

COMMENTARY OPEN ACCESS

Neurodiversity, Gender, and Work

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1 | Introduction

Interest in neurodiversity, which encompasses variations in brain function and lifelong differences in cognition and perception (American Psychiatric Association [APA], 2013), is growing in workplace discussions. Both employers and researchers are beginning to recognize neurodiversity and neurodivergent individuals as valuable assets to organizations, offering unique strengths that can significantly benefit them (Austin and Pisano 2017; Bruyère and Colella 2022). Many organizations have launched neurodiversity programs to select, recruit, retain, and support neurodivergent workers and tap into this population (S. Hennekam and Follmer 2024). For example, in 2013, software provider Systems, Applications and Products in data processing (SAP) launched diversity program specifically for neurodivergent individuals called “Autism at Work”. SAP reports a retention rate of 90% among employees with autism. Other examples are Dell’s Neurodiversity Hiring Program that provides career readiness training and possible full time career opportunities for neurodivergent job seekers. Additionally, Splunk’s Neurodiversity Employee Resource Group that provide community and allies, offer support, mentoring, and networking opportunities.

Despite efforts to create a more inclusive workplace and to generate more opportunities in the labor market for neurodivergent individuals, little is known about the relation between neurodiversity, gender, and work. Yet, gender may play a critical role in the way neurodivergent individuals experience and navigate the workplace or labor market. In this commentary we consider neurodiversity as a gendered concept that influences how neurodevelopmental conditions are understood across

genders influencing individuals’ workplace experiences. This is important as our limited understanding of gender diversity within the neurodivergent population perpetuates inequalities and adverse experiences for these individuals.

There are many conditions formally included under the neurodiversity umbrella. These are autism spectrum conditions, attention deficit and hyperactivity disorder (ADHD), specific learning disabilities (such as dyslexia, dysgraphia, and dyscalculia), developmental coordination disorder (DCD; also called dyspraxia), and Tourette’s disorder (APA 2013). It is common for neurodevelopmental conditions to co-occur with each other (APA 2013). Others, however, adopt a broader view and argue that all neurological differences such as conditions like bipolar disorder, schizophrenia, giftedness, and epilepsy can or should be included as neurodivergence (Nelson 2021).

It has been estimated that one person out of five is neurodivergent (Centers for Disease Control and Prevention 2022; Doyle 2020). The neurodiversity paradigm positions all neurocognitive differences as natural variations that should not be pathologized (Walker 2024). It thus rejects the idea that there is a ‘normal’ or ‘healthy’ type of brain or mind or a ‘right’ style of neurocognitive functioning (Walker 2024). Although all neurocognitive conditions have different behavioral and cognitive indicators, they all relate to differences in how one perceives and experiences the world. For instance, autism is associated with differences in communication, social interaction, repetitive behaviors, and/or restricted interests (APA 2013). Attention deficit and hyperactivity disorder frequently presents in the form of inattentiveness and/or hyperactivity or impulsiveness.

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Common symptoms of learning disabilities are challenges related to reading (dyslexia), writing (dysgraphia), and numeracy (dyscalculia) but can also involve difficulties to plan and organize, stay focused, and memorize information (APA 2013). Finally, DCD impacts physical coordination and Tourette's disorder is characterized by involuntary movements and/or sounds (APA 2013). In this commentary we adopt the broad definition of neurodiversity to be inclusive of all neurological differences and community preferences for language.

In the labor market, neurodivergent individuals frequently encounter significant challenges such as difficulties with communication, sensory sensitivities, and executive functioning. These challenges can lead to misunderstandings with colleagues and employers (Longmire, Vogus, and Colella 2024) resulting in reduced job opportunities (Hennekam and Follmer *in press*). Neurodivergent individuals face high rates of unemployment and underemployment (Krzeminska et al. 2019; Ezerins et al. 2024). They often end up in jobs with fewer career development opportunities and lower salaries compared to their neurotypical counterparts (Branicki et al. 2024) and frequently encounter discrimination and negative stereotypes (Khan et al. 2023). Their workplace challenges have been framed against neurotypical norms (Patton 2019). Additionally, most research has focused on the difficulties they face in relation to their neurocognitive differences (Ali, Grabarski, and Baker 2013) positioning them as dysfunctional (Radulski 2022).

In alignment with the medical model of disability, disabilities and cognitive differences are depicted as 'problems' that need to be fixed or cured (Oliver 1990). It places the burden of one's differences on the individual and focuses on what is wrong (P. Dwyer et al. 2024). This perspective is often rejected by disabled and neurodivergent individuals themselves because it does not consider other factors that contribute to the experience of disability (P. Dwyer et al. 2024). Neurodivergent individuals can find the emphasis on receiving treatment to become more 'normal' inappropriate and offensive (P. Dwyer et al. 2024). The medical model of disability has led to a stream of critical disability scholarship in which the focus has been on oppression and social exclusion (Thomas 2006).

Rejecting what Foucault termed the "medical gaze" (O'Callaghan 2022), referring to the tendency of medical professionals to reduce individuals to their symptoms or diseases rather than recognizing their full humanity, the social model of disability takes a different approach. The social model posits that disability is the consequence of the ways society is organized, including societal attitudes and environments (Oliver 2013). Removing these barriers would enhance inclusivity and accessibility, by, for example, promoting universal design. Though it is not without its critics (Doyle 2020; P. Dwyer 2022), this perspective is more in line with the neurodiversity paradigm which is the position taken in this commentary.

The neurodiversity paradigm aims to change perceptions about neurodivergent individuals by replacing negative stereotypes about neurodivergence (Snyder, Brueggemann, and Garland-Thomson 2022). Instead, it focuses on deficits with a more balanced perspective in which the strengths and skills of neurodivergence are also recognized. The objective is to show

society that neurodivergent individuals are full members of society that bring value to organizations (P. Dwyer et al. 2024). These objectives align with the goals of the disability rights movement that equally aimed to enhance inclusion and representation while debunking negative preconceived ideas.

The neurodiversity paradigm accounts for intersectionality in that the dynamics that co-exist with neurodivergence include aspects such as gender, class, or ethnicity (Sang, Richards, and Marks 2016; Dobusch 2021; Snyder, Brueggemann, and Garland-Thomson 2022). Gottardello (2023) states that individuals with multiple and partly marginalized identities often face compounded discrimination in organizations that hinders career advancement and workplace inclusion. In this context, the research conducted by Sang, Richards, and Marks (2016) on gender and disability in masculine work environments is pertinent as it shifts the focus from individual impairment to social structures and relations and explains how these shape experiences of concerned individuals.

The neurodiversity paradigm accounts for these intersectional experiences. Aligned with the neurodiversity affirming movement we wish to stress the positive aspects of neurodivergence, while we concomitantly acknowledge the challenges neurodivergent individuals experience in the context of work (Nocon, Roestorf, and Menéndez 2022). Indeed, many neurocognitive differences have been associated with positive attributes. Examples are detail orientation and pattern recognition, creativity, critical thinking, entrepreneurialism, and problem solving (Krzeminska et al. 2019; Wiklund, Patzelt, and Dimov 2016). However, scholars also warn for the creation of stereotypes and the stigma for neurodivergent individuals who do not fit these stereotypes (Odegard and Dye 2024).

Despite efforts to create a more inclusive workplace and to generate more opportunities for neurodivergent individuals, little is known about the relationship between neurodiversity, gender, and work. Yet, gender may play a critical role in the above-mentioned experiences and challenges in the workplace or labor market (Hayward, Stokes, and McVilly 2022). For example, neurodivergent women may face additional biases related to gendered societal expectations and stereotypes regarding femininity, which can hinder their career advancement compared to neurodivergent men (Mo, Viljoen, and Sharma 2022). The current commentary seeks to promote research that enhances our understanding of the intersection between neurodivergence and gender, aiming to foster inclusive workplaces that cater to diverse needs.

Below, we consider that neurodivergence is a gendered concept shaped by gender biases and societal norms. We then outline several key issues or factors related to the gendered nature of neurodivergence. This commentary concludes with avenues to spur research in this area.

1.1 | Neurodivergence as a Gendered Concept

In this commentary we consider that neurodivergence is a gendered concept, which reflects in a complex interplay of

biological, social, and cultural factors that influence how neurodevelopmental conditions are understood across genders. In the following, we outline some factors that lead to and sustain the lack of comprehension of gender diversity in neurodivergence which limits our understanding of gendered workplace experiences of neurodivergent individuals.

1.1.1 | Gender-Biased Diagnostic Tools

Although about 15%–20% of the population is neurodivergent (CDCP 2022; Doyle 2020), significant gender disparities exist which tends to favor greater male identification and diagnoses. For example, ADHD is diagnosed more frequently in males than females, with a male-to-female ratio of approximately 3:1 (Hinshaw et al. 2022). The ratio of men to women diagnosed with ADHD in adulthood, however, is much closer to 1:1 (Hinshaw et al. 2022). With regards to ASCs, data reveal a male-to-female ratio of 3.8:1 among children (Maenner 2023) although the diagnostic gender gap is reducing (Russell et al. 2022). Tourette's disorder has a male-to-female ratio of approximately 3:1 (Garris and Quigg 2021) with females experiencing increased complexity of symptoms and greater tic severity as they age (Baizabal-Carvalho and Jankovic 2023). Equally, ratios regarding diagnosed learning disabilities reveal great discrepancies between boys and girls (Arnett et al. 2017) with boys being diagnosed two to five times more frequently (Daniel and Wang 2023). Research has identified reasons for gender differences in the diagnosis of neurodevelopmental conditions, such as different presentations of symptoms in males and females (Baizabal-Carvalho and Jankovic 2023).

Indeed, diagnostic criteria for many neurodevelopmental conditions have been developed using the presentation of these conditions in males which does not always correspond to the way these conditions present in women (Slobodin and Davidovitch 2019; Littman and Wagenberg 2023) or gender-diverse individuals (Adamou, Johnson, and Alty 2018) leading to underdiagnosis and misdiagnosis. Another reason is referral bias as teachers and clinicians refer boys more often for evaluation due to their more noticeable and socially disruptive behaviors (Slobodin and Davidovitch 2019).

Women often conceal their difficulties and are more likely to have internalized symptoms such as anxiety (Garris and Quigg 2021). Coping strategies may also be gendered, with masking and camouflaging possibly being used more frequently by girls and women, which serve to cover up symptoms and can delay diagnosis (Littman and Wagenberg 2023; Slobodin and Davidovitch 2019).

1.1.2 | Neurosexism and Gendered Ableist/Neurotypical Norms

Neurosexism essentially claims that inert and fixed differences exist between male and female brains that are associated with variations in empathy, language processing, and spatial thinking (Rippon 2016). This perpetuates gendered stereotypes that justify unfavorable differences between men and women and

therefore women's 'unsuitability' for certain roles (Fine 2010). Neurodivergent women may not conform to gendered societal expectations and norms, while simultaneously not complying with prevailing ableist norms. Consequently, they may face persisting struggles for acceptance, workplace discrimination, and misogyny in the sense that they are punished for perceived violations of patriarchal norms and expectations (Manne 2017). It has been argued that being male and autistic is closer to being male and neurotypical than it is for women (Moore et al. 2022). "It's probably harder for girls with Asperger's in a way [...] being a boy with Asperger's you're probably more similar to neurotypical boys whereas an Asperger's girl is different to neurotypical girls" (Tierney, Burns, and Kilbey 2016, p. 77). Similarly, a restless boy who moves a lot is socially more acceptable than a girl behaving in the exact same way. These gendered expectations are deeply ingrained in society and often internalized by its members. In addition, ableist discourses delegitimize gender diversity as they tend to draw on the medical model of disability and therefore put the focus on the deficits and challenges neurodivergent individuals experience, essentially delegitimizing individuals who self-identify as gender non-conforming (Toft, Franklin, and Langley 2020). This also impacts how women and gender-diverse individuals cope with their neurodivergent conditions and perform their gender identities. For instance, some women are more likely to downplay or hide their neurocognitive features to appear neurotypical. Gender-diverse individuals also engaged in a discussion about 'passing' to describe similar strategies (Miller, Nachman, and Wynn 2020). Neurosexism and the derived gendered norms of how men and women are supposed to behave thus seem to incite women to conceal the characteristics of their condition(s) that are socially associated with masculinity. While this helps them to go unnoticed, it simultaneously can prevent them from obtaining workplace accommodations.

1.1.3 | The Intersection of Gender Diversity and Neurodiversity

Many neurodivergent individuals also express diverse gender identities (Gratton et al. 2023). These individuals transgress not only ableist or neurotypical norms, but also gender norms. Research shows that neurodivergent individuals might experience pressure to adhere to neurotypical behavioral standards, resulting in stress and anxiety (Hennekam, Kulkarni, and Beatty 2024). This pressure might be especially pronounced for women and non-binary individuals who often contend with additional societal expectations related to their behavior and roles. Indeed, neurodivergent individuals within Lesbian, Gay, Bisexual, Transgender, Queer and other identities communities accumulate challenges as they already face social marginalization and stigma (Barnett 2024). For example, vulnerability to bullying and harassment (Sandberg, Rosqvist, and Grigorovich 2021), which can engender feelings of social isolation and misconception (Walker 2021) as well as mental health issues (Maroney and Horne 2022). Walker (2021) considers that both neurodiversity and gender diversity should be seen as a spectrum, requiring analytical approaches that transcend traditional binary definitions. In this context, the term "neuroqueer" (Yergeau 2018) emerged through discussions in neurodiversity

spaces. Neuroqueer serves as both a verb to describe the act of subverting neuro-normativity and heteronormativity, an adjective to characterize related concepts and practices, and as a social identity label for individuals whose identities are shaped by these intersections (Walker 2021). There is some evidence that compared to the general population for some conditions under the neurodiversity umbrella, such as ADHD and autism, these conditions are more prevalent in gender non-conforming individuals (Hayward et al. 2024; Thrower et al. 2020). Yet, we understand little about how neurodevelopmental conditions affect individuals across the gender spectrum. Hayward, McVilly, and Stokes (2020 2024) acknowledged that more research is needed to understand the experiences of neurodivergent people outside the gender binary of men and women. Acknowledging the existence of and greater understanding of these co-occurrences is paramount in providing tailored psychosocial support (Bölte et al. 2023).

1.1.4 | Stereotypical Representations of Neurodiversity

Common misconceptions assume similarity among neurodivergent individuals in terms behavior, experiences, and talents (Brown and Fisher 2023). For example, dyslexic people are often assumed to have difficulty reading. It is less common to associate dyslexia with executive functioning challenges such as forgetfulness and disorganization (Macdonald 2010). Similarly, the hyperactive/impulsive type of ADHD conforms to the stereotype people have of the condition, while the inattentive type is more easily overlooked (Fresson et al. 2019). Stereotypical portrayals of neurodivergent conditions in films, series, and books reinforce limited and often inaccurate ideas, contributing to the stigma that individuals with these conditions are socially awkward or incapable (Aspler, Harding, and Cascio 2022). There are also very narrow perspectives that often emphasize certain traits while ignoring challenges or other strengths such as genius-level intellect (Loftis 2015).

1.2 | Where to Go From Here

Neurodivergent gender-diverse individuals may have unique needs at work (Gore et al. 2024; Hayward et al. 2024). Yet, this is an overlooked yet crucial topic for both gender and disability scholars (Craddock 2024; Hayward, McVilly, and Stokes 2019). While Gender Work and Organization has a long history of publishing the accounts of individuals with multiple marginalized social identities or other forms of disadvantage (e.g. Abdellatif 2021; S. Hennekam and Dumazert 2023), the intersection of neurodivergence and gender has not yet received adequate attention. While not exhaustive or exclusive, we propose several potential research areas for further exploration in Gender, Work, and Organization.

1. The co-occurrence of neurodivergence as well as its intersection with other marginalized or stigmatized attributes or identities. Research could investigate how multiple forms of neurodivergence intersect with other marginalized identities such as class (Hennekam, Kulkarni, and Beatty 2024)

and ethnicity (Lewis and Arday 2023). Understanding these intersections can illuminate the unique experiences of individuals who navigate both neurodivergent and gender-diverse identities in the workplace.

2. Alternative methodologies for inclusive research. There is a pressing need for different methodologies to tap into other forms of knowledge that do not necessarily comply with academic ways of perceiving, interpreting and describing experiences that embrace diverse ways of knowing. More specifically, neuroinclusive research methods that build on participative research principles and actionable research outcomes that benefit the neurodivergent and gender-diverse communities are needed. Examples include collaborative autoethnographies of neurodivergent individuals or diary studies. Collaboration *with* rather than *on* neurodivergent individuals can empower this population.
3. Contextually sensitive research in understudied areas in the world. Investigating how different cultures perceive neurodiversity and gender can provide valuable insights into the diverse experiences of individuals globally. For example, many cultures recognize more than two genders, such as the Hijra, a non-binary identity in India or the Muxe community in Mexico who have male sexual characteristics but identify in a variety of ways along the gender continuum (Gonzalez-Salzberg and Perisanidi 2021). Additionally, in Samoa, there are widely socially accepted fa'afafine and fa'atama. The former referring to males who do not identify as men and are another gender distinct from men and women, but they express femineity (Vasey and VanderLaan 2021). Their female counterpart, fa'atama are females who express masculinity (Treagus and Enari 2024). Similarly, neurodivergence is perceived in different ways across the globe. More specifically, in some African countries, neurocognitive differences are seen as a curse, witchcraft, or as being possessed by an evil spirit (Baloyi et al. 2024). These cultural and religious contexts influence the experiences neurodivergent individuals undergo and merit more attention to tailor interventions and support mechanisms.
4. Understanding gender expression through neurodivergent lenses. Neurodivergent gender-diverse individuals are a unique population who could enhance our understanding of the socially constructed nature of gender. Especially autistic individuals who may perceive the pressure of social norms and codes differently or feel unable or unwilling to comply with them (Peachey and Crane 2024). Consequently, they may feel less restraint in terms of their gender expression or identity. They may perceive gender identity in non-neurotypical ways that could shed more light on its fluid, non-binary, and socially constructed nature.
5. Addressing stereotypes and stigmas in the workplace. The stereotypes surrounding neurodivergence often lead to discrimination and hinder career advancement. Research could focus on how these stereotypes specifically affect women and gender-diverse individuals.

We urge scholars and practitioners to address these critical issues at the intersection of neurodiversity and gender. By exploring

these areas, we can advance our understanding and create more inclusive workplaces that recognize and celebrate diversity.

Data Availability Statement

Data availability statement will be available upon request from author.

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