

# ANNOUNCEMENTS

## Thank you for joining us today!

1. Please **collect/download** your **handout**
2. Please **introduce yourself** to your **neighbor**, share your **name**, your **occupation**, & your **motivation** for **joining** our workshop today
3. We will work **in pairs**; please find a **working partner/colleague**. \*For our **remote colleagues**, **breakout rooms** will be available to participate.

Thank you!





## Harvard Summer School

HARVARD DIVISION OF CONTINUING EDUCATION



# Teaching Neurodiverse Learners: Accessibility Services

## Accessibility Services Staff

- **Leora Simon**- Director, oversee operations, consult on difficult student cases, coordinate with the other schools Accessibility Offices, policy and grievances
- **Aviva Hollander**- coordinator, responsible for coordinating exams, notetaking services, answer phone and general email inbox
- **Rachel Gregorek**- Assistant Director, Harvard Summer School but also works with students in Extension approving accommodations, reviewing documentation
- **Megan O'Brien**- Assistant Director, Harvard Extension School, responsible for student accommodations, reviewing documentation, working with financial and registration appeals staff
- **Julia Herosian**- Access Technology Specialist, coordinates efforts to provide students with accessible course materials and technology, works primarily with students with vision impairments and with a need for specific formats of materials

# Who are HES Students?

- Diverse!
- Come from all over
- All different countries
- Backgrounds
- Religions
- Races
- Sexual Orientation
- Disability Status
- Political Affiliations
- Understanding of the world around them is different based on experiences

**HSS Students**

## You may have noticed that your syllabus now includes the following statement:

The Division of Continuing Education (DCE) is committed to providing an accessible academic community. The [Accessibility Services Office \(ASO\)](#) is responsible for providing accommodations to students with disabilities. Students must request accommodations or adjustments through the ASO. Instructors cannot grant accommodation requests without prior ASO approval. It is imperative to be in touch with the ASO as soon as possible to avoid delays in the provision of accommodation.

DCE takes student privacy seriously. Any medical documentation should be provided directly to the ASO if a substantial accommodation is required. If you miss class due to a short-term illness, notify your instructor and/or TA but do not include a doctor's note. Course staff will not request, accept, or review doctor's notes or other medical documentation. For more information, email [accessibility@extension.harvard.edu](mailto:accessibility@extension.harvard.edu).

**Syllabus Statement**

- Student Privacy, Unconscious Bias, Non-traditional- no access to campus health services
- Personal Jeopardy: Faculty members who work directly with students, discuss the disability, look over documentation, and agree to accommodation may be establishing themselves as the “gatekeepers” without meaning to do so. If the faculty member agrees to provide accommodation “x” and not accommodation “y” and later the student maintains that he/she was not appropriately accommodated, it is the faculty member’s decision \*Credit to Janie Jarrow PhD, White Paper [Janie Jarow, White Paper](#)
- Institutional Jeopardy: A student who provides documentation to a single faculty member (who accepts and acts on that documentation) may be able to make a legitimate case for saying he/she informed the institution of the disability and the need for accommodation. The faculty member should not be discussing the information that has been shared (because of issues of privacy and confidentiality), and yet the student may be expecting to receive similar consideration and accommodation from other faculty on the basis of having provided the documentation to someone in authority at the institution.
- \* Credit to Janie Jarrow PhD

Why?

- In Accessibility Services, there is a big distinction between a short-term illness like the flu or a strep throat, and disability.
- Disability can be temporary (broken leg or arm) but a short-term illness is treated differently and not protected the same way disability is.
- In most cases, we typically refer students to class policies (get into that more on a later slide) if they are sick with a short-term illness.
- Disability is a protected class and if a student discloses a disability to you including ADHD or a learning disability, you should refer them to us and make sure they understand that we provide accommodations should they need them. Once you give them the information, it is the students responsibility to make any requests to us if they need them.
- Not all students with a disability require accommodation.
- If you are not sure if something is disability or not, you can always call us, email us, or simply suggest the student connect with us to find out if there are any questions.

## **Difference between illness and disability**

- Indicate that you are not able to accept any late work regardless of circumstance (few are choosing this but there are some)
- Indicate that you require advance notice and will provide 1 (or in some instances 2) mulligans of 1-3 day extension without a reason (meaning students do not need to share why they are using the mulligan) simply need to tell you they are using the mulligan on a given assignment
- Tell students that they need to contact you with the reason for a late assignment but generally late assignments are not accepted and students wont be asked to provide verification of illness (honor code)
- If you feel strongly that you should require students to provide verification for medical reason, direct them to submit any medical notes to Accessibility Services. While we prefer not to get involved for short-term related illnesses (it muddies the waters), we are happy to review medical notes and recommend flexibility if appropriate

**Policies and Discretion on when to accept late work/provide flexibility**



How do I ensure equity?

How do I manage individual student needs for flexibility against the class need for getting feedback in a timely manner?

What are some strategies to build flexibility into my class?

What sort of communication do I have with students around my policies?

How do I set expectations?

**Flexibility**



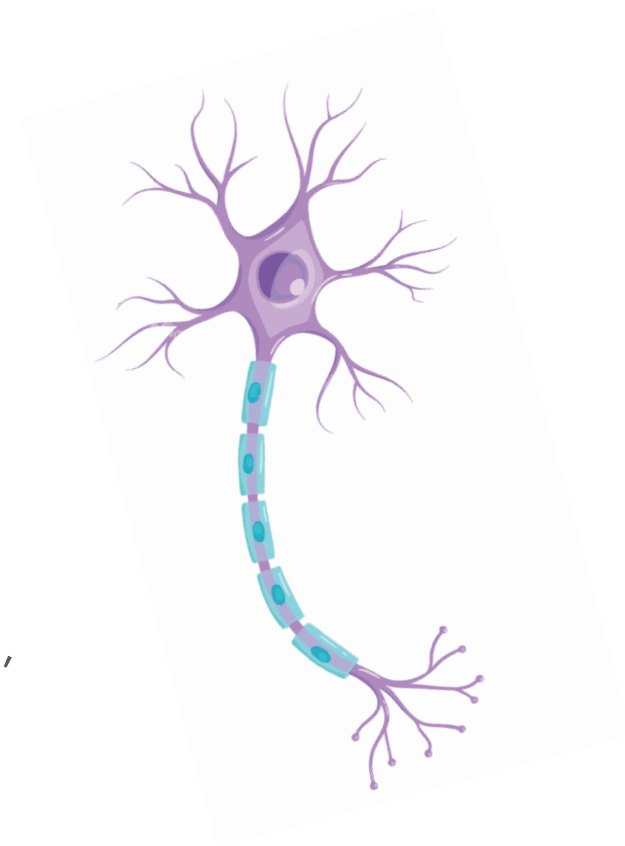
# INCLUSIVE TEACHING FOR NEURODIVERSE LEARNERS

**Julie** | Edith Julieta Sarmiento-Ponce | *Instructor*





- Grateful → **Excellent team of Harvard Summer School & Harvard Extension School Instructors**
- Grateful → To our **wonderful DCE staff**
- **Instructor** → Foundations of Neuroscience, and Molecular & Cellular Biology



# INTRODUCTION



- **Neurodiverse** person
- **ADHD** | Attention Deficit Hyperactive Disorder → Late diagnosed: Age 34
- Honored to share **neurodiversity awareness!**

# INTRODUCTION

- Personal research:
  - Excellent information about ADHD for adults in English (ADHD 2.0 | Dr Hallowell & Dr Ratey)
  - Not much information about **ADHD for adults in Spanish**
- Currently writing a **book** about **ADHD a guide for adults** in Spanish & English
- Hope/plan **share neurodiversity awareness in Latin America** in the future

Edward M. Hallowell, M.D.,  
and John J. Ratey, M.D.

*New York Times* bestselling authors of *Driven to Distraction*

ADHD  
2.0

New Science and Essential Strategies  
for Thriving with Distraction—  
from Childhood Through Adulthood



# INTRODUCTION

- To **keep motivated** → Instagram  
**@adhd.global | Weekly ADHD  
bilingual posts** → Started in January, 8  
months now!
- When I mention: “**We**” = Referring to  
people who live with ADHD or other  
neurodiversity



# LEARNING OBJECTIVES



1. **Reflect** on **neurodiversity**
2. Learn some of the **characteristics of ADHD learners**
3. **Foster** an **inclusive teaching environment** for **neurodiverse learners & for everyone!**

# TIP!

When you see any of the **following icons**

Please pay **special attention** since it will be a **clue** to **write** on your **handouts!**







# 1. NEURODIVERSITY

# NEURODIVERSITY

What comes to mind when hearing the word neurodiversity?

*\*We encourage in-person & online participation, please!*



# NEURODIVERSITY

**Neurodiversity** → concept that emphasizes the natural **variation** in human **neurology**, including differences in:

- **Cognitive** (thinking, reasoning, problem-solving, memory, attention, language, & decision-making)
- **Sensory** (vision, hearing, touch, taste, & smell)
- **Neurological functioning** (overall functioning of the nervous system)



# NEURODIVERSITY

Suggests → these variations are a **normal** & **valuable** part of the **human experience** rather than solely being considered deficits or disorders, challenging traditional views that label certain **neurological conditions** as inherently negative or pathological



# NEURODIVERSITY



Term: Neurodiversity → coined by:  
Australian sociologist **Judy Singer** → late  
1990s

- Proposed → change the narrative around: **neurological differences**
- Reframing from disorders to be cured or normalized to encourages society to **recognize & embrace** the **diverse** ways human **brains function**

# NEURODIVERSITY CONDITIONS

What types of neurodiversity conditions are you familiar with, or have you heard mentioned?

*\*We encourage in-person & online participation, please!*



# COMMON NEURODIVERSITY CONDITIONS



- **ASD** | Autism Spectrum Disorder
- **ADHD** | Attention Deficit Hyperactivity Disorder
- **Dyslexia**
- **Dyscalculia**
- **Intellectual Developmental Disorder**
- **Tourette Syndrome**
- **SPD** | Sensory Processing Disorder
- **NVLD** | Nonverbal Learning Disability

\*Glossary of terms on our handout

# NEURODIVERSITY

Neurodiversity conditions primarily refer to variations in:

- **Neurodevelopment**
- **Neurocognition**





# MENTAL HEALTH CONDITIONS

## Mood conditions:

- Depression
- Bipolar Disorder
- **Anxiety Disorders:**
  - OCD | Obsessive Compulsive Disorder
  - PTSD | Post Traumatic Stress Disorder

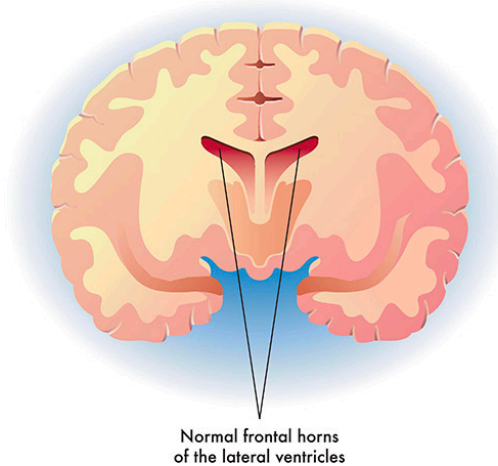


## Mental health conditions:

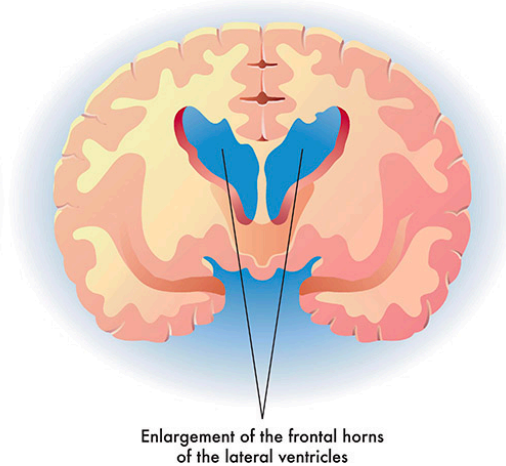
- Eating Disorders
- Substance Use Disorder

# MENTAL HEALTH CONDITIONS

Normal brain section



Huntington's disease



## Neurodegenerative conditions:

- Schizophrenia
- BPD | Borderline Personality Disorder

## Neurodegenerative conditions (age-related):

- Huntington's Disease
- Alzheimer's Disease
- Parkinson's Disease
- Dementia

# ADHD



- We will focus on **ADHD learners**
- Due to my **neurodiverse background & experience**
- **Office hours** → Our neurodiverse students at summer school:
  - Share helpful & not-so-helpful learning approaches



## 2. ADHD CHARACTERISTICS

# ADHD | ATTENTION DEFICIT HYPERACTIVE DISORDER

- What comes to mind when hearing about the condition ADHD?

*\*We encourage in-person & online participation, please!*

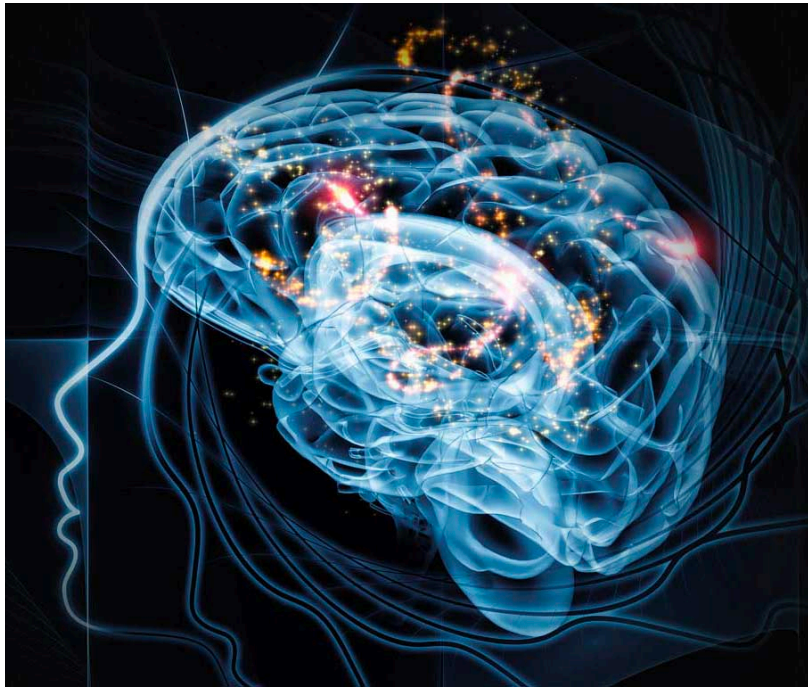


# ADHD | ATTENTION DEFICIT HYPERACTIVE DISORDER

It is NOT a disorder or a disease  
but a set of distinctive characteristics  
of a neurodiverse mind



# ADHD | ATTENTION DEFICIT HYPERACTIVE DISORDER



Neurodevelopmental condition → ongoing research → potential risk factors:

- 1. Genetics**
- 2. Lack of oxygen at birth**
- 3. Traumatic experience**

# ADHD | BRAIN CHEMISTRY

- Our brain chemistry is different







# ADHD | NEUROTRANSMITTERS

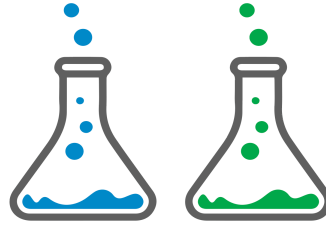


- Lower levels of neurotransmitters:



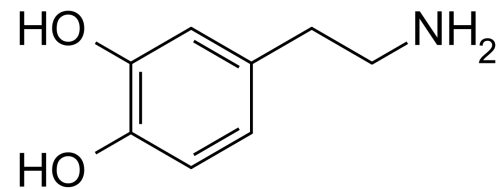
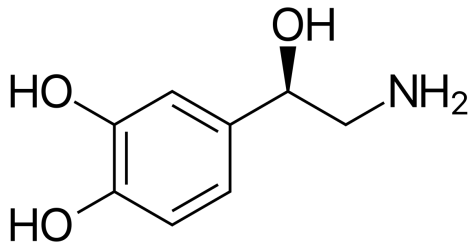
**Norepinephrine**

*Feel alert*



**Dopamine**

*Motivates us to seek  
rewards*

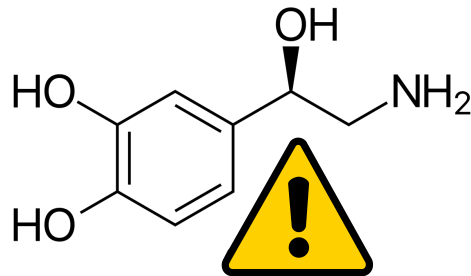




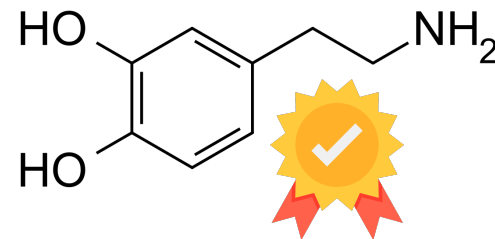
# ADHD | NEUROTRANSMITTERS



- **Medication:** Combined (Norepinephrine + Dopamine) → **Easier to concentrate** for **longer** & feel good (short-term)
- More research required → **long-term effects** of **taking** these **stimulants**



+





# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

1. “**Deficit**” of attention → We **do not** have a **deficit** of attention

**ADHD** = ~~Attention deficit~~  
Difficulty regulating where  
we focus our attention





# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

2. “A child's condition that will be outgrown”



5%

Adults

ADHD





# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

3. “Women can’t have ADHD” → Diagnosis often overlooked at a younger age in women



# UNDIAGNOSED ADHD IN WOMEN

ADHD → often **diagnosed more frequently** in **men** than in **women**

Reasons for the disparity:

- **Different manifestation** of characteristics:
  - **Men** ↑ **hyperactive & impulsive** behaviors
  - **Women** ↑ **inattentiveness, daydreaming, & disorganization**



# UNDIAGNOSED ADHD IN WOMEN

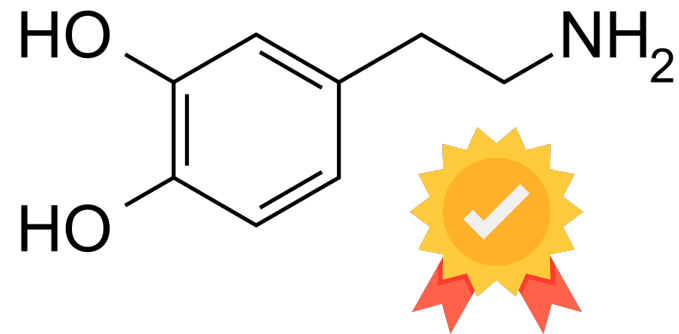
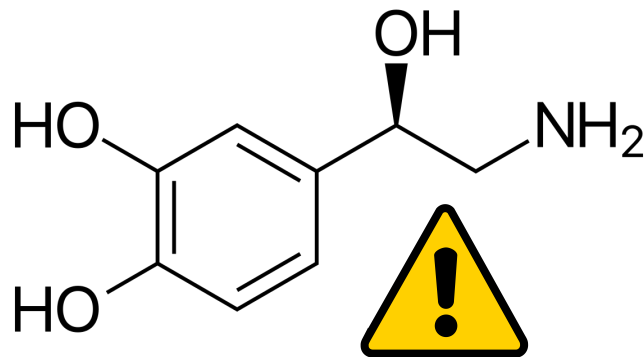
- Different  **coping mechanisms**
  - **Extra effort to appear organized & attentive** → delay or prevent diagnosis
- **Diagnostic criteria**
  - ↑ Research →  **male population**
- **Overlapping** conditions
  - Undiagnosed ADHD in women → can lead to  **anxiety & depression**





# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

4. "ADHD is not real. It is just laziness or too much energy" → Our **brain chemistry levels** are different, we need different strategies.







# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

5. “**Hyperactive** behavior is always present, fidgeting, not being able to stay still” → Inattentiveness, daydreaming & disorganization



# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

- **Ideas** popping up as **popcorn** in a machine
- **Ideas** → emerge in **spontaneous & erratic** bursts
- Often → we can't tune out this **idea creation** at **night**
- Our **minds don't seem to rest**

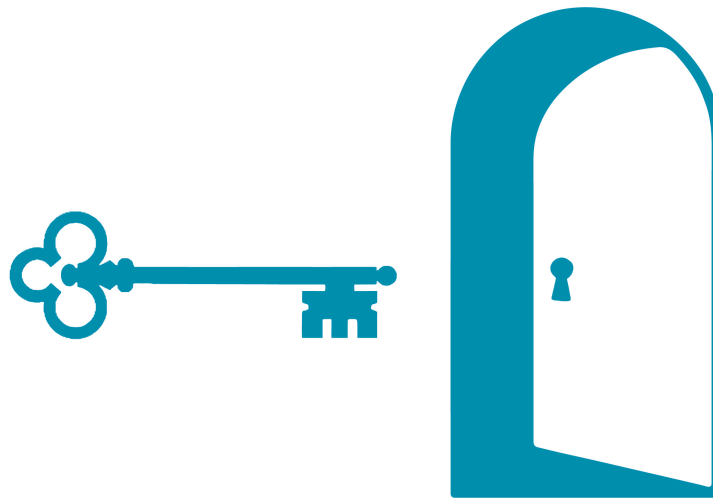




# HANDOUT 1 | ADHD COMMON MISCONCEPTIONS

6. “An ADHD diagnosis is a label”

An ADHD diagnosis is not a label,  
it is a key to self-understanding



# THE ADHD ICEBERG

**Distracted**

Distraíd@

**Disorganized**

Desorganizad@

**Forgetful**

Olvidadiz@

**Often late**

A menudo tarde

**Impulsive**

Impulsiv@

**Hyperactive**

Hiperactiv@

**Easily bored**

Fácilmente aburrid@

**Hyperfocus**

Hiperenfoque

**Low self-esteem**

Baja autoestima

**Time blindness**

Ceguera del tiempo

**Anxiety & Depression**

Ansiedad & Depresión

**Forgetting to eat**

Olvidar comer

**Learning difficulties**

Dificultades de aprendizaje

**Poor sleep & Restlessness**

Dormir mal e Intranquilidad

**Poor working memory**

Corta memoria de trabajo

**Difficulty with self-care**

Dificultad con el autocuidado

**Hypersensitive to rejection**

Hipersensible al rechazo

**Emotionally reactive**

Emocionalmente reactiv@

**Difficulty maintaining relationships & jobs**

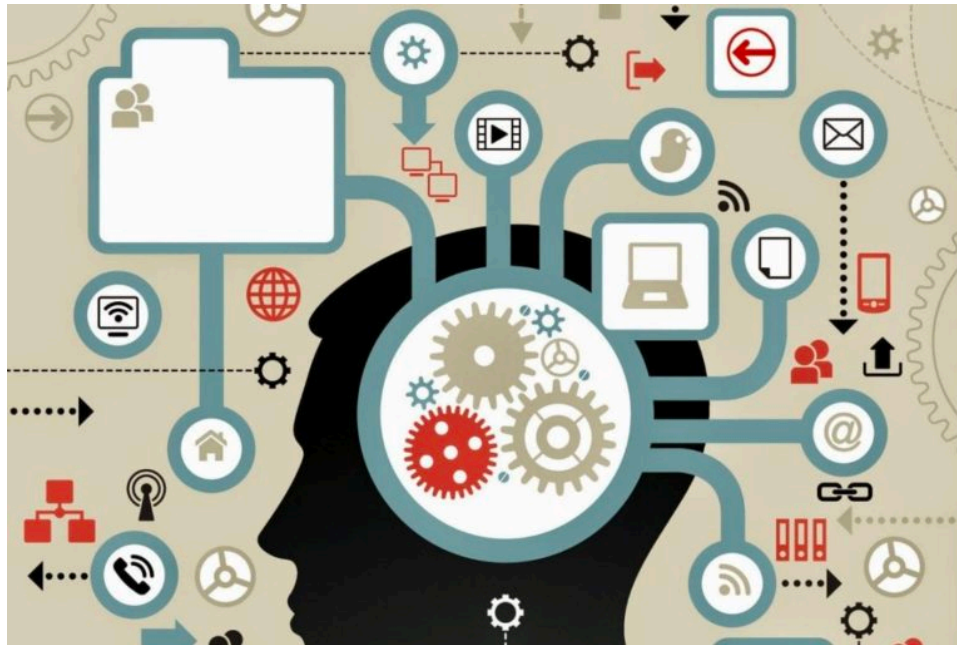
Dificultad para mantener relaciones y trabajos

@adhd.global



# ADHD | ATTENTION DEFICIT HYPERACTIVE DISORDER

- Tendency → Struggle with **executive functions**
- What are executive functions?



# EXECUTIVE FUNCTIONS



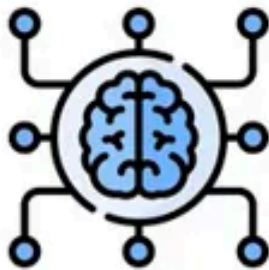
Planning



Organization



Task Initiation



Flexibility



Attention



Self-Control



Metacognition



Working Memory

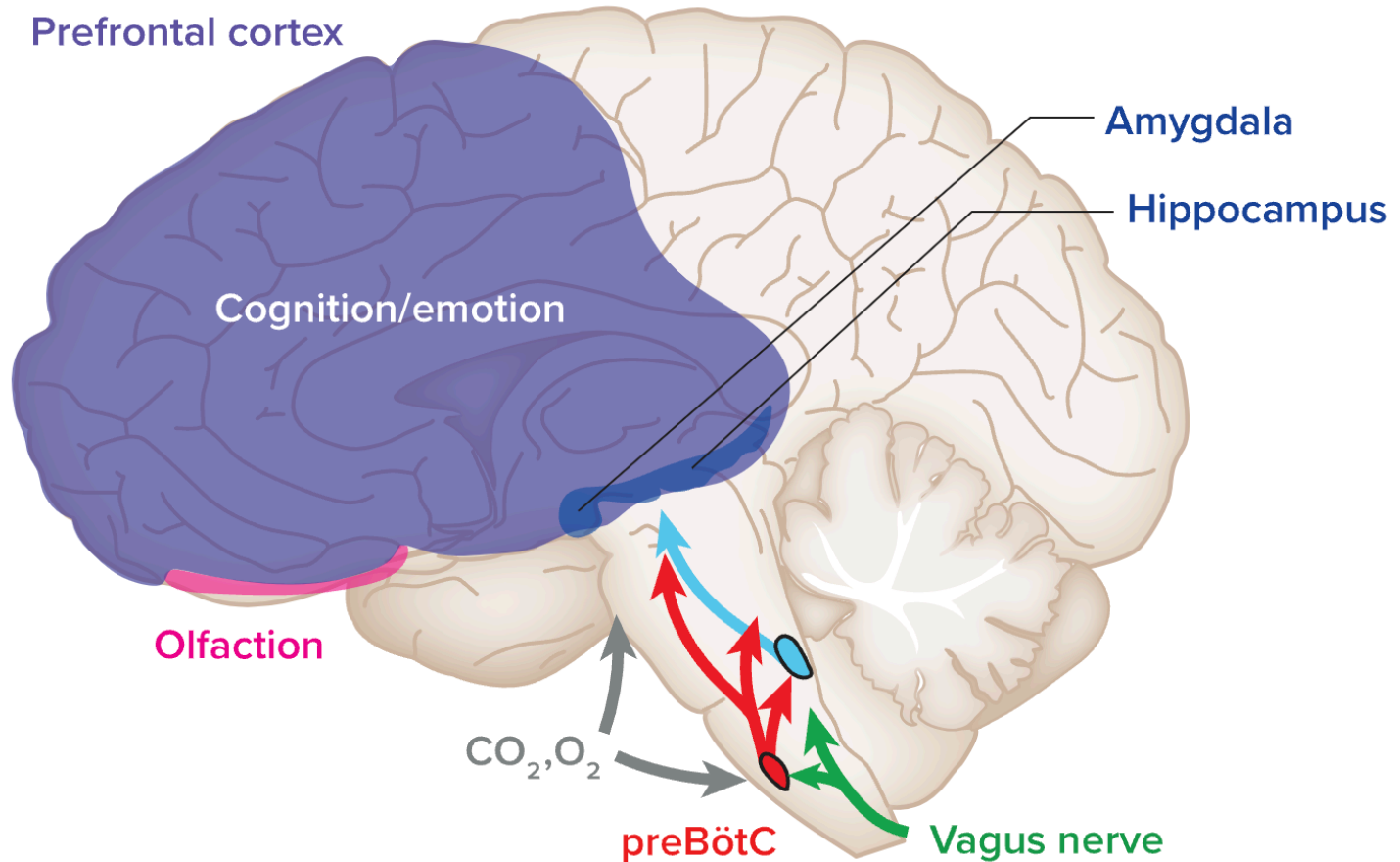


Time Management



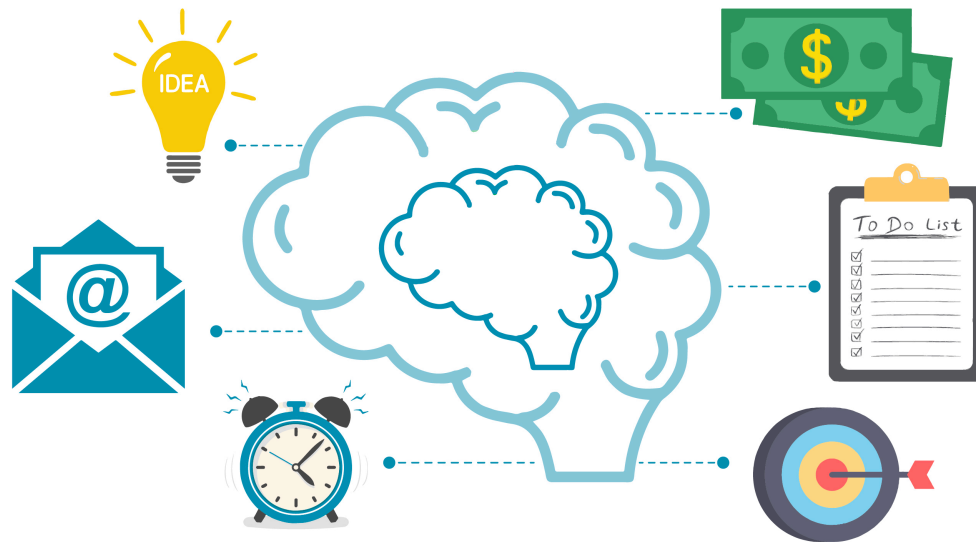
Perseverance

# EXECUTIVE FUNCTIONS



# Task Paralysis

When we feel hesitant, overwhelmed, or unmotivated to begin a task. As a result, we tend to procrastinate and avoid the task by doing other activities or zoning out.







# TEACHING STRATEGY | DISTRACTED/DISORGANIZED

- **Course Schedule page** → Include deadlines per week

Week	Monday	Tuesday	Wednesday	Thursday
<b>Week 1</b> Date	<a href="#"><u>Lecture 1</u></a>	<a href="#"><u>Assignment 1</u></a>	<a href="#"><u>Lecture 2</u></a>	<a href="#"><u>Lab 1</u></a>
<b>Week 2</b> Date	<a href="#"><u>Lecture 3</u></a>	<a href="#"><u>Assignment 2</u></a>	<a href="#"><u>Lecture 4</u></a>	
<b>Week 3</b> Date	<a href="#"><u>Lecture 5</u></a>		<a href="#"><u>Holiday</u></a>	<a href="#"><u>Lab 2</u></a>

[\\*Hyperlinks to the assignments, slides, lab protocols](#)



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Desorganizad@

**Forgetful**  
Olvidadiz@

**Often late**  
A menudo tarde

**Impulsive**  
Impulsiv@

**Hyperactive**  
Hiperactiv@

**Easily bored**  
Fácilmente aburrid@

**Hyperfocus**  
Hiperenfoco

**Low self-esteem**  
Baja autoestima

**Time blindness**  
Ceguera del tiempo

**Anxiety & Depression**  
Ansiedad & Depresión

**Forgetting to eat**  
Olvidar comer

**Learning difficulties**  
Dificultades de aprendizaje

**Poor sleep & Restlessness**  
Dormir mal e Intranquilidad

**Poor working memory**  
Corta memoria de trabajo

**Difficulty with self-care**  
Dificultad con el autocuidado

**Hypersensitive to rejection**  
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Emocionalmente reactiv@

**Difficulty maintaining relationships & jobs**  
Dificultad para mantener relaciones y trabajos

@adhd.global

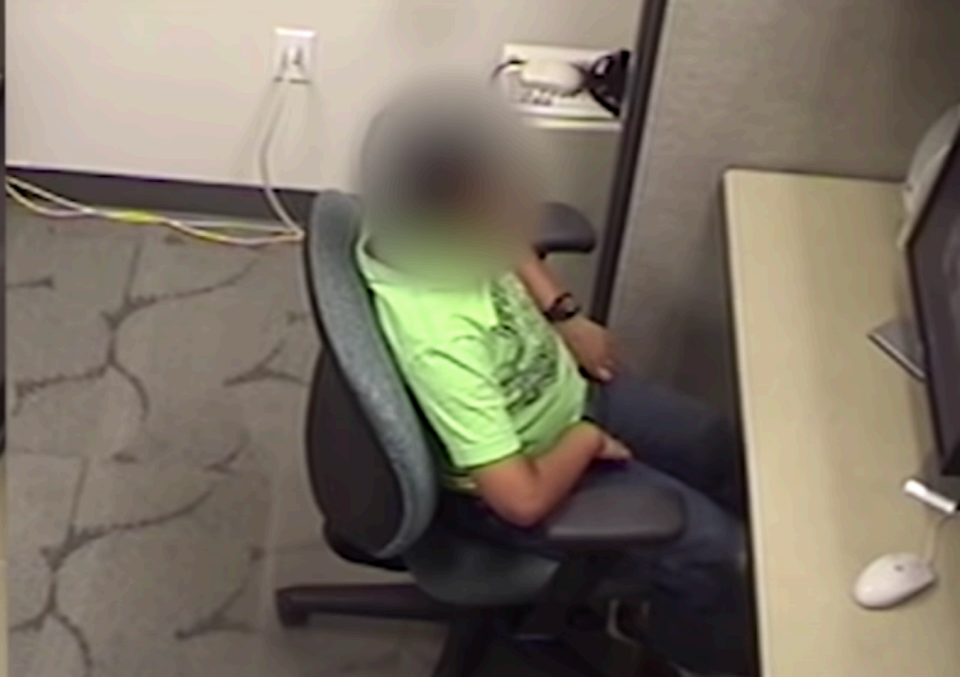


# ADHD STUDY | UNIVERSITY OF CENTRAL FLORIDA

**Math Video**



**Star Wars**



**Same Student  
10-Minute Timelapse**

University of Central Florida



# ADHD STUDY | UNIVERSITY OF CENTRAL FLORIDA



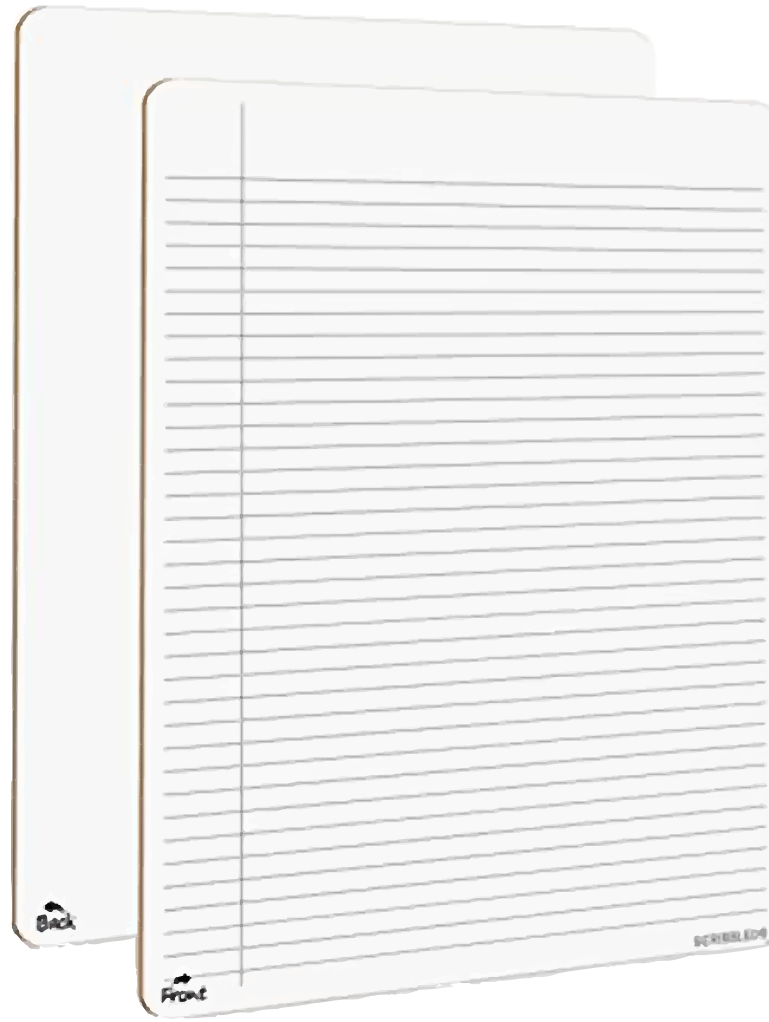
- Research → demonstrated that **fidgiting** → most often present when **children** were using their **brains' executive functions**, particularly “**working memory**”
- **Working memory** → system we use for temporarily storing & managing information required to carry out complex cognitive tasks such as:
  - Learning
  - Reasoning
  - Comprehension

# ADHD & WORKING MEMORY



- **Struggle** with **holding & managing information** in our mind while **performing tasks**:
  - Difficulty **remembering details**
  - Difficulty following **verbal multi-step instructions or conversations**
  - Difficulty **keeping track** of what **needs to be done**

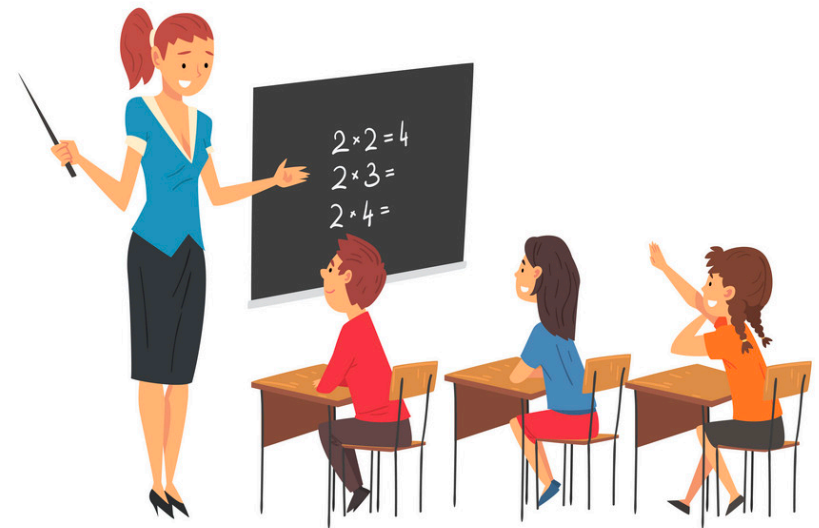
# WORKING MEMORY EXAMPLE





# TEACHING STRATEGY | WORKING MEMORY

- Try to **avoid verbal instructions**
- **Write questions** on the **board** or on the **slides**
- Allow students to **take notes** while explaining instructions
- Politely emphasize to **carefully read the instructions** (*exams or assignments*)



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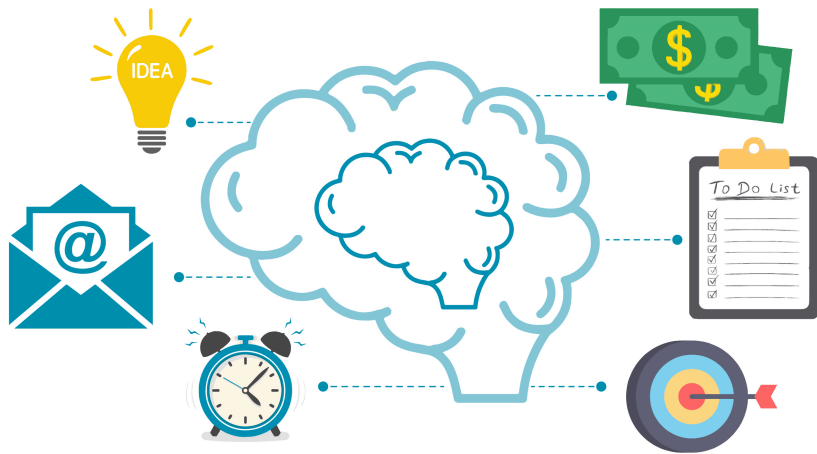
**Difficulty maintaining relationships & jobs**  
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@adhd.global





# EASILY BORED | LEARNING DIFFICULTIES



- Difficulty **sustaining attention** on **tasks** that we find **unstimulating** or **repetitive** (checking the mail or email, paying bills)
- Difficulty **maintaining motivation** to finish long projects



# TEACHING STRATEGY | LEARNING DIFFICULTIES

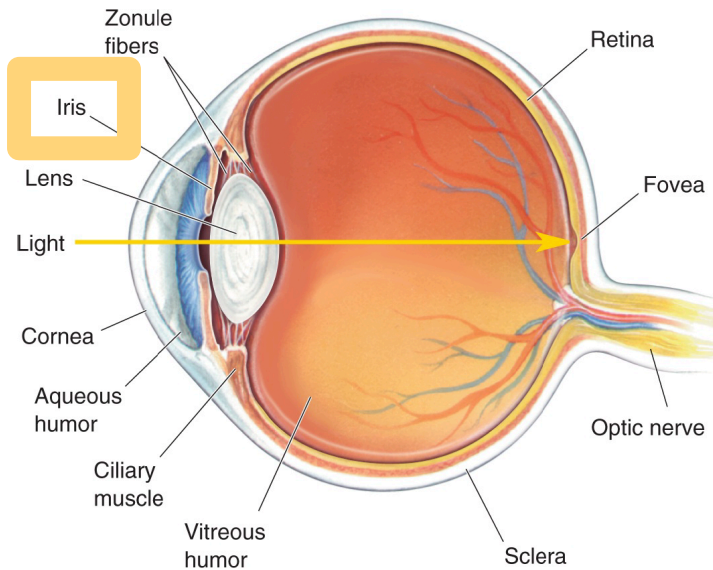
- **Neurodiverse learners** → often **visual learners** → less text on slides, more images, videos, diagrams & any visual aids





# TEACHING STRATEGY | LEARNING DIFFICULTIES

- Tend to **learn** by **association** → **storytelling**, anecdotes, real-life examples, comparisons with day-to-day objects



*f/1.4*



*f/2.0*



*f/2.8*



*f/4.0*



*f/5.6*



*f/8.0*





# TEACHING STRATEGY | LEARNING DIFFICULTIES

- Try to include a **slide of learning objectives** → **why** is it **important** to **learn** this **topic**?
- Try to include a **summary slide** → to consolidate the content





# TEACHING STRATEGY | LEARNING DIFFICULTIES



- **Active Learning**
  - **Activities** during **class** to engage in **pair** or **group discussions**
  - **Think-Pair-Share**
  - **PollEverywhere** → Live quizzes
- **Handouts**
  - Write reflections
  - Fill in the blanks





# TEACHING STRATEGY | LEARNING DIFFICULTIES



- Try at the beginning of the next class →  
in these **cards**, please **write three**  
**learnings** you **remember** from our  
**previous class**



# TEACHING STRATEGY | LEARNING DIFFICULTIES

- **Home quizzes**

- Crosswords
- Matching columns
- Reflection questions





# Quizlet





# ILLUSTRATIVE GUIDES FOR EXAM

Mia Wagner-Sanchez

**SLEEP**  
REM sleep  
NREM sleep  
Go 90 mins

**ATTENTION!!!**  
b/c  
1. 2. 3. 4.

**PLASTICITY**  
change = plasticity

**MEMORY**  
DRIVE  
working  
LTM  
STM

**THREAT!!!**  
Cortisol  
Amygdala

**SOO THE...!!!**  
PFC  
body + optics

**PROTEIN SIGNALS**  
↑ or ↓ receptors

**EMOTIONS**

**Brain Anatomy:** Cerebrum, Corpus Callosum, Hippocampus, Amygdala, Hypothalamus, Pituitary, Pineal, Brainstem (Midbrain, Pons, Medulla), Spinal Cord, Nerves.

**Neurobiology:** Synapses, Neurotransmitters, Action Potentials, Myelin Sheath, Glial Cells, Neurogenesis.

**Psychology:** Sensory perception, Attention, Memory, Emotion, Motivation, Learning, Intelligence.

**Development:** Prenatal development, Birth, Postnatal development, Aging.

**Disorders:** Schizophrenia, Depression, Anxiety, Autism, ADHD, Parkinson's, Alzheimer's, Huntington's, Prion diseases.

**Brain Anatomy:** Dorsal, Ventral, Medial, Lateral, Superior, Inferior, Anterior, Posterior.

**Neurobiology:** Neuron, Synapse, Neurotransmitter, Action Potential, Myelin Sheath, Glial Cell, Neurogenesis.

**Psychology:** Sensory perception, Attention, Memory, Emotion, Motivation, Learning, Intelligence.

**Development:** Prenatal development, Birth, Postnatal development, Aging.

**Disorders:** Schizophrenia, Depression, Anxiety, Autism, ADHD, Parkinson's, Alzheimer's, Huntington's, Prion diseases.

**5. The expression of the genome in an animal**

**Body maps of animals**

**Evolutionary Theory of the brain**

**Brain & Behavior**

**Neurobiology of Learning and Memory**

**Neurobiology of Emotion and Motivation**

**Neurobiology of Attention and Perception**

**Neurobiology of Language and Cognition**

**Neurobiology of Aging and Disease**



# EXAMS

- **Exam Reflection**
  - 1/2 points back:
    - Explain right answer
    - Explain why my answer was incorrect
- Students **re-learn** the concepts & **consolidate** the **knowledge**





# TEACHING STRATEGY | TASK PARALYSIS

- Using **SLACK** to communicate → helps find information more easily → We tend to find it more efficient than email





# TEACHING STRATEGY | DISTRACTED

- **5 min break** at least **every hour**
- **HSS** → 3 hour classes! → 2 (5 min) recommended breaks



# THE ADHD ICEBERG

**Distracted**  
Distraíd@

**Disorganized**  
Desorganizad@

**Forgetful**  
Olvidadiz@

**Often late**  
A menudo tarde

**Impulsive**  
Impulsiv@

**Hyperactive**  
Hiperactiv@

**Easily bored**  
Fácilmente aburrid@

**Hyperfocus**  
Hiperenfoco

**Low self-esteem**  
Baja autoestima

**Time blindness**  
Ceguera del tiempo

**Anxiety & Depression**  
Ansiedad & Depresión

**Forgetting to eat**  
Olvidar comer

**Learning difficulties**  
Dificultades de aprendizaje

**Poor sleep & Restlessness**  
Dormir mal e Intranquilidad

**Poor working memory**  
Corta memoria de trabajo

**Difficulty with self-care**  
Dificultad con el autocuidado

**Hypersensitive to rejection**  
Hipersensible al rechazo

**Emotionally reactive**  
Emocionalmente reactiv@

**Difficulty maintaining relationships & jobs**  
Dificultad para mantener relaciones y trabajos

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# Rejection Sensitive Dysphoria | RSD

An overwhelming emotional sensation that a person may experience in response to an actual or perceived rejection or criticism. Condition that can result in low mood and self-esteem.





# TEACHING STRATEGY | HYPERSENSITIVITY TO REJECTION



## • Active Listening + Inclusive language:

- I would recommend...
- It sounds like...
- It seems like...
- I noticed that...
- I have the impression that...
- I wonder if...
- I would like to add...
- I would like to invite you to...
- I echo your view...
- Building up on your contribution...
- If you can, please consider...
- If you feel comfortable, please...
- My understanding is that...
- It is advisable to consult with...

- **Wrong answer:**

- That is a good start, but there's a small correction...
- Almost there! Let's review it together...
- That was very close, that was a great contribution, we would like to remember...

- **Correct answer:**

- That is an excellent contribution/ great point! I would like to add...
- Excellent point!
- You're absolutely right!

# INCLUSIVE LANGUAGE





# THE HIDDEN GIFTS OF THE ADHD ICEBERG

**Distracted**  
Distraíd@s

**Disorganized**  
Desorganizad@s

**Forgetful**  
Olvidadiz@s

**Often late**  
A menudo tarde

**Impulsive**  
Impulsiv@s

**Hyperactive**  
Hiperactiv@s

**Entrepreneur**  
Emprendedores

**Unconventional**  
Poco convencional

**Creative & Artistic**  
Creativ@s y Artístic@s

**Honest & Open**  
Honestos y Abiertos

**Witty & Charming**  
Ocurrentes y Encantadores

**Brave & Adventurous**  
Valientes y Aventurer@s

**Positive & Optimistic**  
Positiv@s y Optimist@s

**Imaginative & Daydreamers**  
Imaginativos y Soñadores

**Empathetic & Sensitive**  
Empátic@s y Sensibles

**Hyperfocus & Hyperfixation**  
Hiperenfoque e Hiperfijación

**Great intuition & Risk takers**  
Gran intuición y Tomadores de riesgos

**Excellent managing crisis**  
Excelente manejo de crisis

**Resourceful with lateral thinking**

Ingenios@s con pensamiento lateral

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# HANDOUT 2 | TEACHING STRATEGIES

In pairs | Think-Pair-Share | 3-5 min

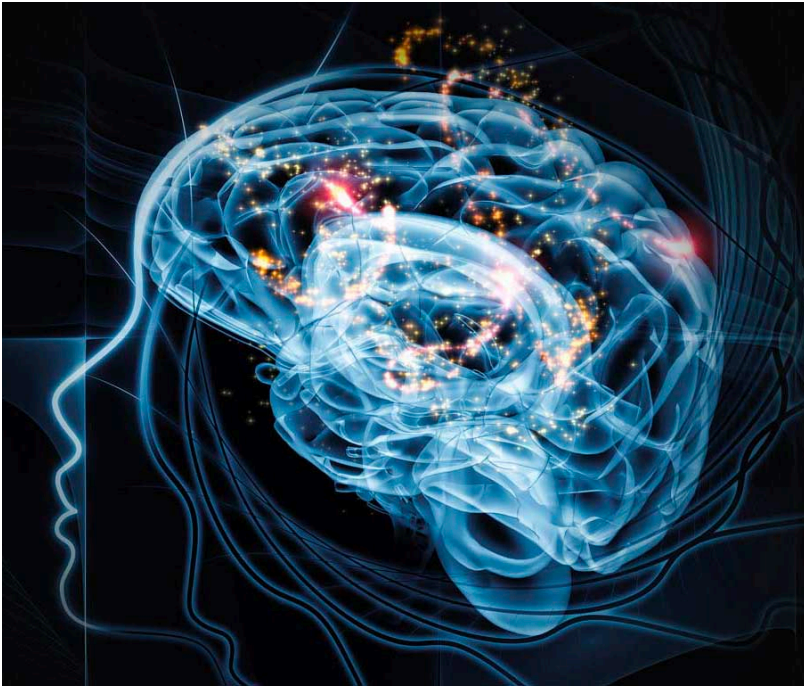
1. Write three or more helpful teaching strategies + three or more not-so-helpful teaching strategies.
2. Reflect → How could you implement the helpful teaching strategies on your courses?





### 3. IN SUMMARY

# IN SUMMARY



1. Reflected on **neurodiversity** & associated mental health conditions
2. Learned some of the **characteristics** of **ADHD learners**
3. We reflected on how to **foster** an **inclusive teaching environment** for **neurodiverse learners & for everyone**



# TEACHING STRATEGIES SUMMARY

1. **Neurodiverse learners** → often **visual learners** → images, videos, diagrams & visual aids
2. Tend to **learn** by **association** → **storytelling**
3. Try to include a slide of **learning objectives** → **why** is it important to learn this topic?
4. Try to include a **summary slide** → to consolidate the content
5. Try at the beginning of the next class → in these **cards**, please **write three learnings** you **remember** from our **previous class**

# ANY QUESTIONS OR COMMENTS





**REFLECTIONS**

# REFLECTIONS

In 2 min | Please write in your cards (only cards will be collected =) for feedback purposes):

1. Two or three **aspects** you found most **relevant/helpful/interesting**

2. Any room for improvement for our workshop

*\*For our online participants, please write this reflection in your handouts*







**THANK YOU!**

# REFERENCES

Hallowell, E. M., & Ratey, J. J. (2022). ADHD 2.0: New science and essential strategies for thriving with distraction--from childhood through adulthood. Ballantine Books.

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Jha, A. (2021). Peak mind: Find your focus, own your attention, invest 12 minutes a day. Hachette UK.

Neurodiversity | Harvard Medical School (<https://www.health.harvard.edu/blog/what-is-neurodiversity-202111232645>)



# VIDEO REFERENCES

**ADHD Study | University of Florida (video)** | <https://www.youtube.com/watch?v=167se17RNHw>

**ADHD Study | University of Florida (research findings)** | <https://www.ucf.edu/news/adhd-kids-can-still-theyre-not-straining-brains/>

**Netflix | How to focus** | <https://www.netflix.com/watch/81273771?trackId=255824129>

