



Who Does This Week Forget?

Neurodivergence is far wider than the familiar experiences. Here is who is missing from the conversation.

✓ Usually included

Autistic

Sensory differences, communication differences, neurodevelopmental identity. A cultural identity, not a disorder.

ADHD / Polyennic

Attention works differently – not a deficit. A different motivational and attentional system.

Dyslexia, Dyspraxia, Dyscalculia

Differences in processing language, motor planning, and number reasoning.

~ Rarely mentioned

Tourette's & Tic Experiences

Involuntary movements and vocalisations. Highly variable – many people live full lives.

Synaesthesia

Senses that cross over – hearing music and seeing colour; reading words and tasting flavours.

Congenital Deafness & Blindness

From birth, shaping entirely different sensory worlds and distinct cultural identities.

↗ Acquired neurodivergence – often invisible

Traumatic Brain Injury & Stroke

Brain differences acquired through injury – affecting cognition, memory, language, and personality. A different brain, not a lesser one.

Chronic Pain, Neurodegenerative & Acquired Sensory Change

Parkinson's, MS, acquired deafness or vision loss – progressive and acquired neurological differences.

✗ Psychological divergence – largely left out

Voice-hearing

Often labelled 'psychosis'. A divergent psychological response – frequently a response to trauma.

Extreme states of mood

Labelled 'bipolar'. A divergent way of experiencing energy and emotion.

Post-traumatic stress, Anxiety & Depression

The nervous system's reasonable responses to unreasonable experiences – shaped by trauma, not broken biology.

⚠ The people left out

When we celebrate neurodiversity but exclude psychological divergence, we send a message: your kind of different is not the right kind.

That exclusion compounds the harm of pathologisation.

Neurodiversity – the variation of all human minds – does not come with an approved list. It includes everyone.

Farahar (2020). The Neurodiversity Reader. Pavilion.

Psychological Divergence Is **Not** Mental Illness

✗ The Pathology Paradigm

- 1 **Distress = illness**
Psychological distress framed as biological disorder – something broken inside the person.
- 2 **One normal brain**
Assumes a single right, healthy brain and classifies significant variation as disorder.
- 3 **Change the person**
Treatment aims to alter the individual to conform to neurotypical norms.
- 4 **Increases stigma**
"Mental illness is an illness like any other" increases social distance. (Haslam & Kvaale, 2015; Corrigan, 2016)

"Neurodiversity may be every bit as crucial for the human race as biodiversity is for life in general. Who can say what forms of life can prove best at any given moment?"

Harvey Blume (1998) – cited in Farahar (2012) & Farahar (2020), The Neurodiversity Reader

✓ The Neurodiversity Paradigm

- 1 **Distress = divergent response**
A reasonable, divergent response to unreasonable experiences – trauma, poverty, racism, neglect.
- 2 **No normal brain**
All human brains differ. Variation is biological fact. No standard brain to measure against.
- 3 **Change the environment**
Address the traumatising society rather than pathologising the individuals it harms.
- 4 **Reduces self-stigma**
Reframing as neurodivergence reduces self-stigma and enables disclosure – for years. (Farahar 2020)

Reframing psychologically-divergent experiences

"Schizophrenia"

→ Voice-hearing: divergent response, often to trauma

"Bipolar disorder"

→ Extreme states of mood: a different experience of energy and emotion

"Depression"

→ Psychological withdrawal: response to adversity & unmet human needs

"PTSD"

→ Post-traumatic stress response: the nervous system's survival adaptation



Neurodivergence is all of us.

Every single one.

The full picture – innate, acquired, and psychologically-divergent neurodivergence – in one place.

INNATE NEURODIVERGENCE – present from birth

● Autistic

● Polygenic / ADHD

● Dyslexic

● Dyspraxic / DCD

● Dyscalculia

● Tourette's

● Synaesthesia

● Congenital Deafness / Blindness

ACQUIRED NEURODIVERGENCE – emerging across the lifespan

● Traumatic Brain Injury

● Stroke

● Post-Traumatic Stress

● Chronic Pain

● Acquired Deafness / Vision Loss

● Parkinson's / MS / Neurodegenerative

PSYCHOLOGICAL DIVERGENCE – often missing from the conversation

● Voice-hearing

often missed

● Extreme states of mood

often missed

● Post-traumatic stress response

often missed

● Anxiety & Depression

often missed

● Psychologically-divergent responses to trauma

often missed

Innate neurodivergence

Present from birth. Part of who you are. Not something to fix or cure.



Acquired neurodivergence

Brains change across a lifetime. Acquired differences are real and valid.



Psychological divergence

Divergent responses to trauma – not illnesses, but human variation.