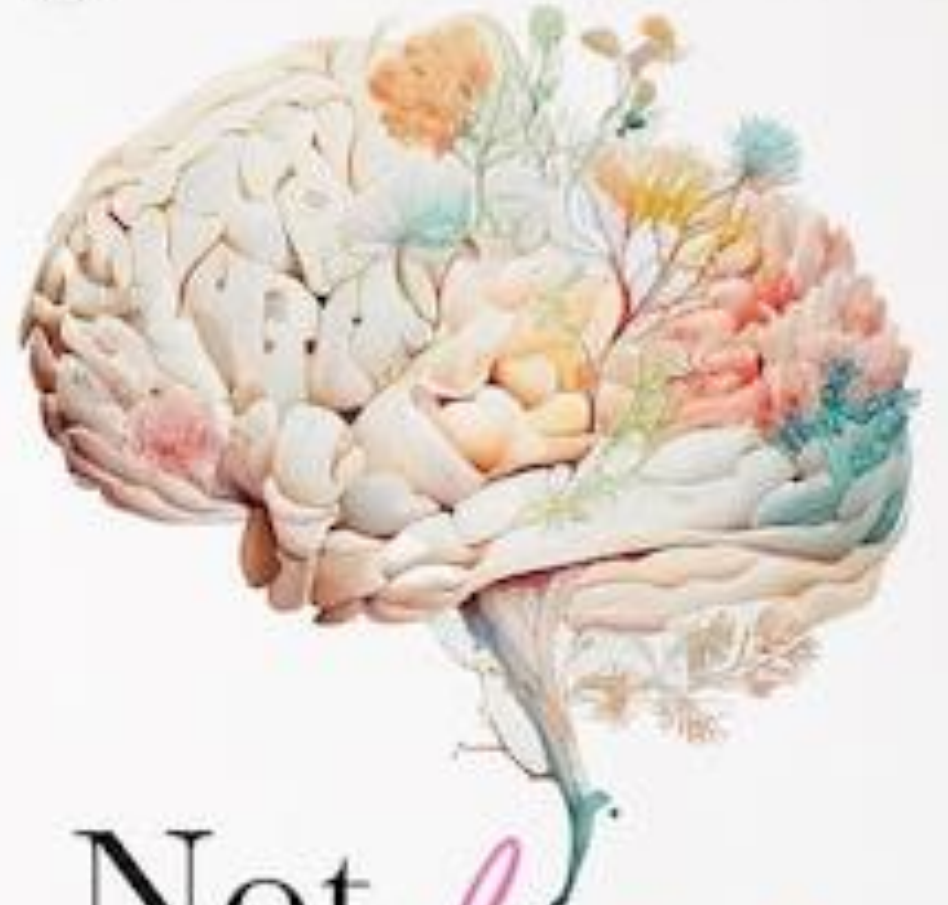
- Access to education
- Bias within our systems
- Substance use
- Co-existing conditions



**NEURODIVERSITY**

*Celebrate The Spectrum*


Just Different



Not *less*

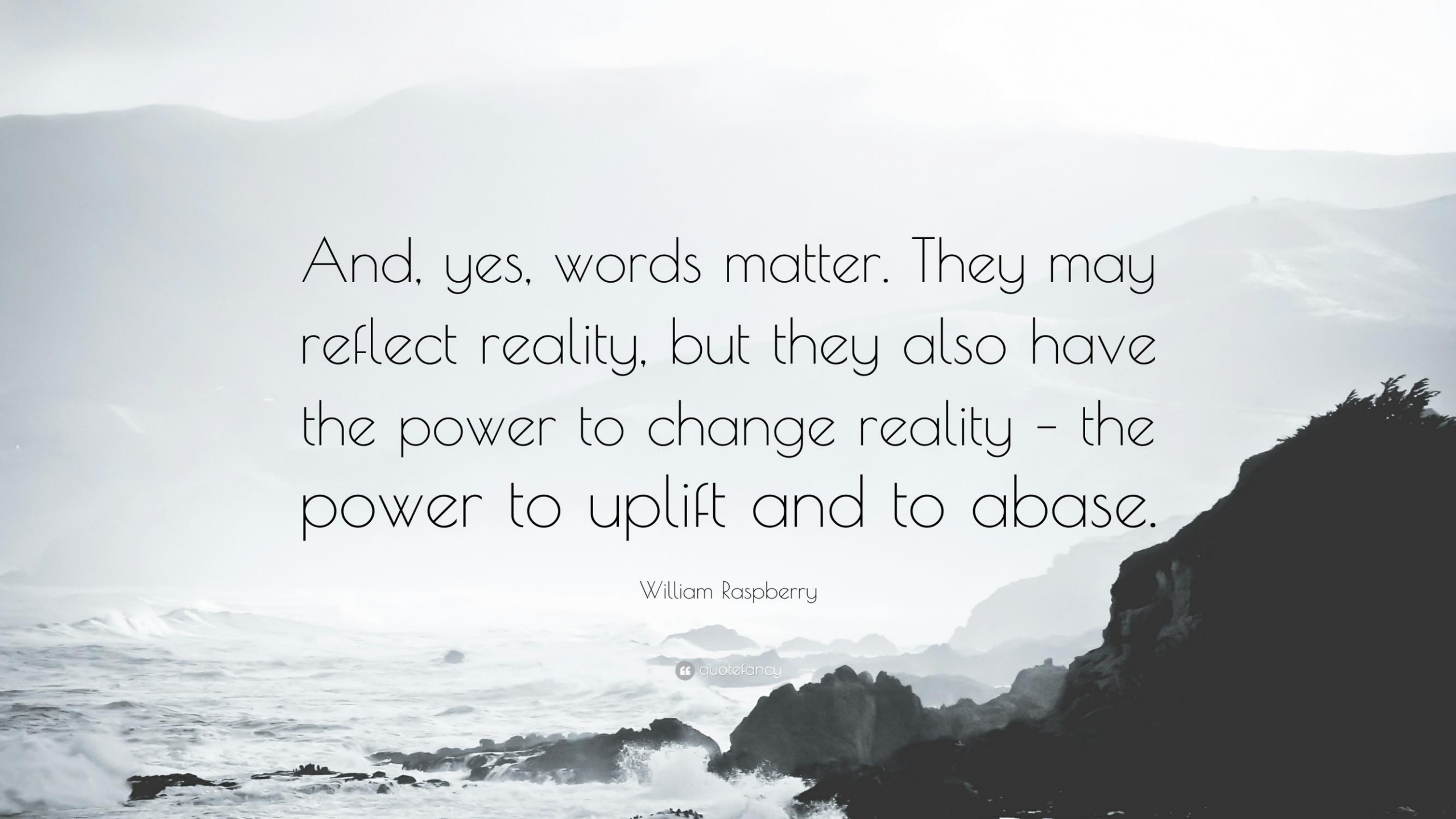
When living in a neurotypical world it is often not your diagnosis that disables you, it is society and how it is structured.





Ableism is **bias, prejudice, and discrimination towards disabled people**. It is based on the idea that disabled people are intrinsically less valuable than non-disabled people.

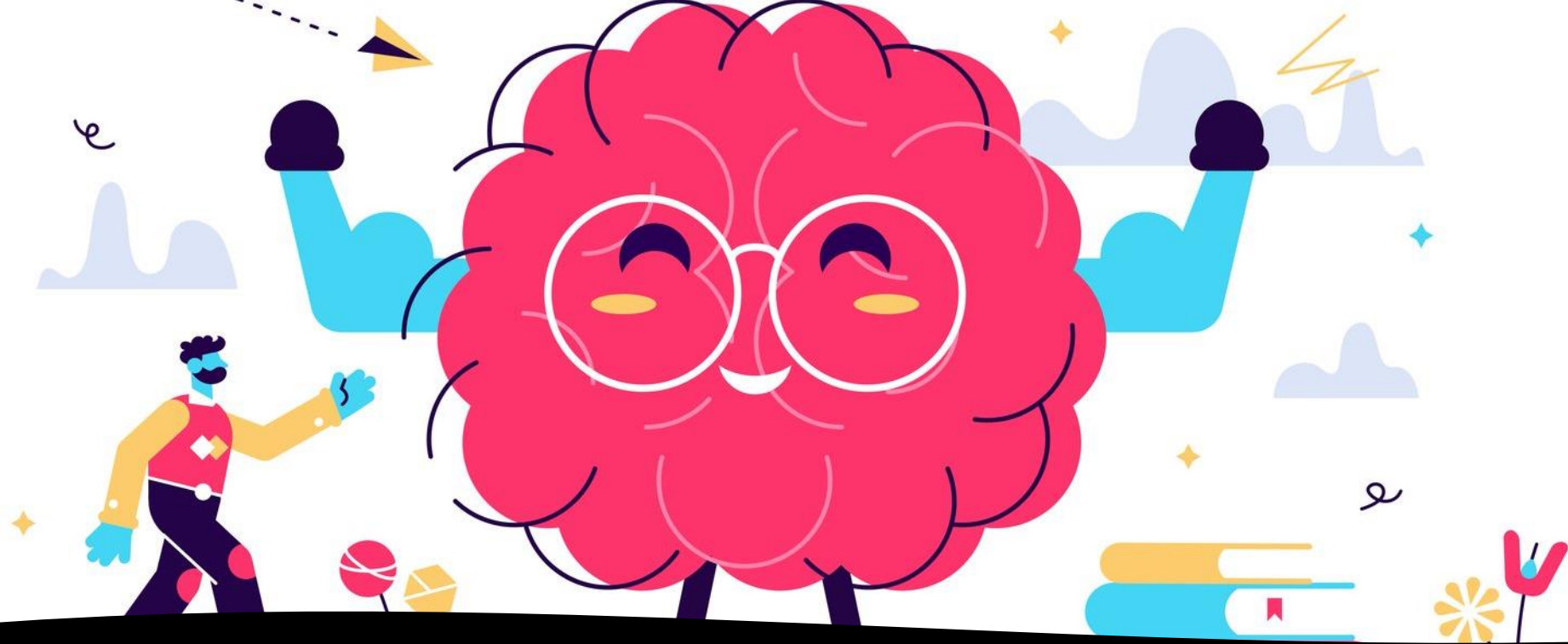




And, yes, words matter. They may reflect reality, but they also have the power to change reality - the power to uplift and to abase.

William Raspberry

quote fancy

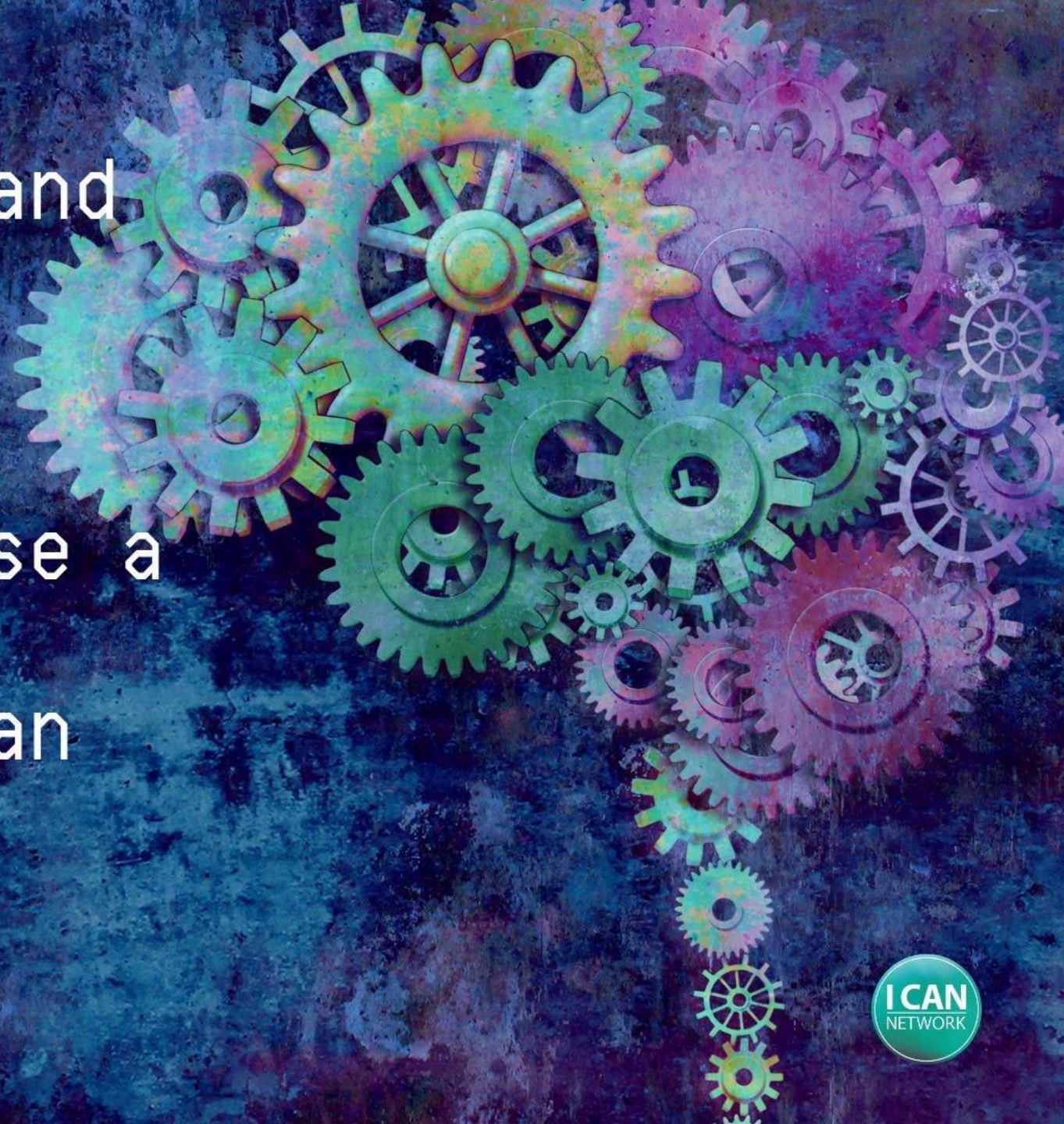


## **Common Strengths**

- Creativity
- Highly resilient
- Good problem-solving skills
- Observant and strong pattern recognition

One way to understand neurodiversity is to think in terms of human operating systems-just because a PC is not running Windows doesn't mean that it's broken.

STEVE SILBERMAN



# Neuroinclusive Practice



Neuroinclusive practice is not just the right thing to do, it is **the smart thing to do.**

- Provides a sense of inclusion, safety, and trust
- Increases engagement
- More informed decision making
- Better outcomes



If someone shares their diagnosis with you, **learn** about that diagnosis and then **ask** the person how it presents for them and **what support they might need.**





**We do not need a diagnosis or label to work better with others.**

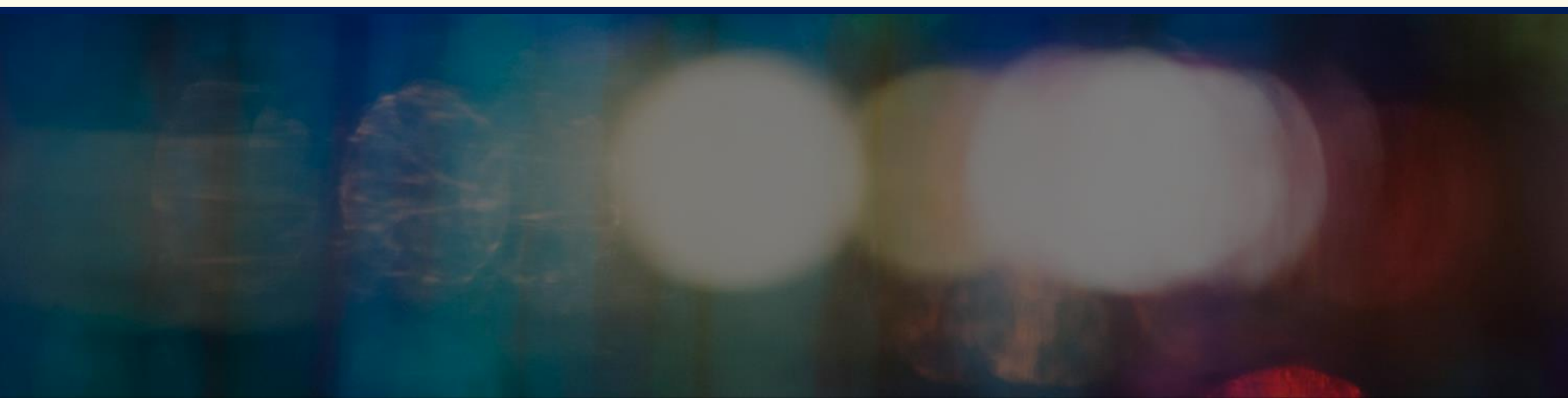






- Be mindful of the **language** we use and the environments our words create.
- Get to know people, **normalise individualised** ways of engaging with someone.
- Work to someone's **strengths**.
- Provide **feedback** when things go well.
- **Invite kōrero** about how you can best work together.
- Be responsive to the **traits or habits** you see.

**Unfocused**



## **How to be Responsive**

- Encourage and normalise fidgeting and movement within 1:1 and group settings.
- Think about the spaces we meet people.
- Be mindful of what and how we communicate.
- Take breaks.
- Allow time for people to pause and share.




# Miscommunication





## **How to be Responsive**

- Use simple, concise, accessible language.
  - Be direct and literal.
  - Be mindful of how long you are booking with someone.
  - Move at their pace, don't rush kōrero.
  - Summarise key points.
  - Provide communication in more than one way – written and verbal.
- 



# Emotive Responses





## **How to be Responsive**

- Communicate in a variety of ways.
- Let people know as soon as there is a change of routine and why.
- Allow people time to process change.
- Think about the spaces we meet people.
- Take time to explain processes.
- Check comprehension.

A close-up, slightly blurred photograph of a person's hands writing in a notebook. The person is wearing a light-colored, textured sweater. The notebook is open, and the person is holding a blue pen. The background is a wooden desk. The overall lighting is soft and natural.

# **Difficulty with Written Documents**



## **How to be Responsive - Fonts**

- Use a san serif font such as *Arial*, *Comic Sans*, *Verdana*, or *OpenDyslexic*.
- Font size should be at least 12-14 pt.
- Dark colour text on a light background.
- Avoid green and pink/red colours.

## **How to be Responsive – Emphasis**

- Do not use underlining and italics, use **bold** instead.
- Do not use BLOCK CAPITALS.
- Put borders around pages/text.
- Use visuals – images, charts, mind maps.

## **How to be Responsive – Page Layout**

- Use left justified with a ragged right edge.
- Avoid columns.
- Line spacing of 1.5.
- Avoid starting a sentence at the end of a line.
- Use bullet points and numbering rather than large blocks of text.

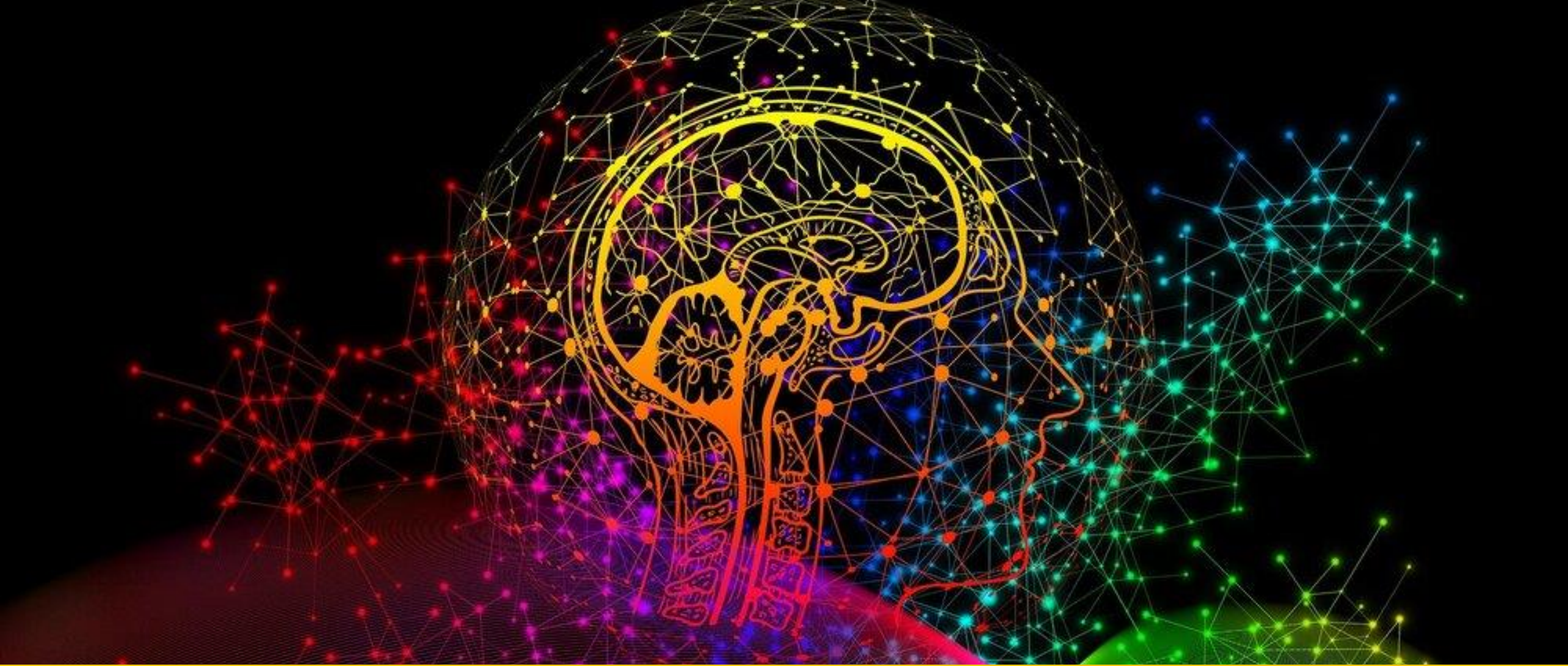
## **How to be Responsive – Writing Style**

- Use short, simple sentences.
- Give instructions clearly.
- Avoid long sentences.
- Avoid double negatives.
- Avoid abbreviations and acronyms.
- Be concise.

# Continue Learning

- Local Neurodiversity Networks
- Diversity, Equity, and Inclusion Advisers
- INDIGO – Including Neurodiversity in Government Organisations
- Follow neurodivergent advocates on LinkedIn or other social media





# Questions, Thoughts, Reflections





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