

The Many Ways of Being Human

From Diagnosis to
Human Diversity &
Back to the Person

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From Diversity to Neurodiversity

How do we Understand Diversity ?

Curiosity

Humility

Context

What we see depends on the lens through which we look.

1.Starting with the Map: Diagnosis

Two Psychologists, One Person

Psychologist 1

ADHD — Combined
Presentation (314.01-6A05.2)
Generalised Anxiety Disorder
(300.02-6B00)
Obsessive-Compulsive
Disorder (300.3 -6B20)
DSM-5-TR & ICD-11 Codes

Psychologist 2

Same Dx
Difficulty regulating attention
Nervous system is easily
overwhelmed
Rituals create predictability
Creative, conscientious

Same Diagnoses - Different Understanding.

Diagnosis and Formulation Answer Different Questions

Diagnosis

What pattern are we observing?

When did it begin?

How persistent is it?

How frequent and severe?

In which areas of life does it affect functioning?

Does it meet diagnostic criteria?

Case Formulation

How did this pattern develop in this particular person?

Why might it make sense?

What triggers or maintains the difficulties?

In which contexts do they become more or less pronounced?

What matters to this person?

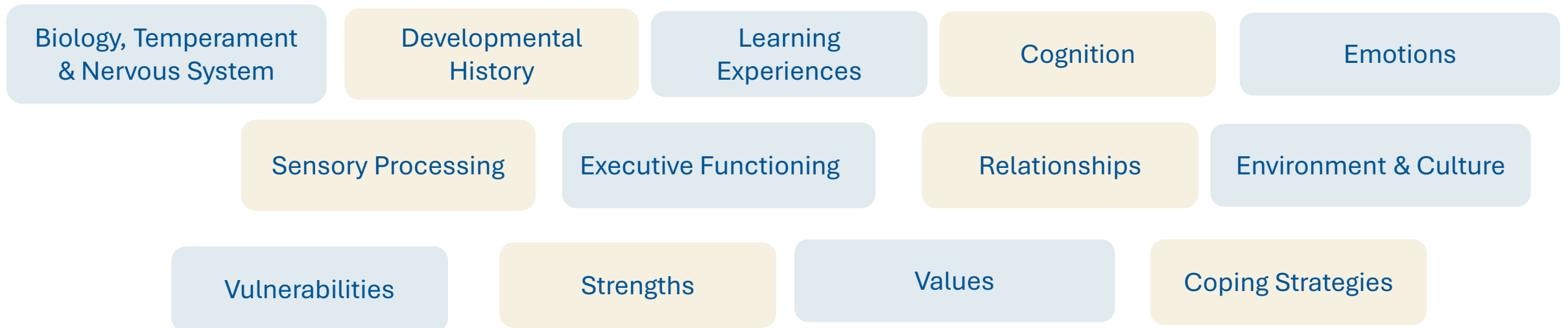
What helps them to cope?

What Comes after Diagnosis?

2. Beyond the Label: Case Formulation

Diagnosis helps us recognise meaningful patterns.

Case formulation restores individuality.



Formulation: Similar Difficulties - Different Underlying Mechanisms

“I have difficulty concentrating.”

Executive regulation

Scanning for threat

Anxious rumination

Obsessive thinking

Sleep, hormonal changes, illness

ADHD

Trauma

Anxiety

OCD

Exhaustion

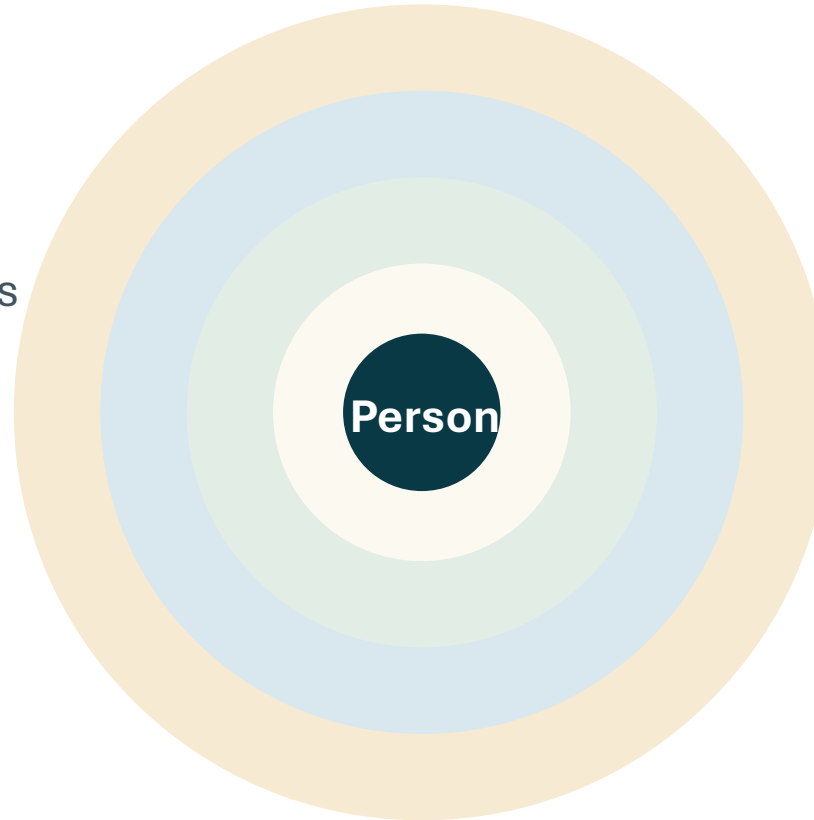
When we zoom in, we may discover different experiences & therapeutic needs.

Clinical Thinking asks us to change our distance from the picture

Zoom In →

Individual level

- Symptoms
- Biology, Temperament & Nervous System
- Cognition, Emotion & Executive Functioning
- Personal Vulnerabilities & Resources



→ Zoom Out

Contextual levels

- Family & Relationships
- School & Work
- Social Expectations
- Socio-economic Conditions
- Community & Institutions
- Culture & Society

Case Formulation: Moving between Levels without Losing Sight of the Person

3. The Wider Landscape of Human Diversity

Each Person has a Unique Profile

A hypothetical individual

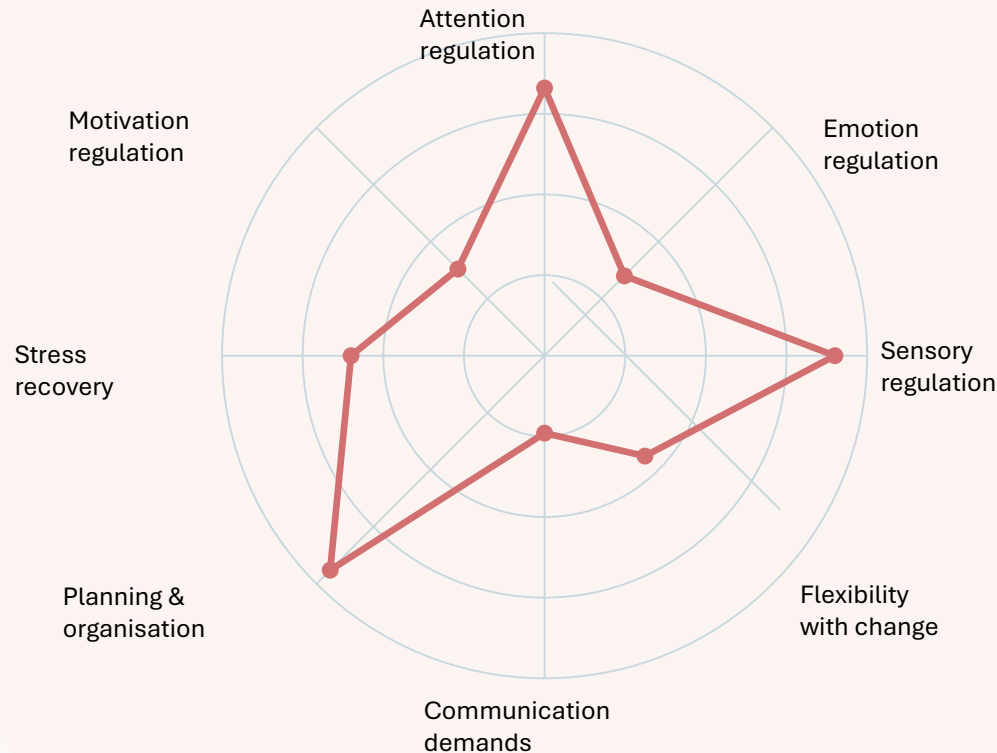


Illustration of a Hypothetical Uneven Profile

Human variation is the Norm

We differ in attention, emotion, learning, sensory experience, communication, and adaptability...

Characteristics vary across Dimensions

Characteristics are not simply binary. Each person has a unique combination across dimensions.

Spectrum

A Dx category with a wide variety of presentations that share defining characteristics.

Diagnostic & Clinical Significance:

Pattern, developmental history, persistence, intensity, functional impact and support needs.

Profiles can be Uneven or “Spiky”

Pronounced strengths can coexist with significant difficulties.

Spectrum: diversity within a diagnostic category. Profile: individuality within that diversity.

4. From Neurodiversity to Neurodivergent Experience

Neurodiversity

Variation among human minds and brains at the level of a population.

Neurodivergence

Refers to neurological or cognitive functioning that differs from what is generally considered typical.

Common examples

Autism Spectrum

ADHD

Dyslexia

Coordination differences

Tourette syndrome

OCD

Diagnostic groups contain enormous individual diversity.

Formulation Preserves Individuality

Diagnoses belong to clinical groups. Formulations belong to specific people.

From Deficits

A deficit-only story

What is wrong?
Difficulties and impairment

Towards Strengths

A reparative response

Recognising abilities and interests
Risk of romanticising

Towards Accuracy

A diversity-affirming view

Strengths and difficulties are both real
No need to be exceptional

From Judgement to Curiosity

“What is wrong with this person?” → “What makes this difficult, and what might help?”

5. The Person in the Environment

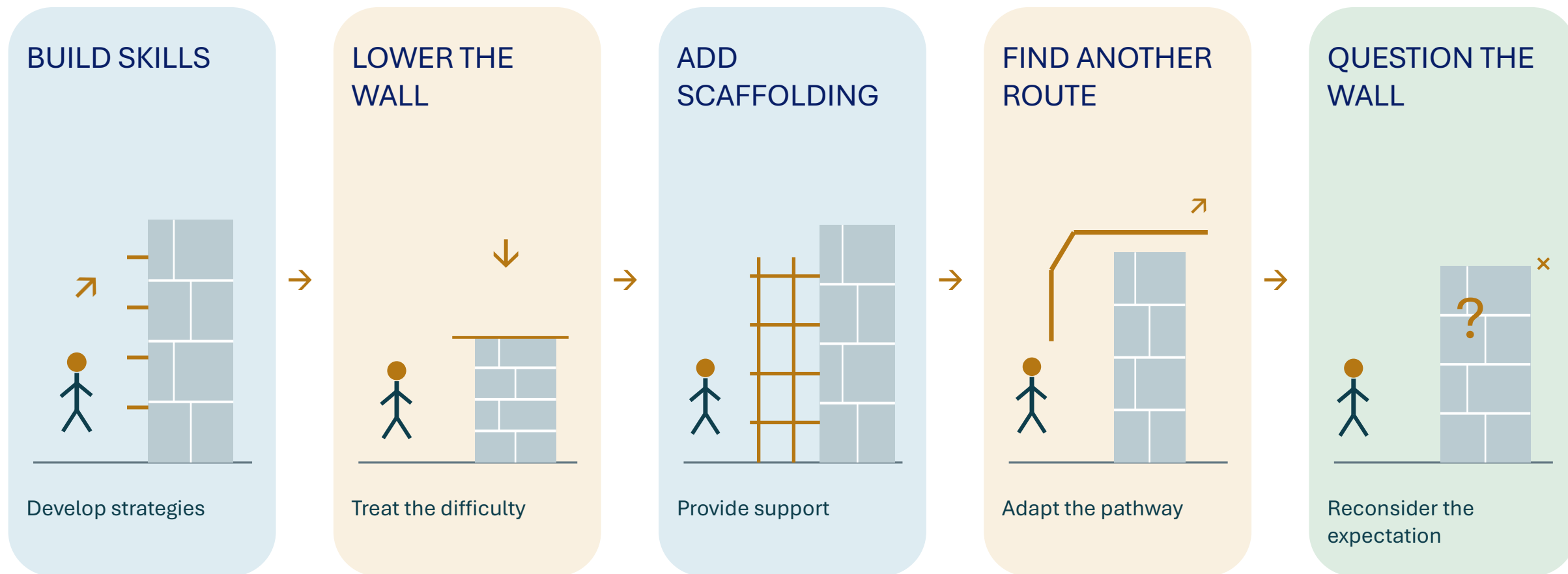
The Same Person can Function Differently across Contexts

	Accessible Conditions	High-Demand Conditions
ATTENTION	- Clear instructions - One task at a time - Limited distractions	- Implicit expectations - Competing unfinished tasks - Messages, interruptions
REGULATION	- Structure & visual support - Predictable transitions	- Noisy classroom - Sudden changes
COMMUNICATION	Eye contact optional	Eye contact required

What happens when this person, with this nervous system, encounters this environment?

Many Ways Through — and Beyond — a Wall

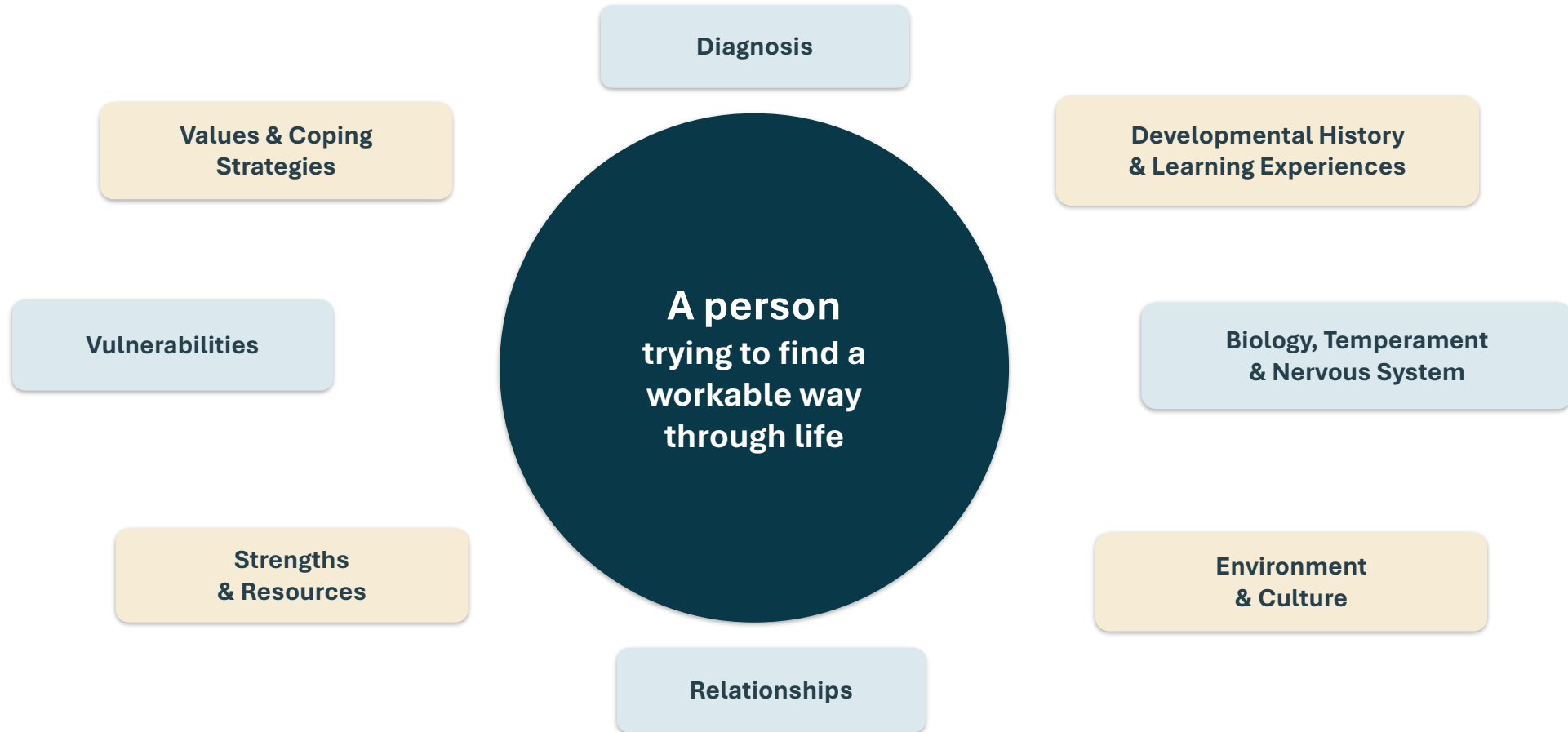
Different clinical responses to the same apparent obstacle



Before helping someone climb a wall, should we ask whether that wall needs to be there at all?

6. Coming Back to the Person

Bringing Diversity Into the Therapy Room: A Richer Field of Vision



What we see from the outside does not always tell us what an experience costs on the inside.

Mapping the Conditions for Flourishing

Understanding both what makes life harder and what makes it easier

Conditions of Suffering

Difficulties
Vulnerabilities
Barriers & Risk Factors

Conditions for Flourishing

Strengths
Resources
Protective Factors

My Own Owner's Manual

What overwhelms me? What helps me regulate?
What do I need to feel more fully myself?

The Map and the Landscape

There are Many Ways of Being Human

THE MAP



Diagnosis
shared language



Patterns
evidence and research



Frameworks
guide interventions, services
and accommodations

THE LANDSCAPE



Lived experience
what it feels like for this person



Context
relationships, environment,
culture



The particular person
vulnerabilities, strengths,
values and possibilities

Know the map. Explore the landscape.
With scientific knowledge, clinical skill, curiosity and humility.