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Valuing Neurodiversity on Campus: Perspectives and Priorities of Neurodivergent Students, Faculty, and Professional Staff

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Colleges and universities are broadening their social inclusion reach and increasingly recognizing the importance of valuing neurodivergent students, faculty, and staff. Holding the understanding that neurodiversity is valuable to society, we gathered perspectives around neurodiversity from students, faculty, and staff on our university and affiliated campuses via a mixed method sequential two-phase study. First, a neurodiversity survey was used to gather campus perspectives around neurodiversity and neurodiversity culture. A total of 254 neurodivergent participants completed the survey. Next, focus groups and interviews were designed to expand upon and increase reliability of initial survey data. Eight neurodivergent campus community members participated in follow-up focus groups and/or interviews. Specific research questions included: What are the perspectives of neurodivergent university students, faculty, and staff around neurodiversity? How does the university currently value and support neurodivergent students, faculty, and staff? What are suggestions for improvement around valuing and supporting neurodiversity on campus? Findings include four emerging participant priorities to (a) expand mental health supports; (b) provide faculty training and professional development around neurodiversity and universal design for learning; (c) center neurodiversity in diversity and equity initiatives; and (d) expand neurodiversity specific supports.

Keywords: neurodiversity, university, culture, autism, universal design

Historically, colleges and universities have limited the access and inclusion of people with disability labels including autism, attention-deficit/hyperactivity disorder (ADHD), dyslexia, and Tourette syndrome, and students who do attend college have reported experiencing disability-related prejudice and stigma (Dwyer et al., 2023). Although all neurodivergent people do not identify as disabled (Walker, 2021), issues faced by disabled and neurodivergent students, faculty, and staff in higher education often align (den Houting, 2019; Hughes, 2016). Compounding the postsecondary education access barriers faced by disabled students, disability is routinely left out of university (Scheef et al., 2020) and employment (Williams & Hagood, 2019) diversity, equity, and inclusion (DEI) initiatives. Researchers and self-advocates have reported upon the exclusion of neurodivergent students from higher

education, social justice initiatives, and higher education research (e.g., see Hughes, 2016).

In a postpandemic world as we strive to overcome systemic racism and new COVID variants, we are also broadening our understanding of diversity, access, and inclusion (Cassidy et al., 2020). Correspondingly, universities worldwide are broadening their social inclusion reach. University administration and community members are increasingly recognizing the importance of creating equitable opportunities for neurodivergent students, faculty, and staff. This includes advocating for the centering of neurodiversity in college campus DEI initiatives (Kuder et al., 2021). With leadership from university DEI groups and autistic self-advocates, initiatives to value neurodiversity are emerging along with the call to establish neurodiversity and disability cultural centers (Chiang, 2020; Dwyer et al., 2023).

The Neurodiversity Paradigm

The neurodiversity movement reframes neurocognitive differences as diversity and provides a paradigm shift to understanding that different ways of thinking and behaving are natural variations of being human (see Kapp, 2020). As members of a university neurodiversity taskforce, we recognize neurodiversity as the full range of variations in cognition, learning, behaving, and interacting that exists among individuals. We approach the present study through the conceptual framework of the neurodiversity paradigm, embracing the perspective that neurodivergence is valuable (Walker, 2021). Valuing neurodiversity from a strengths perspective has the potential to alleviate inequities inherent in educational systems solely reliant on deficit-focused need models (Gobbo & Shmulsky, 2019). Neurodivergence

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is not exclusionary and students who are autistic, ADHD, dyslexic, experience mental health conditions, and so forth are increasingly attending college (Dwyer et al., 2023). For this article, we focused broadly on neurodivergent identity and used identity first language in alignment with the preference of self-advocates and the neurodiversity paradigm. We recognize it is a personal choice and often a sign of pride to identify as neurodivergent. Following, we provide an overview of neurodiversity in higher education, barriers to college success, and initiatives to support the valuing of neurodiversity in higher education.

Neurodiversity in Higher Education

The research literature remains limited in the area of neurodiversity and higher education (Anderson et al., 2017; Cox et al., 2021; Gelbar et al., 2014), with publications dispersed across the special education, psychology, higher education, and autism specific journals. With the aims of increasing postsecondary access, understanding barriers, and developing inclusive postsecondary initiatives, research is increasingly considering the first-hand experiences of neurodivergent people (e.g., Accardo et al., 2019; Cox et al., 2021; Dwyer et al., 2023; Gillespie-Lynch et al., 2017; McLeod et al., 2019; Peña et al., 2016). Much of the extant research is focused on understanding barriers to college success.

Barriers

Research teams have identified commonly reported barriers to the academic success of neurodivergent college students. Barriers include weaknesses in executive functioning skills such as time management and organization, as well as inadequate study skills and unexpected high demands on information processing including reading (e.g., Jansen et al., 2017; Kuder et al., 2021; Nuske et al., 2019; Van Hees et al., 2015). Unfortunately, typical academic accommodations such as increased time on tests are reported to not meet the unique needs of many neurodivergent students who report benefit from individualized supports and relationships forged with supportive faculty and staff (Cox et al., 2021; Sarrett, 2018).

Research teams have likewise identified commonly reported barriers to the nonacademic success of neurodivergent college students. Barriers include sensory processing, less structured daily schedules, differences in communication, and lack of social contacts (e.g., Jansen et al., 2017; Kuder et al., 2021; Nuske et al., 2019; Van Hees et al., 2015). Of utmost concern, neurodivergent students in higher education have reported facing the barrier of stigma and bias (Dwyer et al., 2023). Stigma has been linked to student hesitancy disclosing disability labels (Bolourian et al., 2018; Van Hees et al., 2015) and to the common practice of masking/camouflaging neurodivergent characteristics. This is troubling as neurodivergent college students experience heightened incidences of mental health conditions including anxiety and depression (Gelbar et al., 2014; Kuder et al., 2020; Van Hees et al., 2015), and masking has been found to exacerbate mental health conditions (Scheerer et al., 2020).

Neurodivergent faculty and staff also face barriers in higher education. Findings from a narrative review of articles on the lived experiences of higher education faculty and staff include career satisfaction and supportive environments, yet also troubling reports of ableism, stigma and discrimination following disclosure of neurodivergence (Mellifont, 2023). While faculty and staff may be

increasingly aware of the stigma that comes with disclosure, Price et al. (2017) found that faculty and staff with mental health conditions were primarily unaware of the accommodations available to them and felt that it would be too risky to ask for environmental support that may benefit them, such as natural lighting, access to quiet spaces, and options for flexible scheduling. Mellifont (2023) identified barriers to success for neurodivergent faculty and staff as disability stigma, avoiding disclosure of disabilities to employers, workplaces that are unwelcoming to neurodivergent staff, and neurodivergent contributions to the academy controlled by neurotypical faculty.

Despite holding employable talents and skills, up to 80% of neurodivergent people remain unemployed (Austin & Pisano, 2017). Valuing neurodiversity from a strength-based perspective is essential for college students as well as faculty and staff, as neurodivergent people face discrimination and hostility in workspaces which do not recognize their talents or provide adequate accommodations (Robertson, 2009). While limited, the literature on neurodiversity and higher education faculty and staff suggests that increased initiatives aimed at improving the experiences of neurodivergent students on campus should also include initiatives for neurodivergent faculty and staff.

Diversity Initiatives

Neurodiversity specific initiatives on campus are vital for decreasing barriers and improving the experiences of neurodivergent students. For example, researchers have found that neurodiversity specific initiatives can support students in transitioning to changing routines inherent in college life (Jansen et al., 2017; Kuder et al., 2021; Van Hees et al., 2015). There is some evidence that university-wide initiatives may reduce barriers for students, faculty, and staff. Wilke et al. (2019) found that disabled students in higher education have benefited from accessible and flexible options, from using accommodations, and from faculty and staff's understanding of disability. An important component of the initiatives was professional development for staff around disability and issues of campus access on a broad scale. Similarly, Cox et al. (2017) identified several potential university initiatives to support disabled and/or neurodivergent students, including offering more than just formal disability accommodations, staffing an ample number of mental health counselors, and incorporating universal design into the institutional culture and practice, for example, through the offering of single living options, peer mentors, and support with social engagement opportunities on campus.

The concept of universal design stems from the field of architecture and emphasizes planning for the natural diversity of people when designing buildings and environments (Mace, 1997). Building on the concept of universal design, universal design for learning (UDL) was developed by Meyer and Rose in the 1990s and provides a framework to minimize barriers in education and to universally support the learning of all students (Rose & Meyer, 2002). The Higher Education Opportunity Act (2008) endorsed UDL, bridging the focus on developing accessible learning opportunities from K–12 education settings to higher education. Despite decades of endorsements, universal design is not yet widespread in higher education; however, universally designing university spaces and courses has been reported as beneficial for supporting postsecondary students with disability labels (e.g., Burgstahler & Russo-Gleicher, 2015) as well as students of color (e.g., Fritzgerald, 2020).

The framework of universal design/UDL may be a promising diversity affirming initiative for higher education as it supports student responsiveness and values the growing diversity on today's university campuses.

University initiatives which include engagement in a critique of how disability is constructed and viewed may also lead to greater empowerment for disabled campus members. Peña et al. (2016) reported a critical disability lens can challenge the construction of disability as a list of individual impairments and deficits, leading to the valuing of neurodiversity, an aim of the present study. In addition, Peña et al. (2020) recommended the use of a community-based, participatory research approach in program design to be vital for autistic campus members, noting participation in the planning and assessment process helps to ensure that university initiatives provide real benefits for those they are meant to serve and emphasizing the importance of valuing the voices of disabled and/or neurodivergent campus community members. This study builds on existing research by valuing the voices of our neurodivergent campus community members.

Purpose

Through the lens of the neurodiversity paradigm and holding the understanding that neurodiversity is valuable to society, we recognized the need to gather the perspectives and priorities around neurodiversity on our university and affiliated campuses. Gathering information from the neurodivergent community is essential to prioritizing and valuing neurodiversity culture on campus; to meeting the support needs of neurodivergent students, staff, and faculty; and to glean implications for systems of higher education in relation to disability and diversity.

A neurodiversity survey was developed to gather information about campus perspectives around neurodiversity and neurodiversity culture from both neurodivergent and neurotypical members of our campus community. Valuing and prioritizing neurodivergent students, faculty, and staff, the present study reports upon the perspectives of neurodivergent campus community members. Specific research questions follow:

1. What are the perspectives of neurodivergent university students, faculty, and staff around neurodiversity?
2. How does the university currently value and support neurodivergent students, faculty, and staff?
3. What are suggestions for improvement around valuing and supporting neurodiversity on campus?

Method

A university taskforce with expertise in neurodiversity was established through the university division of DEI with a goal of understanding campus priorities and perspectives around neurodiversity. The taskforce met bimonthly over one academic year, discussed topics pertinent to neurodiversity on campus, and developed and conducted an exploratory sequential mixed methods two-phase study: (a) a nonexperimental neurodiversity survey and (b) qualitative follow-up focus groups and interviews with neurodivergent faculty, staff, and students. Guided by survey responses, semistructured interviews and focus groups were designed to expand upon and increase reliability of initial survey data (Teddle & Tashakkori, 2009)

and to allow for probing of information based on survey data (Merriam & Tisdell, 2016).

Data Sources: The Neurodiversity Survey, Focus Groups, and Interviews

Our data sources included an online survey distributed across multiple campuses affiliated with one university in the Northeastern United States and focus groups/interviews held with interested survey participants.

Neurodiversity Survey

The neurodiversity survey was developed with three parts: (a) demographic questions, (b) Likert-scale questions, and (c) open-ended questions. The demographic questions gathered participant neurodiversity identity, disability identity, role on campus, college/department affiliation, race/ethnicity, gender identity, and age.

The Likert-scale questions asked students, faculty, and staff about their level of familiarity with neurodiversity, recognition of neurodiversity on campus, observation or experiences of inequities, accessibility on campus, teaching and learning supports, and available accommodations. Faculty were asked about the accommodations they provided for their students in the classroom as well as their preferred teaching and meeting modes, while students were asked about their preferred instructional methods and aspects of classroom design. All participants were also asked about their satisfaction with their social involvement on campus, accommodations and supports, and with campus culture. Finally, faculty, staff, and students were asked if training on neurodiversity would benefit them and if they were comfortable identifying and preferred identifying as neurodivergent.

The neurodiversity survey included six open-ended questions: (a) What does neurodiversity mean to you? (b) What are ways our university supports our neurodivergent student body? (c) What are ways we can improve the university experience for neurodivergent students? (d) What are spaces you may have seen neurodiversity discussed? (e) Did our provided resources and supports impact your decision to come to our university? (f) What ideas do you have for bringing neurodiversity-related expertise and initiatives to our university?

Neurodiversity Interview and Focus Group Questions

As part of the survey, students, faculty, and staff were invited to take part in a follow-up interview. Semistructured questions were organized by five major themes emerging from the initial survey data: (a) disclosure/identity, (b) mental health, (c) existing neurodiversity affirming supports, (d) needed neurodiversity affirming supports, and (e) ideas and insights to foster neurodiversity culture. The first and second author conducted the interviews implementing a two-probe rule (e.g., can you provide an example? Do you have anything to add?). In line with a semistructured interview format, additional follow-up questions were asked if something arose in a response that needed clarification or expansion.

Phase I: Survey

Participants had the opportunity to participate in this research study over a 2-year time period. The survey was administered

through Qualtrics during the Spring 2021 semester via a posting of the Institutional Review Board approved invitation and link in our university daily online announcer. The invitation was posted four times, once a week, across 1 month. Responses with less than 50% completion were deleted and if a participant identified as being both a student and faculty member, their responses were only included in faculty data. Likert-scale responses were analyzed as interval data and closed-ended data analyzed descriptively using frequency counts and mean percentages through IBM SPSS 27. Open-ended data were coded by two authors in a cyclical manner. In the first round of coding, each author individually applied *in vivo* codes. Next, authors worked together, discussing and revising codes to reach 100% agreement. *In vivo* coding was selected to honor participant voices in response to open-ended question topics (Saldaña, 2016). In the second round of coding, passages were synthesized into patterns (Saldaña, 2016). Emerging patterns were considered in conjunction with Likert-scale survey results to guide follow-up interview/focus group questions. A total of 254 neurodivergent participants completed the survey.

Phase 2: Interviews and Focus Groups

Interviews and focus groups were conducted during the Spring 2022 semester. Participants were recruited via emails sent to all neurodivergent faculty, staff, and students who indicated they would be interested in participating in a follow-up interview or focus group. Two separate recruitments were sent 2 weeks apart. With consideration of neurodiversity affirming practices, participation options were provided including the option to participate in an interview (one-on-one) or focus groups (two or more participants) and the option to participate in-person or via web-based video conferencing. Zoom was used as the platform for remote participation and options of chat or verbal participation were provided as well as the option to use closed captioning and video on or off features. The same semistructured interview format and questions were used for both interviews and focus groups. A total of three neurodivergent faculty and staff and five neurodivergent students responded and participated in an interview ($n = 4$) or focus group ($n = 4$) format. All but one participant chose to participate via Zoom. All participants' names were changed to maintain confidentiality.

The data from the focus groups and interviews were audio recorded and transcribed verbatim. Data were analyzed using qualitative coding methodologies based on Saldaña (2016). The second and third authors followed a multistep process first reviewing all responses independently to become familiar with the data and then performing first round coding with a combination of descriptive, *in vivo*, and process codes. In the second cycle, pattern coding was applied to synthesize information coded in the first round into broader categories (Saldaña, 2016; see also Corbin & Strauss, 2015). Coding was conducted by the second and third authors, then shared with the first author, with all codes discussed and revised to reach 100% agreement.

Participants

Included survey results are limited to participants identifying as neurodivergent. Of the 254 neurodivergent participants, 103 were faculty/staff and 151 were students. All participants self-disclosed identifying as neurodivergent. In terms of specific disability labels,

both faculty/staff and students most commonly reported mental health (14% and 33%) and ADHD (13% and 25%). In terms of demographics, the majority of participants identified as women (64% faculty/staff; 73% students) and as White (78% faculty/staff; 66% students). Participants came from multiple campuses affiliated with one major university in the Northeastern United States and represented a wide array of academic departments and majors (e.g., of 64 reported majors, 4% was the highest reporting: Computer Science; Engineering; and Health Sciences, followed by 3% reporting for Biological Sciences and undecided). A majority of students were sophomores and maintained a grade point average of 3.5–4.0. Only 26.5% of students reported receiving accommodations from the accessibility services center. See Table 1.

Positionality

All authors hold personal and extensive lived experience with neurodiversity identifying as neurodivergent or as parent, sibling, and/or spouse to neurodivergent family members. Affiliated with the university division of DEI, all authors are committed to valuing intersectional identities, to providing equitable postsecondary education experiences to historically marginalized groups, and to centering disability as diversity. The authors were part of the university neurodiversity taskforce, a neurodiverse group of faculty, staff, and graduate students codeveloping the initiative to gather perspectives of neurodivergent students, faculty, and staff on our university and affiliated campuses. Following, we share the results of our neurodiversity survey and follow-up focus groups and interviews.

Results

Survey and focus group/interview findings are organized by research questions with Phase 1 survey results discussed first, followed by Phase 2 focus group and interview data.

Perspectives of University Students, Faculty, and Staff Around Neurodiversity

Research Question 1 elicited the perspectives of neurodivergent students, faculty, and staff around neurodiversity. Of the 151 neurodivergent student participants and 103 neurodivergent faculty and staff participants, 84% of students as well as 83% of faculty and staff reported being very or somewhat familiar with neurodiversity. While all participants identified as neurodivergent as per the study inclusion criteria, when asked if they were comfortable identifying as neurodivergent within their campus community, 68% of students and only 38% of faculty and staff reported agreement. See Table 2.

Survey participants were also asked whether or not they identified as disabled in addition to neurodivergent. While 46% of students identified as both neurodivergent and disabled, only 24% of neurodivergent faculty identified as disabled. The most frequently occurring disability label reported was mental health condition (33% students, 14% faculty), followed by ADHD (25% students, 13% faculty), and autism (14% students, 3% faculty). Of note, only 27% of students reported being officially registered for accommodations through the campus disability center and only 10% of students reported receiving financial aid or student funding related to their disability.

Table 1
Demographics of Survey Participants

Demographic	Neurodivergent faculty and staff (<i>N</i> = 103)	Neurodivergent student (<i>N</i> = 151)
Race (may select more than one)		
White	80 (78%)	100 (66.2%)
Of African descent	4 (4%)	14 (9.3%)
Of Asian descent	2 (2%)	3 (2%)
Hispanic, Latina/Chicano	4 (4%)	11 (7.3%)
Indigenous (Maori, Aboriginal, Native American, Alaskan Native, etc.)		2 (1.3%)
Of Arab or Middle Eastern descent	1 (1%)	
More than one race	3 (3%)	17 (11.4%)
Prefer not to respond	7 (7%)	4 (3%)
Gender (may select more than one)		
Men	31 (30%)	19 (24.1%)
Women	66 (64%)	58 (73.4%)
Transgender men		4 (3%)
Transgender women		1 (1%)
Gender fluid		2 (1.3%)
Nonbinary		5 (3.3%)
Other		3 (2%)
No response	6 (6%)	
Age		
18–20		62 (41.1%)
21–25	3 (3%)	50 (33%)
26–29	9 (9%)	16 (11%)
30–39	21 (20.4%)	12 (8%)
40–49	25 (24.3%)	7 (5%)
50–59	17 (16.5%)	3 (2%)
60 or older	24 (23.3%)	1 (1%)
Prefer not to respond	3 (3%)	
Employment type		
Faculty (full-time, instructors, lecturers, adjuncts)	61 (59.2%)	
Professional staff	42 (40.8%)	
Disability identity		
Disabled	25 (24.3%)	69 (46%)
Nondisabled	76 (74%)	65 (43%)
Prefer not to respond	2 (2%)	17 (11.3%)
Disability label (may select more than one)		
ADHD	13 (13%)	36 (25%)
Autistic/autism spectrum/Aspergers	3 (3%)	20 (14%)
Hearing impairment	5 (5%)	2 (1.4%)
Mental health condition (e.g., anxiety, depression, obsessive compulsive disorder, bipolar disorder, etc.)	14 (14%)	50 (33%)
Health impairment	6 (6%)	10 (7%)
Orthopedic impairment	2 (2%)	4 (3%)
Neurological condition (e.g., epilepsy, traumatic brain injury)	1 (1%)	9 (6.3%)
Specific learning disability (e.g., dyslexia, auditory processing, dyspraxia, etc.)	7 (7%)	19 (13%)
Visual impairment	1 (1%)	2 (1.3%)
Traumatic brain injury	1 (1%)	9 (6.3%)
Other-sensory avoidance	1 (1%)	
Other-auditory processing		1 (1%)
Other-Fragile × Syndrome		1 (1%)
Other-chronic illness		3 (2.1%)
Other-executive function disorder		1 (1%)
Other-misophonia		1 (1%)
Receive support services or accommodation		
Yes	1 (1%)	40 (26.5%)
No	3 (3%)	25 (17%)
I do not know	1 (1%)	4 (3%)
GPA		
3.5–4.0		82 (54.3%)
3.0–3.49		27 (18%)
2.5–2.99		21 (14%)
1.0–1.49		2 (1.3%)
Just starting first semester		10 (7%)

(table continues)

Table 1 (*continued*)

Demographic	Neurodivergent faculty and staff (<i>N</i> = 103)	Neurodivergent student (<i>N</i> = 151)
Years in college		
Freshman		30 (20%)
Sophomore		46 (30.5%)
Junior		26 (17.2%)
Senior		15 (10%)
Graduate/doctoral		10 (7%)
Transfer student		15 (10%)

Note. ADHD = attention-deficit/hyperactivity disorder; GPA = grade point average.

Defining Neurodiversity

When asked what neurodiversity means to them via open-ended survey prompt, faculty, staff, and students focused on variation in thinking and ways of being. They also emphasized the importance of inclusion, celebration, and acceptance. For example, one faculty member responded, “celebrating differences in the way people function and learn, designing educational opportunities and workplaces that support individuals with different abilities for a more equitable environment.” Similarly, a student shared, “It’s both a blessing and a curse such as being very creative but also not being able to sit through online classes without struggling.” Overall, faculty and staff responses focused on neurodiversity as natural difference. See quotes in Table 3.

Disclosure and Identity

Perspectives around disclosure and disability identity emerging from survey data were further explored within follow-up semistructured interviews and focus groups. When asked why neurodivergent campus members would decide to disclose or not disclose their identity as neurodivergent, participants shared perspectives that involved both external and internal barriers primarily related to lack of societal acceptance around neurodivergence resulting in the pressure to mask neurodivergent identities or risk being socially ostracized. One student participant indicated the external barriers of stigma and past school trauma:

Another thing is that I mean this is sort of personal experience for me, is that I’m one who masks in a lot of situations ... it comes from back when I was in school like middle school, elementary school when like I was like the weird kid or the strange kid, and people used to pick on me for that.

Another student identified as neurodivergent on campus, but understood why others may have different internal motivators causing them to feel differently:

I can definitely answer that; it’s interesting but it’s complicated. So, when I think of like disclosure and camouflaging I think it’s more of like, it depends on the individual’s comfortability and realizing they want to be identified as such, or how they would personally feel. And personally, like, I do feel comfortable identifying as neurodivergent.

Another student shared that opening up and disclosing as neurodivergent risks social alienation and losing the respect of others, “I think the reason why they might not want to do that is

because they don’t want to be treated as different and we want to be respected and accepted into society.”

Perspectives around identifying as disabled among neurodivergent students, faculty, and staff were further explored with the follow-up question, why do you think campus members choose to identify as neurodivergent versus having a disability, vice versa, or as both terms? Participant responses convey the term disabled is perceived as negative and stigmatizing, while the term neurodivergent is perceived as positive. One student was emphatic about having a neurodivergent identity instead of a disability identity and shared, “I don’t consider myself disabled. Some people might but I do like the term neurodivergent. It feels less harsh. it feels less aggressive.” Another student agreed and shared:

There’re still some negative connotations about disability, and because of how being disabled is still stigmatized; so some people might not want to have that label, but for me the way I see it is, I identify as both neurodivergent and being disabled in that sometimes it’s the way that society works- that it’s made for people mostly neurotypical people, but not for the way, I think, or the way my brain is wired.

Student responses convey the complexities of disability-related identity formation with the decision to identify as disabled potentially more stigmatizing than the decision to identify as neurodivergent. Student responses also highlight the tensions around disability language use and identity formation, as another student explained they identified as both neurodivergent and disabled but were confused by the terminology and imagined disability as negative and neurodiversity as a more positive label.

Satisfaction With Neurodiversity Affirming Supports

Research Question 2 elicited perspectives around existing supports for neurodivergent students, faculty, and staff with participants expressing mixed views on the strengths of campus neurodiversity culture as well as concerning experiences with inequities and inaccessibility in campus attitudes, policies, and environments. More faculty and staff (63%) than students (45%) believed that neurodivergent students were recognized and respected as a cultural group on campus. Yet most (60% faculty/staff, 59% students) also reported a lack of accessibility toward neurodivergent people. Similarly, 60% of students and 57% of faculty/staff reported experiencing or witnessing inequities on campus. While neurodivergent faculty/staff and students reported minimal connection with other neurodivergent campus members (18%; 28%), most were satisfied with their level of social involvement on campus (58%; 61%).

Table 2*Neurodiversity Survey Results: Student and Faculty/Staff Perspectives Around Neurodiversity*

Neurodiversity factor	Neurodivergent faculty (N = 103)	Neurodivergent student (N = 151)
Familiarity with neurodiversity		
Very familiar	32 (31%)	81 (54%)
Somewhat familiar	53 (51.5%)	44 (29.1%)
Somewhat unfamiliar	17 (16.5%)	26 (17.2%)
Totally unfamiliar	1 (1%)	
Neurodivergent students are recognized and respected as a cultural group on campus		
Agree	65 (63.1%)	68 (45%)
Disagree	33 (32%)	64 (42.4%)
Not applicable	5 (5%)	19 (13%)
I experience or witness inequities toward neurodivergent people on campus (e.g., attitudes, policies, and environments)		
Agree	59 (57.2%)	91 (60.3%)
Disagree	36 (34.9%)	48 (32%)
Not applicable	7 (7%)	11 (7.3%)
I experience or witness a lack of accessibility toward neurodivergent people on campus (e.g., attitudes, policies, and environments)		
Agree	62 (60.2%)	89 (59%)
Disagree	30 (29.2%)	46 (30.5%)
Not applicable	9 (8.7%)	13 (9%)
I prefer not to identify as neurodivergent as a faculty, professional staff member, or student		
Agree	38 (37%)	36 (24%)
Disagree	32 (31.1%)	103 (68.2%)
Not applicable	16 (15.5%)	10 (7%)
There is value in incorporating topics of neurodiversity on campus		
Agree	100 (97.1%)	134 (89%)
Disagree	2 (2%)	16 (10.5%)
I am satisfied with my current level of social involvement in campus		
Agree	63 (61.2)	87 (58%)
Disagree	26 (25.3%)	62 (51.1%)
Not applicable	12 (12%)	
I am comfortable identifying as a neurodivergent faculty, professional staff, or student		
Agree	39 (38%)	102 (67.5%)
Disagree	35 (34%)	39 (26%)
Not applicable	13 (13%)	7 (5%)
The campus environment is a sensory-friendly place (i.e., lighting, colors, smells, sounds, and dedicated sensory spaces)		
Agree	56 (54.3%)	93 (62%)
Disagree	40 (39%)	49 (32.4%)
Not applicable	5 (5%)	
I am satisfied with the accommodations available to me as a neurodivergent faculty/staff member or student		
Agree	36 (35%)	85 (56.2%)
Disagree	29 (28.2%)	38 (25.2%)
Not applicable	20 (19.4%)	26 (17.2%)
I am able to use assistive technology in classrooms and around campus with relative ease		
Agree	40 (39%)	60 (40%)
Disagree	15 (15%)	24 (16%)
Not applicable	30 (29%)	64 (42.4%)
I am satisfied with the supports available for my mental health needs on campus		
Agree	47 (46%)	85 (56%)
Disagree	36 (35%)	44 (29.1%)
Not applicable	17 (16.5%)	20 (13.2%)

In terms of supports, more than half (56%) of students were satisfied with the accommodations (formal and informal) available to them, yet only 35% of faculty and staff felt satisfied with the supports they received. When asked about specific supports, 56% of students and 46% of faculty/staff reported satisfaction with the mental health support provided on campus. Similarly, about half agreed that there was ample assistive technology on campus. When asked about satisfaction with career and employment supports, 78% of students reported satisfaction or a neutral response. The majority of participants also felt that the

campus is a sensory-friendly place, considering details such as lighting, smells, sounds, and dedicated sensory spaces. See Table 2.

Neurodivergent students agreed that access to professors during classroom instruction consistently met their needs (76%). The design of quizzes, exams, and class assignments were also reported to meet the needs of a majority of students (60%). Half of students reported flexible due dates and presentation of information during classroom instruction met their needs. Students were divided on preferred instructional delivery methods, with the highest number of students

Table 3*Open-Ended Response: What Neurodiversity Means to Neurodivergent Students, Faculty/Staff*

Role	Example quote
Student	"Learning freely and independently is what neurodiversity means to me. I am still trying to gain autonomy and control with self-directed progressive learning and teaching methods with the help of the unique teachers that I currently have."
Faculty	"Differences in ways of being, engaging, and understanding the world."
Faculty	"Neurodiversity refers to the broad expanse of neurological development in different people. It challenges the notion that there is not one 'normal' way of thinking, processing, interacting, or behaving."
Student	"It means that my brain works differently than most. I have to find systems that work for me that better suit my brain and not try to do it like those that are neurotypical."
Student	"Every brain works differently. Some folks are born with brains that need more or less of some things to function, that neurotypical folks wouldn't even notice: stimulation, downtime, comfort objects, etc."
Faculty	"Celebrating differences in the way people function and learn, designing educational opportunities and workplaces that support individuals with different abilities for a more equitable environment."
Student	"Not being able to conform with the average or expected though patterns by society. It's both a blessing and a curse such as being very creative but also not being able to sit through online classes without struggling."
Faculty	"Different mental frameworks and approaches that shape how individuals interact with the world and make meaning."

preferring to learn in person (35%). Only 30% of students reported alternative presentation formats, alternative assessments, or alternate options for assignments as addressing their needs. Students further shared that they were currently supported on campus through neurodiversity-centered clubs and activities. See Table 4.

Neurodivergent faculty and staff reported satisfaction with provided modes of meeting access, including in-person and online meeting options (85%). About half of neurodivergent faculty and staff (48%) reported having classes, programs, and offices structured to meet their individual preferences. Faculty and staff were divided on preferred modality of instructional methods, with the highest number of faculty (33%) preferring in-person instruction. In terms of supporting their students, a majority of neurodivergent faculty and staff (79%) reported structuring their classes to meet the preferences of their neurodivergent student population. They also reported routinely providing options for students to communicate using alternative methods such as speaking, text, and visual representations (80%). See Table 5.

When asked about supports in follow-up interviews and focus groups, students, faculty, and staff shared positive experiences around

neurodiversity resources and groups, noting specific areas with pride including mental health supports, affinity and student groups, and accessibility services. A student shared, "I think the university does a great job of letting students know what resources are available to them. I think it is great that there are psychologists available to students, not every campus provides this service." One faculty member shared, "The development of the (neurodiversity) affinity group has been a great start. I have had conversations with individual members of my department on how to support me in groups and meetings." Neurodiversity specific student clubs and the Office of Accessibility Services were also identified as supporting the neurodivergent campus community (Table 6).

Recommendations for Neurodiversity Affirming Supports

The third research question elicited suggestions for university-wide action steps valuing and supporting neurodivergent students, faculty, and staff. Recommendations emerging from participant interview and focus groups responses include: (a) expanding mental

Table 4*Neurodiversity Survey Results: Student Specific Experiences*

Students' experience <i>N</i> = 151	Agree	Disagree	Other
Access to professors during classroom instructions have consistently addressed my needs as a student	115 (76.2%)	30 (20%)	6 (4%)
I have connected with other neurodivergent students on campus	32 (28%)	76 (50.3%)	30 (20%)
Alternative assessments have consistently addressed my needs as a student	49 (30.4%)	71 (47.1%)	32 (20.5%)
Alternative presentation formats have consistently addressed my needs as a student	57 (38%)	65 (43.1%)	29 (19.2%)
Design of quizzes/exams has consistently addressed my needs as a student	90 (60%)	53 (35.1%)	7 (5%)
Options for assignments during classroom instruction have consistently addressed my needs as a student	52 (41%)	66 (44%)	23 (15.2%)
Flexible due dates during classroom instruction have consistently addressed my needs as a student	76 (50.4%)	65 (43%)	9 (6%)
Design of class assignments has consistently addressed my needs as a student	91 (60.3%)	52 (34.4%)	8 (5.3%)
The presentation of information during classroom instruction have consistently addressed my needs as a student	95 (53%)	44 (29.1%)	10 (7%)
I am satisfied with the career and employment support on campus	57 (38%)	16 (11%)	75 (49.7%)
As a student, I am routinely provided options to communicate including use of speaking, text, and visual representations	70 (46.3%)	49 (32.5%)	31 (20.5%)
There is ample assistive technology available to me as a college student	71 (47%)	33 (22%)	43 (28.5%)

Table 5*Neurodiversity Survey Results: Faculty/Staff Specific Experiences*

Faculty/staff experience <i>N</i> = 103	Agree	Disagree	Other
I am able to structure my classes/programs/offices to meet my preferences as a neurodivergent faculty or staff	49 (48%)	18 (18.5%)	19 (18.4%)
I have connected with other neurodivergent faculty or professional staff on campus	19 (18.4%)	47 (46%)	20 (19.4%)
There is ample assistive technology to support me with my work-related responsibilities	48 (47%)	15 (15%)	20 (20%)
I am satisfied with provided modes of meeting access (in-person, Zoom/WebEx, having both options, etc.)	88 (85.4%)	8 (8%)	5 (5%)
I structure my classes/programs/offices to meet the preferences of a neurodivergent student population	78 (79%)	10 (10%)	12 (12%)
There is ample assistive technology available to me to support students	56 (54.4%)	33 (32.1%)	14 (14%)
I routinely provide options for students to communicate using alternatives that include speaking, text, and visual representations	82 (79.6%)	7 (7%)	12 (12%)
I would like more information and/or professional development about providing supports for neurodivergent students	94 (91.3%)	4 (3.9%)	3 (1.2%)
Training on neurodiversity would benefit me and how I complete my work day-to-day	92 (89.35%)	8 (8%)	

health supports, (b) providing faculty professional development, (c) centering neurodiversity in diversity and equity initiatives, and (d) expanding neurodiversity specific supports, all with the aim of improving the experiences of neurodivergent students, faculty, and staff. See Table 7.

Expanding Mental Health Supports

Despite the neurodiversity survey results suggesting roughly half of neurodivergent students, faculty, and staff (46% of faculty/staff and 56% of students) were satisfied with campus mental health supports, further expanding mental health supports emerged as a priority of both students and faculty/staff. Specific suggestions to better support mental health needs across campuses shared by students include the perspective that campus resources could be more impactful if they were specialized and individualized.

I think most people, I would say, do not feel even personally, maybe feel that the resources aren't enough. I mean there's an abundant amount-base- there seems to be an abundant amount of resources. but I don't think it's to a degree where it's impacting the students correctly or even benefiting the students. It seems like ... this resource is available, but it's not providing great beneficiary actions.

Requests for expanding services in the area of mental health were shared, even though existing supports were noted as abundant. This suggests a needed shift to holistic and individualized university mental health supports. One student on the university main campus reported both a positive and negative experience using services at the university wellness center. The student suggested improving services by providing long-term continuity of care. Specifically, the student reported follow-through when a counselor leaves or a student approaches graduation as areas of improvement. The student said,

Table 6*Open-Ended Response: Ways the University Supports Neurodivergent Faculty/Staff and Students*

Role	Example quote
Student	"There is some support but not a lot of awareness for students. There (are) not really a lot of peers, allies to understand us."
Student	"I think the university does a great job of letting students know what resources are available to them. I think it is great that there are psychologists available to students, not every campus provides this service."
Faculty	"Through the Academic Success Center and support resources, student clubs and organizations, information sessions at orientation, and attendance at all open houses and accepted student receptions to bring awareness to incoming students that these services are offered."
Student	"The Office for Disability Resources is fantastic, all staff there are wonderful. Aside from that department, I don't see a lot of information or event promotion."
Faculty	"Disability Resources does an amazing job with insufficient resources to support a growing population with a wide spectrum of needs for supports and services."
Faculty	"There are many different ways that we can interact with our students, virtual meetings, recorded lectures, closed captions on lectures, face to face, student services, etc."
Student	"Allowing students with disabilities to serve as success coaches, disability portal for students, and creating some accommodations."
Faculty	"Clinical programs, expansion of neurodiverse department/office and staff, additional programs to students."
Faculty	"The development of the affinity group has been a great start. I have had conversations with individual members of my department on how to support me in groups and meetings."
Faculty	"I'm not out as neurodivergent to my colleagues. My mask is impenetrable and my scripts are perfect. So, I have not really sought out support."
Faculty	"Accommodations can be provided, the existence of affinity groups, but I imagine that acceptance varies depending on department and departmental leadership."
Faculty	"I have not seen evidence of this (support for neurodivergent faculty/staff)."
Faculty	"Ample opportunities for professional development."

Table 7*Open-Ended Response: Suggestions for Valuing Neurodivergent Faculty/Staff and Students*

Role	Example quote
Faculty	"Provide explanations of what types of accommodations are possible. Do a better job of creating a safe space to share these experiences without fear of judgment or job security."
Faculty	"Build centers and satellites to include a neurodiverse population, incorporating universal design for learning."
Faculty	"Start designing inclusive workplaces and policies, start hiring more staff and faculty who are neurodiverse, representation matters, Design an department to start overhauling curriculum and workspaces/policies for neurodiverse students and staff."
Student	"Providing more robust mental health services."
Student	"Professors need training on how to differentiate learning."
Student	"Create true quiet places, provide stimming tools, listen to students when they have issues in class and aren't being truly heard, educate faculty on how they can do better for their students."
Faculty	"More staff for equity and inclusion efforts."
Faculty	"Support groups, mentorship opportunities, dedicated sensory-friendly spaces, programming to not only increase awareness of neurodiversity but to encourage concrete improvements in the ways we support neurodiverse members of the (university) community."

I'm someone who has like definitely received a lot of help from (the university) in their mental health services. ... I think the primary place where they've fallen short for me is with the individual therapy. I'm bothered with the fact that it's so temporary, because it is very stressful to have to re-explain your whole story to someone. And so for me, my individual therapist moved to a private practice, and I couldn't see her anymore. Because you know I would have had to pay and I just can't afford that. And so I couldn't get her through. (the university) and I didn't want to start with the new person, because I'm only here for one more year, and I know that I would have to change after a year.

The same student reported they would like to see neurodiversity specific mental health support on campus, stating, "I'd also really like to see maybe like more specialized clinics."

Several students expressed a general desire for more mental health support as a way to improve mental health on campus. Specifically, they spoke about the need for more space and counselors for the number of students in need. One student said,

It's still a long process to get done and it's, there's not enough people or hires to be accommodated for not just neurotypical people, but also for a variety of students per se because it's hard enough when you have an undergrad population of 20,000 students, when you only have so many professionals hired on campus when there's like space issues (there's a need to have) immediate response to help them when it's not there.

A faculty member also emphasized a need for more counselors to support the mental health needs of students as priority, expressing concerns with suicide and potentially limited resources. They said "we've had a number of suicides ... so I don't think there's enough resources. There's not enough, you know, there's not a high enough proportion of counselors to students."

Faculty elaborated on the connection between student mental health and faculty mental health. One participant felt opening up readily available mental health resources to faculty may help faculty mentally cope with triggers from hearing about student mental health issues, an unrecognized, cascading event. Faculty also suggested improving compassion among university staff to improve the mental health of faculty, placing emphasis on fostering compassionate workplace culture over providing accommodations.

I really think it's, it comes down to being accommodating and I don't necessarily mean that in strict like registered for accommodations ways, I think kind of recognizing, like, for example, if I'm, if I'm having

a week where I'm just really struggling with either stuff ADHD wise or mental health wise, I think, um just knowing that, like my team understands that like there's a- I might have a fluctuation to my workflow but recognizing that I'm not like intentionally dropping the ball or anything

Other staff corroborated this need for mental health acceptance stating while they acknowledge some compassion exists, they often feel it lacks genuineness, "Sometimes it feels like lip service. But yeah luckily, I've had some really understanding colleagues, and I've seen a lot of people being understanding, but sometimes I do think that there's a limit to that."

Provide Faculty Training and Professional Development

In addition to recommendations focused on mental health, faculty/staff and students also prioritized training, professional development, and information-sharing about neurodiversity. Almost all of the faculty, staff, and students felt that there was value in incorporating topics of neurodiversity on campus (97% faculty, 89% students). Training on neurodiversity was considered beneficial for day-to-day work by 89% of all faculty and staff. For the faculty and staff that work directly with students, 96% would like more information and/or professional development about providing supports for neurodivergent students.

Multiple participants emphasized that they felt becoming a supportive campus meant educating faculty on neurodiversity and improving inclusive pedagogy and practices. One student shared, "So I think a neurodiversity supportive campus would be like more training for professors to understand neurodiversity." Other recommendations included, "professors need training on how to differentiate learning" and "educate faculty on how they can do better."

Faculty agreed with students regarding fostering a more inclusive campus through faculty learning and identified a need for a shared framework for inclusive practices such as UDL. One faculty member recommended the university increase inclusive pedagogy and practices to help faculty support neurodivergent students: "I think somehow making it standard practice for faculty to provide different ways for people to do their work" should be a priority. Elaborating on the desire to educate faculty on neurodiversity to become an inclusive campus, other faculty specifically spoke on their desire to

see more UDL. One faculty member expressed frustration with the lack of UDL adoption:

one of our strategic action plan items for the (diversity, equity and inclusion initiative) that we're supposed to be doing is developing like a sense of UDL like universal design. Nothing ever happens for it, though. I think the biggest like- first and foremost thing we would need here is like mandatory faculty development.

Center Neurodiversity in Diversity and Equity Initiatives

Building on recommendations for professional development, neurodivergent faculty felt the lack of implementation of UDL reflected a larger need for faculty training on diversity and equity in general and expressed a desire for neurodiversity to be centered in DEI initiatives along with race and lesbian, gay, bisexual, transgender, and queer initiatives:

but the faculty and staff are way behind and it's not just for neurodiversity. I mean it's for like racial issues and lesbian, gay, bisexual, transgender, and queer stuff, and like just in a general sense of you know, social justice kind of things. Our faculty and staff are behind the times for sure.

Another faculty member felt the need for increased education was important; however, it was not enough. They suggested creating a more inclusive campus by fixing what they perceive as a lack of faculty/staff willingness to commit to equity and/or ability to put learning into action.

if supervisors and professors and the like are well trained, that's really important, but not just the training part of it, they also have to be able to actually implement the things that they have learned in training. Um, because I found that I think a lot of people have really good intentions but might not have the resources or the time or the energy to be able to actually like do certain things.

Pulling together a need to center neurodiversity within campus diversity and equity initiatives and UDL, one faculty member recommended, "build centers and satellites to include a neurodiverse population, incorporating Universal Design for Learning." Another professional staff member recommended "more staff for (expanding existing) equity and inclusion efforts."

Focus group and interview participants also shared ideas for strengthening neurodiversity culture and for new neurodiversity-affirming supports. In terms of fostering neurodiversity culture, students mentioned the importance of working to dispel myths and misinformation surrounding neurodiversity, exploring the history of neurodiversity and disability cultures, representing disability culture more strongly on campus (similar to other diversity groups), and discussing the strengths of neurodiversity.

Expand Neurodiversity Specific Supports

In terms of new supports and insights for building neurodiversity culture, ideas varied and spanned across providing transparency of access to accommodations, affirming neurodivergent faculty, increasing sensory-friendly environments and events, and valuing the voices of neurodivergent campus community members.

In connection to accommodations access, students suggested being transparent about who can ask for accommodations on campus.

Similarly, one faculty member shared, "provide explanations of what types of accommodations are possible. Do a better job of creating a safe space to share these experiences without fear of judgment or job security." Faculty and staff further prioritized a need for flexibility and transparency within their departments as a means to create more inclusive workplaces, along with concrete recommendations to increase neurodiversity culture through a neurodiversity mentorship program for faculty and staff, and university human resource provided neurodiversity training.

Suggestions related to programs and curriculum included student requests to incorporate neurodiversity culture and perspectives in coursework and conversations. In connection to attending events, faculty and staff suggested creating a buddy system for attending new or unfamiliar events on campus. One student shared, "create true quiet places, provide stimming tools, listen to students when they have issues in class and aren't being truly heard." Student environmental recommendations included a dedicated hangout space and (more) sensory-friendly rooms around campus.

Recommendations were also provided in support of the newly launched university neurodiversity cultural center. A faculty member suggested more flexible scheduling for existing center programming so that scheduling conflicts would not become an issue. Another faculty member suggested the center develop neurodiversity training modules for all faculty and staff on campus. Finally, a staff member suggested increasing the visibility of the center by incorporating the center into large campus events, such as graduation ceremonies.

Finally, faculty, staff, and students shared ideas for bringing expertise to the university to help raise awareness and knowledge about neurodiversity. Recommendations included valuing neurodivergent people working and writing from a neurodiversity paradigm, speaking directly to neurodivergent people on campus, and reaching out to key people on campus well-versed in neurodiversity. Students recommended encouraging self-advocates at the university to share their ideas on campus, increasing support for social media self-advocates, and welcoming visiting self-advocates working in the neurodiversity paradigm as experts.

Discussion

Our primary aim was to gain an understanding of campus perspectives and priorities around neurodiversity initiatives on campus. Eliciting and analyzing survey and interview data provided information for improving neurodiversity affirming policies and practices on our university affiliated campuses and for recognizing systemic disability and diversity issues, such as stigma surrounding neurodivergence, in the broader field of higher education. With the understanding that neurodiversity is a valuable part of society, all members of a campus community benefit when neurodivergent experiences are understood and when ability differences are recognized as diversity and as one of many intersectional identities to be recognized and valued (see Shmulsky & Gobbo, 2019). We focused our discussion of our findings around the participant shared priorities of centering neurodiversity in DEI initiatives, expanding neurodiversity specific supports, expanding mental health and wellness supports, and increasing professional development around neurodiversity.

Neurodiversity and DEI Initiatives

Beginning with a focus on identity, it was important to note that more students than faculty and staff openly embraced their own neurodivergent identity. Despite identifying as neurodivergent, only 38% of faculty (compared to 68% of students) reported being comfortable identifying as neurodivergent on campus. This may be because neurodivergence is not usually viewed as a valuable cultural identity (see Hughes, 2016) and stigma surrounding brain-based differences is still widely prevalent (Gillespie-Lynch et al., 2021).

Additionally, most participants reported a lack of accessible attitudes, policies, and environments on campus (60% faculty/staff, 59% students) and reported experiencing or witnessing inequities toward neurodivergent people on campus (60% of students, 57% of faculty/staff). This lack of accessibility may lead to students, faculty, and staff choosing to camouflage their neurodivergence in an attempt to pass as neurotypical (Hull et al., 2017). This is of concern as camouflaging has been linked to increased mental health conditions including anxiety and negative feelings of self (Hull et al., 2017).

Neurodivergent participants also noted confusion around identifying with the terms disabled versus neurodivergent. This is a notable implication for DEI campus initiatives, as an important part of DEI work is fostering an appreciation and understanding of differing and intersecting identities. On college campuses, neurodiversity can be an important part of cultural identity when supported by the work of DEI and dedicated neurodiversity cultural centers (Kuder et al., 2021; Dwyer et al., 2023). Campus-wide education about neurodiversity emerges as essential to support all campus community members in recognizing that neurodiversity and disability coexist (den Houting, 2019; Hughes, 2016).

Neurodiversity Specific Supports

Second, many students, faculty, and staff provided a strength-based perspective in their shared perspectives of neurodiversity, as well as the desire to build neurodiversity and disability culture on our campus. This may be an indication that the university's actions to situate neurodiversity within our DEI campus initiatives are making a positive impact. Building on this foundation, recommendations emerge for universities to increase neurodiversity specific support.

Dwyer et al. (2023) described the importance of recognizing neurodiversity initiatives within broader DEI initiatives for many reasons, including to help build a stronger neurodiversity culture and to guide the development of neurodiversity specific accommodations and supports. In our study, only 26% of students reported being officially registered to receive accommodations. This is concerning because almost half (46%) of neurodivergent students indicated that they also identified as disabled, with 30% of neurodivergent and disabled students reporting a mental health condition. The process for formally receiving accommodations as a student in higher education is often difficult (Marshak et al., 2010), and may be a barrier for students who could benefit from more robust access to individualized accommodations. For some neurodivergent students, obstacles to their college success include factors such as mental health conditions, difficulty with study skills, and worrying about their college professors (Kuder et al., 2021). Understanding these factors and providing accommodations that help remove some of these barriers could allow students to focus more on their academic

strengths and be more successful in their postsecondary endeavors. University accommodations designed to meet the preferences of those with brain-based differences could help students feel that their identities are being acknowledged and that their neurodivergent strengths are being recognized.

Mental Health and Wellness

Third, the frequent mention of mental health and wellness by faculty, staff, and students warrants ongoing attention. While half of all participants were satisfied with the mental health services they personally received (50% satisfied), an equal number of students, faculty, and staff reported university mental health and wellness services to be lacking. McMorris et al. (2019) found that neurodivergent students utilized mental health services at a much higher rate than the general population but often encountered barriers accessing services, such as finding the process, to be overwhelming. This makes sense considering anxiety and depression are two of the most frequent mental health conditions reported among neurodivergent populations (Gelbar et al., 2014). Perhaps the process of obtaining mental health services prevents some neurodivergent students, faculty, and staff from successfully receiving mental health and wellness support on campus. The high rates of suicidal ideations among neurodivergent student populations (Jackson et al., 2018) creates a sense of urgency for higher education systems to meet the mental health and wellness needs of neurodivergent populations.

Professional Development

Finally, a need for professional development with an emerging emphasis on UDL was spotlighted by faculty and staff throughout the survey, focus groups, and interviews. Almost all (89%) of faculty and staff felt training on neurodiversity would be beneficial, and 96% of all faculty and staff wanted more information about how to support neurodivergent students. While students were not aware of UDL specifically, they did provide feedback on faculty needing increased training on understanding neurodivergent learners. It seemed that UDL was a particularly important aspect of training, and that faculty and staff considered UDL to be beneficial for neurodivergent students. This aligns with the work of Spaeth and Pearson (2023), who found that utilizing UDL in classes decreased the necessity for students to disclose their disabilities and created more flexible classroom environments for all students via practices such as recognizing student strengths, reconceptualizing mandatory attendance policies, being flexible and giving choices, avoiding using group work as the primary form of student engagement, and considering the sensory aspects of their classroom spaces.

Moreover, it seems that UDL is considered beneficial by those who received training in UDL practices as reported in the higher education literature (Nachman, 2022; Waisman et al., 2023). For example, Nachman (2022) found that faculty completing a course focused on inclusive practices and UDL reported increased readiness to teach autistic college students. Similarly, Waisman et al. (2023) found that 80% of faculty participating in UDL training developed plans for their classes that incorporated UDL strategies and 64% of those participants went on to implement those practices. Professional development on UDL may lead to increased use of UDL practices and to increased valuing of neurodiversity on campus.

Implications

Findings from the present study warrant further research as well as practical considerations around how disability and neurodiversity are understood and valued by institutions of higher education. In terms of identity, the finding that a majority of neurodivergent students in the present study do not identify as disabled and do not apply for or receive official accommodations implies a need to reconsider the traditional practice of providing student supports primarily through university disability service centers. Traditional systems of education that address ability differences by identifying and remediating deficits through a needs model may prohibit students from developing a positive sense of identity (Shmulsky et al., 2021).

The reported lack of accessible policies, attitudes, and environments on campus may suggest that neurodivergent people do not feel supported within their colleges and departments to disclose their neurodivergent identities (Mellifont, 2023). Targeted initiatives such as book studies around neurodiversity in the workplace, human resources provided training around neurodiversity, or campus-wide identity affirming initiatives including faculty and staff affinity groups are recommended. The campus community may benefit from inviting neurodivergent people to work within participatory projects focused on neurodiversity, as well as disclosure by neurodivergent campus leaders as role models to build neurodiversity culture.

Beyond not identifying as disabled, neurodivergent students may choose not to use university disability services centers for a myriad of reasons warranting further research including barriers faced by a cumbersome process, not feeling accommodations have met their needs in the past, wanting a fresh start as a college student free of stigma and discrimination, not perceiving existing available accommodations as valuable, and not needing accommodations.

For students and faculty that did identify as disabled in the present study, the most commonly reported disability was a mental health condition. To support neurodivergent students, faculty, and staff, higher education institutions may benefit from rethinking siloed practices related to mental health, for example, establishing set time for mental health and wellness offices to collaborate with DEI offices and disability services centers with an aim of forging a wider system of neurodiversity affirming practices. Findings from the present study also warrant further research into the faculty-reported connection between student mental health needs and their own mental health needs as well as how wellness support is provided to university faculty and staff. Establishing a transparent process to obtain mental health supports, as well as designated counselors who understand neurodivergence and are available to build consistent relationships with neurodivergent students they work with, are also recommended.

Further, the finding that a majority of neurodivergent faculty/staff and a large percentage of neurodivergent students define neurodiversity as a positive term yet mask their neurodivergence on campus in the present study suggests ongoing stigma surrounding neurodivergence as a continuing systemic issue in higher education (e.g., Dwyer et al., 2023). University initiatives to dismantle bias, stigma, and related incidences of discrimination should be reviewed for inclusion of topics of ableism, neurodiversity, and positive representations of neurodiversity culture. In general, it is recommended that universities take an intersectional approach to supporting student identity, centering neurodiversity among other identities within DEI, wellness, and affinity initiatives (Shmulsky et al., 2021).

As noted by participants in the present study, supporting neurodiversity on campus requires faculty/staff commitment to equity. Marchiondo et al. (2023) found that faculty working with strong DEI-focused academic leaders are more likely to recognize bias and stigma, and to support institutional diversity. In terms of faculty/staff recruitment and onboarding, findings from the present study suggest a need to train human resource departments to meet the needs of neurodivergent candidates and employees and to provide neurodiversity training to new hires and university leaders.

A primary takeaway from the present study is the need to recognize and value neurodiversity culture (see Gobbo & Shmulsky, 2019). Participants shared the desire for neurodiversity culture to be recognized on campus, for example, through focused centers, initiatives, and groups. Despite the increase in neurodivergent college students, there remains a dearth of neurodiversity cultural centers within higher education institutions. Such centers differ from accessibility services and align more closely with cultural centers for other marginalized groups (Dwyer et al., 2023). The broader higher education community may benefit from forging participatory neurodiversity partnerships across universities routinely engaging as neurodiverse scholars and students to share what works on campus, for example, sharing tips for forming antistigma initiatives and/or steps taken to form and strengthen neurodiversity cultural centers.

Implications for the broader field of higher education include consideration of campus-wide frameworks for improving and developing policies and procedures around disability and diversity (such as UDL). While it is up to individual institutions of higher education to consider how to recruit and meet the needs of diverse student populations, moving beyond providing traditional academic accommodations such as extended time on tests to recognizing ability differences as natural human variation to be valued and supported with universally designed and specialized supports emerges as essential. First step recommendations include providing professional development around neurodiversity and UDL open to all campus community members, for example, through neurodivergent speaker series and forming working groups to assess the accessibility of workspaces/classroom environments and courses.

Limitations

We recognize that our roles affiliated with the university division of DEI and our commitment to valuing intersectional identities including neurodiversity may have biased our findings. In terms of demographics, faculty, staff, and students were predominantly White college educated women, groups not necessarily representative of the wider neurodivergent community. We did not maintain demographic data specific to individual interview participants which could have provided factors of positionality around shared quotations. Further, this study only captured those both willing to self-identify as neurodivergent and willing to participate in research and may not represent the larger group of neurodivergent students and faculty/staff. Additionally, graduating students were limited in their access to follow-up interviews conducted in the subsequent academic year.

Comfort level regarding neurodivergent identity, disclosure, and self-acceptance ranges significantly from full disclosure to full masking. The nature of this research alone suggests some neurodivergent people may not have chosen to participate and as such the results shared do not reflect all neurodivergent campus community members. Finally, combining participant data across

multiple campuses allowed us to amplify collective voices but limited our reporting of data specific to different university affiliated campus communities. Results may not be generalizable to other college campuses. For future studies, focusing on just one campus or separating data by each campus may be beneficial.

Conclusion

The present study reports upon the perspectives of neurodivergent university students, faculty, and staff around neurodiversity. Overall, students, faculty, and staff reported familiarity with neurodiversity and defined neurodiversity from a strength perspective. Notable findings for faculty/staff include that only 37% have a comfort level disclosing their neurodiversity and only 35% are satisfied with the support they receive on campus. Notable findings for students include that of the roughly half that identify as both neurodivergent and disabled, 30% report a mental health condition, and only 26% receive formal accommodations.

Emerging from this study is the need to prioritize college/university initiatives that establish neurodiversity cultural centers on university campuses, situate neurodiversity in DEI initiatives, simplify the process to receive neurodiversity affirming accommodations and supports, expand supports including those for mental health, and increase professional development around neurodiversity. Also emerging from this study is a need to value and prioritize the voices of our neurodivergent campus community through ongoing participatory research with students, faculty, and staff that takes a social justice, strength-based lens.

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