

Neurodivergence in higher education from the perspective of the academic staff: a grounded theory study about representations, myths, and opportunities in Latin American universities

Neurodivergencia en la Educación Superior desde la perspectiva del claustro: un estudio de teoría fundamentada sobre representaciones, mitos y oportunidades en universidades latinoamericanas

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Abstract

This study addresses the representation of neurodivergence in higher education from the perspective of academic faculty, exploring their perceptions, myths, and opportunities for inclusion. The study was based on a qualitative approach with a grounded theory design and semi-structured interviews with 13 faculty and staff members selected through snowball analysis. The study allowed for the analysis of attitudes toward neurodivergent students at seven Latin American universities and the theoretical triangulation of the findings. The results reveal that, while some faculty recognize neurodivergence as a pedagogical resource that enriches the teaching-learning process, institutional and cultural resistance persists, hindering the full inclusion of these students. Stigma and a lack of ongoing training on neurodiversity among faculty are key barriers to acceptance and disclosure. The study highlights pedagogical opportunities for integrating diverse forms of learning, but also structural limitations, such as administrative bureaucracy, that hinder access to support. Recommendations include promoting clear inclusive policies, continuing education for teaching staff, and creating safe spaces for neurodivergent students. Finally, further longitudinal studies on the impact of inclusive policies and the experience of neurodivergent students in the academic environment are suggested.

Keywords: neurodivergence, higher education, inclusion, stigma, cognitive diversity.

Resumen

Este estudio aborda la representación de la neurodivergencia en la educación superior desde la perspectiva del claustro académico, explorando sus percepciones, mitos y oportunidades para la inclusión. El estudio se basó en un enfoque cualitativo con diseño de teoría fundamentada y entrevistas semi-estructuradas a 13 docentes y administrativos seleccionados mediante snowball. El estudio permitió analizar las actitudes hacia los estudiantes neurodivergentes en siete universidades latinoamericanas y triangular teóricamente los hallazgos. Los resultados revelan que, si bien algunos docentes reconocen la neurodivergencia como un recurso pedagógico que enriquece el proceso de enseñanza-aprendizaje, persisten resistencias institucionales y culturales que dificultan la plena inclusión de estos estudiantes. El estigma y la falta de formación continua sobre neurodivergencia en el claustro son barreras claves para su aceptación y revelación. Se destacan las oportunidades pedagógicas de integrar diversas formas de aprendizaje, pero también las limitaciones estructurales, como la burocracia administrativa, que obstaculizan el acceso a apoyos. Las recomendaciones incluyen promover políticas inclusivas claras, la formación continua del claustro docente y la creación de espacios seguros para los estudiantes neurodivergentes. Finalmente, se sugiere profundizar en estudios longitudinales sobre el impacto de las políticas inclusivas y la experiencia de los estudiantes neurodivergentes en el entorno académico.

Palabras clave: neurodivergencia, educación superior, inclusión, estigma, diversidad cognitiva.

INTRODUCTION

Higher education, as one of the cornerstones of social and professional development, is in the process of adapting its model to the era of knowledge and widespread access. Among other crucial elements, inclusion is seen as an urgent imperative that transcends physical accessibility, as it had been conceived in traditional approaches (Bhalla et al., 2024; Kennedy et al., 2025a). In this context of paradigm shifts, the concept of neurodivergence has gained strength as a category that brings together the cognitive and affective diversity of educational agents (Kennedy et al., 2025b; Kumar Bisoi et al., 2024).

This category has gained ground in specialized circles and academic discourse related to diversity awareness (Fathi Zaghamir & Megahed Ibrahim, 2025). This is largely because it has provided a conceptual platform for questioning traditional clinical and educational models (Escalante et al., 2024; José Da Fonseca & Rosler, 2024; Sonuga-Barke, 2023). Furthermore, its operational development has enabled a better examination of diagnostic and pedagogical practices reproduced by institutional structures.

A specific example of this shift in understanding neurodiversity is that in traditional models, neurological functioning that deviated from the standards of “normality,” such as autism spectrum disorder, ADHD, or dyslexia, was studied and treated from a deficit-focused model (Legault et al., 2021; Lima Rocha & Salguero, 2025). This deficit approach focused efforts on correction and placed greater importance on the limitations of the subjects, as the ultimate goal was to “normalize” behavior and adjust abilities to that standard.

Currently, especially given the increase in enrollment and greater awareness of issues related to mental health, this perspective has proven insufficient for understanding affective-cognitive complexity in the context of diversity (Butcher & Lane, 2025; Eslava-Zapata & Quiroz-Leal, 2024; Garces Garces et al., 2024). Therefore, the growth of the field of neurodivergence studies has been driven by the development of a more nuanced view of neurological variations. Thus, authors and specialists advocate for a humanistic approach to these diverse conditions as a legitimate expression of humanity, on a

level similar to gender and race (Cruz Puerto & Vázquez, 2024; Gutiérrez Caiza & Granda Vidal, 2025; Kumari et al., 2024).

Despite these advances, educational, organizational, and clinical practice has been relegated to the background in favor of discursive and specialized advances. Therefore, a true paradigm shift requires an update of what is conceived in institutional terms as neurodivergence, diversity, and attention to diversity (Moya-Pérez et al., 2024). In specific terms, this would mean that universities should offer, rather than minor accommodations and adjustments, a comprehensive redesign of their environments (virtual, physical, recreational, educational, among others).

In this way, spaces can be progressively built to welcome and enhance the strengths of neurodivergent individuals. By focusing these spaces on comprehensive development rather than deficits, the principles of comprehensive development, diversity, and neurodiversity are unified, thereby contributing to the reconfiguration of a new university model that can be experienced by everyone.

However, although promising developments have been made in previous levels of education, especially in primary and secondary schools, in understanding neurodivergence and the role of schools in addressing it, higher education has lagged behind. At those levels, there are numerous studies on socio-affective development (Costa De Oliveira Martins Matos et al., 2024); the design of digital platforms and technological resources (Auza-Santivañez et al., 2025; Guizado-Barrientos et al., 2023; Lalli & Senbagavalli, 2024); specialized psychopedagogical care (Etchegaray-Montecinos et al., 2024; Rodríguez Torres et al., 2023); the treatment of comorbidities in clinical-medical terms (Rojas Contreras et al., 2024); and the preparation of educational agents and families to assume their roles (Jiménez-Pulido, 2025; Kruty et al., 2024; Murillo Murillo et al., 2025).

There is little research on how faculty members perceive and relate to the neurodivergence of neurodivergent students and colleagues. In this regard, exploratory literature searches showed that most studies focus on the experience of neurodivergent students, resulting in a significant gap in knowledge about representations, myths,

and opportunities from the perspective of agents with the direct capacity to implement the necessary transformations in university culture.

In light of this scenario, the study sought to explore the representation of neurodivergence in higher education from the perspective of faculty members. The objective was to analyze the main themes that characterize the representation of neurodivergence by teachers and administrators. Additionally, although there are recent studies on student experiences, such as those by Bailey & Petty (2025), Borsotti et al. (2024), and Butcher & Lane (2025), the perspective of faculty has been insufficiently explored in Latin America, which has limited the design of appropriate educational policies. Consequently, the following research questions were posed to facilitate the operationalization of the objective:

1. How does the university faculty represent neurodivergence in higher education?
2. What myths and stigmas emerge in their discourse about neurodivergent students and colleagues?
3. What opportunities do they see for moving toward an inclusive university culture?

On the other hand, although its novelty lies in directly contributing to filling a gap in the literature, the main merit of the research is the generation of a deep understanding that serves as a basis for the design of policies and programs that promote the construction of a truly inclusive university culture. Therefore, this article offers a perspective on the beliefs and myths present in the discourse of university professionals, as well as providing a platform for informed and humanized dialogue on the future of diversity in higher education.

THEORETICAL APPROACH

Neurodivergence from an ontological and epistemological perspective

The term neurodivergence emerged during the 1990s and is mainly attributed to sociologist Judy Singer. However, a recent study published by Botha et al. (2024) suggests that, while the contribution of Singer and her team is undeniable, the origin of the term lies in the autistic community, and it was later used by another of its pioneers, Harvey Blume. Brooks

and Jones (2025) agree on this point, starting from the importance of neurodiversity as human capital, a fact pointed out by Blume himself.

Currently, neurodivergence is a fundamental category, as it offers an alternative theoretical platform for understanding differences. In contrast to the traditional clinical medical model, which pathologizes neurological differences, neurodivergence understands that known and cataloged gnoseological entities are actually legitimate expressions of human diversity. Well-known disorders such as ADHD, autism spectrum disorder, and dyslexia are not understood as diseases, but as human conditions, which shifts the focus from the deficit paradigm centered on healing to the construction of inclusive and accessible environments.

In this regard, it is necessary to emphasize that neurodivergence recognizes the psychobiological and psychophysiological conditions that constitute the substrate of these profiles, where imbalances and organismic dynamics directly influence divergence (Bautista-Vanegas et al., 2025; Pereira De Arruda & Salguero, 2024a; Pereira De Arruda & Salguero, 2024b). However, neurodiversity has emerged as a social movement for acceptance, justice, inclusion, and protection of the rights of neurodivergent people.

Myths, stigma, and self-stigma

Despite numerous scientific, technological, and social advances related to neurodivergence, the literature points to the presence and reproduction of numerous stigmas and myths, as well as a growing tendency toward self-stigmatization (Ai et al., 2024; García et al., 2025; Pyszkowska et al., 2025). Related to what was discussed in the introduction, the prevalence of these myths and stigmas is especially marked in higher education, where institutions often lack the structures and trained personnel to serve neurodivergent people (Medrano et al., 2025).

A common myth is the erroneous association between neurodivergence and low intellectual abilities. This idea ignores the development of neurodivergent people in other specific areas or their high abilities in specific tasks or fields. Another common and equally erroneous belief is that these individuals have poor socio-emotional development and difficulty empathizing. However, studies show that, although they may express themselves in peculiar and complex

ways, their understanding of social interactions is proof that they can develop social skills and coexist in their environments (Gini et al., 2021).

These stigmas not only cause the stigmatization and devaluation of these individuals, but they are also the basis for overt and covert processes of discrimination. Compared to other conditions, the presence of self-stigma can be a crucial factor in isolation and the prevalence of negative experiences (Barrera León et al., 2024). In general, studies show that the presence of these myths and stigmas can have a significant impact on students' psychological well-being and academic performance (Čolić, 2025; Marion et al., 2023).

Neurodivergence in higher education: an overview of challenges and opportunities

Higher education, as analyzed thus far, is a complex space for addressing neurodivergence. First, there are significant challenges in adapting substantive processes, not only teaching, since the methodologies that support teaching, learning, research, and even leisure and outreach are tailored to the profile of the neurotypical student.

This does not mean that there are no approaches, programs, or initiatives, since, as McDowall and Kiseleva (2024) found, interventions and approaches from different processes and at different stages of higher education are becoming increasingly common. In this regard, based on a meta-analysis of eleven previous studies, these authors found a focus on instruction, technology-based interventions, support during transitions (access and graduation), tutoring-mentoring and psychological counseling programs, as well as as comprehensive support programs.

However, it is essential to recognize that these experiences tend to occur at a specialized level and do not represent the norm, as teachers and administrators require training that may be difficult to access for professionals outside the faculties of education, psychology, or other health sciences-related fields. This does not mean that opportunities do not exist, as university dynamics themselves serve as a basis for the design of more flexible academic programs, the development and adoption of assistive technologies, and the promotion of a culture of acceptance and support. Furthermore, encouraging these initiatives is increasingly

urgent, as Butcher and Lane (2025) point out that there is a growing trend in the number of students who identify as neurodivergent and who have a negative experience at university due to the complex system of unmet needs.

Intersectionality and neurodivergence

On a theoretical and practical level, another important line of study is the intersection between neurodivergence and other social and biological categories that shape the human experience. Issues such as access to professional diagnosis, the presence of specialized support systems, and social acceptance may be conditioned by psychosocial and biological variables such as race, gender, social class, and sexual orientation. One example highlighted in the literature is the difficulty in accessing diagnosis for women and racial minorities, a fact that reflects systemic and methodological biases in clinical and psychopedagogical practice (Craddock, 2024; Russell et al., 2025).

In this sense, the literature has begun to highlight the importance of analyzing how these conditions are influenced by their identity configuration, since the experiences of these individuals are also nuanced by the challenges and opportunities that their affiliations (racial, ethnic, gender, among others) present them with. In this way, the intersectional approach provides crucial support for a deeper understanding of the realities of neurodivergent people, especially those who live with structural barriers or have voluntarily chosen not to access educational or health services that do not represent them (Friedman et al., 2024).

Potential offered by new technologies for comprehensive care of neurodiversity

The growing adoption of new technologies has created a significant number of opportunities for comprehensive care of neurodivergence in higher education, especially through the creation of flexible, customizable, and inclusive learning environments (Bernedo-Moreira et al., 2024; Dávila Panduro et al., 2024; Jiménez Pérez & Pérez Gamboa, 2025). In this regard, the implementation of support systems based on virtual learning platforms and learning management systems stands out, where students, with the corresponding teaching support, can access materials and respond to academic demands at their own pace (Horlin et al., 2024).

On the other hand, text-to-speech conversion tools also offer new opportunities in academic work and oral participation for people who previously had difficulties with speech articulation and literacy (Borsotti et al., 2024). Similarly, studies show that the metaverse could represent an important space for comprehensive care for neurodivergence, as it offers the possibility of building multisensory, dynamic, and flexible experiences, making learning and social interaction more attractive (Gonzales Tito et al., 2023; Hutson, 2022; Levterova-Gadjalova et al., 2024). Even so, the literature also points to the risk of iatrogenic effects resulting from poor teacher training (both in technology and in addressing neurodivergence), the generation of overload, and increased symptoms of burnout (Tcherdakoff et al., 2025; Velásquez Castro & Paredes-Águila, 2024).

METHOD

Type

The study was based on qualitative research methodology, specifically the grounded theory approach. This approach was adopted because it is ideal for exploring the representations, beliefs, myths, and opportunities as conceived by the university faculty in relation to neurodivergence. Choosing this tradition allowed for the construction of a design aimed at an inductive approach to the data, as well as the generation of new knowledge based on a deep understanding of the phenomenon derived from the narratives, experiences, and perspectives of key participants (Pérez Gamboa et al., 2024).

Participants

The study was conducted between September 2024 and March 2025, using a sampling strategy based on the snowball technique. This technique, typical of studies with intentional and non-probabilistic samples, is particularly effective in research with populations that are difficult to access or that possess specific knowledge and experience on a given topic (Pérez Gamboa et al., 2024). Due to the limited presence of specialists in neurodivergence in the authors' educational context, the selection process began with the inclusion of two key informants (KI3 and

KI5), who in turn acted as gatekeepers. These professionals, two administrators with doctorates in Education Sciences and more than 15 years of experience, facilitated the identification, contact, and recruitment of new participants according to the established inclusion criteria.

In this regard, these criteria were defined to ensure a sample of experts and professionals with a broad yet deep understanding of diversity and, more specifically, neurodivergence. The requirements for participation in the study were as follows:

- ✓ Membership in the academic faculty of a university.
- ✓ Verifiable formal experience in the study of neurodivergence (demonstrated through scientific publications or thesis reports).
- ✓ Experience in clinical and psycho-pedagogical consultation, or having served as an advisor in the field.
- ✓ Willingness to participate in the study and sign the informed consent form.

The sampling process was interrupted once the scope of theoretical saturation had been assessed. This decision was made once it was verified that the interviews were not yielding new results, resulting in the non-appearance of new categories or relevant aspects in the data, with the eleventh interview marking the beginning of saturation. The final sample size was 13 key informants from seven different universities. It should be noted that, although the number of informants may be small compared to the ideal size mentioned by Pérez Gamboa et al. (2024) and Hernández-Sampieri & Mendoza (2020), this should be assessed in terms of the specificity of the inclusion criteria and the size of the population under study. Finally, it is important to emphasize the diversity of the informants themselves because, although their recruitment did not formally follow this specific criterion, the final sample does reflect a rich plurality in terms of gender, stages of psychological development, professional experience and educational backgrounds. Table 1 details the profiles of the key participants in accordance with the principle of data protection.

Table 1
Description of key informants in the study.

Key informant	Gender	Academic title/degree	Years of experience in the study of diversity awareness
KI1. Teacher	Female	Master's Degree in Psychology	15 years
KI 2. Teacher	Female	Licenciate (PhD candidate in Applied Psychology)	4 years
KI 3. Administrative	Female	Doctor's Degree in Education Sciences	21 years
KI 4. Teacher	Female	Doctor's Degree in Psychological Sciences	9 years
KI 5. Administrative	Female	Doctor's Degree in Education Sciences	16 years
KI 6. Teacher	Female	Master's Degree in Neuropsychology	8 years
KI 7. Teacher	Female	Doctor's Degree in Education Sciences	13 years
KI 8. Administrative.	Female	Master's Degree (PhD candidate in Psychology)	20 years
KI 9. Teacher	Female	Doctor's Degree in Education Sciences	36 years
KI 10. Teacher	Female	Master's Degree in Psychopedagogy	18 years
I KI 11. Teacher	Female	Master's Degree (PhD candidate in Education Sciences)	8 years
KI 12. Teacher	Female	Master's Degree in Attention to Diversity	6 years
KI 13. Administrative	Female	Doctor's Degree in Psychology	13 years

Source: Prepared by the authors

Instruments

In accordance with the literature, the main data collection technique was the semi-structured interview. This technique was designed to provide the necessary prompts to flexibly explore the participants' experiences in depth. To this end, the protocol included a set of guiding topics, operationalized as core questions, supplemented by auxiliary prompts prepared based on the course of the research and the emergence of lines to explore.

The instrument was constructed based on sensitive categories identified in the literature, which acted as initial open references to facilitate the emergence of new meanings and significance related to the representation of neurodiversity in higher education. Additionally, a preliminary search was conducted in the Scopus database to identify

trends, prolific authors, and prominent sources (Sánchez Castillo et al., 2024). This combination of a priori codes and a review of the mainstream literature facilitated the construction of the theoretical approach presented above. Furthermore, a methodological adjustment was made after conducting three pilot interviews, which allowed for the addition of probing questions, verification of the understanding of terms and propositions, and improvement of the execution time.

Finally, participants were asked for permission to record interactions using audio and video, under the premise of data protection and preservation of anonymity. Interactions took place via digital platforms, specifically WhatsApp and Meet, which facilitated informant participation and flexibility in terms of scheduling.

Data analysis

Data analysis and representation were carried out in accordance with the procedures established for the grounded theory approach, following the constructivist tradition and the quality criteria of Charmaz & Thornberg (2021). The interviews were transcribed in their entirety in order to preserve the integrity of the narratives, following the logic of sequential data organization (initial general analysis). Subsequently, the transcripts were imported into ATLAS.ti software, which facilitated data management, analysis, and representation.

The process began with open coding, a phase aimed at breaking down the data and assigning codes to text segments. This procedure allowed us to identify initial concepts, experiences, and categories. Next, connections were established between the categories through axial coding, a phase that allowed us to organize two complex networks of relationships. Finally, selective coding was used to integrate the relationship categories into main themes, which were articulated to shape the theoretical contribution of the study and the characterization of the representation of neurodivergence in higher education from the perspective of the study participants.

In order to reinforce the validity and credibility of the research, researcher triangulation and theoretical triangulation were implemented, allowing the findings to be compared with international and regional literature. In addition, the procedure of exchanging partial summaries of the categories with three participants was applied to validate consistency with their experiences. The analysis was carried out independently by the two researchers, which facilitated the comparison of initial interpretations. A third external reviewer (a psychologist specializing in qualitative methods) acted as an arbitrator in cases of discrepancy. This procedure ensured greater reliability in the construction of the categories.

Ethical aspects

Throughout the research, the highest ethical standards were maintained. The principles of confidentiality and data protection for participants were prioritized. Before each interview, informed consent was obtained, ensuring that key informants understood the objectives of the study and how the information provided would be used. Ethics were conceived as a cross-cutting decision-making process,

influencing every stage, from data collection to processing, organization, and presentation (Pérez Gamboa et al., 2024).

At the operational level, to ensure confidentiality, all interviews were recorded with prior authorization and stored on encrypted servers with restricted access. Subsequently, the audio and video files were identified only with alphanumeric codes (K11, K12... K113), removing any personal data that could identify the informants. During the transcription phase, an anonymization process was applied in which proper names, institutions, or specific geographical references were replaced with general descriptors in order to protect the identity of the participants.

RESULTS

First phase

Axial coding allowed us to identify five initial categories, comprising a total of 15 codes. Below is a summary of the main elements analyzed and the network representation of this phase.

The first of these categories was called “*definition of neurodivergence*” and consisted of three fundamental codes that explain how participants conceptualized the phenomenon under study. In this regard, it was noteworthy that participants agreed that neurodivergence is a broad framework that goes beyond traditional diagnoses. The specialists agreed that this concept refers to different ways of thinking, learning, and processing information, but they also added affective and socio-emotional criteria as fundamental components.

K11: “*We used to think of them in terms of deficiency or label them as ‘deficient,’ but over time I came to understand that neurodivergence means recognizing that there are multiple ways of processing information, learning, communicating, and participating in academic life.*”

On the other hand, the typicality and the need to establish more comprehensive ranges for conditions that are conceived as neurodivergent were also defined, since the configuration of identity also participates in the way differences were manifested. In this regard, the most common processes identified were problem solving, creativity, and divergent thinking. Although the

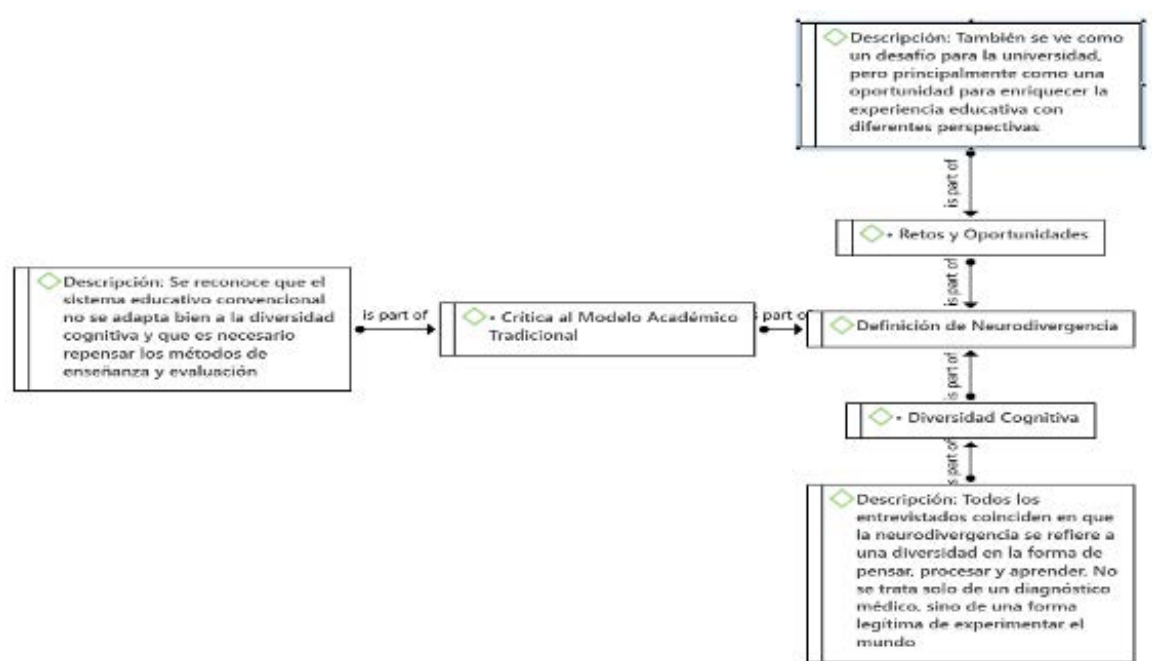
sociocultural value of neurodivergence and the potential contributions of these students were recognized, participants stated that their contexts were far from being prepared to take advantage of this.

KI: *"In my experience, it means moving from inclusion understood as a concession to inclusion understood as a right and, above all, as an opportunity for innovation in the way we conceive knowledge and academic life."*

Finally, this category included meanings related to conditions that can be classified as neurodivergent, as ten of the 13 participants stated that it did not only involve conditions such as ADHD, dyslexia, dyscalculia, or autism spectrum disorder. For these participants, the concept is broader and should therefore include individual expressions of processing, socialization, and experience that cannot be encapsulated in formal diagnostic categories. Figure 1 shows the corresponding network designed in ATLAS.ti.

Figure 1

Category 1. Definition of neurodivergence.



Source: prepared by the authors.

The second category was called *"teachers' and administrators' perceptions,"* whose core meaning was the balance between strengths and weaknesses in caring for these students. First, the verbalizations indicated that when neurodivergence was perceived as creativity, attention to detail, or above-average analytical skills, the approach to these students tended to be positive and facilitated adjustments in teaching and assessment methods, as well as greater flexibility in requirements. In contrast, the specialists suggested that when the emphasis was placed on diagnosis, the perception was colored by codes such as burden or obstacle.

KI7: *"In some settings, neurodivergence is still perceived from a 'deficit' perspective, which*

leads to the assumption that students will always require 'special' attention or that they represent a burden on academic dynamics."

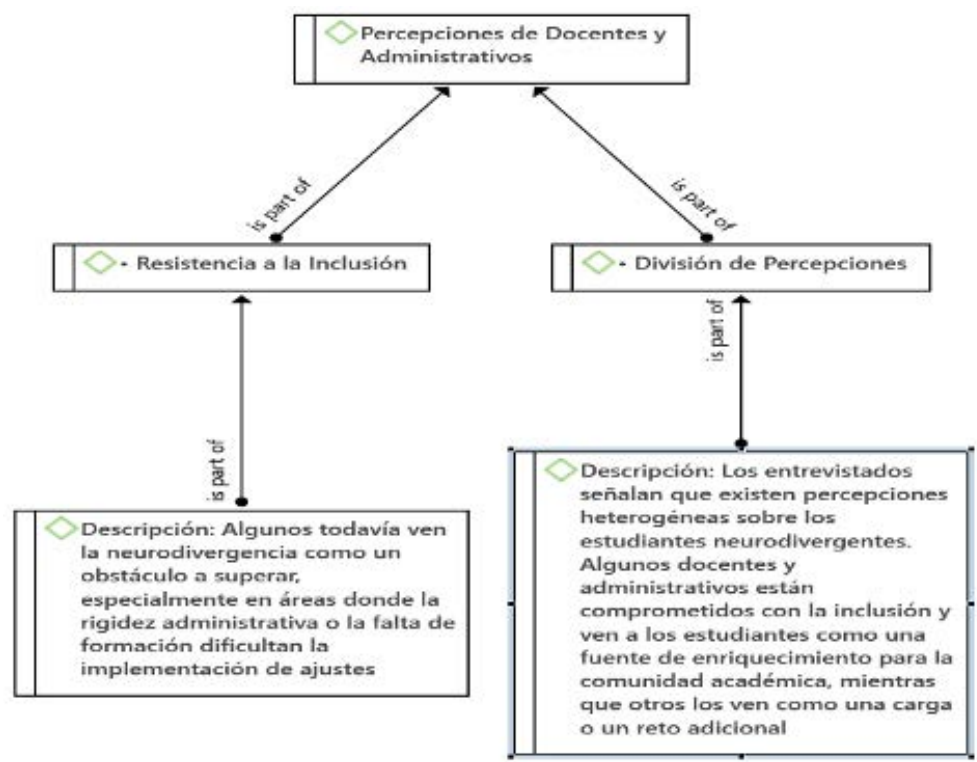
KI5: *"On the one hand, there are teachers who recognize them as part of the natural diversity of the university community and value their contributions, highlighting their creativity, their ability to see problems from different angles, or their perseverance. On the other hand, some teachers still believe that neurodivergence translates into permanent difficulties that 'complicate' the pace of the class or undermine academic standards."*

When this is the prevailing perception, participants explained that it quickly spread to the rest of the faculty and that the general opinion

was associated with more work, interruptions in processes, and a greater risk of academic disparity. Furthermore, in this category, it was found that the perception of neurodivergent students could be conditioned by the degree

program, since in teaching staff with training in fields related to diversity, the risk of exclusion as a result of negative representation was lower. Figure 2 shows the network for this category.

Figure 2
Category 2. Teachers' and administrators' perceptions



Source: prepared by the authors.

The third category was “*factors that facilitate or hinder the disclosure of neurodivergence.*” The codes in this category revealed a clear tendency not to disclose the diagnosis or to reject the process in the case of students and teachers who had not been formally diagnosed. Among the most notable factors were fear of stigma, lack of trust in the faculty (in general, with the exception of specific teachers), and the perception that there was no benefit in disclosing the diagnosis due to the lack of concrete support.

K14: “(...) *fear of stigma was one of the biggest obstacles. Many students told me privately that they didn’t want to be seen as ‘the problem in the class’ or ‘the ones asking for special treatment’.* That fear was reinforced when they heard comments from teachers or administrators questioning the support measures.”

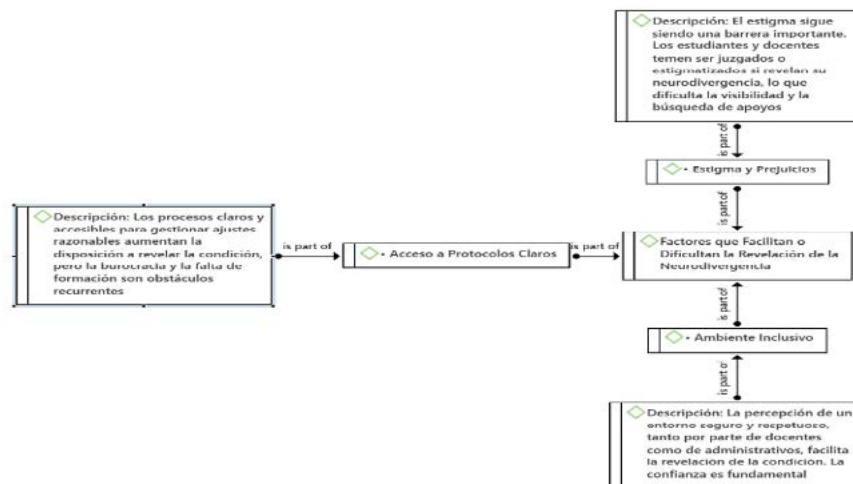
With regard to disclosure, the most significant factors were the opposite, highlighting the importance of raising awareness of success stories and the integration of neurodivergent students (Figure 3). According to the participants, this strategy was successful in different degree programs and contexts when the necessary coordination between support and disclosure of the condition was achieved.

K16: “*That fear doesn’t come out of nowhere: it’s fueled by previous experiences of ridicule at school or comments at university such as ‘everyone has ADHD now.’*”

K12: “*In my experience, the factors that make it easier or harder for a student or colleague to disclose their neurodivergent status are deeply linked to the institutional climate and attitudes within the academic community.*”

Figure 3

Category 3 (1). Factors that facilitate or hinder the disclosure of neurodivergence.



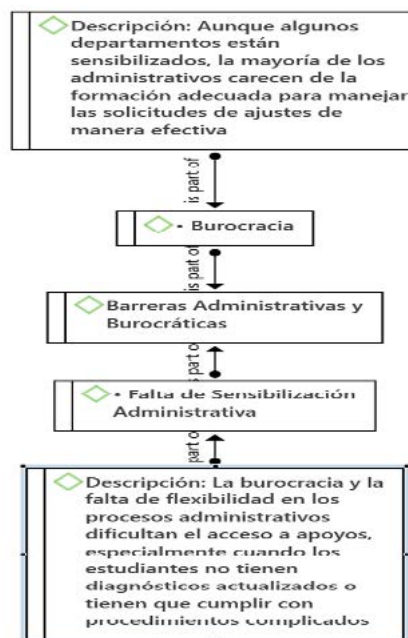
Source: prepared by the authors.

In terms of barriers, the most common were found to be misinformation about profiles, stigma, institutional bureaucracy, excessive perks in disclosure contexts, and lack of confidentiality

guarantees. These factors can be exacerbated in the contexts described above. Figure 4 shows the main administrative and bureaucratic barriers.

Figure 4

Category 3 (2). Main administrative and bureaucratic barriers to comprehensive care for neurodivergence



Source: prepared by the authors.

The fourth category was named “teaching and assessment practices that promote inclusion.” This category showed a more specific level of attention given to students, where the clearest focus was on the need to go beyond remedial adjustments and achieve awareness of the

required transformation of organizational culture. Among the most commonly used strategies were the aforementioned diversification of teaching methods, flexible assessment (primarily in terms of formats and timing), personalized feedback on grades/marks, the use of technologies to

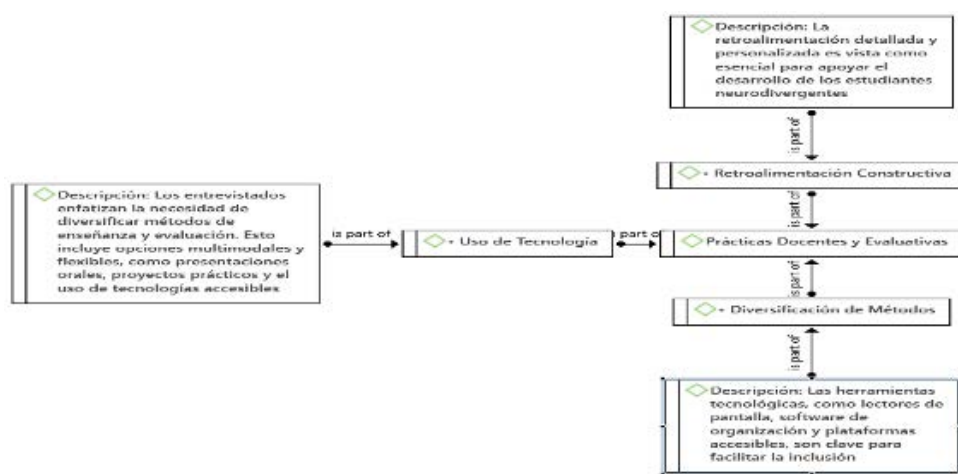
facilitate accessibility, and the promotion of teamwork with trained peers.

K12: *"In my experience, faculty are not very familiar with technology, and that lack of knowledge becomes a silent barrier to inclusion. Most of my colleagues are proficient with basic tools, but when it comes to specific technologies for neurodivergent students, their level of knowledge is quite limited."*

However, although these strategies were mentioned as valuable resources, their presentation was accompanied in all verbalizations by doubts about their sustainability in terms of longitudinal application during the degree program, especially due to changes in groups and teachers that could disrupt the progress made. As in other categories, the creation of safe spaces and raising awareness in the environment emerged as urgent needs. Figure 5 shows the network for this category.

Figure 5

Category 4. Teaching and assessment practices that promote inclusion.



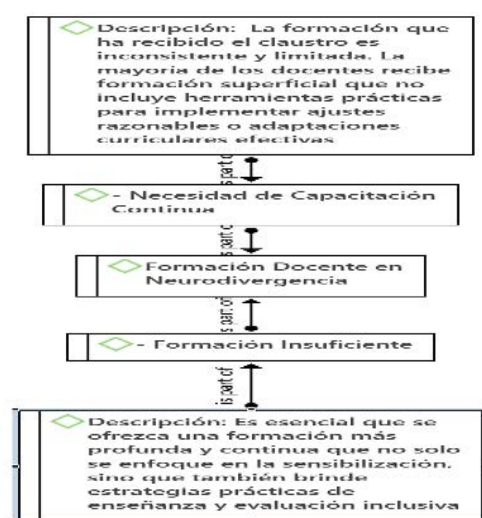
Source: prepared by the authors.

Finally, analysis of the category *"training and training needs"* revealed that training on neurodivergence and inclusion has been limited. This finding is critical, as it appeared in the narratives of all thirteen key informants, suggesting that even in specialized degree programs and faculties, neurodivergence remains a marginal topic. In addition, references were identified to the failure of training plans when they were implemented at the institutional level without prior awareness-raising.

With regard to the content of potential programs, there was a clear co-occurrence with respect to the codes established in the previous category, with an emphasis on pedagogical strategies, the adoption of technologies, the demands of administrative management in the presence of neurodivergent students, and the creation of support structures (well-being centers, psycho-pedagogical offices, mentoring/tutoring programs). Figure 6 shows the network for this category, while Figure 7 represents the general network for open coding.

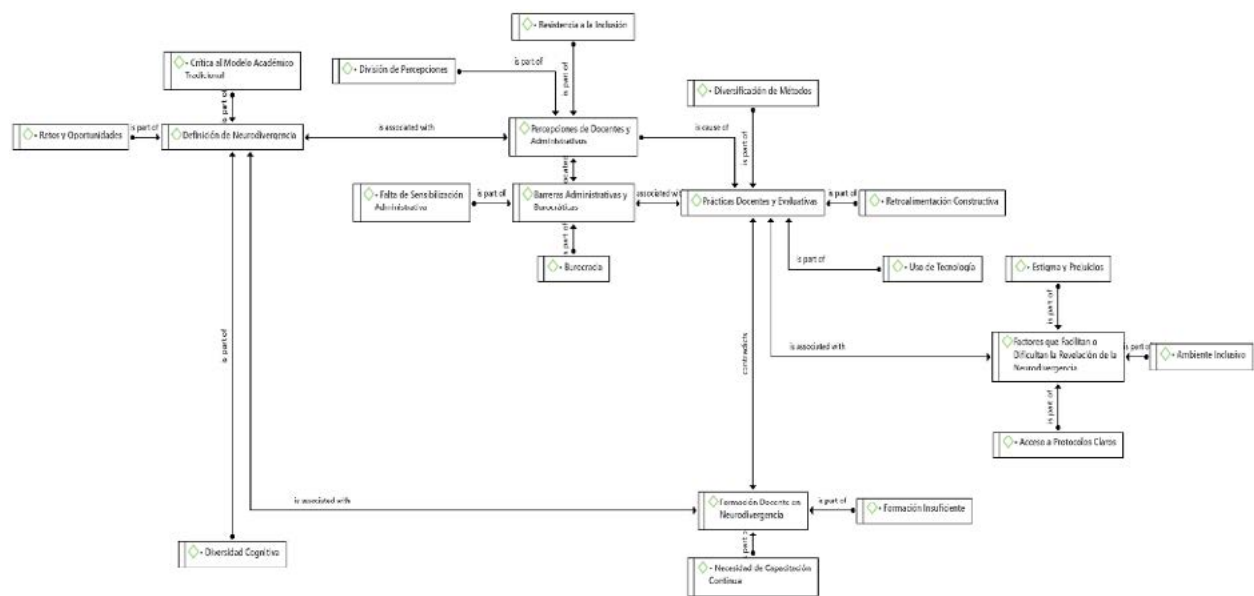
Figure 6

Category 5. Education and training needs.



Source: prepared by the authors.

Figure 7
Network representation of phase 1.



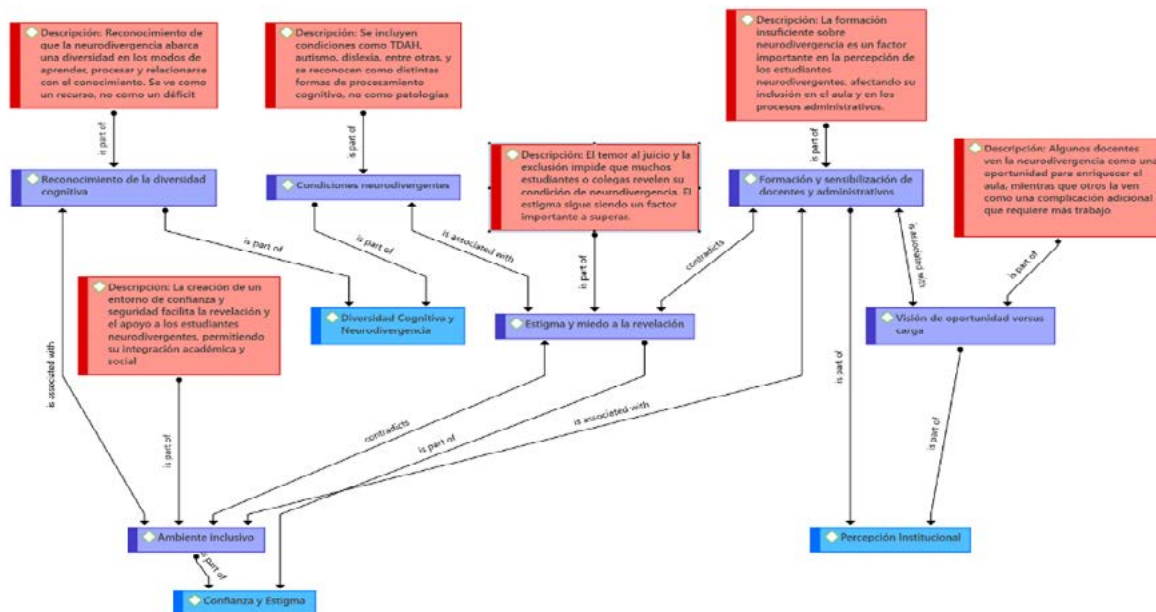
Source: prepared by the authors.

Second phase

The axial coding revealed key relationships between the emerging categories, which were represented in two networks. These networks were designed not only to provide a visualization of the codes and categories, but also a nuanced view of the conceptual hierarchies. To this end, a color system was used where blue represents the main categories, purple the secondary categories, and red the corresponding descriptions, which help to contextualize the analyses and relationships identified in this phase.

In the first place, neurodivergence is perceived differently among faculty and university authorities, reflecting the coexistence of traditional and inclusive approaches. This variability was linked to the absence of continuing education programs to ensure adequate attention to diversity, especially for neurodivergent students and teachers. Along the same lines, a clear relationship was observed between awareness and the success of transformations, since, apart from specific cases, achieving adequate inclusion of neurodivergent people requires prior awareness-raising processes, especially to avoid fatalistic and assistentialist approaches (Figure 8).

Figure 8
Axial coding I.

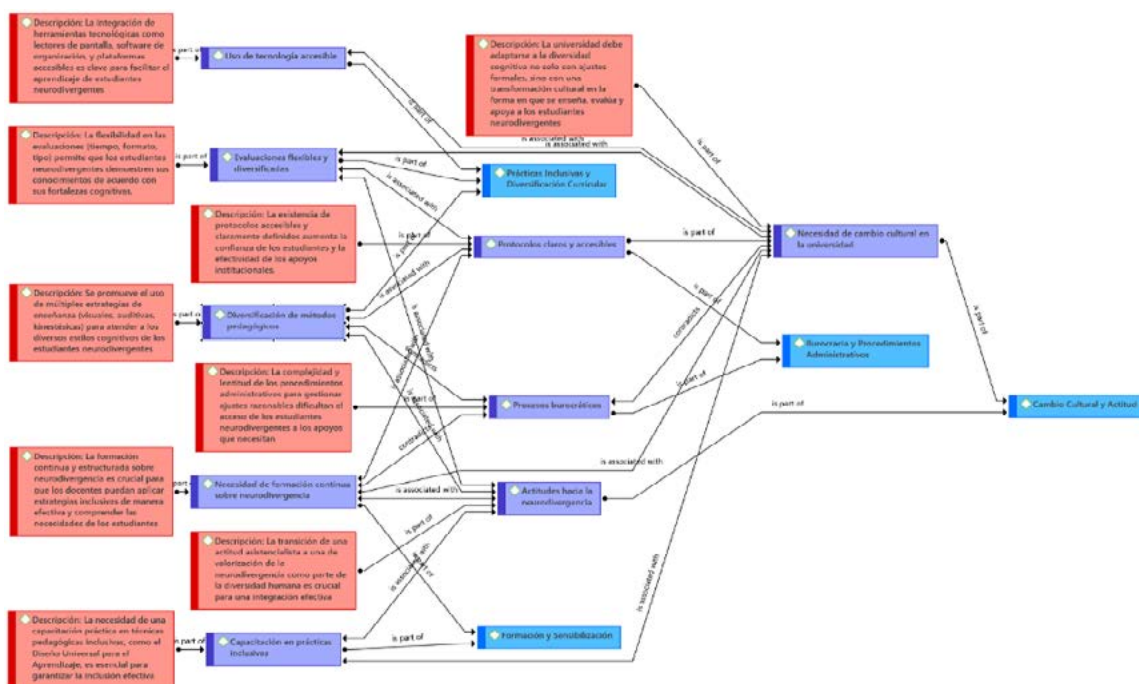


Source: prepared by the authors.

Another important relationship identified was between comprehensiveness and organizational culture, as it reflects that, although specific courses, teachers or groups show a willingness to make reasonable adjustments, these require external support so that they are not limited to finite experiences. Therefore, it is essential that there are feedback channels that cross

all organizational levels in universities, so that contextualized and coherent policies can be developed that bring together changes in the training model, management and the provision of support services (specialized diagnosis, psychological guidance, educational guidance). In figure 8 you can see the second axial coding matrix.

Figure 9
Axial coding II.



Source: prepared by the authors.

Third phase

The third phase began with the identification of the main emerging themes and associated subthemes resulting from the analysis of categorical relationships. Consequently, six fundamental themes were identified that endorse the participants' representation of neurodivergence in higher education. Table 2 details these emerging themes and subthemes.

Table 2

Results of selective coding in terms of themes and subthemes.

Themes	Subthemes
1. Neurodivergence as a system of opportunities for cognitive diversity and inclusion.	Neurodivergence as an added value in higher education.
	Rethinking traditional methodologies and assessment systems as a platform for adaptation to cognitive diversity.
	Representing neurodivergent students as valuable contributors instead of difference as a central attribute.
2. The divided representation of neurodivergence by teachers and administrators.	The disparity in the perception of neurodivergence.
	Institutional resistance to change towards inclusion, especially in contexts without previous experience of training/education on neurodivergence.
	The impact of cultural barriers and prejudices in the adoption of inclusive practices.
3. Stigma as a barrier to inclusion.	Implicit discrimination.
	Self-exclusion due to fear of marginalization and labeling.
	The perpetuation of stigmas due to insufficient training on neurodivergence.
4. The importance of institutional trust and the existence of safe spaces.	Creating safe environments for disclosure of diagnosis.
	The design and implementation of clear and accessible protocols for the management of reasonable adjustments.
	El diseño e implementación de protocolos claros y accesibles para la gestión de ajustes razonables.
5. Continuing education and training as a crucial unit.	Promoting role models through testimonials and experiences of successful neurodivergent individuals.
	The introduction of practical training programs in inclusive techniques and curriculum adaptation.
	The design and implementation of institutional awareness programs.
6. The impact of bureaucracy and administrative barriers.	The adoption of accessible technological tools and the introduction of diversified pedagogical models.
	Identifying and eliminating complex procedures that hinder access to reasonable adjustments.
	Analyzing administrative protocols that increase the burden on neurodivergent students in order to make them more flexible.
	Diagnosing inequality in access to resources due to socioeconomic, ethical, racial, and gender factors.

Source: prepared by the authors.

Based on selective coding, it was identified that the central theme connecting the other themes and subthemes is *the need to transform the university into an inclusive space*. This central theme highlights that neurodivergence is an enriching resource and a space for the legitimization of human, civil, and student rights, as opposed to its representation as an obstacle or illness. Meeting this need requires addressing persistent cultural and structural barriers, which

is the basis for creating safe and empathetic spaces. As in the other phases, this phase found that awareness raising, infrastructure adaptation, technology adoption, and ongoing training are crucial to ensuring that comprehensive care for neurodivergence is an effective and sustainable practice. Figure 10 provides a representation of the in-depth interpretation of the results in this phase.

Figure 10
Interpretation of selective coding results.



Source: prepared by the authors.

Finally, in this phase, the substantive proposal was developed, not as a theoretical construct per se, but as an alternative to achieve the profound cultural change that universities require to ensure the necessary comprehensive

attention to neurodivergence. In order to mitigate the aforementioned barriers and facilitate the transition from a rigid and homogeneous academic model to a flexible and diverse one, the essential strategies are set out in Figure 11.

Figure 11
Substantive contribution to promoting comprehensive attention to neurodiversity.



Source: prepared by the authors.

The results confirm the relevance of the study by showing that the university faculty is situated at a point of tension between deficit discourses and possibilities for inclusive transformation. The analysis provided answers to the research questions, reaffirming that the inclusion of neurodivergent students and teachers requires institutional and cultural transformation beyond specific adjustments, and that faculty representations are a decisive factor in shaping a truly inclusive university.

DISCUSSION

The study's findings revealed that neurodivergence is largely represented as an opportunity to enrich university teaching, as it is assumed that neurodivergent students and teachers can contribute perspectives and skills that enrich the academic environment. However, significant resistance was also identified within teaching and administrative staff, especially in degree programs where awareness-raising processes have not been carried out. This finding coincides with that of Borsotti et al. (2024), who assert that intersectional disadvantage and a lack of adequate preparation affect these students, to the point of minimizing the impact of micro-interventions.

In these scenarios, difficulties persist in implementing inclusive practices due to a lack of ongoing training and persistent prejudices. A study conducted in Scotland showed similar results, highlighting the experience of facing systemic barriers to achieving the same results as neurotypical students, which emphasizes the role that faculty can play in systematic inclusion (Jack et al., 2024).

On the other hand, a recurring topic was the stigma surrounding neurodivergence in higher education, which makes it difficult for students, teachers, and administrators to disclose their condition. The fear of being labeled as "less capable" or perceived as an additional burden remains an obstacle to full inclusion. In this regard, the mixed study by Marion et al. (2023) found that in autistic adults, stigma and self-stigma are related to perceived self-efficacy, while isolation and verbal bullying were highlighted as forms of exclusion, both with severe consequences in terms of self-esteem and self-efficacy.

The results obtained are consistent with previous studies that highlight the benefits of integrating neurodivergence into classrooms. In this regard, the literature suggests that the inclusion of neurodivergent students can enrich academic dynamics and improve collaborative learning (Borsotti et al., 2024). However, the study differs from some previous research that continues to emphasize the challenges associated with inclusion, without considering the pedagogical benefits that neurodivergent students can bring. Although Baker's (2023) doctoral thesis at Johns Hopkins University found a need to enhance these potential contributions as a basis for organizational and cultural change, studies such as those by Bailey and Petty (2025) and Butcher and Lane (2025) confirm that current pedagogical frameworks are far from the levels of development to which we should aspire.

The results also corroborate the findings of Delfino et al. (2020) and Murray et al. (2022), who identify institutional resistance as a key factor limiting effective inclusion. However, this study delves deeper into the perceptions and attitudes of the teaching staff, highlighting the need for cultural transformation within the university.

The issue of stigma faced by neurodivergent students has been widely discussed in the literature, as noted by Čolić (2025), who argues that fear of judgment prevents many students from identifying as neurodivergent. Another study confirming these barriers is that of Borsotti et al. (2024), which also highlights that stigma also affects teachers and administrators, who, in some cases, prefer to hide their condition to avoid having their professionalism questioned. Similarly, Sarchet (2024) states that teachers may be perceived as incapable of well-being by their colleagues and that, due to structural and cultural inefficiencies, they may be exposed to severe access difficulties.

Based on the findings, it is suggested that universities adopt more flexible pedagogical approaches that allow for diversification of assessments and the integration of multiple forms of learning. The use of accessible technologies and inclusive strategies such as Universal Design for Learning (UDL) should be implemented more systematically and not just as an exception (Barrera Ciurana & Moliner García, 2025; Horlin et al., 2024).

Teacher training in neurodivergence should be mandatory and ongoing, covering not only theoretical knowledge but also practical strategies for adapting the curriculum and assessments. It is essential that teachers are given tools to manage the diverse needs of students, without seeing this as an additional burden, which has proven to be an important step towards the sustainability of comprehensive attention to diversity at previous educational levels (Schuck & Fung, 2024).

CONCLUSIONS

The study confirmed that neurodivergence in education is a complex and poorly studied phenomenon, where challenges and opportunities are intertwined depending on structures, cultural norms, and the influence of new institutional and societal models. In this sense, the results reveal the persistence of cultural resistance, insufficient pedagogical articulation of the concept, and limited transition from discourse on attention to diversity to concrete practice.

The data analyzed allows us to conclude that participants represent the stigma and the inadequate training on neurodivergence as two significant barriers that make it difficult for neurodivergent students and teachers to openly accept their condition. As verified, these barriers limit inclusive practices in classrooms and educational spaces, with an exacerbated impact in technical faculties where neurodivergence is not a relevant topic on the educational agenda.

In relation to this, participants highlighted how crucial it is to promote cultural change at the institutional level, where neurodivergence is valued as an element of cognitive and socio-affective richness and not from reductionist and deficit-based perspectives. Therefore, theoretical and empirical findings allow us to recommend the design and introduction of clear inclusive policies that enable access to reasonable adjustments, student rights protection systems, and other support resources in an efficient manner. To achieve this goal, we suggest identifying and eliminating bureaucratic barriers, promoting awareness and teacher training, and creating safe spaces and educational guidance strategies for specialized care for neurodivergent persons.

Future research should focus on the representations of students and teachers without prior training in issues related to neurodivergence, the study of the effectiveness of the policies and programs implemented, and the longitudinal evaluation of indicators such as academic retention, communication of the condition, and professional performance of neurodivergent graduates. Finally, it is suggested that the focus be broadened to include perspectives from mixed groups, career trajectories, and integral support experiences in order to obtain a comprehensive view of experiences in higher education.

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Authors Roles:

AMCHC: Conceptualization, data curation and formal analysis, fieldwork, manuscript writing and revision.

MHL: Conceptualization, data curation and formal analysis, methodology design and fieldwork, data representation, manuscript review.

EMJZ: Data representation, manuscript writing and revision.

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GUÍA DE ENTREVISTA SEMIESTRUCTURADA

1. Introducción

- Agradecer la participación y explicar el propósito del estudio.
- Reiterar que no hay respuestas correctas o incorrectas; lo importante son sus percepciones.
- Garantizar confidencialidad y anonimato.

Bloque A. Representaciones y comprensiones sobre la neurodivergencia

Pregunta troncal:

1. Cuando escucha el término neurodivergencia en el contexto de la educación superior, ¿qué significa para usted?

Sondas:

- ¿Qué condiciones o perfiles cree que incluye?
- ¿Piensa más en dificultades o también en fortalezas?
- ¿Cómo describiría el lenguaje adecuado para referirse a estudiantes o colegas neurodivergentes?

Bloque B. Actitudes y creencias del claustro

Pregunta troncal:

2. ¿Cómo describiría la manera en que docentes y administrativos perciben a los estudiantes neurodivergentes en su institución?

Sondas:

- ¿Se habla de ellos en términos de capacidades, de limitaciones o de ambas?
- ¿Qué tan abiertos cree que son sus colegas a hacer ajustes?
- ¿Ha escuchado opiniones de que los apoyos puedan significar una “ventaja injusta” o afectar la exigencia académica?

Bloque C. Experiencias de divulgación y seguridad psicológica

Pregunta troncal:

3. ¿Qué factores facilitan o dificultan que un estudiante o colega revele su condición de neurodivergencia?

Sondas:

- ¿Existen temores a la estigmatización o experiencias previas negativas?
- ¿Qué ocurre cuando alguien revela su condición?
- ¿Cree que el entorno institucional favorece esa confianza?

Bloque D. Prácticas pedagógicas y de evaluación

Pregunta troncal:

4. ¿Qué prácticas docentes o evaluativas considera que favorecen la inclusión de estudiantes neurodivergentes?

Sondas:

- ¿Ha usado o escuchado del enfoque de Diseño Universal para el Aprendizaje (DUA/UDL)?
- ¿Qué estrategias de flexibilidad en tiempos, tareas o evaluación se implementan o podrían implementarse?
- ¿Qué barreras percibe (sensitivas, sociales, académicas)?

Bloque E. Accesibilidad tecnológica y recursos

Pregunta troncal:

5. Desde su perspectiva, ¿los materiales y plataformas que utiliza la institución son accesibles para estudiantes con diferentes formas de procesar la información?

Sondas:

- ¿Se incluyen subtítulos, audios, formatos alternativos?
- ¿Qué tan familiar es el claustro con tecnologías de apoyo?
- ¿Existen barreras digitales o tecnológicas recurrentes?

Bloque F. Procesos institucionales y servicios

Pregunta troncal:

6. ¿Qué tan claras y efectivas considera que son las rutas institucionales para gestionar apoyos o ajustes razonables en su institución?

Sondas:

- ¿Conoce las instancias encargadas de estos procesos?

- ¿Se perciben trámites ágiles o burocráticos?
- ¿Cómo se entiende la inclusión: como un derecho, un favor, una carga?

Bloque G. Desarrollo profesional del claustro

Pregunta troncal:

7. ¿Qué formación ha recibido usted o el claustro en temas de neurodivergencia e inclusión?

Sondas:

- ¿Qué necesidades de capacitación detecta?
- ¿Se siente preparado para responder a estudiantes ND?
- ¿Qué incentivos o barreras existen para que el claustro se forme en este tema?

Bloque H. Cultura institucional y clima

Pregunta troncal:

8. ¿Qué tan presente considera que están el estigma o el ableísmo en la vida universitaria?

Sondas:

- ¿Podría compartir ejemplos de actitudes o comentarios cotidianos?
- ¿Existen redes de apoyo o comunidades neurodivergentes reconocidas?
- ¿Percibe cambios recientes en la cultura institucional?

Bloque I. Interseccionalidad

Pregunta troncal:

9. ¿Cree que factores como género, etnia, nacionalidad o nivel socioeconómico influyen en cómo se vive la neurodivergencia en la universidad?

Sondas:

- ¿Ha notado diferencias en el acceso al diagnóstico o en la solicitud de apoyos según estos factores?
- ¿Existen grupos más invisibilizados?

Bloque J. Experiencias de personal docente/ administrativo neurodivergente

Pregunta troncal:

10. ¿Qué piensa sobre la experiencia de los propios docentes o administrativos que se identifican como neurodivergentes?

Sondas:

- ¿Tienen acceso a ajustes laborales?
- ¿Cómo se percibe su trayectoria académica y profesional?
- ¿Qué desafíos enfrentan?

Bloque K. Mitos frecuentes

Pregunta troncal:

11. ¿Qué cree que son los principales mitos o ideas erróneas que circulan en el claustro sobre la neurodivergencia?

Sondas:

- ¿Qué tan comunes son frases como “esto baja estándares” o “es demasiado costoso”?
- ¿Se piensa que todas las personas ND tienen las mismas necesidades?
- ¿Cómo cree que estos mitos afectan la inclusión?

Bloque L. Oportunidades de mejora

Pregunta troncal:

12. Desde su experiencia, ¿qué cambios cree que podrían implementarse en su institución para mejorar la inclusión de personas neurodivergentes?

Sondas:

- ¿Qué acciones simples considera viables a corto plazo?
- ¿Qué transformaciones curriculares o estructurales serían necesarias?
- ¿Qué papel pueden tener el claustro y los servicios de apoyo en estas mejoras?

13. Cierre

- ¿Desea agregar algo más que considere importante sobre la relación entre neurodivergencia y educación superior?