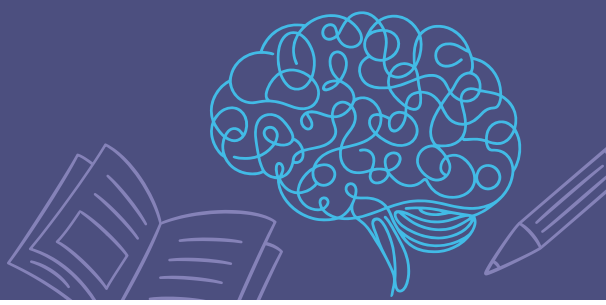
Overview



Neurodiversity refers to natural variations in the way that human brains take in, process, and respond to the world around them. There is no one better or correct way to be: all types of brains (also referred to as neurotypes) are valuable.

Neurotypical refers to a person whose brain functions in a way that aligns with society's norms and expectations.

Neuronormative refers to the socially accepted and expected neurological and cognitive functioning patterns, including how we communicate and interact with others.

Neurodivergent (or **neurominority**) refers to a person whose brain functions differently from society's norms and expectations. This difference is called **neurodivergence**. Sometimes neurodivergence is identified by diagnoses—for example, autism spectrum disorder (ASD), attention-deficit/hyperactivity disorder (ADHD), intellectual disability (ID), fetal alcohol spectrum disorder (FASD) and tic disorders (e.g., Tourette syndrome). It is important to keep in mind that while some people find that having a diagnosis is validating and can help with accessing resources, not all neurodivergent people have a diagnosis or identify with labels like these.

Neurodivergence encompasses a wide range of neurological differences in the way people think, learn and process information, which shapes **sensory processing**, **emotional regulation**, **executive functioning** and **social interactions and connections**.

Sensory processing	How people receive and respond to information from their environment, including what they see, hear, feel, smell and taste, as well as how they experience their balance (vestibular system), internal state (interoception) and body awareness (proprioception). Every individual can experience these sensations in their own way. Some may seek out certain sensations, while others may be far more sensitive and find it hard to cope in overstimulating environments. The overwhelming influx of sensory stimuli can trigger heightened emotional responses, leading to anxiety, frustration and anger. It may be challenging to find balance and regain control in the face of overwhelming sensory input.
Emotional regulation	The ability to modulate an emotion or set of emotions. *Explicit emotional regulation* involves noticing how we're feeling and using strategies—like seeing a situation from a new angle, shifting focus or accessing help—to help us respond in a way that supports our well-being. *Implicit emotional regulation* operates without deliberate monitoring. The intensity or duration of an emotional response is adjusted subconsciously and happens without our awareness.

Source: healthymindsbc.gov.bc.ca

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Executive functioning	Executive function is a set of cognitive skills. It includes working memory, problem-solving, flexible thinking and self-control (e.g., attentional, behavioural and emotional). We use these skills every day to learn, work and manage daily life. Difficulties or differences with executive function can make it hard to focus, follow directions and handle emotions, especially in environments not built for neurodivergent minds.
Social interactions and connections	*Social interactions* are the ways we act with other people and how we react to how other people are acting. *Social connections* are the relationships we have with the people around us. What is determined as age-appropriate, acceptable and positive actions/ reactions in social settings is influenced by culture and societal norms, which tend to be neuronormative and favour neurotypical behaviours, while not understanding that neurodivergent populations also have their own social and communication patterns.

Challenges that neurodivergent people experience in these domains are often a result of societal and environmental barriers. This is because attitudes, systems and physical spaces are predominantly created by and for neurotypical individuals, which perpetuate *ableism*. **Ableism** is the conscious and unconscious false belief that being neurotypical and able-bodied is superior. **Systemic ableism** refers to discrimination and bias against individuals with disabilities or diverse abilities that are embedded in societal structures, policies and practices, resulting in institutional barriers that limit full participation and equal opportunity.

Ableism's *intersection* with other systems of oppression—like colonialism, racism, sexism and classism—can create additional barriers for some neurodivergent people, leading to multiple types of marginalization. **Intersectionality** is a way to understand how different aspects of ourselves (i.e., race, class, sexual orientation, ability, etc.) intersect, overlap and are impacted by various systems of oppression.

Indigenous perspectives

In “Neurodiversity from an Indigenous Perspective,” Lexi Giizhigokee Nahwegiizhic writes:

> Neurodiversity is viewed differently between the Western World and Indigenous cultures. The Western World uses a medical model that defines traits as normal and abnormal, labelling individuals based on perceived impairments. Indigenous cultures use a strength-based model focused on gifts and talents, labelling individuals based on areas they thrive. The latter results in a society where diversity flourishes. Many Indigenous cultures share teachings on several values that guide an individual to live a good life. These values—humility, honesty, respect, courage, wisdom, love, and truth—acknowledge that all living beings are important parts of Creation, and no one is above the rest. Before the migration of Europeans to North America, Indigenous Peoples thrived on the land because of their mutual respect for life. To survive with small population sizes, the communities relied on the diversity of their people to cultivate innovation and resilience. Embracing an Indigenous perspective on neurodiversity would benefit the Western World by creating a society where individuals are celebrated for their strengths instead of being restricted by their disabilities.[1]

Mental health

Neurodivergence is not a mental health disorder. But like everyone, neurodivergent people can experience mental health difficulties. Being neurodivergent in a neurotypical world can lead to challenges that may lead to or worsen pre-existing mental health conditions, such as anxiety or depression.

Sometimes characteristics associated with conditions associated with neurodivergence, like autism, can be mistaken for symptoms of mental health conditions, which in turn can make it difficult to get the right support.

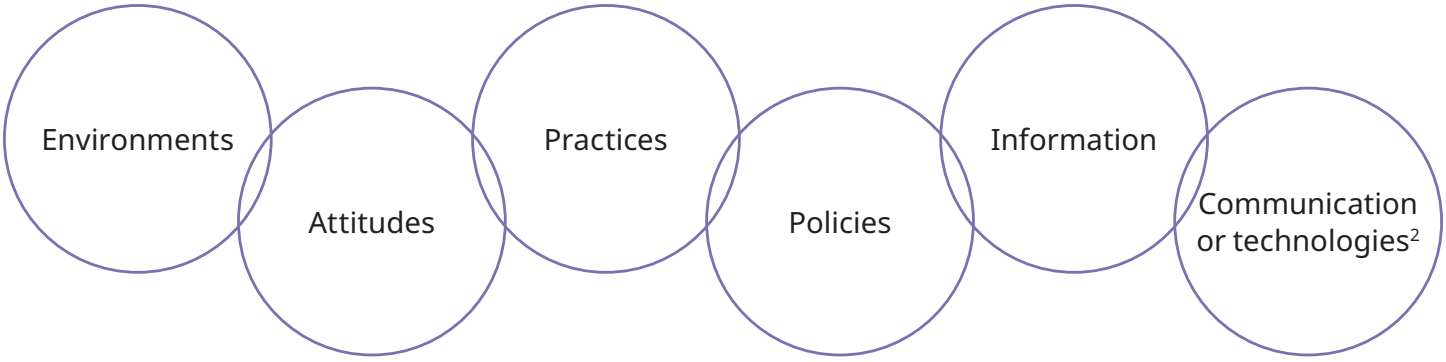
[1] L. G. Nahwegiizhic (2024), Neurodiversity from an Indigenous perspective: Honouring the Seven Grandfather’s Teachings, in J. T. Ward (Ed.), Indigenous Disability Studies (pp. 94–103), Routledge.

Lexi (Giizhigokwe) is a “two-spirited, neurodiverse Ojibwe woman from Sheguiandah First Nation in Ontario. Her traditional name is Giizhigokwe, meaning Little Sky Woman. Nahwegiizhic [...] emphasised feeling the tension between ‘both worlds’ after being recognised positively for her differences by her community growing up, then going to school where she was struggling and frustrated from masking and the Western system.”(G. Street and E. Bautista [2025, April 9], Indigenous disability studies: Towards a more holistic view of disability, Honi Soit, https://honisoit.com/2025/04/indigenous-disability-studies-towards-a-more-holistic-view-of-disability/)

Neurodivergent students and school systems

Neurodivergent students often face barriers in the school system because of stigma, negative attitudes or assumptions, environmental barriers, limited supports or accommodations, inflexible policies and practices, and other factors. This can lead to students falling behind academically, feeling anxious about attending school, or struggling with self esteem.

Barriers to accessibility fall under six categories:



Addressing these barriers requires changes at individual and system-wide levels. Accessibility in schools involves inclusion, adaptability, diversity, collaboration, self-determination and universal design for learning.[3]

[2] Accessible British Columbia Act, S.B.C. c. 19 (2021). https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/21019
[3] British Columbia School Trustees Association (2024), *Improving student outcomes for students with disabilities and diverse abilities*, 2024-Inclusion-and-Accessibility-Working-Group-Report-Final-Release.pdf