

Neurodivergent Conditions in Adults

Introduction

The measures we take to value neurodiversity will benefit everyone:

‘Valuing neurodiversity has the potential to create stronger and wiser communities and positive social values.’¹

Increasingly, adults are consulting with primary healthcare clinicians about neuro-divergent conditions with some raising concerns that their condition has been missed since childhood. Some of these conditions include autism and Attention Deficit Hyperactivity Disorder (ADHD). A few are concerned that an earlier diagnosis would have given them greater benefit: allowing them to be better understood by family, friends and employers. Commonly, these people are referred onwards to mental health services such as psychology. Currently, these services have very long waiting times for initial assessment. Neurodiversity is the natural variability found within human brains and understanding this diversity is important on many levels, including:¹

- human rights
- equity and social justice
- respect for difference
- person and family centred care

[Expert reviewer’s comments: Neurodivergent conditions is a more accurate term than neurodiverse conditions. This is a common misuse of the term. Neurodiversity includes everybody: neurodivergent and neurotypical. “Neurodiverse” should not be used as a synonym for disabled, or for any of the particular conditions commonly associated. An individual should not be referred to as neurodiverse, nor can a person “have neurodiversity”, or be “diagnosed with neurodiversity”. These are all common misunderstandings of the basic principles of neurodiversity.]

Module aims:

- raise awareness of definitions and terminology around neurodivergent conditions
- appreciate their impact on life, work and health
- provide support and resources to patients while waiting for assessment and diagnosis
- consider reasonable adjustments in primary healthcare clinical areas
- raise awareness of communication preferences
- improve consultation skills and understand other’s perspective
- knowledge of diagnostic tests in primary healthcare
- referral criteria: the evidence required and managing overlap between autism and ADHD
- private referrals: their reliability and connecting back in with NHS
- shared care agreements: especially around the monitoring of medicines