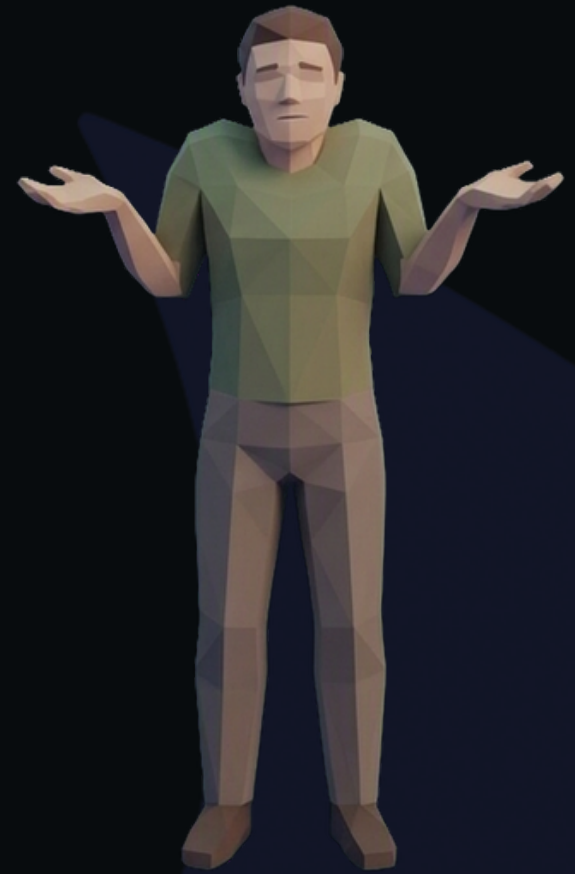


Words matter, but learning should not feel like a trap.



Using the correct terms is critical for psych safety, and therefore for neuroinclusivity. There are seemingly so many terms, and in some online spaces there can be harsh criticism for getting them wrong. This creates fear to even engage, and paralyses progress.

Some terms are foundational, and focusing on understand them goes a long way to demystifying neurodiversity.



Neurodiversity

A biological fact. Human beings are naturally diverse in their neurological makeup, which influences capabilities and experiences.

Leader's note: "Neurodiversity" applies to a collective group, not a single person. A team is neurodiverse; an individual employee is not.



Neurotypical

From the social model, individuals whose neurological development aligns with what is conventionally treated as standard or typical in the current culture.

Leader's note: "Typical" describes a cultural statistical baseline, not a superior way of thinking or working.



Neurodivergent

An individual descriptor. Individuals whose neurological development diverges from the conventional cultural baseline (e.g., Autism, ADHD, Dyslexia).

Leader's note: Refers to individual human processing. It represents dynamic arrays of strengths and needs that can be unique and comparatively inconsistent, rather than clinical symptom lists.



Neuronormative

The cultural default. Actions, values, expectations, and operational systems considered "normal" by current corporate or societal standards.

Leader's note: The invisible rules (like eye contact or unstructured 3-hour meetings with on movement) that create an unseen energy tax for divergent brains.



Neuroinclusion

The systemic practice. The deliberate design of workflows, culture, and environments to ensure all cognitive styles can contribute and flourish.

Leader's note: Inclusion is an active organisational architecture and co-designed environment, not a passive accommodation or adjustment for one person.

