



Mental Health and Wellbeing

Working with Neurodivergent Clients

Introduction

Some of us work with clients who have a diagnosis or are self-diagnosed as neurodivergent (ND). More older people are being diagnosed now that we have a better understanding of neurodivergence and how it presents in people of different backgrounds, ages and genders. We also know more about co-existing conditions and mental and physical health issues.

In this guide we share information about a range of neurotypes and the impact they have. We discuss how to recognise traits of neurodivergence and to understand the struggles and challenges that these can cause for clients, colleagues, friends and family. We will also explore some ways to support coaching clients so they can get the best out of their coaching experience.

Guide:

What are neurotypes?

Neurotypes include, but are not limited to autism, ADHD, dyslexia, Tourette syndrome, dyspraxia (DCD) and dyscalculia. Each of these comes with strengths and challenges and many people have more than one condition. Neurodivergent people think in a different way, but this is not inherently negative. The disabling factors for ND people come from societal norms and expectations which is similar for many people who are members of a marginalised or non-mainstream section of the population. I have listed some of their challenges below, but for more information follow the links.

Autism – people can struggle with social situations, communications and human proximity, often preferring to be alone and seeming blunt or uninterested. They can often take things literally and find change difficult. They are often hypersensitive to sounds, smells and touch. Women with autism often mask and copy others to fit in, and they may appear to be coping in social settings. [Signs of autism in adults](#)

ADHD – people have difficulties with focus, function and feelings. It can be difficult to prioritise, concentrate or stay motivated. They can have time agnosia and be disorganised with work and possessions. Most people with ADHD have emotional dysregulation and while they can be very enthusiastic, they are also prone to low self-esteem and overwhelm. [Living and working with ADHD](#)

Dyslexia – people may find it hard to skim read and may read and write slowly, confusing similar words. They can struggle with executive function and find it hard to concentrate and get organised, feeling overwhelmed and overloaded. They are also prone to low self-esteem. [Signs of dyslexia](#)

Tourette syndrome – people can have physical or vocal tics. Physical tics include blinking, eye rolling, shoulder shrugging, head jerking, jumping or touching objects or people. Vocal tics include grunting, whistling, coughing, saying particular words and for one in ten, swearing. [Tourette's syndrome](#)

Dyspraxia (DCD) – people have challenges with large movements around balance, posture and coordination, and small movements with manual dexterity and tasks. They can also have difficulty with executive function, emotions and hypersensitivity. [Adults with Dyspraxia/DCD](#)

Dyscalculia – people can struggle with directions, basic maths, numbers and dates, memory and executive function. [Dyscalculia in Adults - Checklist](#)

It is impossible to generalise as all neurodivergent people are unique, but there are challenges to be aware of when you are coaching a client who identifies as having one or more ND condition. These may include problems with energy and burnout, focus and concentration, hyperfocus, routine, following instructions, sensory overload, organising thoughts and things, emotional dysregulation and masking.

Summary

How can we help?

We can use inclusive language which is non-judgemental. For example, we can say diagnosis or self-diagnosis instead of label, or condition or neurotype rather than disorder. The language we use can be laden with negative connotations to which ND people are extremely sensitive. They may well have been criticised their whole lives for not matching with neurotypical expectations and societal norms. They may be struggling with shame and guilt, and we should not make assumptions, but always ask what kind of language is best for them.

We can also explore how best to work together, and what communications and administration might work well for our clients. Using timers or clocks, note taking and frequent recaps can be helpful in a coaching session. Our instructions and information can be designed for accessibility and kept short and concise in a format that is appropriate for them.

We can plan for energy levels which may fluctuate during the day or the week and be aware that a client can sometimes find themselves burnt out. We need to pay attention to our coaching environment and make sure it is comfortable, quiet and calm, even when it is online. We can suggest fidget toys or activities which help some ND people focus and remain present. We can acknowledge emotions that come into the room and focus on reassurance and support, allowing for our client to process and recover.

We can give time and space to explore topics, but also agree boundaries and interventions which will benefit the client and help them to make the best use of their coaching time. We can offer information, advice and guidance in our coaching when it is appropriate. Many ND clients will not have the answer within and may benefit from signposting when tried and tested strategies work for many people. We can ask narrower and more targeted questions when our clients struggle or panic with wide open questions that are open to interpretation.

Above all we can provide a safe space for our neurodivergent clients where they can unmask, explore their goals and strengths, find support and acceptance, talk through their challenges and approaches and be guided to the resources that will help them most. Positivity, kindness and reassurance can go a long way to helping someone who finds daily work and life a challenge.

FAQS

Q: Neurodivergent/ADHD clients often struggle with executive function. How can I support them to get the best out of the coaching process?

- Offer to send a calendar invite
- Send them a reminder before the session starts
- Keep information clear and concise
- Share your notes with them after the session
- Negotiate homework tasks and be clear about what they will be doing.
- Remind them about where they are in the process e.g. the number of weeks they have left
- Schedule sessions for times and days when the client has more energy
- Aim to keep to a structure in your sessions, with a clear, beginning, middle and end, with time to reflect on key learning and actions

Q: When working with an autistic client I sometimes find that open questions can cause panic, or that processing time is needed. How can I adapt my questioning?

- Ask more tailored questions
- Allow for processing time
- Clarify if the client is comfortable with the question
- Amend or narrow the question if necessary

Q: My client moves a lot and doesn't make eye contact. How can I get them to focus?

- Understand that ND people often use movement, stimming and fidgeting to allow them to focus
- Ask them what is comfortable for them
- Be aware of your background or environment in terms of distracting sights and sounds

Q: ADHD clients often talk a lot and go off on a tangent. How can I bring them back on track?

- Agree in the contracting stage how you will manage when the client might go off topic within the session (e.g. Don't be afraid to 'interrupt' and bring the client back through reflection and summarising to help keep them focussed, if this is something you agree to do)
- Ask them how their thoughts relate to their goals
- Be ready to signpost to other services if the topic relates more to their mental health and falls outside your boundaries
- Be aware of the time and make sure the client knows if you are moving towards the end of your session

Q: Neurodivergent clients often ask for advice, guidance, and information. How does this align with traditional coaching models?

- Understand that working with neurodivergent clients requires a slightly different approach
- With the client's permission, share information after the session in a follow up email
- Explore what already works for the client, what their challenges are and with the client's permission share ideas around tried and tested strategies that ND people find useful

Q: People with ADHD are often masking so they can fit in. How can I support them?

- Learn about ADHD traits and how they impact on people's lives and work. You may find awareness training useful and there are many providers in the marketplace
- People with ADHD often struggle with imposter syndrome, negative self-beliefs, and low self-esteem. Researching these can help you identify and address them

Q: People with ADHD can experience emotional dysregulation and rejection sensitivity dysphoria. How can I support them?

- Emotions can run high and low in a short space of time. Acknowledge the emotion and allow some time to sit with it. Then help the client to move on with the session if it feels appropriate.

- Avoid using critical words and phrases, blaming or shaming. Shame is often at the heart of their struggles.
- Focus on strengths, not weaknesses. Use positive language, not deficit language. Help them to understand that they are good enough and accept them for who they are.

Q: A current coaching client has just disclosed to their employer and to me - they have been diagnosed with ADHD and possibly BPD.

- Refer to the 7 'C's of Coaching Member to Member Guide
- Check what support the person is already receiving, what it means for them and if they are already in therapy for their BPD
- Check what organisation support is available for employees who are neurodiverse or with mental health issues (BPD)
- Clearly establish your role and what is required in the coaching contract. Remember you work with the whole person, and you need to be aware of the impact of ADHD and BPD on the person and in the workplace. Your role is to enable, not to treat ADHD or BPD. If you don't feel comfortable, if it is beyond your scope, then discuss options available
- Remember to take this to supervision

Q: What qualifications as a coach or supervisor do I need to work with neurodivergence?

Look for relevant accredited courses that train ADHD coaches. There are many unaccredited and short trainings on the market. Look for CPD that is delivered by experienced facilitators who come from a neurodiversity and training background for the best learning experience and the most reliable content.

Q: What are the 'signs' I need to be aware of in a coaching client that they may be neurodivergent and how do I adapt my style?

- You may see signs of executive function issues such as lateness, diary clashes, missed appointments, forgetfulness, mistakes, and lack of communication
- They may forget agreed actions, lose notes or become overwhelmed with too many tasks and an unmanageable workload.
- Your client may struggle to focus on the session or talk at a tangent, fidget, or move, and avoid eye contact. You may notice tics both verbal and physical

- They may not understand the point of open questions and go quiet while they process or become confused about the question or the intention of the question
- They may get overly excited about trying out new strategies and approaches, but they may not always follow through with the practice between sessions
- They may experience several emotions during the session which can change quickly
- They may be easily hurt and upset by implied criticism, judgemental comments and 'banter'

Q: I have been asked to coach a client who has recently been diagnosed with ADHD. What do I need to know?

Check:

- Does the client want a coach who has experience of or is trained to work with a client who has ADHD, does your Professional Indemnity Insurance cover you?
- What kind of coaching does the client want: e.g. help to work and understand their diagnosis or to help them with e.g. interpersonal dynamics, focus of attention?

Then decide if it is within your capability capacity and scope of the contract.

If your client is in a corporate setting:

- What support does the organisation have in place to support employees who are neurodiverse?
- What feedback may be required, explore confidentiality and boundaries that may need to be in place?
- Include the nominated sponsor within the contracting process.

Learn more about coaching and neurodivergence [here](#).

About the Author



Esther Barrett was 53 when she was diagnosed with ADHD. After 25 years in education consultancy, facilitation and training, she became a coach, supervisor and coach trainer working with ADHD and neurodivergent clients. She works with her son Lewis who also has ADHD. As a coach, she has helped many people to identify their strengths and develop strategies to help overcome challenges and reach their goals. When she is supervising and training, coaches appreciate her ADHD Coaching Triangle model which incorporates traditional methods alongside appropriate psychoeducation and

guidance. Esther delivers ADHD and neurodiversity awareness and support workshops, and she also manages several support networks for coaches and clients. As a member of the neurodivergent community, she encourages and promotes inclusive practices and organisational change that enable us all to live our best lives.

Resources

[Neurodiversity Awareness](#) – Wakelet resources

[Coaching with and for ADHD](#) – Webinar with Sarah Templeton

[The Female Experience of ADHD](#) – Webinar with Pippa Simou

[Coaching with and for ADHD](#) - Webinar Sarah Templeton

[The Neuroscience of Introversion](#) - Webinar with Sabrina Ahmed

[Leadership, Coaching and Neurodiversity](#) – LinkedIn Live with Esther Barrett

[Neurodiversity Coaching Matters](#) – Podcast with Jannine Perryman

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*If you have any questions or would like to contribute further, please email:
lenka@associationforcoaching.com*