

The Relationship Between Neurodiversity Awareness and Inclusion Attitudes Toward Employees with ADHD and Autism

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Abstract: *The present study investigates the relationship between neurodiversity awareness and inclusion attitudes toward employees with ADHD and Autism in workplace contexts. Using a quantitative cross-sectional design, data were collected through a structured questionnaire — the Neurodiversity Awareness and Inclusion Attitude Scale (NAIAS) — adapted from established instruments such as the Autism Stigma and Knowledge Questionnaire (ASK-Q), ADHD Awareness Questionnaire (AAQ), and Multidimensional Attitudes Scale toward Persons with Disabilities (MAS). A total of 100 responses were received, of which 93 valid entries were retained for analysis following data screening. Descriptive statistics revealed moderate awareness and positive attitudes towards inclusion among participants, although some misconceptions persisted. A simple linear regression revealed that awareness significantly predicted inclusion attitudes ($\beta = 0.21, p = .03, R^2 = 0.04$). The multiple regression model, incorporating both awareness and prior contact with neurodivergent individuals, was statistically significant ($F(2, 90) = 3.92, p = .02, R^2 = 0.08$). Contact emerged as a stronger predictor ($\beta = 0.27, p = .03$), while awareness remained a positive but marginal factor ($\beta = 0.20, p = .06$). These findings demonstrate that personal interaction with neurodivergent individuals strengthens the impact of awareness on inclusion attitudes, highlighting the combined importance of education and interpersonal exposure in fostering inclusive workplace environments. The study concludes that neurodiversity awareness alone is valuable but gains greater practical significance when supported by direct contact, organizational training, and systemic inclusion efforts.*

Keywords: Neurodiversity awareness; Inclusion attitudes; ADHD; Autism; Workplace inclusion; Contact hypothesis; Neurodivergent employees; Organizational psychology

1. Introduction

In recent years, the concept of neurodiversity has gained considerable prominence across academic, professional, and social domains. It refers to the natural continuum of variation in human neurocognitive functioning, recognizing that differences in how individuals think, learn, and interact with their environment are not deficits but integral aspects of human diversity. The neurodiversity framework encompasses a range of conditions, including Dyspraxia, Dyslexia, Developmental Language Disorder (DLD), attention deficit hyperactivity disorder (ADHD), Developmental Coordination Disorder (DCD), Dyscalculia, Autism Spectrum Disorder (ASD), and Tourette Syndrome—each representing distinct yet equally valid forms of cognitive expression (Dwyer et al., 2022).

This paradigm challenges the long-standing notion of a single “normal” or “healthy” mind and instead affirms that cognitive diversity constitutes an inherent dimension of the human condition. By reframing neurodevelopmental differences within the broader discourse of diversity and inclusion, the neurodiversity movement seeks to cultivate a culture of acceptance, respect, and appreciation for the multiplicity of human cognition. It emphasizes that neurodivergent individuals bring unique perspectives, problem-solving styles, and creativity that enrich both social and organizational environments.

Despite the growing acceptance of this framework, empirical evidence suggests that neurodivergent individuals continue to face disproportionate challenges in the workplace, including higher rates of unemployment, underemployment, and reduced well-being compared to their neurotypical peers

(Anderson, Stephenson, and Carter 2017; Bayeh 2022; What Happens Next? - Latest report on the first destinations of disabled graduates n.d.). Persistent stigma, limited awareness, and inconsistent implementation of inclusive policies often hinder their full participation and professional growth.

Neurodiversity awareness has therefore emerged as a transformative force in promoting more inclusive attitudes toward employees with ADHD and autism. It encourages organizations to move beyond deficit-based models and recognize cognitive diversity as a source of innovation, adaptability, and resilience. Through structured initiatives that focus on education, advocacy, and meaningful engagement with neurodivergent individuals, workplaces can create environments that reduce stigma, enhance understanding, and support equitable opportunities for all employees.

Although the discourse on neurodiversity has expanded in recent years, there remains limited empirical evidence examining how awareness of neurodiversity translates into tangible inclusion attitudes within workplace settings. In particular, few studies have explored employees' understanding of neurodiversity and its influence on perceptions toward colleagues with ADHD and autism. Addressing this gap, the present study aims to evaluate the extent of employees' awareness of the neurodiversity concept and how such awareness shapes their attitudes toward inclusion, support, and the reduction of stigma in the workplace.

Accordingly, this empirical review examines the relationship between neurodiversity awareness and inclusion attitudes toward employees with ADHD and autism. By synthesizing

existing research, it aims to explore how awareness initiatives shape organizational perspectives, influence inclusion practices, and ultimately contribute to improving workplace outcomes for neurodivergent individuals. This study contributes to the growing body of organizational psychology and diversity research by highlighting the practical role of neurodiversity awareness in shaping inclusive workplace cultures.

Objectives of the study:

- 1) To raise employee awareness of neurodiversity, especially ADHD and autism.
- 2) To evaluate the inclusion attitude towards Neurodivergent employees.
- 3) To analyze the relationship between neurodiversity, awareness, and inclusion attitudes.
- 4) To identify possible factors (e.g., prior contact) influencing inclusion perceptions.

2. Methods

Study Design: This study followed a quantitative, cross-sectional correlational design. The Design was chosen to examine the relationship between neurodiversity awareness (Independent variable) and inclusion attitudes (Dependent variable) at a single point in time.

Variables:

Independent Variable: Neurodiversity Awareness

Dependent Variable (DV): Inclusion attitudes towards employees with ADHD and Autism.

Study Population:

The study Population included employees and managers working in MNCs (Multinational companies) in different organizational sectors. Participants were selected regardless of gender, industry type, or years of experience.

Sample and Sampling Method:

A total of 100 participants were recruited through convenience sampling using online platforms such as Microsoft Forms. The sample included both managerial and non-managerial employees.

Inclusion Criterion

- Individuals aged 18 years and above
- Currently employed (Full-time or part-time, or internship)
- Able to read and understand English
- Voluntarily agreed to participate (provided consent)

Exclusion Criterion

- Unemployed Individuals
- Participants below 18 years of age
- Respondents who did not provide consent or submitted incomplete questionnaires.

Data Collection Tool:

Data were collected using a structured questionnaire – the neuro-diversity, awareness and inclusion attitudes scale (NAIAS), adapted from validated instruments such as the autism stigma and knowledge questionnaire (ASK– Q), ADHD awareness questionnaire (AAQ), and multidimensional attitudes scale towards persons with

disability (MAS). The tool included sections on demographics, awareness, inclusion, attitudes, and contact family, all rated on a five-point Likert scale. (Findler et al., 2007; Ghanizadeh et al., 2006; Harrison et al., 2017)

Instrument Reliability

The internal reliability of the Neurodiversity Awareness and Inclusion Attitude Scale (NAIAS) was assumed to be satisfactory, as the items were derived and adapted from previously validated measures reported in prior literature (Austin & Pisano, 2017; Botha & Frost, 2020).

Given the exploratory nature of this empirical study and the sample size constraints, Reliability testing (Cronbach's α) was planned but deferred due to time and resource constraints and thus was **not conducted**. However, the internal consistency of the NAIAS items is expected to be acceptable based on earlier validations, and **Cronbach's alpha** values will be reported in future replication studies to further strengthen the psychometric robustness of the scale.

Data collection procedure

The questionnaire was distributed online via Microsoft Forms. Participants 1st read and accepted an informed consent form before proceeding to the questions. The average completion time was 10 – 15 minutes.

Data analysis

The collected data were exported from Microsoft Forms into Microsoft Excel (Version 2021) for analysis. Initial data screening was performed to identify and remove incomplete or inconsistent responses. Descriptive statistics including, mean and standard deviation (SD), were computed to summarize participants' levels of neurodiversity awareness and inclusion attitudes. For inferential analysis, both simple and multiple linear regression models were applied to test the study hypotheses. The simple regression examined the direct relationship between neurodiversity awareness (independent variable) and inclusion attitudes (dependent variable). The multiple regression model included both awareness and contact/familiarity with neurodivergent individuals as predictors of inclusion attitudes. Model fit and predictive power were assessed using R^2 , Adjusted R^2 , F-statistics, and p-values. The significance level was set at $p < 0.05$ for all statistical interpretations. The results were presented through tabular summaries and narrative explanations.

Ethical consideration

Participation was voluntary, and anonymity was maintained. No identifying information was collected. Participants could withdraw at any time before submitting the form.

3. Results

Descriptive Statistics

Data collected from 100 participants were screened for completeness, after which **7 responses were excluded** due to missing or inconsistent data. The final analysis included **93 valid responses**.

Descriptive analysis (Table 1) indicated that the mean score for **Neurodiversity Awareness** was **25.9 (SD = 4.1)**, reflecting a moderate understanding of neurodiversity

concepts such as ADHD and Autism. The mean score for **Inclusion Attitudes** was **27.8 (SD = 4.3)**, suggesting generally positive workplace perceptions toward neurodivergent employees. Meanwhile, the mean for **Contact and Familiarity** was **12.8 (SD = 3.6)**, indicating that respondents had moderate to limited direct experience interacting with neurodivergent individuals.

Inferential Analysis

1) Simple Linear Regression

A simple regression analysis examined whether **Neurodiversity Awareness** predicted **Inclusion Attitudes** toward employees with ADHD and Autism.

The model was **statistically significant**, $F(1, 91) = 3.60$, $p = .03$, explaining **4% of the variance** in inclusion attitudes ($R^2 = 0.04$). The regression coefficient was positive ($\beta = 0.21$, $p = .03$), indicating that higher awareness was associated with more inclusive attitudes toward neurodivergent employees.

2) Multiple Linear Regression (Table 2)

A multiple regression analysis assessed the combined effect of **Neurodiversity Awareness** and **Contact/Familiarity** on inclusion attitudes.

The overall model was **statistically significant**, $F(2, 90) = 3.92$, $p = .02$, explaining **8% of the variance** in inclusion attitudes ($R^2 = 0.08$, $Adjusted R^2 = 0.06$).

Interpretation:

The results indicated that most participants showed a high level of neurodiversity awareness. The majority agreed or strongly agreed that ADHD and Autism are lifelong neurodevelopmental conditions, and that people with these conditions can be skilled and productive employees. Only a small percentage disagreed or strongly disagreed with these statements. However, a few participants still held misconceptions — for instance, some agreed that ADHD results from a lack of effort or that Autism is caused by poor parenting. Overall, the results suggest that awareness levels are generally positive, though certain myths still persist among a small portion of respondents.

A regression model was used to predict the outcomes of the predictors, and were found to be the following: Neurodiversity Awareness was a positive but marginal predictor ($\beta = 0.20$, $p = 0.06$), indicating that higher awareness levels were generally associated with more inclusive attitudes, though the effect narrowly missed the conventional significance threshold ($p < 0.05$). Contact with neurodivergent individuals was a significant positive predictor ($\beta = 0.27$, $p = 0.03$), suggesting that respondents with prior experience or interaction with individuals with ADHD or Autism demonstrated more inclusive workplace attitudes.

These findings collectively indicate that awareness and personal exposure both contribute to inclusion attitudes, with interpersonal contact exerting the stronger influence.

The results reveal a statistically significant relationship between neurodiversity-related factors and inclusion attitudes. While awareness contributes positively, direct

contact with neurodivergent individuals appears to have a greater effect on fostering inclusion. These results partially confirm the hypothesis that higher awareness and exposure are associated with more inclusive workplace perceptions.

Overall, the findings indicate that neurodiversity awareness and personal contact collectively shape inclusion attitudes toward employees with ADHD and Autism. The inclusion of contact as a second predictor strengthened the overall model, increasing its explanatory power and significance. This suggests that personal interaction with neurodivergent individuals amplifies the positive effect of awareness on inclusive workplace attitudes.

4. Discussion

The findings of this study indicate that individuals who have greater awareness and understanding of the concept of neurodiversity — particularly regarding ADHD and Autism — would likely demonstrate more positive inclusion attitudes toward neurodivergent employees, suggesting that awareness will definitely play a crucial role in shaping how people perceive, accept, and integrate neurodivergent individuals in the workplace. The positive correlation between awareness and inclusion attitudes reinforces the idea that when employees and managers are educated about neurodevelopmental differences, misconceptions are reduced, empathy is strengthened, and inclusion becomes a shared organizational value, making neurodivergent people better adapted to the workplace and thus a smoother transition.

Importantly, the results imply that training and awareness initiatives are not just theoretical interventions but practical tools that can improve workplace harmony and acceptance of neurodivergent individuals. Structured awareness programs and sensitivity training can help employees to understand behavioral and communication differences, adapt work environments, and eliminate stigma or discomfort associated with ADHD and Autism, thus making sure working with neuro-divergent individuals isn't problematic. When neurodiversity education becomes part of organizational development, neurodivergent employees are more likely to feel accepted, supported, and able to perform on par with their peers, and get better suited to the workplace and be less stressful to neurodivergent individuals.

These outcomes align with the social model of disability, which emphasizes that barriers to inclusion stem more from societal attitudes and environments than from individual impairments. By increasing awareness, organizations can shift from seeing neurodivergence as a limitation to recognizing it as a source of cognitive diversity and innovation. In essence, awareness training bridges the gap between difference and belonging — allowing the neurodiverse group to not only fit into teams but also thrive within them.

This research could find that if individuals have understanding about the concept of neurodiversity, have correct information about the conditions of ADHD & Autism, they tend to think more positively about working with people who have these conditions, thus in other words Individuals

who are more accepting & open-minded, would correctly fend off / remove wrong ideas or stereotypes such as claiming that neurodivergent individuals are less capable. Hence, when awareness increases, stigma decreases & thus making it easier for everyone to feel respected and included at work.

There is strong evidence that supports the idea that increasing neurodiversity awareness would improve inclusion attitudes towards employees with ADHD and Autism, especially when awareness efforts are combined with practical training, inclusive workplace design, and active support from leadership (Doyle, 2020; Kim & Gillespie-Lynch, 2023; Waisman et al., 2023). Awareness programs help by reducing stigma, increasing empathy & encouraging employees to see neurodivergent colleagues more positively. However, these work best when adequate resources, policies, and system-wide changes are supported in everyday practice (Clouder et al., 2020; Tromans et al., 2023; Davies et al., 2023; Spoor et al., 2021). Awareness on its own is not enough- it needs to be followed by real actions such as staff training, policy adjustments, and workplace accommodations. Programs are most effective when they are interactive, culturally sensitive, and focused on practical solutions rather than theory alone (Kim & Gillespie-Lynch, 2023; Waisman et al., 2023; Schuck & Fung, 2024).

This study also had a few limitations that should be kept in mind. Since it used a cross-sectional design, it would only show the relationship between awareness and inclusion attitudes at one point in time- it cannot prove that awareness would cause better attitudes. Since the study employed self-reported questionnaires, this means that some participants might have given answers that they felt were socially acceptable rather than completely honest. In addition, the sample size was small & based on convenience sampling, which limits the results that can be applied to all workplaces or populations.

For future research, it would be conducive to conduct long-term (longitudinal) or experimental studies, or develop tools to monitor how harmonious the employees are among neurodivergent as well as how well neurodivergent employees are able to adapt to the work environment, which could help to improve and get feedback about training awareness regarding inclusion & behavior over time. Fear of stigma, limited organizational resources, and inconsistent implementation continue to hamper the progress, which is already very slow. Larger & more diverse samples could give stronger results & direct researchers to look at how neurodiversity awareness works together with factors like organizational culture, leadership style, or HR support, thus highlighting the fact that continuous awareness efforts and further research are needed to create systems/ workplaces genuinely accepted and supported for employees with ADHD & Autism.

5. Conclusion

Neurodiversity awareness is a powerful driver of improved inclusion attitudes toward employees with ADHD and autism, especially when combined with practical training, universal design, and systemic support. Awareness alone may not be enough since it depends on organizational support,

inclusive policies, and leadership commitment, while also addressing persistent barriers, cultural differences, highlighting the need for ongoing, context-sensitive efforts.

In summary, raising awareness is an important first step, but achieving full inclusion for employees with ADHD and Autism requires continuous effort, adequate resources, and sustained policy implementation. Ongoing research and systemic change are needed to address persistent barriers and ensure lasting, meaningful, long-term inclusive practices.

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Tables & Figures

Table 1: Descriptive Statistics of Key Variables

Particulars	Mean	SD	Max	Min
Neurodiversity Awareness	25.9	4.1	39	18
Inclusion Attitudes	27.8	4.3	37	19
Contact and Familiarity	12.8	3.6	21	5

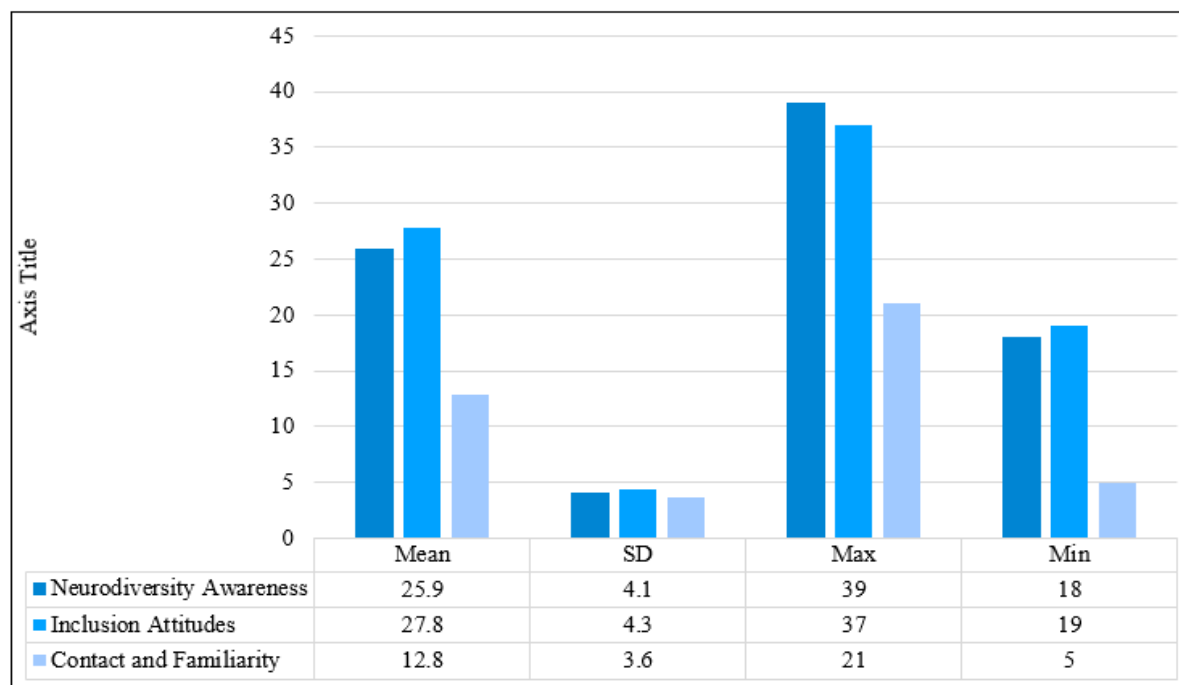
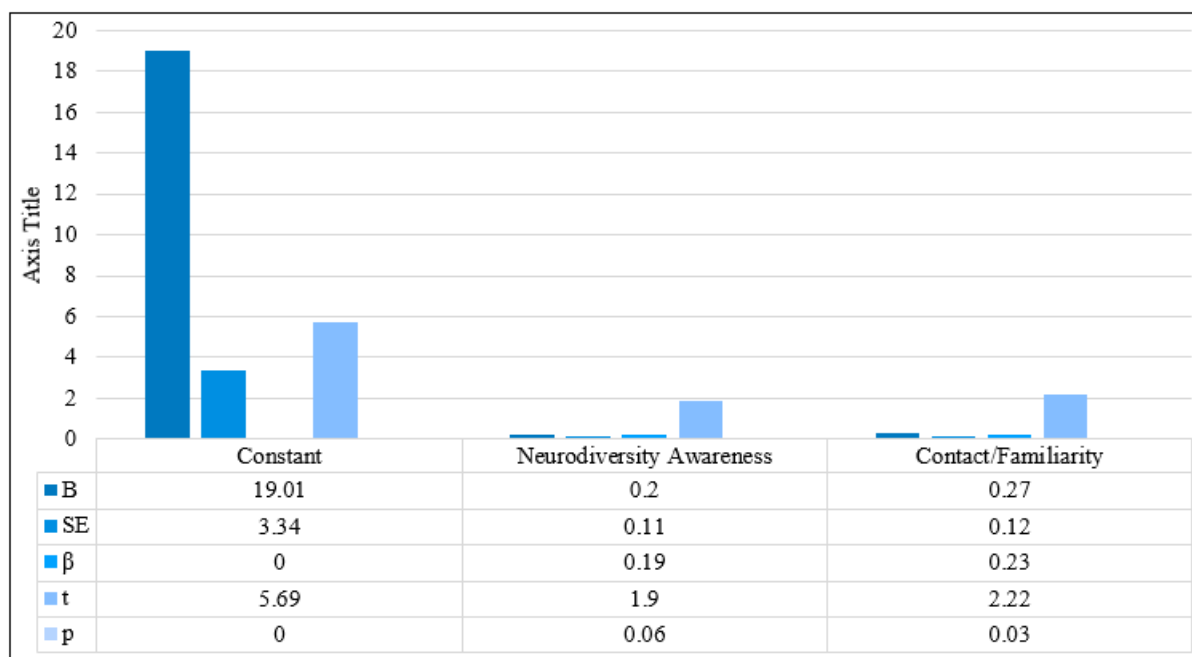


Figure 1.1

Table 2: Multiple Linear Regression Predicting Inclusion Attitudes Toward Employees with ADHD and Autism

Predictor	B	SE	β	t	p
Constant	19.01	3.34	—	5.69	< .001
Neurodiversity Awareness	0.20	0.11	0.19	1.90	0.06
Contact/Familiarity	0.27	0.12	0.23	2.22	0.03

Note. B = Unstandardized coefficient; SE = Standard Error; β = Standardized coefficient; t = t-statistic; p = Significance value. Model Summary: $R^2 = .08$, Adjusted $R^2 = .06$, $F(2, 90) = 3.92$, $p = .02$.

**Figure 1.2**

Appendix

Appendix A: Neurodiversity Awareness and Inclusion Attitude Scale (NAIAS) Questionnaire

This appendix presents the questionnaire used in the study titled “The Relationship Between Neurodiversity Awareness and Inclusion Attitudes Toward Employees with ADHD and Autism.”

The instrument was adapted from the following validated sources:

- Autism Stigma and Knowledge Questionnaire (ASK-Q) – Harrison et al. (2017)
- ADHD Awareness Questionnaire (AAQ) – Ghanizadeh et al. (2006)
- Multidimensional Attitudes Scale toward Persons with Disabilities (MAS) – Findler et al. (2007)

Each item was rated on a 5-point Likert scale:

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

Section A: Demographic Information

- 1) Age
- 2) Gender
- 3) Current Role
- 4) Years of Experience
- 5) Have you ever worked with or managed an employee with ADHD or Autism? (Yes/No/Not sure)

Section B: Neurodiversity Awareness

- 6) I understand about the term "NEURODIVERSITY"
- 7) ADHD and Autism are lifelong neurodevelopmental conditions, not personality flaws.
- 8) People with ADHD or Autism can be highly skilled and productive employees.
- 9) Most people with ADHD simply need to try harder to control themselves
- 10) Autism is caused by poor parenting
- 11) I can identify workplace accommodations that help neurodivergent employees perform better.
- 12) I am aware of my organization's policies for supporting neurodivergent employees.
- 13) I have received some form of neurodiversity or disability inclusion training at work.
- 14) I feel confident interacting with colleagues who have ADHD or Autism.
- 15) Understanding neurodiversity benefits the entire workplace culture

Section C: Inclusion Attitudes

- 1) I would feel comfortable working closely with a colleague who has Autism
- 2) I would feel comfortable if my manager disclosed that they have ADHD
- 3) I would include a neurodivergent colleague in team discussions and social events
- 4) I would prefer not to collaborate with a person who frequently exhibits ADHD-related behaviors.
- 5) Neurodivergent employees should receive the same career growth opportunities as others.
- 6) I would support hiring more people with ADHD or Autism in my organization
- 7) I would feel uneasy if a neurodivergent employee took longer to complete tasks.
- 8) Organization values neurodivergent employees' perspectives and talents
- 9) I believe coworkers generally respect neurodivergent employees.
- 10) I feel personally responsible for promoting inclusion in my workplace.

Section D: Contact and Familiarity

- 1) I have interacted socially with a person diagnosed with Autism.
- 2) I have worked on a team with someone who has ADHD
- 3) I have participated in training or workshops on neurodiversity.
- 4) I have supervised or mentored a neurodivergent employee.
- 5) I personally know someone (friend or family) diagnosed with ADHD or Autism.

Section E :

Thank you for taking the time to complete this questionnaire.

Your responses will be analyzed anonymously and used only for academic research purposes.

If you wish to receive a summary of the study findings, please leave your email below (optional):

Appendix B – Informed Consent Form

You are invited to take part in a research study titled “Neurodiversity Awareness and Inclusion Attitudes Toward Employees with ADHD and Autism.” Participation involves completing an anonymous online questionnaire that will take approximately 10–15 minutes. Your participation is voluntary. You may skip any question or stop at any time without penalty. Your responses will be kept anonymous/confidential and used only for research and academic reporting. Results may be published in aggregate form; individual responses will not be identifiable. Data will be stored securely for time period of 1 year and then deleted. There are no expected risks beyond those of everyday life. If you feel uncomfortable, you may discontinue at any time. If you have questions about the study or your rights as a participant, contact. By clicking “I agree” below you confirm that:

- You are 18 years or older,
- You have read the above information and agree to participate voluntarily, and
- You consent to the use of your anonymized responses for research purposes.

Participants were informed about the purpose of the study, anonymity of responses, voluntary participation, and the right to withdraw before submission. Consent was obtained digitally before the questionnaire began.

Appendix C- Statistical Data (See Supplementary File)

The complete dataset of 94 participant responses used for analysis is provided in the accompanying Excel file titled “Book3.xlsx.” The file includes all responses to the NAIAS questionnaire, demographic variables, and computed total scores.