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Neurodiversity in South African Education. A Study of Policy and Research on Autism and Attention-Deficient/Hyper-Activity Disorder

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ABSTRACT

This conceptual paper advocates for the recognition of neurodiversity within South African education policy as integral to the realization of inclusive education. Current policy discourses marginalize neurodivergent communities by conflating neurodiversity with disability, reproducing deficit-based framings that neglect intersectional realities. This underrepresentation has negative consequences for the participation and recognition of neurodivergent learners, particularly those with autism and attention-deficit/hyperactivity disorder. We argue that policy reform is essential to reframe neurodiversity as difference, rather than disability. Drawing on the cultural model and intersectionality theory, this study undertakes a qualitative analysis of post-apartheid education policy documents and relevant scholarly literature. The analysis critically interrogates how neurodiversity is framed, the extent of its representation, and the implications of prevailing deficit-oriented conceptualizations for inclusive education in South Africa. Findings reveal that neurodiversity is largely absent from existing policies, and when referenced, it is mischaracterized through medicalized discourses that reinforce stigma. Such framings erase strengths-based perspectives, perpetuate negative perceptions of autism and attention-deficit/hyperactivity disorder, and constrain institutional capacity to develop inclusive practices responsive to South Africa's sociocultural context. We call for Afrocentric, intersectional, and community-driven policy reform. Reframing neurodiversity as human diversity would align with UNESCO's Salamanca Statement, enhance institutional inclusivity, and improve the educational experiences of neurodivergent learners across schools and universities in South Africa.

1 | Introduction

This paper is an analysis and critique of how neurodiversity is conceptualized in South African education policies, surveying both basic and higher education policies. We argue that the evident policy failure to meaningfully represent neurodiversity, in terms that reflect the intersectional complexity of South African society and the neurodiverse community, has significant negative consequence for the ability of educational institutions to effectively support and recognize this community. Our analysis

will show that where neurodiversity is mentioned in policy it is mischaracterized as a “disability”, reinforcing stereotypical language and prejudices that are harmful to the neurodivergent community. This conceptualization contradicts the neurodiversity approach we affirm in this paper, that neurodevelopmental differences are forms of human diversity, and not disabilities (Acevedo and Nussbaum 2020). Drawing on the cultural model and intersectionality theory we advocate for community-rooted policy redrafting initiatives that will better represent and advocate for this community.

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This focus is necessary because neurological difference in sub-Saharan Africa is commonly associated with negative attitudes due to superstitions, misinformation, and a lack of awareness about different neurodevelopmental conditions (Abubakar et al. 2016). Furthermore, there is little evidence of meaningful efforts to develop an inclusive education system that caters for the needs of neurodivergent people (Mutanga 2017). In South Africa, the emphasis in research, policies, and government initiatives, with respect to inclusive education, tends to focus on basic education¹ and on disability and impairment (Rambe and Moeti 2017; Siwela 2017). We argue that neurodiversity recognition and advocacy must also form part of these initiatives, and that recognizing and re-positioning neurodiversity in policy will lead to better experiences for neurodivergent individuals in schools and universities. Furthermore, such policy development should also be intersectional and Afrocentric; meaning that it should be relevant to the combination of challenges that South African neurodiverse individuals face. This sensitivity to the local context follows the Salamanca Statement's (UNESCO 1994) recommendation that inclusive education should respond to specific forms of exclusion experienced in different places, and be adapted to local contexts and values.

This study considers the two most prevalent forms of neurodiversity: autism² and attention-deficit hyperactivity disorder (ADHD). Significantly, autism and ADHD are officially classified as neurodevelopmental "disorders", reinforcing the idea that neurodiverse individuals have a "disorder", or are "suffering" from an impairment. For example, the Diagnostic and Statistical Manual of Mental Disorders describes ADHD as: "a neurodevelopmental disorder defined by impairing levels of inattention, disorganisation, and/or hyperactivity-impulsivity" (American Psychiatric Association 2022, p. 36). Part of our focus is to contest this deficient language, and advocate instead for neurodiversity as part of the range of different cognitive traits that people have. Crucially, this is not an attempt to negate the challenges of neurodiversity, but to recognize that there are also strengths (Climie and Mastoras 2015).

The paper will develop as follows, firstly it will explain the theoretical frameworks, the cultural model and intersectionality, which underpin our analysis. Then it will present a background survey on existing literature that explores how ADHD and autism are understood in South African communities and more globally. From there we will analyze education policy in post-apartheid South Africa, focusing on the extent to which the conceptualization of inclusion does not accommodate neurodiversity in ways that allow for the effective support of this diversity. Lastly, we will propose specific interventions in the form of consultative policy drafting processes to support and enhance South Africa's inclusive education aspirations.

2 | Theoretical Framework

This study combines the cultural model, an approach originating in disability studies that celebrates difference, with intersectionality, a philosophical approach grounded in human rights and the mitigation of exclusion (Waldschmidt 2017). The cultural model argues that we should focus on recognizing an individual's strengths, rather than reducing them to their impairments (Conyers 2003). Furthermore, the model argues that exclusion is

often created by cultural prejudice, and thus changing cultural prejudice toward a positive reception of difference can promote societal acceptance (Forber-Pratt 2019). Thus, a key intention of the cultural model is to ensure that despite impairments, people can "take pride in their unique traits and bodies" (Zaks 2024, p. 8). Therefore, the cultural model seeks to both challenge existing exclusionary culture, while fostering respect for and acceptance of difference. Significantly the cultural model emphasizes the need to adapt inclusive strategies to the specific context in which research or support efforts are implemented (Twardowski 2022). This is important in South Africa, where research has shown that existing inclusive discourses and efforts often lack local relevance (Donohue and Bornman 2014; Engelbrecht et al. 2016).

In combination with the cultural model, intersectionality highlights the complexity of exclusion and proposes a multifaceted view of marginalization. According to Crenshaw (2013), intersectionality "is an analytic sensibility, a way of thinking about identity and its relationship to power" (p. 1). It argues that different kinds of identities and their associated challenges may intersect in the same context, and in the same individual. This requires advocacy and support approaches that can respond to a variety of intersectional challenges, rather than narrow approaches that focus on just one factor. Intersectionality aims for a more holistic analysis, promoting "an understanding of human beings as shaped by the interaction of different social locations" (Hankivsky 2014, p. 2). Because social locations are connected to identities Crenshaw (1991) argues that intersectionality "highlights the need to account for multiple grounds of identity when considering how the social world is constructed" (p. 1245). It is therefore a useful approach in guiding our study toward a deeper understanding of neurodiversity beyond that identity marker alone, ensuring a more nuanced understanding of neurodiversity. By applying intersectionality, this study positions neurodiversity within the broader context of challenges present in the South African education system, including socioeconomic issues, gender and other factors. This aligns with the goal of inclusive education, which is to identify and challenge practices that alienate people from different identity groups (Walton and Engelbrecht 2022).

The combination of the cultural model and intersectionality is useful for this study as it provides a more holistic, context-sensitive, and affirmative lens for understanding neurodiversity. The cultural model challenges deficit framings of autism and ADHD by emphasizing strengths and community relevance. Intersectionality, meanwhile, situates neurodivergence within South Africa's layered inequalities of race, class, gender, and language. This combination is therefore essential for our analysis of policy, because it reveals how current legislative frameworks not only frame neurodiversity as disability, but also fail to respond to the intersecting realities of neurodivergent learners and students in South Africa. Using this combined framework, we argue for a locally relevant, intersectional approach to educational policy development and advocacy for neurodivergent students across the South African education landscape.

3 | Background

Having set out the conceptual foundation, we now discuss how global and local literature has understood autism and ADHD, and how these understandings reflect in the South African policy

landscape. Although global research on autism and ADHD has expanded significantly in recent decades, these discourses remain dominated by Western contexts and assumptions (Daley and Birchwood 2010; Gurbuz et al. 2019). Such perspectives often frame neurodiversity in medicalized or deficit-based terms which are then exported to the global South as universal approaches (Manase 2024). This imposition is problematic because it obscures the local cultural, social, and historical factors that shape how neurodivergence is understood and experienced in specific contexts, including South Africa. Supporting this Hirota et al. (2024) argue that “cultural contexts that shape social norms and dictate different preferences can also account for the different trajectories of the development of neurodiversity paradigms and movements” (p. 2686). Harris (2017) confirms this, indicating for example, that in low-income contexts in the United States, negative perceptions of autism are informed by cultural and religious beliefs, whereas in middle-to-high income contexts, perceptions tend to be influenced by conspiracy theories around vaccines and food additives. Acknowledging that neurodiversity paradigms develop differently across cultural contexts supports the argument that South Africa requires its own contextually grounded approach.

In South Africa, global deficit discourses intersect with unique local challenges, ranging from traditional beliefs and stigma (Laitila 2018) to enduring structural inequalities and apartheid legacies (Walton 2023). Thus, while it is useful to consider Western sources of knowledge about neurodiversity, a locally grounded, Afrocentric perspective is essential for South Africa. Matshabane and Seedat (2024) assert that neurodiversity discourses should be formulated using African cultural norms and practices. This should draw on local and culturally specific indigenous knowledge to problematize Euro-American discourses and knowledges that would otherwise remain hegemonic (Manase 2024). Existing local value systems that encourage respect for difference can also be applied in advocacy and policy development for the recognition of neurodivergent people. This contextual orientation not only aligns with the cultural model, which positions support for people with identified differences in ways that are relevant to local communities and are responsive to the norms of specific contexts; but also underscores the need for intersectional approaches that account for race, class, gender, and language (Waldschmidt 2017).

In addressing Afrocentric views on the inclusion of neurodivergent individuals it is vital to consider the status quo, and the current prejudices that act as barriers to inclusivity. In developing countries, the lack of knowledge about neurological differences plays a significant role in perpetuating ignorance about neurodiversity, and contributes to the lack of support for neurodivergent people (Matshabane and Seedat 2024). Longstanding cultural beliefs also contribute to negative attitudes surrounding neurodiversity. For instance, the prejudices of African communities inform their perceptions of neurodiversity, as in the case of Swahili communities in Kenya, in which, Greer et al. (2022) found that “any associated shame [because of a child’s neurodiversity] is attributed to the mother’s nurturing, rather than due to neurodiversity” (p. 2). Similarly, in a South African study involving mothers of autistic children, Manono and Clasquin-Johnson (2023) found that mothers carried guilt from being blamed for their children’s neurodivergent

behavior. In both these examples neurodivergence is attributed to parental failure in child rearing. Such views reinforce a deficit understanding of neurodivergence but also highlight how social and cultural contexts intensify exclusion.

The marginalization of neurodivergent individuals due to cultural prejudice, however, also exists alongside other forms of exclusion (Walton 2023). Race, language, disability, and economic inequality are forms of marginalization and discrimination in South Africa, and a combination of them can be experienced by neurodivergent individuals. This is significant when considering policy focus to address marginalization in South Africa. During apartheid, autism, ADHD, and neurodiversity more broadly received no policy recognition. Post-apartheid redress initiatives prioritized racial and gender equality and advanced the rights of persons with disabilities, but they did not extend to neurodivergent identities (Du Plessis 2013; Mzangwa 2019; Naicker 2007). This omission is striking given that the global neurodiversity movement emerged in the 1990s, as South Africa entered democracy, advocating for the recognition of neurological difference as part of human diversity (Legault et al. 2021). Yet neurodiversity was not included in South Africa’s transformation agenda, and three decades later it remains marginal in education policy (Viljoen et al. 2019). This highlights the need for an Afrocentric and intersectional approach today. We argue that neurodiversity discourses should draw on African cultural norms and indigenous knowledge to articulate “what neuro-inclusivity looks like from an Afrocentric standpoint” (Matshabane and Seedat 2024, p. 274). Such an approach would reframe support in ways that resonate with local communities and address intersecting exclusions related to race, class, gender, and language. This approach would also align well with the cultural model by recognizing strengths and differences within a particular social context, rather than reducing identities to impairments.

4 | Research on Autism and ADHD in South Africa

In this section, we consider research on autism and ADHD in South Africa to illustrate how deficit framings and contextual challenges are reflected in South African studies, and how they continue to position the possibilities for inclusion in education. Research suggests that there is little knowledge about ADHD and autism in South Africa, despite their increasing worldwide prevalence. Autism is either unknown or poorly understood and there is little data on it in the South Africa (Guler et al. 2018; South et al. 2017; Springer et al. 2013). Bakare et al. (2022) report that sub-Saharan Africa remains among the least informed global regions about autism. ADHD is also not well-documented and information about it is lacking, particularly among black South Africans (Muthukrishna 2013). Although recent advances in resources have led to an improved capacity for diagnosis and data gathering, there is still a general lack of awareness of neurodivergence. To address this, more studies are needed to better position and understand neurodiversity in the global South, and further document the worldwide prevalence of autism and ADHD (Topkin et al. 2015).

Generally, in the global South neurodiversity is presented as a disease or deficiency that requires special needs education

(Manase 2024). Furthermore, neurodiverse individuals in South Africa are still represented in problematic ways (Laitila 2018). This negativity is so entrenched and unreflective that even advocacy groups perpetuate negative stereotypes about neurodevelopmental conditions. For instance, in a study by Clasquin-Johnson (2023) on the descriptions of autism on the websites of 64 autism advocacy organizations in South Africa, most described it negatively, and in ways aligned with medical model discourse. Terms such as “disease”, “severe lifelong condition”, “developmental disability”, and “a tragedy” are commonly used in the advocacy groups’ explanations of autism.³ This undermines the legitimacy of advocacy efforts because neurodiversity movements should challenge existing negative stereotypes. The negative terminology only describes deficits, despite the substantial research that shows that autism, for example, also has positive traits, such as hyperfocus, attention to detail, and a strong sense of justice (Cherewick and Matergia 2024; Xueyan 2021).

This negative perception of neurodiversity is so pervasive that even a recent South African government initiative to raise autism awareness on World Autism Day labelled autism “a global health crisis” (Government of South Africa 2024). By describing it as a “crisis” the government implies that autism is perceived as a sickness, and something to be cured and prevented. According to this conceptualization, neurodiversity is seen as a set of “clinical disorders that require treatment of an individual’s pathology” (Knopes 2024, p. 1). This conceptualization differs significantly from the neurodiversity movement which celebrates neurological differences as “the diversity of brain function caused by various developmental conditions and experiences” (Victor-Aigbodion and Eseadi 2023, p. 1).

Research in South African education on autism and ADHD has often reinforced deficit-based understandings rather than promoting inclusive perspectives. For instance, in their study on teachers’ experiences of supporting learners with ADHD, Braude and Dwarika (2020) categorized these learners as “learners with special education needs” (LSEN). Although ADHD may involve challenges such as attention difficulties and hypersensitivity, the use of LSEN terminology, derived from Education White Paper 6: Special Needs Education, Building an Inclusive Education and Training System (WP6) (Department of Education 2001), reduces learners to disability and impairment labels. WP6 explicitly defines LSEN as “learners with disabilities and impairments” (p. 7), a framing that contradicts more progressive conceptions of diversity and difference. Similarly, in their study on autism prevalence in the Western Cape, Pillay et al. (2021) situated autism within a catalogue of “disability categories” that included hearing, visual, physical, and intellectual impairments, behavioral disorders, epilepsy, and ADHD (p. 1083). Such classifications not only position neurodivergence within a pathology-oriented discourse, but also obscure opportunities to recognize autism and ADHD as forms of human diversity. In this way, research practices themselves risk entrenching deficit narratives, thereby perpetuating negative conceptualizations of autism and ADHD.

Having discussed the negative conceptualization of autism and ADHD as “disabilities” in South Africa, an analysis of why this is problematic is necessary. Importantly, we do not deny that people have impairments as part of their experience of autism or ADHD. Den Houting (2019), an autistic neurodiversity

advocate, agrees that there are natural impairments that exist in autistic individuals, but this does not necessarily constitute disability. Disability, Den Houting (2019) adds, “results, not from autism itself but instead from living in a society which tends to be physically, socially and emotionally inhospitable towards autistic people” (p. 271). This statement rings true for the South African context, exposing the core reason why instilling positive, neurodiversity affirming attitudes in this society and educational system is such a challenge. Other related reasons are a lack of knowledge about neurodiversity in South Africa, and the general stigma toward different neurotypes (de Milander et al. 2020; Guler et al. 2018).

Den Houting’s (2019) assertion that disability arises from society’s inability to respond to diversity is informed by the social model of disability, rather than the cultural model we advocate here. The social model posits that impairments themselves are not disabling; rather, exclusion occurs when schools, workplaces, and broader society fail to accommodate difference (Oliver 1996). This framework has also shaped much of the neurodiversity movement, which often interprets the challenges faced by neurodivergent people through a social-model lens (Knopes 2024). Yet, as Constantino (2018) observes, the movement simultaneously resists the social model’s tendency to classify autism and related conditions as “impairments”, instead positioning them as forms of human difference. In this regard, the cultural model provides a more nuanced approach because it acknowledges both strengths and impairments within neurological difference (Waldschmidt 2018). Recognizing impairments remains essential for mobilizing appropriate support, but affirming difference as a valued dimension of diversity counters deficit narratives and fosters inclusion. In South Africa, however, research, advocacy, and policy discourse largely emphasize impairment and continue to frame neurological difference within a tragedy model (Clasquin-Johnson 2023), thereby limiting space for more informed, positive and inclusive understandings.

The research landscape in South Africa currently reveals both the lack of knowledge, and the persistence of exclusionary framings of autism and ADHD. This highlights the urgency of developing Afrocentric, intersectional, and neurodiversity-affirming approaches that can inform policy and practice. Having considered how research constructs autism and ADHD, we now turn to the legislative and policy frameworks that govern inclusive education in South Africa. Examining these frameworks is essential because policy not only reflects dominant conceptualizations of neurodiversity but also structures the practical possibilities for inclusion in schools and universities.

5 | Legislation and Policies

This section reviews South African legislative and policy frameworks related to inclusive education post-1994 to determine the level of focus on neurodiversity as well as to identify and critique its classification. In this analysis, the aim is to determine whether and to what extent there is a focus on neurodiversity, or at least of neurodevelopmental conditions, such as autism and ADHD. In cases where this focus is indicated, the statements in the policies will be analyzed to determine whether they present autism and ADHD as forms of diversity, as the neurodiversity movement

argues (Cheng et al. 2023), or as disorders and disabilities. This is a necessary consideration because ideological positions in policies exert significant influence on the practices of institutions, and ultimately on the lived experiences of neurodivergent individuals in the educational space. In this analysis, legislation and subsequent policies developed post-1994 that focus on the right to education, and more specifically inclusive education, are considered. These are policies from both the basic and higher education contexts.

Educational policy development in post-apartheid South Africa has largely followed a reform agenda in which previously marginalized populations are prioritized, with the aim of providing education on an equal basis and eradicating existing inequalities. Given that the injustices of the past were largely racially motivated, there has been significant emphasis in post-apartheid South Africa on advancing educational opportunities for black people in a non-racial and unified education system (Majee and Ress 2020). Although the prevalence of past racial prejudice necessitates policy focus on racial equality, there has been a neglect of other populations, including neurodivergent people. Despite their increasing presence across basic and higher education, neurodivergent learners and students are hardly represented and advocated for in educational policies (de Milander et al. 2020; Erasmus et al. 2022). Arguably, there has been a slow response from government and educational institutions to the growing levels of diversity in the South African student population. The appropriate response to an increasingly diverse learner and student population begins with enacting laws and policies to protect the rights of all forms of diversity in the educational environment. While legislation and policies are not, in themselves, sufficient for the inclusive transformation of the education system, the lack thereof is detrimental, as no common guiding framework can be referred to in cases where students feel excluded. Viljoen et al. (2019) confirm the paucity of representation of neurodiversity in South African legislation, stating that “there are no legal mandates for [autism] ASD-specific services in South Africa” (p. 2116). The lack of representation of autism and other forms of neurodiversity results in the ongoing neglect of the rights of neurodivergent students across the education system. A starting point would be to develop legislative instruments that affirm and celebrate neurodiversity. Before explaining what, such policies would look like, we give a detailed analysis of existing educational policies on inclusive education in South Africa to determine the extent to which they consider neurodiversity.

The South African Constitution, widely regarded as a progressive and forward-thinking set of principles, places a high standard on the promotion of human rights (Du Plessis 2013). With the Constitution setting the example, subsequent legal and policy instruments should also show a similar regard for human rights and diversity. However, this is not the case in relation to neurodiversity. None of the existing education policies mention neurodiversity as an integral part of the diverse character of the South African population. While provisions for this are constitutionally possible, they are still not fully realized in subsequent legislation and policy. This lack of specificity on neurodiversity in educational policies is a global issue, seen in both developed and developing countries. In Scotland for example, neurodivergent individuals are still grouped as “disabled,” with their inclusion in educational institutions provided

for under the Learning Disabilities, Autism and Neurodiversity Bill (Scottish Government 2023). The bill recognizes neurological difference, but classifies it as a form of disability, which is another example of a deficit focus (Jack et al. 2023). It would be more appropriate for existing policies on inclusive education to better represent neurodivergent identity as a separate, but equally important demographic. Essentially, we are arguing for intersectional “disability and neurodiversity” policies, and not necessarily for the development of separate neurodiversity policies. Guided by intersectionality theory, we argue that policies that focus solely on neurodiversity would unnecessarily compartmentalize what is a fluid dynamic of overlapping forms of exclusion that should be addressed collaboratively, and not in isolation. We expand more on this argument below. In the sections below, we examine the development of educational policies from the beginning of democracy in South Africa, relating to the inclusion of previously marginalized groups, with special attention to whether neurodivergent individuals are considered in the reform agendas that the policies promote.

6 | Basic Education Legislation

Basic education, segregated along racial lines during the colonial and apartheid eras, has significantly changed in South Africa since 1994, and is now unified and non-racial (Du Plessis 2013). In post-apartheid South Africa the South African Schools Act (SASA) (Department of Education 1996) expresses the government’s commitment to uphold the right of every child to receive an education. The SASA prohibits marginalization, stating that “a public school must admit learners and serve their educational requirements without unfairly discriminating in any way” (Department of Education 1996, p. 6). This general statement is not specific to any particular forms of diversity, but rather inclusive of all. Building on the SASA, the WP6 (Department of Education 2001) is the main policy for inclusive education in South Africa. As a White Paper its aim is to provide the blueprint for restructuring the education system so that learners with disabilities are integrated into, and attend mainstream schools, rather than separate special schools (Nthibeli et al. 2022). Although it is not enforceable by law, it is underpinned by the Constitution and the Schools Act. Although the WP6 adopts a shift from the medical model to the social model of disability and seeks to remove negative attitudes toward disability, encouraging tolerant, positive attitudes, an ambiguity is created through the paper’s persistent focus on disability, rather than diversity (Donohue and Bornman 2015). While the shift from the medical to the social model of disability aligns with most global initiatives and legislation, such as the Salamanca Statement and Convention for the Rights of Persons with Disabilities (UNESCO 1994; United Nations 2006) the social model of disability still operates *within* a disability framework, which, as we argue, is not appropriate for neurodiversity categorization.

As indicated, WP6 mentions neurological impairments but categorizes them as disabilities. The White Paper also recognizes neurological differences, stating that “different learning needs arise from a range of factors including physical, mental, sensory, neurological and developmental impairments” (Department of Education 2001, p. 7). However, the recognition of neurological differences as impairments alone, without acknowledging the

strengths associated with them, is limited and reinforces a disability discourse of neurodiversity. Neurodiversity advocates argue that while neurodivergent people may naturally experience some impairments, they also possess unique strengths which are part of their neurological makeup. For example, Taneja et al. (2024) argue that hypersensitivity can lead to some neurodivergent people possessing an excellent attention span and an eye for details. This is true for students with autism and ADHD alike, who characteristically are highly sensitive to sensory input (De Vries 2024). By considering neurodiversity only in terms of impairment, the WP6 adds to its conceptualization as a disability, and not natural cognitive diversity. More comprehensive, intersectional policy positions should be developed which speak to neurodiversity on multiple levels, including its strengths. Taneja et al. (2024) properly capture what the inclusion of neurodivergent people could be, stating that “true inclusion must start moving away from a deficit-based perspective to one that recognises and nurtures their unique strengths and talents” (p. 3). WP6, despite its important contribution, fails to do this.

7 | Higher Education Legislation

Like basic education, higher education in apartheid South Africa was segregated along racial lines, with very limited opportunities for most of the population to access it (Griffiths 2025). In addition to racial inequality, apartheid higher education also perpetuated gender and class inequality. To create a more inclusive and accessible tertiary landscape, these and other forms of inequality, such as socioeconomic inequality and language barriers, had to be addressed. The Higher Education Act of 1997 (Department of Education 1997) set the course for this transformation and remains the legislative document governing higher education institutions in South Africa (Mzangwa 2019). The Act affirms a commitment to “pursue excellence, promote the full realisation of the potential of every student and employee, tolerance of ideas and appreciation of diversity” (Department of Education 1997, p. 2). The stated aim to realize the potential of each student is also held by the neurodiversity movement, and in addition to the objective of appreciating diversity, these pronouncements could provide a positive basis for neurodiversity advocacy and policies. After the Higher Education Act the Ministry of Higher Education began a transformation agenda, which was expressed through White Paper 3 – A Program for Higher Education Transformation, in 1997 (Department of Education 1997). This framework was based on the analysis that there was “an inequitable distribution of access and opportunity for students and staff along the lines of race, gender, class and geography” in higher education (Department of Education 1997, p. 8). However, in spite of the recommendation from the White Paper, Akala (2018) argues that some of the transformation envisaged by this policy has barely been realized, specifically mentioning the lack of progress in achieving gender equality in higher education. Our concern is that the White Paper remains an inadequate framework for advancing diversity transformation. There is no reference to neurodiversity as a form of difference, despite the White Paper pledging to “promote institutional cultures which will embody values and facilitate behaviour aimed at peaceful assembly, reconciliation, respect for difference and the promotion of the common good” (Department of Education 1997, p. 42). Although these are positive principles that align with respect for human rights, they remain very general.

Since White Paper 3, no higher education policy has shown any meaningful recognition of neurodivergent students or made any commitment to address their challenges. This has been the case for nearly three decades, and even the most recent policy framework for the advancement of inclusive education in higher education does not address neurodiversity. The framework, titled the Strategic Policy Framework on Disability for the Post-School Education and Training System (Department of Higher Education and Training 2018), focuses on inclusive education in terms of disability, listing both autism and ADHD in this respect. The Strategic Policy Framework specifically mentions “neurological and/or emotional disabilities” among the categories for which it seeks full inclusion (Department of Higher Education and Training 2018, p. 31). However, the only mention of support for neurological difference is expressed as a commitment to using assistive technologies, such as “using voice control to navigate smartphones, improving communication skills of people with autism” (p. 25). In terms of neurodiversity advocacy, this policy lacks the specificity needed to address the marginalization of neurodivergent students, and merely perpetuates a deficit discourse (Austin and Pisano 2017). However, we must acknowledge that the specific mention of autism, ADHD and the broader category of neurological differences (despite describing them as disabilities) shows that there is some recognition of their existence in higher education policy. Nevertheless, this limited policy focus confirms that “neurodiversity”, as a concept, is not part of South Africa’s education landscape broadly, and higher education specifically, despite its rising prominence as a global phenomenon of human difference.

8 | Possibilities for Neurodiversity Policy

Building on the analysis of both research and policy, this section sets out possibilities for how neurodiversity can be more explicitly and positively integrated into South African education policies and society more broadly. These proposals draw directly on the cultural and intersectional frameworks outlined earlier, from an Afrocentric perspective. Though autism and ADHD are mentioned in the 2018 policy they are positioned in a deficit-based, disability language. We argue that this positioning needs to fundamentally shift toward one of tolerance, acceptance and appreciation of neurological differences, not as a disability, but as part of human cognitive diversity. Such a repositioning will challenge existing modes of thinking, including traditional norms and institutional cultures. We therefore draw on the cultural model framework which advocates for the recognition and celebration of difference by challenging existing practices that lead to exclusion (Atherton et al. 2023). The cultural model seeks to align diversity with positivity, with Zaks (2024) adding that the model aims “to question culturally produced notions of what is normal” (p. 17). Thus, in this paper’s context, we challenge the established notion that neurotypical people are “normal” and neurodivergent people are “disabled” or “abnormal.” Instead, we argue that the full spectrum of human neurology should be valued and appreciated, and that existing legislation and policies should acknowledge neurodiversity as integral to South Africa’s rich diversity.

Integrating neurodiversity-affirming, intersectional amendments into South African inclusive education policy requires two key shifts. First, policy development must involve neurodivergent people themselves to ensure that reforms reflect their lived

experiences and needs. This consultative approach echoes the early post-apartheid process that shaped White Paper 6 (WP6), where engagement with people with disabilities helped to make the policy relevant and responsive (Lomofsky and Lazarus 2001; Van Rooyen et al. 2003). Similar ground-up participation should guide the formulation of neurodiversity policy, as seen in Sri Lanka, where engaging neurodivergent students has significantly strengthened institutional support services (Fernando 2024). Second, policy must actively counter deficit framings by promoting positive perceptions of neurological difference. Current policies and awareness campaigns continue to categorize autism and ADHD as disabilities or “disorders” (Department of Education 2001; Department of Higher Education and Training 2018), reinforcing stigma that undermines students’ participation and belonging (Clouder et al. 2020). In contrast, evidence-based, neurodiversity-affirming guidelines should position autism, ADHD, and other forms of neurodivergence as dimensions of cognitive diversity, valued for both strengths and challenges (Horlin et al. 2024; Xueyan 2021). The language used is especially critical as deficit-based discourse not only erodes self-confidence among neurodivergent students, but also perpetuates negative attitudes in educational institutions and society at large (Hirota et al. 2024; Wagland et al. 2025). As Bottema-Beutel et al. (2021) assert, everyday and institutional discourse maintains power relations, thus deliberately shifting toward strength-based, affirming language can reshape identity and social attitudes. Ultimately, policies should not merely advocate for neurodivergent students as a vulnerable group. They should instead go beyond this to ensure the transformation of educational institutions into genuinely neurodiversity-friendly environments.

Another aspect central to our argument is the need for an intersectional focus in the policy revisions for neurodiversity. While we reject the categorization of neurodivergent identities as disabilities, the association between neurodiversity and disability in research and policy is a starting point for advocating for neurodiversity, because of the intersectional complexity it presents (Gillespie-Lynch et al. 2020). According to Crenshaw (1991), intersectionality highlights “overlapping systems of subordination” (p. 1265), which pertains to neurodiversity and how it connects with other rights-based movements against oppression. Understanding these intersectional dimensions entails analyzing different aspects of marginalization and drawing from a multiplicity of contexts in defending the rights of marginalized peoples. Currently, the rights of autistic and ADHD students in South Africa are advocated for by disability-focused organizations, and the progress made by those entities is valuable (Matshabane and Seedat 2024). For instance, in South African universities “disability units” are responsible for ensuring that neurodivergent students receive the necessary assistance and concessions in their studies, according to their needs (Mbuva 2019; Nthibeli 2025). While this means there is recognition and assistance afforded to neurodiverse individuals, the next step is to move away from the perception that neurodivergence is a disability, and instead advocate for inclusion and the celebration of difference in the educational space. This is supported by Gillespie-Lynch et al. (2020), who argue that neurodiversity can be strengthened through the development of policies that cover the support needs of all, enhancing both disability rights and neurodiversity in education. The policies can set frameworks for training support units so that they can facilitate neurodiversity

advocacy as well. As a starting point, the names of these units should also reflect the widened scope of their services, such as a “support unit” rather than “disability unit”. This renaming gives broader scope for the intersectional nature of support needs. In their current form, disability units in South African universities do not affirm neurodivergent traits and strengths. Supporting this, several international studies show that many students do not disclose that they are neurodivergent because of the stigma attached to it and traditional “disability units,” and because they are then considered “disabled” (Brandsen et al. 2024; Clouder et al. 2020; Gurbuz et al. 2019).

To further emphasize the need for intersectional, neurodiversity-affirming educational policies, a reflection on other existing challenges is necessary. Firstly, there has been a steady decline in the yearly increment in government funding toward universities, with Hlatshwayo (2024) asserting that “funding constraints continue to cripple the post-school education and training sector” (p. 5; see also Van Schalkwyk 2021). This has happened simultaneously with global calls for the increased advocacy of neurodiversity, among other forms of diversity, such as gender and race. Another significant issue is that the physical environment of South African universities is not inclusive for neurodivergent people. Recent research shows that there is a lack of quiet spaces with controlled sensory input available on campuses, which neurodivergent students need to cope with the high-stress environment of overcrowded campuses (Nthibeli 2025). According to Dwyer et al. (2023), a neurodiversity-friendly university would attempt to minimize sensory triggers in order to include neurodivergent students. Currently, such considerations are virtually non-existent in South African universities and should be included in policy developments for neurodiversity. Here Harvey (2017) argues that urban spaces, including learning institutions, should be designed reflect diversity and respond to the needs of all who use those spaces. As a corrective measure, we recommend that policies should emphasize that learning spaces should be designed in consideration of the diverse population of students, and that neurodivergent people should be given platforms to express their needs in terms of how learning spaces can cater for them.

On the social front, South Africa still struggles with patriarchy, gender-based violence and racism, which are also prevalent on university campuses (Bam et al. 2024; Nordling 2019). Higher education policy developments on neurodiversity should incorporate these intersectional issues. This is vital because a neurodiversity-friendly university environment is not only aware of neurodevelopmental differences, but should address the full range of challenges affecting neurodivergent students which intersect with racial identity, gender, class and other factors (Le 2024). Here Davis et al. (2022) add that “inequities in outcomes cannot be appropriately considered unless other intersecting identities are also considered for subjugated groups” (p. 307). Thus, education policy on neurodiversity should also connect with other intersectional diversity markers. Crucially, this should be done within the local context, reflecting the values, norms and cultural practices that underpin the rich diversity of South Africa. Essentially, policies advocating for neurodiversity in South Africa should be Afrocentric, as we have claimed (Manase 2024). These policy changes must reflect the local context and uphold values that are relatable to neurodivergent people and

their South African identity (Matshabane and Seedat 2024). For example, the nation promotes the value of inclusivity under the philosophy of *Ubuntu*, which spans many South African cultures, and upholds respect for all persons. According to Mpofu and Sefotho (2024), *Ubuntu* “rejects individualism and selfishness in favor of collective well-being and social harmony” (p. 129). This thinking aligns well with the celebration of difference that the neurodiversity movement promotes which supports an inclusive society (Casanova and Widman 2021).

Furthermore, we argue that the intersectional nature of the proposed neurodiversity policy initiatives should also involve different stakeholders at government and the professional level. At its core, neurodiversity is a social phenomenon, as identities such as autism and ADHD are defined mostly by observing the behavioral traits shown in interaction with other people, usually by contrasting these traits with those considered “normal” (Hughes 2016). Therefore, we argue that neurodiverse differences observed in people can be understood and accepted in social interactions, if all parties in these interactions understand and behave accordingly. Thus, the development of educational policy concerning neurodiversity must involve trained professionals who have experience working to improve the wellbeing of neurodivergent individuals in South Africa. This includes therapists, social workers and similar stakeholders that may not be directly involved in education, but are nonetheless key contributors to the community, in terms of assisting neurodivergent individuals (Pillay et al. 2021) and, we argue, also the neurotypical members of their shared communities, to build effective patterns of social interaction. Collaborative engagement and planning at the governmental level should happen between the Department of Higher Education and Training, the Department of Social Development, the Department of Basic Education (DBE) and the Department of Health. These departments can bring different perspectives and expertise together to ensure that neurodivergent people are recognized at multiple levels of society. This is crucial to avoid isolated inclusion where neurodivergent students are included in the education space, but still live in a society that is exclusionary in other ways. Ultimately, inclusive education strives for the transformation of the entire society, and not just educational institutions (UNESCO 1994). Broader stakeholder collaboration will help to create and maintain a uniform positive consensus on neurodiversity across relevant government departments and society (Constantino 2018).

9 | Conclusion

This article has argued that neurodiversity in South Africa remains marginalized within both policy and research, despite the global rise of neurodiversity discourses. Our discussion demonstrates that autism and ADHD are consistently framed in deficit-based, disability-oriented frameworks, which undermines inclusive education goals in South Africa. Drawing on the cultural model and intersectionality, we have proposed an alternative framing that celebrates neurological difference as strength, while recognizing the layered realities of race, class, gender, and language that shape exclusion in South Africa.

Future research should build participatory approaches that foreground the voices of neurodivergent people themselves, ensuring

that advocacy, policy, and practice are aligned with lived realities. A participatory approach will allow neurodiversity research and policy in South Africa to properly account for the marginalization and inclusion of neurodiverse people (Atkins 2013). We further propose that advocacy efforts for neurodivergent students should be increased through the formation of positive neurodiversity advocacy organizations and support structures that embrace and affirm, rather than marginalize, cognitive diversity.

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Conflicts of Interest

The authors declare no conflict of interest

Endnotes

¹ Basic education in South Africa includes primary and secondary school education, which begin in Grade 1, the year the child turns 7, and continues to the final year of matriculation, Grade 12 when the learner completes secondary schooling.

² We use the term ‘autism’ only, rather than ‘autism spectrum disorder’ or the abbreviation ‘ASD’ to avoid implying that autism is a disorder, and to maintain the use of neurodiversity-affirming language (see Bottema-Betuel et al. 2021).

³ In the latest Diagnostic and Statistical Manual of Mental Disorders there are three levels of autism support needs indicated (American Psychiatric Association 2022). Arguably, people with significant support needs, such as those with ‘locked-in syndrome’ who are unable to meaningfully engage with the world, would be considered tragic. However, many with minor support needs should not be considered ‘tragic’.

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