

Helping Young People Find the Words: Exploring the Impact of Psychoeducational Materials for Neurodivergent Young People

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Abstract

Neurodivergent individuals often struggle with self-understanding due to a lack of accessible, affirming psychoeducational materials. Grounded in the neurodiversity approach – which views neurodivergence as difference, not deficit – this study explored the impact of co-produced resources for ADHD and/or autistic young people. Drawing on lived experience, surveys with neurodivergent adults ($n = 71$) revealed that 95.7% believed these resources would have been beneficial in childhood. Content analysis and reflexive thematic analysis identified key benefits, including increased self-acceptance, improved communication, and greater confidence in self-advocacy. Parent/carer surveys ($n = 8$) and interviews further indicated support for emotional well-being, independence, and communication skills. Findings highlight the importance of neurodivergent-led development, with careful attention to language and accessibility. This study reinforces the role of affirming psychoeducation in reducing confusion, stigma, and emotional distress. Future research should examine long-term outcomes and adapt materials across developmental stages. By supporting recognition of both strengths and challenges, these resources can mitigate stigma and foster more inclusive environments – ultimately contributing to improved outcomes for neurodivergent young people.

Lay Abstract

Many autistic and ADHD individuals grow up without access to clear, supportive information that helps them understand themselves. This study looked at how specially designed educational resources could support ADHD and/or autistic young people. These resources were created with input from neurodivergent people to make sure they were helpful, respectful, and easy to understand.

We asked 71 neurodivergent adults what they thought of the resources. Almost all (95.7%) said they would have found them helpful when they were younger. We also heard from eight parents/carers. They told us the materials helped their children feel more confident, talk about their differences more easily, and feel better about themselves.

The study shows that when resources are made *with* neurodivergent people – not just *about* them – they can make a big difference. Using positive language, recognising both strengths and challenges, and making sure the information is easy to understand can help reduce confusion, stress, and stigma. These kinds of tools could help more children feel understood and accepted and support them to grow up with better mental health and stronger self-esteem.

Keywords

ADHD, autism, neurodiversity, psychoeducation, school-age children, lived experience

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Introduction

The number of neurodivergent school-aged children is growing (DfE, 2024; Maciver et al., 2023), meaning their neurological development and processing abilities differ from the neurotypical norm. Neurodivergent individuals, including those who are autistic and ADHD, have neurological differences (Pellicano & den Houting, 2022). ADHD is characterised by hyperactivity, impulsivity, and inattention, while autism involves social communication differences, restricted behaviours, and sensory sensitivities (APA, 2013).

Traditional views of neurodivergence have often followed a medical model of disability, focusing on individual deficits and dysfunction (Bradley et al., 2025; Shakespeare & Shakespeare, 2016). This perspective is increasingly challenged by the social model of disability and the neurodiversity paradigm. The social model argues that individuals are disabled by a society designed for the neurotypical majority, citing barriers such as stigma, inaccessibility, and pathologising narratives (Shakespeare & Shakespeare, 2016). The neurodiversity paradigm supports this but further emphasises recognising and valuing the strengths of neurodivergent individuals (Bertilsdotter Rosqvist et al., 2023a; Pellicano & den Houting, 2022). In this framing, neurodivergence is not a problem to be ‘fixed’ but a natural variation of human experience, placing responsibility on systems and institutions to adapt. As neurodivergence reflects different cognitive styles and functioning, this article uses identity-first language, aligned with neurodivergent preferences (Kenny et al., 2016). Terms such as ‘autistic people’, ‘ADHD people’, and ‘AuDHD’ (autistic and ADHD) are used throughout. A neurodiversity-affirming approach has been linked to better self-esteem and reduced stigma (Najeeb & Quadat, 2024).

Within education, these paradigms have influenced a growing shift towards inclusive, neurodiversity-affirming practices. Scholars have argued for educational environments that do not merely accommodate neurodivergent learners but actively value their perspectives (Kapp, 2020). Educating neurodivergent children about their identities has been shown to foster resilience, self-advocacy, and belonging (Chellappa, 2023; Milton, 2012). Simultaneously, introducing neurotypical peers to neurodiversity concepts can reduce stigma, promote empathy, and encourage more inclusive peer cultures (Milton, 2012). This dual educational approach – supporting neurodivergent self-understanding while reshaping societal attitudes – forms a critical foundation for inclusive education.

Psychoeducation – teaching young people about their conditions and self-management strategies – benefits neurodivergent individuals (Powell et al., 2022). Despite ADHD children and autistic children representing 5% and 1.5% of school-aged children (Bougeard et al., 2021), age-appropriate resources are scarce, leaving neurodivergent young people at risk of academic, mental health, and quality-of-life challenges (Powell et al., 2021, 2024).

Structured psychoeducation has been shown to improve self-understanding, communication, and self-esteem in neurodivergent youth (Black et al., 2024; Powell et al., 2024, 2025).

Effective psychoeducation increasingly relies on co-production, where resources are developed with neurodivergent individuals, their families, and professionals (Armitt et al., 2025; Cullingham et al., 2023; Powell et al., 2022, 2024). Such resources are considered more engaging and relevant (Izzidien et al., 2024; Papageorgiou et al., 2023) but remain rare for neurodivergent young people (Powell et al., 2022, 2024). To address this gap, two co-produced psychoeducational resources for autistic and ADHD children aged 7–11 (Powell, 2021; Powell et al., 2023) were co-designed with neurodivergent young people, families, educators, and clinical professionals. These resources are now widely used across U.K. schools, health-care services, local authorities, and charities. They offer accessible explanations and strategies to help neurodivergent children navigate the neurotypical world (Powell et al., 2021, 2024).

While these resources have been positively received, evaluations so far have been limited to samples of young people and their families (Powell et al., 2021, 2024). A significant gap remains in understanding how neurodivergent adults, who can reflect with hindsight on what support might have been valuable in childhood, perceive these materials (Zakai-Mashiach, 2023).

This study addresses a specific niche by exploring how autistic, ADHD and AuDHD adults retrospectively evaluate psychoeducational materials designed for children. This perspective is underrepresented in the existing literature, which often focus on child and parent/carer evaluations. The primary objective of this research is to assess the perceived effectiveness and relevance of two co-produced resources, drawing on insights from neurodivergent adults, and caregivers. It aims to inform the future development of psychoeducational interventions that are inclusive, affirming, and grounded in lived experience. By centring lived experiences, this research advocates for a co-productive, socially informed approach to psychoeducation that promotes empowerment and inclusion for neurodivergent youth.

Methodology

Researcher Positionality and Epistemological Grounding

This study is grounded in a critical neurodiversity framework, underpinned by a social constructivist epistemology and relativist ontology. Knowledge is viewed as co-constructed, shaped by context, lived experience, and researcher–participant interaction (Braun & Clarke, 2021;

Kapp, 2020). Rather than seeking objective truths, we aim to illuminate meaning-making processes and lived experiences. Rejecting pathologising paradigms, we frame neurodivergence as a valuable form of human diversity (Bertilsdotter Rosqvist et al., 2023a; Chapman et al., 2020).

Insider perspectives are central to this work. Author LP is a late-diagnosed AuDHD woman; SB is an education professional with experience supporting ADHD students. LP's childhood experiences without diagnosis inform her commitment to affirming psychoeducation. SB led data collection; LP led analysis and interpretation.

This dual positioning enabled reflexive, context-sensitive interpretation. Insider research is increasingly valued for producing authentic, nuanced understandings of marginalised experiences (Brown, 2024; Sonuga-Barke, 2023). We recognise that all research is shaped by author positionality and have approached this study with transparency and reflexivity (Bertilsdotter Rosqvist et al., 2023b; Braun & Clarke, 2021).

Design and Procedure

Recruitment and data collection commenced following ethical approval (reference 059907). This study consisted of two concurrent phases: (1) retrospective surveys with neurodivergent adults and (2) surveys and follow-up interviews with parents/carers.

Participant Context. The study was conducted in England, where affirming views of neurodivergence are growing, though structural barriers to diagnosis and support remain. Participants from varied socio-economic backgrounds across England shared experiences of education and healthcare. Most were White British, but ethnicity was not recorded – an acknowledged limitation to be addressed in future work. All were fluent in English, and data collection was conducted in English.

A formal diagnosis was not required. Participants could self-identify as autistic, ADHD and/or AuDHD, be awaiting assessment, or have a confirmed diagnosis. This approach reflects the growing legitimacy of self-identification (Lewis, 2016; Overton et al., 2024; Wadsworth, 2017) and long diagnostic delays in the United Kingdom (Austistica, 2024; Healthwatch, 2023; NHS England, 2023). It aligns with neurodiversity-affirming principles and ensures inclusion of voices often excluded from clinical studies.

Retrospective Surveys. Participant inclusion criteria were: (1) aged 18+ years and (2) autistic, ADHD or AuDHD, formally or through self-identification. Participants were recruited via convenience sampling through authors' professional and community networks. Each were sent the relevant resource(s) and invited to complete an online survey following informed consent. Surveys explored the perceived value these resources might have had in

childhood (ages 7–11), focusing on identity, wellbeing, and self-understanding.

Surveys and Interviews with Families. Participant inclusion criteria were: (1) parent/carer of 7–11-year-old autistic, ADHD or AuDHD child. Children on waitlists or self-identified were included for reasons outlined above.

Parents/carers received the relevant resource(s) by post and used them with their child for at least two weeks. They then completed an online survey on perceived impacts and then invited to a 60-min follow-up interview to discuss their responses. Interviews were recorded, transcribed verbatim, and anonymised using pseudonyms.

Data Analysis

Qualitative survey responses to open-ended questions were analysed using a conventional content analysis approach (Hsieh & Shannon, 2005) to identify the frequency and nature of key ideas participants expressed. This inductive method was selected because it enables categories to be identified from the data without imposing pre-existing theoretical frameworks. Codes were derived directly from participants' words, allowing findings to develop naturally and reflect their perspectives. Codes were then categorised to summarise common response patterns and illustrate the range of views provided, making this approach appropriate for exploring participants' perspectives on the resources.

Interview data were analysed using reflexive thematic analysis (Braun & Clarke, 2021), which aligns with our critical neurodiversity-informed, constructivist approach. This method recognises the researchers' interpretative role and embraces subjectivity as a strength rather than a threat to validity (Braun & Clarke, 2021, 2024). An inductive, primarily semantic approach identified explicit meanings in participant responses, with latent analysis that explored underlying assumptions and values. We followed Braun and Clarke's six iterative steps of analysis (Braun & Clarke, 2021):

1. Data familiarisation: Lead author (LP) immersed herself in the data by reading transcripts multiple times and listening to interview recordings.
2. Code generation: Initial codes were applied to meaningful segments of data, capturing semantic content and latent meanings.
3. Theme searching: Codes were grouped into potential themes, reflecting patterns across the data.
4. Theme review: Themes were collaboratively refined between authors to ensure they captured diversity of participant voices.
5. Theme definitions and names: Each theme was clearly articulated and named to reflect its meaning.
6. Results write up: Themes were illustrated with anonymised quotes that represent a breadth of participant

Table 1. Adult Survey Sample Demographic Information.

	ADHD Sample (n)	Autism Sample (n)	AuDHD Sample (n)	Total (n)
N	30	16	25	71
Self-diagnosed	9	4	6	19
Under assessment	6		2	8
Formal diagnosis	15	12	5	32
ADHD: Formal diagnosis; Autism: Self-diagnosis or under assessment			5	5
Autism: Formal diagnosis; ADHD: Self-diagnosis or under assessment			7	7
Mean age, years*	34.52	30.97	32.17	32.88
Age (years) at diagnosis*	30.8	27.59	29.67	29.22
N assigned female at birth (AFAB)	24	12	19	55
N: Thought resource(s) would have taught their younger selves' skills to live well with their neurodivergence	30	15	23	68

experiences. Big Q reporting standards were followed (Braun & Clarke, 2024).

Researcher reflexivity was central throughout. Lead researcher (LP) kept a reflexive journal to record interpretative decisions, emotional responses, and developing insights. These reflections were discussed with co-author SB, whose professional perspective offered critical dialogue and deepened analysis. Our lived and professional experiences, outlined in our positionality statement, also influenced how meaning was constructed.

Results

Retrospective Surveys

After receiving the relevant resource(s), autistic, ADHD and AuDHD adults reflected on what difference, if any, the materials might have made had they been available during their childhood. Responses were analysed using a conventional content analysis approach (Hsieh & Shannon, 2005) to identify key ideas and recurring points of feedback. Categories were derived inductively from participants' words, resulting in five main categories: combatting confusion and accepting difference; helping others to help and accept me; language matters; self-advocacy and communication; and content suitability. The following section outlines participant characteristics, followed by the main categories of perceived benefits

and suggested improvements. Table 1 describes adults who undertook the retrospective surveys.

Combatting Confusion and Accepting Difference. ADHD participants noted that accepting their differences reduced childhood confusion. Three believed the resources would have lessened their frustration, a major source of anxiety. They felt the resources would have helped them understand their emotional struggles ($n=3$) and behaviour ($n=2$). Seven participants shared that their neurodivergence made them feel different, causing significant discomfort, and believed the resources would have helped them understand and accept this.

(ADHD resource) ... might have made a significant difference in how I viewed myself. – ADHD Adult

This was a really wonderful resource, it warmed my heart. As a late-diagnosed AFAB autistic person, there is so little representation, understanding, and support for us in the school system, so a booklet like this could have saved me many years of confusion and difficulties. – Autistic adult

Help Others Help and Accept Me. ADHD adults valued resources that could have helped others support and accept them as children. For example, adults shared that the resources could have helped others understand their ADHD differences, including their parents/carers ($n=7$)

and peers ($n = 3$). It was also noted that it is important to ask for help as a child however this was not always easy:

I am sure that many of the challenges I faced at school stemmed from undiagnosed ADHD, and a lack of understanding amongst parents and teachers. – ADHD adult

(ADHD resource) ... highlights how asking for help is very important. – ADHD adult

I think it would be useful to help me and others to understand why I might react to certain situations in different ways. – AuDHD adult

If I had materials such as these to educate myself, my teachers and my parents, I think I wouldn't have struggled as much, people would have been more accepting of me. My childhood experiences unfortunately resulted in a lot of trauma due to failure of those around me to understand my needs. – AuDHD adult

Language Matters. ADHD adults commented on the significance of language use in the resources. For example, three adults shared appreciation for the positive language, specifically referring to strengths in young people with ADHD as 'superpowers' rather than solely focussing on challenges:

I liked the emphasis on working to strengths instead of just focussing on struggles. – ADHD adult

However, seven adults found this language misleading, arguing it downplayed the challenges ADHD young people face:

I'm a little uncomfortable with the notion of ADHD as a 'superpower'. I understand the motivation to empower young people and to help them see the positives of their condition, but I think there's a risk of perpetuating the 'Rain Man' neurodiversity myth, e.g., all autistic / ADHD-ers have some hidden genius or 'superpower', when that just isn't the case. – ADHD adult

I don't love the overused 'superpower' messaging as it is a genuine condition that makes life hard ... But it is age appropriate ... It's nice to reframe it for a kid audience to feel more empowered so it is nice to mention some superpowers... – AuDHD adult

Self-Advocacy and Communication. ADHD adults emphasised the importance of self-advocacy in childhood, noting its absence and how the resources might have helped develop this skill ($n = 4$). One participant stated the resources would have '*empowered me to advocate for myself, communicate my needs, and seek appropriate*

accommodations'. Six adults felt the resources would have helped them communicate their needs, a struggle in childhood:

It is important to be self-aware as to understand oneself means you can take back control and get the support you need. This would improve psychological and physical wellbeing – ADHD adult

(Autism resource) does a good, age-appropriate job of explaining that different doesn't mean bad or wrong. ... this might have taught me the skill of asking for help ... It would have been helpful to know about supportive options like talking through unexpected changes, and then I might have felt I could ask for them. – Autistic adult

I always knew I was different; I just didn't have the words to explain what was different. Resources like this could have helped me find the words. – Autistic adult

Content Suitability. Adults deemed the content of the resources suitable for a number of reasons including thoughts that they would have enjoyed the activities as a child ($n = 5$). One participant noted the usefulness of the activities to help their younger self understand their own ADHD:

Being able to put my own answers would have helped me to understand that ADHD looks different for different individuals. – ADHD adult

The "in the playground" section is great, that has quite a logical "I struggle to make friends (The problem) + I talk about my hobbies too much (The situation) - Therefore I need to ask them more about theirs so its not too one-sided (The solution)". Reading that example would have been very logical and made a bunch of sense to me. – Autistic adult

I think the spot the difference exercise and the one about super-senses would have been really helpful for me to understand how I was (am!) so reactive to certain stimuli and would help people understand that it wasn't just an "overreaction" or "tantrum". I think also that the part where it explains that taking time alone is important would have made me feel less isolated, too. – Autistic adult

Surveys and Interviews with Families

After at least two weeks of use, seven parents/carers of eight children completed a survey on the resources perceived usefulness (Table 2). Six of these seven families took part in a follow up interview (Table 3). Reflexive thematic analysis of interview data identified four themes, that represented all participant groups of parents/carers of ADHD, autistic and AuDHD young people: (1) Benefits of positivity in

Table 2. Parent/carer-Reported Survey Responses: What Young People Learned from the Resources.

Participant Group	ADHD		Autistic			AuDHD		
	1	2	3	4	5	6*	7	8
Participant ID								
What ADHD stands for			N/A	N/A	N/A		X	X
Understand autism/ADHD better post resource(s)		X					X	X
Understand strengths related to ADHD/autism	X	X	X				X	X
Understand ADHD is a difference	X	X	N/A	N/A	N/A		X	X
Aware of some ADHD celebrities	X		N/A	N/A	N/A			
Some challenges are because of ADHD/autism	X	X					X	X
What to do when they feel sad	X	X					X	X
ADHD medication understanding	X	X	N/A	N/A	N/A			
ADHD/autism does not prevent future success	X	X					X	X
It is okay to ask for help	N/A	N/A					X	X
Autistic and non-autistic people experience the world differently	N/A	N/A					X	X
What uses up their energy	N/A	N/A		X				
How to recharge their battery	N/A	N/A		X			X	X

*P7 and P8 represent two children from the same family.

**Participant 6 did not share any potential benefits the resources had for their child.

recognising challenges and strengths, (2), Accessibility/Benefits of relating to content, (3) Step to independence/learning skills, and (4) Communication aid.

Benefits of Positivity in Recognising Challenges and Strengths.

Six families highlighted the benefits of the resources in acknowledging both the strengths and challenges their child faces due to their neurodivergence (P1, 2, 4, 6–8). Parents of ADHD children appreciated the term ‘superpowers’ to describe their child’s strengths, believing it boosted self-esteem. They also praised how the resources encouraged young people to channel their strengths productively (P6, 7, 8).

(appreciation for) ... the superhero type aspects of it, because you get into this huge negative cycle and it’s hard. – P1

Accessibility/Benefits of Relating to Content. Seven families (P1, 2; P4–8) commented on how the resources were age appropriate and accessible and noted the importance of their child being able to relate to the content. They felt that this boosted their child’s confidence, particularly the sharing of ADHD celebrities in the ADHD resource:

...he really focused on the celebrities especially Emma Watson. It really surprised him – P1

I was pleased that she was reading about it and in quite an accessible way – P2

...Spot the Difference. That was really good. He did that ... I think it has been really good for him with this was the understanding of the sensory aspects (of autism) – P6

He went swimming and he noticed “being around too many people affected me”. So, it’s like it (resource) brought his attention a bit more to his sensory challenges ... the other thing that we could relate to quite well was then the change of plan page – P6

Step to Independence/Learning Skills. Five families commented on the significance the resources could have for their children in terms of acting as a step towards independence through learning skills to live well with their ADHD/autism (P2; P5–8). Three families noted that secondary school poses increased daily demands and that the resources could form part of the support during this important transition (P5, P7–8):

Table 3. Family Participant Demographics.

ID	Group	Age (years); Sex Assigned at Birth	How Resources used	ADHD/autism Understanding pre/Postresource	Frequency of using skills to live well with ADHD/autism pre/postresource	Follow-up interview participation?/who present in interview
1	ADHD	9; male	Support from adult	Good/good	Sometimes/sometimes	Yes/mother
2	ADHD	11; female	Independently	Poor/good	Sometimes/several days a week	Yes/mother
3	Autistic	5; male	Support from adult	No understanding/a little	Occasionally/sometimes	No/N/A
4	Autistic	10; male	Support from adult	Very detailed/very detailed*	Sometimes/sometimes	Yes/mother
5	Autistic	11; male	Support from adult	A little/a little	Occasionally/sometimes	Yes/mother
6	AuDHD	10; male	Support from adult	Good/detailed	Never/never	Yes/mother
7*	AuDHD	10; male	Support from adult	A little/good	Sometimes/several days a week	Yes/mother
8*	AuDHD	8; female	Support from adult	A little/good	Sometimes/several days a week	Yes/mother

*No learning as already had this knowledge.

*P7 and P8 represent two children from the same family.

We want them to be independent and be able to manage some of these and differences themselves. So, I think it's a good step towards that. – P2

One family noted that although they already have strict routines in their house to benefit their children, their child could see the value and rationale behind this once they engaged with the resources:

We are very routine-led household because we have to be but I think for her to see the impact of those routines and why we have them in place things. She found that very useful. She wrote herself in the bottom page of it and she wrote herself her own little plan for the day. – P8

Communication Aid. Five families stated that the resources acted as a communication aid between parents/carers and their child (P2, 4; 6–8). Families also shared that the resources helped their children to tell others about their ADHD including their friends (P2, 4) and family (P4), something they noted was empowering for their child placing them as the expert of their neurodivergence. Two families also shared that the resources informed them as parents and could also inform their child's teachers of their neurodivergence (P7–8).

it (resource) kind of scaffolded his own conversation about how he experiences things with her for her to understand in a way. I don't think she may be understood before He kind of had some ownership over being able to be the expert like this... – P4

One parent found that by their child completing the activities in the autism resource, they learned that some strategies they thought helped their child were in fact not as useful as she once believed:

...where you put things that use your energy and things that might give you energy It was interesting to me. ... when he's answered ... I thought that a break in a quiet space might give him energy, but he put that it didn't. And it put the holding a toy or a blanket helped... – P6

One parent also noted that although she knew her child found certain situations stressful such as being exposed to loud noises, she was interested to see that he was also aware of this through completion of activities in the autism resource:

...I know he struggles with loud noises ... but it's interesting see that he's aware of it. ... but when it's finished (loud noises)

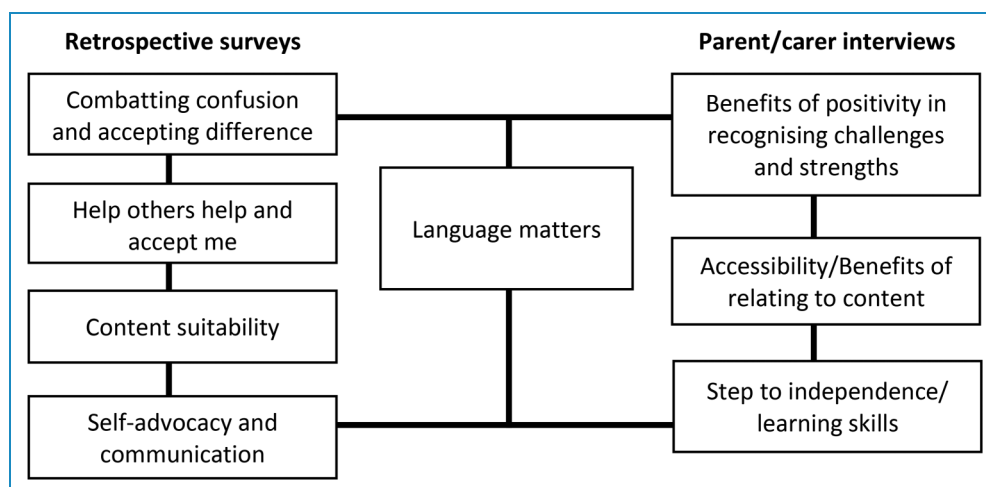


Figure 1. Thematic Similarities and Differences in Perspectives from Retrospective Surveys and Parent/Carer Interviews.

I struggled to stay calm, I get quite overwhelmed. Now I can see that in him, but I've never verbalized it to him. That's interesting to see that he could (identify this). – P7

Summary

Findings reveal shared values across adult and parent/carers groups, including the importance of clear, affirming language, accessible content, and resources that foster understanding of neurodivergent needs. However, family interviews centred on practical support during transitions, especially to secondary school, while retrospective accounts highlighted how such resources could have aided early self-understanding, reduced confusion, and supported self-advocacy – insights shaped by time and reflection.

Figure 1 shows thematic similarities and differences, illustrating how both groups recognised the resources' potential to enhance understanding and communication, with perspectives influenced by developmental stage and lived experience.

Presenting these findings together highlights the evolving nature of neurodivergent experiences. By contrasting families seeking immediate support with individuals reflecting on their past, the study underscores how co-produced tools can meet distinct age-related needs while addressing shared themes across the lifespan. This approach reinforces the importance of tailored interventions at different life stages.

Discussion

This study highlights the importance of early psychoeducational interventions for neurodivergent individuals, particularly those who are ADHD, autistic or AuDHD, in promoting self-understanding and emotional well-being. Participants reported their lack of self-awareness during childhood led to confusion, anxiety, and emotional distress. 95.8% ($n = 68$) of adults indicated that psychoeducational resources

would have mitigated these challenges by fostering self-acceptance and reducing frustration and anxiety. These findings emphasise the need for accessible, identity-affirming resources that can promote a positive self-concept in neurodivergent individuals from a young age.

Content Suitability and Accessibility

Participants underscored the necessity of resources that were suitable and accessible. Feedback from retrospective participants and parent/carers responses indicated that the materials were engaging, clear, and appropriately tailored to the cognitive, sensory, and attentional needs of neurodivergent children. These findings are consistent with existing literature, which asserts that psychoeducational resources must be designed with neurodivergent individuals' unique learning profiles in mind (Powell et al., 2021, 2024). ADHD and autistic children are shown to engage more effectively with materials that employ straightforward language, visual aids, and interactive elements, which minimise cognitive overload and optimise comprehension (National Autistic Society, 2022; NHS England, 2025). Furthermore, the importance of relatability was highlighted by participants, aligning with research that emphasises the role of engagement in resource effectiveness (Powell et al., 2021, 2024). These results underscore the need for neurodivergent-led resource development to ensure materials resonate with the intended audience and facilitate meaningful engagement.

Language Matters

Language profoundly influences how neurodivergent individuals make sense of themselves and their experiences (Hutson & Hutson, 2024). This study underscores the value of affirming, strengths-based language in psychoeducational resources. Retrospective participants and parents/carers emphasised that the positive tone and accessible wording supported emotional well-being and would have

encouraged greater self-acceptance and confidence in childhood. In contrast, many recalled how deficit-focused narratives had contributed to confusion, frustration, and diminished self-esteem.

Preferences around identity-first (e.g. ‘autistic person’) versus person-first (e.g. ‘person with autism’) language also emerged as meaningful. Many participants favoured identity-first language as an expression of pride and authenticity – mirroring broader preferences in neurodivergent communities, particularly among autistic individuals (Kenny et al., 2016). The resources reflected these views, centring neurodivergent voices throughout.

These findings align with broader research showing that deficit-based language can reinforce stigma and psychological harm, while affirming narratives foster resilience, belonging, and self-worth (Carter et al., 2024; Chellappa, 2023; Colbert & Powell, 2025; Jones & Hesse, 2018). The study’s neurodiversity-affirming approach, which acknowledged both strengths and challenges (Bertilsdotter Rosqvist et al., 2023a; Pellicano & den Houting, 2022), was viewed by families as both realistic and empowering. These findings reinforce the importance of inclusive, affirming language and support the case for neurodivergent-led resource development that prioritises empowerment and inclusion.

Psychoeducation to Support Self-Advocacy and Communication

The study highlighted the dual role of psychoeducational resources in fostering self-advocacy and communication skills for neurodivergent children and young people. Participants recalled lacking the language and confidence to express their needs in childhood, leading to frustration and misunderstandings. Earlier access to such resources could have improved communication, reduced confusion, and supported help-seeking. This aligns with research showing that self-advocacy – recognising strengths, expressing needs, and navigating support – enhances educational outcomes and well-being (Dubey, 2024; Lin, 2021). Participants also felt the resources could have supported smoother transitions to secondary school. Self-advocacy is associated with greater resilience and reduced isolation through more meaningful engagement with one’s environment (Black et al., 2024).

Beyond self-advocacy, the resources were also valued for their role in improving communication with peers. The ADHD resource co-design process highlighted the importance of peer understanding in improving social inclusion and reducing stigma. Participants noted that these resources provided a useful framework for initiating conversations about ADHD and autism, which may contribute to reducing misunderstandings and fostering greater empathy and acceptance among neurotypical peers (Sreckovic et al., 2019). However, research in this area

remains limited, and further studies are warranted to explore the impact of psychoeducational materials on peer understanding and social inclusion.

Practical Implications

This study underscores the urgent need for accessible educational resources on neurodivergence. Participants consistently expressed that earlier access could have reduced confusion, anxiety, and emotional distress by helping them understand and accept their differences. This aligns with existing research showing that self-knowledge and validation are critical for well-being, resilience, self-advocacy, and a sense of belonging in neurodivergent individuals (Black et al., 2024; Milton, 2012). In addition to supporting self-understanding, many participants emphasised the importance of being understood and accepted by others. Resources that facilitate mutual understanding – between neurodivergent individuals and those around them – can reduce stigma, promote empathy, and foster more inclusive cultures, all of which are essential for inclusive education (Milton, 2012).

To maximise impact, these resources should be embedded into personal, social, health, and economic education in schools, with educators trained to facilitate informed, respectful conversations about neurodivergence. Tailoring materials to different age groups and learning needs will ensure accessibility. Training is also recommended for staff in higher education settings to better support neurodivergent students and enhance their academic and emotional well-being.

Participants also highlighted the role of the resources as communication tools within families. In addition to their use in schools, healthcare professionals – such as clinicians, paediatricians, and mental health practitioners – could distribute these materials during diagnostic assessments and follow-up support. Used in this way, they can guide conversations around identity, strengths, and coping strategies, bridging the gap between diagnosis and self-acceptance.

Successful implementation requires attention to cultural and linguistic contexts. Understanding and acceptance of neurodivergence can be influenced by cultural norms, values, and language, which may affect how these resources are interpreted and applied. For example, in communities where neurodivergence is less recognised or understood, the materials may need to be adapted to align with local attitudes and priorities to ensure they are effective and relevant. Likewise, the linguistic style of the resources must be flexible enough to resonate with diverse populations and support diverse learning needs.

Crucially, co-production with neurodivergent individuals must be at the heart of any such initiative. Valuing lived-experience perspectives enhances the relevance and effectiveness of these resources (Kapp, 2020). Future research should evaluate long-term impacts, particularly

on mental health and academic outcomes. Given the challenges of measuring outcomes in psychoeducational interventions, qualitative evidence will remain essential for capturing perceived benefits and practical utility.

Strengths and Limitations of this Study

This study adopts a neurodiversity approach to evaluating early psychoeducation materials for neurodivergent young people with ADHD and/or autism. It identifies key benefits, including reduced confusion, increased self-acceptance, improved communication about neurodivergence, and greater acceptance from others. These outcomes foster recognition of both strengths and challenges, mitigate stigma, and promote inclusivity – ultimately supporting better outcomes for neurodivergent youth.

Lived-experience researcher LP, a late-diagnosed AuDHD, provided an insider perspective that enriched data interpretation and learning (Sonuga-Barke, 2023). Neurodivergent researchers are known to offer insights often overlooked by non-neurodivergent teams (Bertilsdotter Rosqvist et al., 2023b; Brown, 2024).

Despite these contributions, several limitations should be noted. The sample of 71 adults with ADHD and/or autism was relatively small and homogenous, with limited representation across socio-economic backgrounds, cultures, geographies, or sex assigned at birth. Most participants were male, and all parent/carer participants were mothers, limiting perspectives from fathers and other carers.

While some participants were dual-diagnosed, others were only ADHD or autistic. This separation may have influenced responses, as experiences can differ despite overlapping challenges (e.g. emotional regulation, social interaction, self-advocacy). Future research should explore ADHD-autism intersectionality and develop tailored resources for dual-diagnosed individuals.

The retrospective survey design introduces potential recall bias; participants may idealise or understate past experiences. Nonetheless, adult reflections on childhood offer valuable perspectives often inaccessible from children themselves.

Finally, the resources were designed within a specific cultural and linguistic context. Their interpretation and impact may vary across cultural settings, where norms and language differ. Further research should explore how adaptations might enhance effectiveness in diverse communities. This study's findings may not fully generalise to other populations, and future work should examine the transferability of these insights.

Future Research and Implications

A more diverse sample is needed to explore how different demographic groups experience these resources, as neurodivergent individuals from minority communities may

have distinct experiences and support needs (Ministry of Housing, 2019; National Autistic Society, 2025a, 2025b, 2025c).

While this study provides valuable insights, future research should extend its scope. Notably, its neurodiversity-informed approach focused solely on ADHD and autism. Though central to the neurodiversity paradigm, other neurodevelopmental differences – such as dyslexia, dyspraxia, and dyscalculia – remain medicalised in both research and practice. Exploring how psychoeducation supports identity and self-understanding in young people with these conditions would promote a more inclusive and comprehensive view of neurodiversity.

A more diverse sample is also needed to explore how individuals from minority backgrounds engage with these resources, as cultural context, systemic barriers, and intersecting identities may shape experiences and support needs.

Longitudinal research could assess the lasting impact of early psychoeducation on emotional well-being, self-esteem, advocacy, and life satisfaction. While this study captures retrospective accounts, long-term evidence could clarify how early interventions shape later experiences.

Additionally, perspectives of educators, healthcare providers, and parents/carers warrant further exploration. Understanding how these figures engage with and apply the resources would offer a more holistic picture of their utility. Tailoring resources to different age groups and developmental stages would also help maximise their relevance and effectiveness.

Conclusions

This study highlights the value of early psychoeducational resources in supporting self-understanding, emotional well-being, and identity development among autistic, ADHD and AuDHD young people. Participants reflected that such resources could have alleviated confusion and anxiety in childhood by offering affirming insights into neurodivergent traits.

The findings underscore the importance of accessible, supportive tools that promote self-acceptance, reduce stigma, and help individuals manage emotions and behaviours more confidently. Language was identified as a key factor, with affirming, identity-first wording seen as vital for fostering accurate understanding and belonging (Visser et al., 2024).

While the homogenous sample limits generalisability, this study offers valuable insight into how well-designed resources can improve outcomes for neurodivergent individuals. Future research should examine long-term impacts, explore age-appropriate adaptations, and compare resource formats across diverse communities.

Ultimately, this study contributes to growing evidence that early, inclusive self-education plays a crucial role in enhancing resilience, mental health, and life satisfaction


for neurodivergent youth. It also reinforces the importance of co-produced, lived experience-led approaches in designing effective, empowering interventions.

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Ethical Approval and Informed Consent Statements

The School of Education Ethics Review Committee at the University of Sheffield approved our interviews (approval: 059907) on 3rd May, 2024. Written informed consent was obtained from a legally authorised representative for anonymised patient information to be published in this article.

Data Availability Statement

Anonymised raw data is available upon request.

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