Evaluating the development of the Making Space Neurodiversity Toolkit

June

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MERSEYSIDE Violence Reduction Partnership

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making space

LIVERPOOL JOHN MOORES UNIVERSITY

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About this report

Merseyside is one of several areas allocated funding since 2019 by the UK government to establish a Violence Reduction Unit. To inform the continued development of the Merseyside Violence Reduction Partnership (MVRP) since November 2019, Liverpool John Moores University (LJMU), have been commissioned to evaluate the MVRP as a whole (Quigg et al., 2020, 2021, 2022, 2023), and selected work programmes. In addition, since 2022/23, LJMU have been commissioned to implement additional research to fill gaps in local knowledge. This report forms one of a suite of outputs from the 2025/26 research and evaluation work programme and specifically presents a whole system evaluation of the MVRP. Additional reports for 2025/26 explore:

- Young Futures Prevention Panels (Harris et al., 2026).
- Operation Inclusion (Wilson et al., 2026).
- Custody Navigators (Hearne et al., 2026).
- Be the Change (Smith et al., 2026).
- Whole system (Harris et al., 2026).
- Fire Champions (Smith et al., 2026).
- Children and young people's survey findings (Butler et al., 2026; Quigg et al., 2026).

Outputs are available on the MVRP website: www.merseysidevrp.com or via Zara Quigg.

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For more information on the Making Space Neurodiversity Toolkit: daryhl.lewis@makingspace.co.uk

How to read this report

This report is designed to be read in sections. Readers may wish to start with the executive summary and recommendations before moving to detailed findings.

This report has been designed using neurodiversity affirming principles to reduce cognitive and sensory load, including off-white page colours, structured headings, use of plain language and clear navigation. These design choices reflect both the context of the evaluation as well as the lived experience shared by people taking part.

Icons and diagrams are used sparingly and consistently to support the navigation and understanding of the report. Decorative imagery has been avoided to minimise sensory and cognitive load.

Acknowledgements

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Glossary

- Neurodiversity is the natural variation in how human brains work, learn, and experience the world.
- Neurotypical refers to individuals whose neurological development and functioning align with what is socially and medically considered the norm.
- Neurodivergent refers to an individual whose brain functions significantly differently from those who are considered neurotypical.
- Neurodiverse is a term used to describe a group of individuals who represent neurodiversity which includes neurotypical and neurodivergent individuals.
- Neuroinclusive refers to practices, cultures, and environments that intentionally recognise, value, and accommodate the full range of cognitive differences, ensuring that both neurodivergent and neurotypical individuals can participate, communicate, and thrive without unnecessary barrier.
- Criminal justice system. The services involved when someone is arrested, goes to court, goes to prison, or works with probation.
- Custody. Being held by the police, usually in a custody suite after arrest.
- Probation. Support and supervision for people in the community after leaving prison or instead of going to prison.
- Approved Premises. A place where some people live after leaving prison. Staff support residents with rules, routines, and safety.
- Induction. The first stage when someone arrives in prison or a service. They are told the rules and what will happen next.
- Booking-in. The process when someone first arrives in custody or prison. Staff ask questions and record information.
- Screening. A short check to see if someone might be neurodivergent or needs extra support.
- Neurodiversity Support Manager. A staff member in prisons who helps identify neurodivergent people and makes sure they get the right support.
- Adverse Childhood Experiences (ACEs): Traumatic life events that occur during childhood that often significantly impact long term health and wellbeing outcomes.

- Masking. Trying to hide your natural behaviours to fit in or avoid being judged. This can be exhausting.
- Meltdown. A strong reaction when someone becomes overwhelmed. This may look like crying, shouting, or needing to move away.
- Shutdown. When someone becomes very overwhelmed and stops talking or interacting. They may go quiet or freeze.
- Stimming. Repetitive movements or sounds (like tapping, rocking, or humming) that help someone feel calm or focused.
- Sensory overload. When sounds, lights, smells, or other sensations become too much and cause distress.
- Cognitive load. How much information your brain is trying to process at once. Too much can make thinking or decision-making hard.
- Overwhelm. Feeling like everything is too much to cope with.
- Reasonable adjustments. Changes that services must make to help disabled or neurodivergent people take part equally (e.g., clearer language, quiet spaces, extra time).
- Neurodiversity Toolkit. A collection of easy-read guides, worksheets, and resources to help neurodivergent people understand the criminal justice system and get support.

Executive summary

What this section covers

- A short summary of the whole report
- The main findings from the evaluation
- Why neurodiversity matters in the criminal justice system
- Why the Neurodiversity Toolkit was developed
- What difference the Toolkit is making
- The key messages and next steps

What this report is about

This report evaluates the Making Space Neurodiversity Toolkit, developed to support neurodivergent people who encounter (or are at risk of encountering) the criminal justice system. Liverpool John Moores University and Making Space carried out the evaluation. The evaluation looks at:

- Why the Toolkit was needed
- How it was developed and used
- What difference it is making
- What helps or limits its impact
- What needs to happen next

The evaluation draws on:

Interviews with professionals across the criminal justice system

Focus groups and interviews with people with lived experience

Training feedback and documentation

Key findings

 Neurodivergence	Neurodivergent people think, process information, and communicate differently compared to neurotypical people. Neurodivergence includes, but is not limited to people who are autistic, ADHD, dyslexic and dyspraxic. Many neurodivergent people in the criminal justice system: • Are not diagnosed • Have experienced trauma or adversity • Can struggle with complex language, fast processes, and sensory overload.
 Neurodivergent people in the criminal justice system	The criminal justice system relies heavily on: • Long written documents • Complex and legal language • Rapid verbal instructions • Strict routines and unpredictable change
	These systems are not designed with neurodivergent needs in mind. As a result, neurodivergent people who enter the criminal justice system are often: • Confused or overwhelmed • Afraid of getting things wrong • Misunderstood as “non-compliant” or “aggressive” • Punished for distress rather than supported

 Lived experience	People with lived experience described: • Not understanding what was happening to them • Feeling frightened and overwhelmed • Being laughed at or not believed when asking for help • Having their needs ignored even when disclosed • Being punished for behaviour linked to distress, trauma, or sensory overload
	Many said that not knowing what would happen next was one of the most distressing parts of the system. These experiences were reported across: • Police custody • Prison • Probation • Court processes
 Why the Neurodiversity Toolkit was developed	The Toolkit was created to address long-standing gaps in support. Before the Toolkit: • Support was inconsistent • Good practice depended on individual staff • Information was varied and inconsistent across services • Neurodivergent needs were often invisible

	The aim of the Toolkit is to: • Improve people's understanding of neurodiversity • Reduce confusion and distress for neurodiverse people • Support clearer communication • Help prevent escalation and harm • Work for everyone, not just people with diagnoses
 What the Toolkit includes	The Toolkit provides: • Clear explanations of criminal justice system processes • Easy-read and visual resources • Worksheets for 1-to-1 work • Guidance for staff • Materials for families and carers
	It is designed using universal design principles, meaning: • It can be used with anyone • It does not rely on diagnosis • It can reduce cognitive and sensory load

 What works well about the Toolkit	Across the evaluation, people said the Toolkit works because it: • Uses clear, simple language • Breaks information into small steps • Explains what will happen next • Reduces overwhelm and anxiety • Supports calmer conversations
	The Toolkit was described as practical, usable, and relevant to real-world practice. Staff said the Toolkit: • Builds confidence • Helps them explain things more clearly • Improves engagement • Supports neurodivergent and neurotypical people (everyone)
 How the Toolkit helps prevent harm	The Toolkit is not just helpful after problems occur. This makes the Toolkit a preventative tool, not just a support resource. It helps prevent problems by: • Reducing fear and uncertainty • Helping people understand expectations • Supporting early de-escalation • Reducing misinterpretations of distress

 What limits the Toolkit's impact	The main barriers are not the Toolkit itself. As a result of barriers, the use of the Toolkit is uneven. Barriers include: • Lack of staff time and capacity • High workloads and staff shortages • Inconsistent or optional training • Cultural attitudes that see adjustments as "extra" • Poor information sharing across services
 Why embedding the Toolkit matters	The Toolkit works best when it is: • Part of routine processes • Offered automatically • Supported by systems and leadership
	Embedding makes good practice the default, not the exception. It is less effective when: • It relies on individual staff memory • It depends on "champions" alone • It is optional

Conclusion

The Making Space Neurodiversity Toolkit responds to a real and urgent need. It improves clarity and understanding, reduces distress and escalation, supports fairer and safer practice for both individuals and staff.

The Toolkit cannot fix structural problems on its own. However, when it is properly supported and embedded into systems, it has a strong potential to improve engagement, reduce harm, support dignity and contribute to long-term culture change. This work is not about being “soft”, it is about preventing damage, improving outcomes, and treating people as human beings within the criminal justice system.

What needs to happen next

1. Embed the Toolkit into routine processes (e.g. booking-in, induction, first appointments)
2. Provide regular, bite-sized training for frontline staff
3. Treat neurodivergent support as part of safety and fairness, not as optional support
4. Reduce repeated disclosure by improving information sharing
5. Take sensory and communication needs seriously
6. Support staff with backing from leaders, training, and supervision
7. Move from short-term pilots to longer-term investment

Contents

1. Introduction

What this section covers

- What neurodiversity means and why it matters
- Why many neurodivergent people face extra challenges in the criminal justice system
- How trauma and early adversity increase risk and reduce support
- Why the Making Space Neurodiversity Toolkit was developed
- What this evaluation aims to understand

1.1 Background

Neurodiversity

- Neurodiversity is a term used to describe the multiple and diverse ways that people's brains function across the population.
- People who are neurodivergent have brain functions or developmental patterns that differ from what society considers typical. Those whose neurological development aligns with these societal norms are called neurotypical (NHS England, n.d.).
- Neurodivergence includes various neurodevelopmental conditions (NDCs) such as Autism (also known as Autism Spectrum Disorder/Condition, (ASD/ASC)), Attention Deficit Hyperactivity Disorder (ADHD), Tourette's Syndrome (TS), as well as learning difficulties such as Dyslexia, Dyspraxia, Dyscalculia, Dysgraphia and more (NHS England, n.d.).
- These conditions typically appear early in life and are linked to brain development. Most persist into adulthood and are lifelong (Embracing Complexity Coalition, 2019).
- It is estimated that around 1 in 10 people in the UK are neurodivergent (Embracing Complexity Coalition, 2019), however, NDCs are underdiagnosed in the UK (Ginsberg,

Quintero et al., 2014; Hayes et al., 2018). Women are often diagnosed later in life and are historically left out of studies etc.

- There are many neurodivergent individuals who either lack a formal diagnosis or choose not to pursue one. Despite this, they still perceive and experience the world differently from those who are neurotypical and therefore are impacted in the same ways as those with diagnoses.
- Neurodivergent individuals often encounter socio-environmental pressures and systemic barriers, including environmental constraints and limited clinical recognition of co-occurring neurodevelopment conditions which can impact support (Black et al., 2025; Chellappa, 2025; Wilson et al., 2024). These challenges often interact and create significant disparities in terms of the health and wellbeing of neurodivergent individuals and can impact the need for and access to support.

Neurodivergence and Adverse Childhood Experiences

- A 2024 regional household survey of 5,395 adults found that neurodivergent individuals experienced higher rates of every measured ACE type (e.g. physical, sexual or emotional abuse, neglect, or environmental factors that make a child feel unsafe) and were significantly more likely to report four or more ACEs, even after controlling for sociodemographic factors (Wilson et al., 2024).
- ACEs were particularly prevalent among ND adults, with verbal abuse (44.7%) emerging as the most commonly reported form (Wilson et al., 2024). This higher prevalence may be due to abuse disguised as efforts to “correct” behaviours that are perceived as outside of societal norms.
- Consistent with wider evidence, adults with four or more ACEs face substantially elevated risks of mental health difficulties, risky health behaviours, and exposure to violence compared to those with fewer or no ACEs (Hughes et al., 2019).
- Furthermore, studies from across England and Wales show that people with four or more ACEs are significantly more likely to be incarcerated compared to those with none (Bellis et al., 2014; Bellis et al., 2016).

- Together, this highlights the disproportionate burden of childhood adversity experienced by neurodivergent individuals and the cumulative impact of such exposures.

Criminal Justice System

- The combined effects of increased ACE exposure, socio-environmental pressures, and systemic disadvantages have been linked to the overrepresentation of neurodivergent individuals within the criminal justice system or a heightened risk of eventual contact with it (Wilson et al., 2024).
- Empirical data reflect this pattern, with neurodivergent individuals being 2.37 times more likely to have ever been arrested and 1.58 times more likely to have ever been incarcerated compared to neurotypical peers (Wilson et al., 2024).
- Additionally, it is estimated that up to half of the adult prison population could be considered neurodivergent (Ministry of Justice, 2024).
- Criminal justice system processes are often reliant on communication styles, expectations, and behavioural norms that do not align with how neurodivergent people think and process information (Gibbs, 2025; Woodhouse et al., 2024).
- Neurodivergent people can face difficulties when accessing programmes, education, rehabilitation, or legal processes where sensory overload, unclear instructions, or rigid expectations can reduce engagement or lead to distress, that can manifest in several ways (meltdowns, shutdowns, severe anxiety, becoming non-verbal etc.) (Gibbs, 2025)
- As a result, misunderstandings are common, and individuals may be unfairly perceived as non-compliant, uncooperative, or disruptive which can expose neurodivergent service users to punitive responses from police, courts, corrections officers, and probation staff (Gibbs, 2025; Woodhouse, 2024).
- Not all people with the same ND condition behave the same and so even well-meaning people working in the criminal justice system may not recognise traits if they do not fit stereotypes.
- The UK criminal justice system has recently implemented several measures to better support neurodivergent individuals, driven by the Cross-Government Neurodiversity

Action Plan, which has improved screening, staff capability, and information-sharing across prisons, probation, and policing (Ministry of Justice, 2026).

- A major development has been the nationwide introduction of Neurodiversity Support Managers in all public prisons, who are responsible for identifying neurodivergent prisoners, coordinating reasonable adjustments, and training staff (Chadwick, 2025; Ministry of Justice, 2024).
- Alongside this, more than 180,000 screenings have been completed since 2021 to improve identification of neurodivergent needs, and prisons have begun adopting practical adjustments such as introducing sensory rooms and adapting communication approaches (Ministry of Justice, 2024; HM Inspectorate of Prisons, 2025).
- Additional guidance from the Parole Board ensures that neurodivergent individuals receive appropriate support during parole processes, including adjustments for communication and sensory needs (Parole Board, 2024).
- Collectively, these initiatives represent a move toward more consistent and inclusive support for neurodivergent people within the criminal justice system.
- Despite this, there are still significant gaps in addressing neurodivergent needs within the criminal justice system. Inspectorate reviews continue to describe support as "patchy, inconsistent and uncoordinated," with many individuals still going unidentified due to inconsistent screening processes across police custody, courts, and prison reception (Criminal Justice Joint Inspectorates, 2021; Woodhouse et al., 2024).
- Although prisons have expanded screening, earlier stages of the system (e.g. police interviews, the court system) lack systematic identification and staff training; while this is improving, it remains uneven across the criminal justice system (Chadwick, 2025; Woodhouse et al., 2024; Mason et al., 2025).
- Whilst the roll-out of Neurodiversity Support Managers has improved provision in some establishments, their impact varies widely depending on local resources, leadership, and staffing, which results in access to support being location-dependent (HM Inspectorate of Prisons, 2025).

- Environmental adjustments such as sensory-friendly spaces, having clear routines, and accessible communication formats are also not consistently implemented, despite strong evidence for their effectiveness Mason et al., 2025).
- More broadly, the criminal justice system still lacks a coherent, end-to-end neurodiversity strategy, spanning policing through to resettlement. This leads to fragmented support and poor continuity of care (Criminal Justice Joint Inspectorates, 2021).
- As a result, many neurodivergent individuals continue to report having to repeatedly explain their needs and being forced to navigate environments that are not designed for them. Such difficulties contribute to distress, disengagement, and disproportionate disciplinary outcomes (Chadwick, 2025).

1.2 The Making Space Neurodiversity Toolkit

The Merseyside Violence Reduction Partnership (MVRP) and the Office of the Police and Crime Commissioner asked Making Space, working with Sinclair Strong Consultants, to create a Neurodiversity Toolkit.

Photo source: [Making Space helps launch pioneering neurodiversity Toolkit for the criminal justice system - News - Making Space]

The Toolkit was created to help address the extra challenges neurodivergent people face when dealing with the criminal justice system and to improve understanding and support. The Toolkit aims to:

- Help neurodivergent individuals and their families navigate the criminal justice system.
- Support parents, carers, and professionals in understanding neurodivergence.
- Reduce reoffending by meeting the needs of neurodivergent offenders.
- Promote positive change through a neurodiversity-affirming approach.

"Leading this project on behalf of Making Space has been a privilege. From the beginning, our focus has been on hearing the voice of neurodivergent people and their families and working closely with professionals across the system to understand the challenges they face. The result is a Toolkit shaped by lived experience and professional insight, giving practitioners the resources they need to offer effective support, while ensuring individuals and communities feel understood, respected and empowered."

Daryhl Lewis, Wellbeing Services Lead at Making Space

- The Toolkit currently includes 61 original resources and links to 170 more. These materials are designed for professionals, victims, witnesses, defendants, offenders, families, and carers.
- The Toolkit includes easy-read documents, posters, worksheets, and guides for different stages of the criminal justice process (such as police call-outs, arrests, custody, and interviews).
- The Toolkit has already been shared widely in criminal justice system settings, including in prisons, probation, custody suites and community services. Training has been delivered to Safer Schools police officers, as well as for a short training package to be accessed by all police staff.

- In this study we will be evaluating how well the Toolkit works.

The Toolkit can be found here: [Neurodiversity Toolkit - Merseyside Violence Reduction Partnership]

1.3 Evaluation aims

The overall aim of this evaluation is to assess the implementation, accessibility, usefulness, and impact of the Making Space Neurodiversity Toolkit across criminal justice system settings. Specifically, the evaluation aims to:

- Examine how the Neurodiversity Toolkit is being used across different criminal justice system environments, including prisons, probation services, youth justice services, and police settings (e.g., custody suites, Safer Schools teams).
- Assess the accessibility, relevance, and perceived usefulness of the Toolkit for professionals, neurodivergent service users, families, and carers.
- Explore whether and how the Toolkit supports the implementation of reasonable adjustments, improves understanding of neurodivergence, and supports more neurodiversity-affirming practice.
- Identify barriers and facilitators to Toolkit use and the associated training, including organisational, cultural, and practical factors influencing uptake and engagement.
- Capture the experiences of people who have used or engaged with the Toolkit, including those with lived experience of neurodivergence and interaction with the criminal justice system.
- Assess the reach and dissemination of the Toolkit, including exploring how widely the materials have been shared and embedded within services.
- Develop evidence-based recommendations informing future rollout, sustainability, and system-wide adoption of the Toolkit.
- Evaluate the effectiveness of the Toolkit training, including any changes in staff knowledge, confidence, and practice intentions, using pre-, post-, and follow-up survey measures.

2. Methodology

What this section covers

- How the evaluation was carried out
- Who was involved and how they took part
- What information was collected
- How feedback and data were analysed
- How different sources of evidence were combined

This mixed-methods evaluation was conducted jointly between LJMU and Making Space. More information on Making Space, can be found here: https://www.makingspace.co.uk/.

Making Space delivered the Neurodiversity Toolkit training and supported recruitment and access; LJMU independently led stakeholder interviews and oversaw survey data management and analysis. Both teams contributed to service user data collection. A multi-component mixed-methods design was used, combining:

- Qualitative interviews and focus groups with stakeholders, professionals, and service users.
- Quantitative survey data from training attendees, collected pre-, post-, and at 6-week follow-up.
- Secondary data analysis of existing documentation and feedback gathered by Making Space.

2.1 Stakeholder engagement

Interviews and one focus group were conducted with (*n*=14) individuals involved in developing, delivering, or implementing the Toolkit across the criminal justice system, including police officers (including Safer Schools teams), probation staff, prison staff, youth justice staff, and other practitioners who have used or seen the Toolkit. Individuals were recruited via Making Space and MVRP networks, using organisational contacts, training

sessions, and existing professional networks. Semi-structured interviews explored the development, implementation, and delivery of the Toolkit, including its perceived strengths, challenges, and any opportunities for improvement. Specifically, interviews examined:

- Experiences using the Toolkit
- Barriers and facilitators to implementation
- Views on the need for such resources within the criminal justice system
- Perceived impact on practice
- Views on training effectiveness
- Perspectives on how the Toolkit could support long-term, sustainable change
- Recommendations for wider rollout

2.2 Engagement with individuals with lived experience

One interview was carried out with a person with lived experience at LJMU and one focus group (*n*=8) was conducted with adults living in an Approved Premises to capture lived experiences of:

- Neurodivergent needs during criminal justice system interactions
- Exposure to or use of the Toolkit
- Perceived helpfulness and accessibility of Toolkit materials
- Suggestions for enhancing support for neurodivergent people
- Experiences engaging with the Toolkit
- Perceived relevance and clarity of the Toolkit
- Impact on understanding, confidence, or interactions with professionals

Informed consent was obtained from all individuals. All interviews and focus groups were audio-recorded (with consent), transcribed, and analysed using thematic analysis.

2.3 Secondary data analysis

Training Evaluation Surveys

Three surveys were administered at different time points: a pre-training survey (*n* = 19), a post-training survey (*n*= 2), and a six-week follow-up survey (n*n*= 1). The pre-training survey was administered online via JISC Online Surveys (link distributed by Making Space) or in paper format on the day of training. The post-training survey was administered immediately following completion of training, either online (via JISC) or in paper format. The six-week follow-up survey was administered online only, with the survey link distributed by Making Space. Due to a small number of people completing the post and follow up surveys, statistical analysis could not be completed. However, the pre surveys did tell us about the level of knowledge and confidence of staff before training. Pre-surveys explored:

- Knowledge and understanding of neurodivergence
- Confidence in supporting neurodivergent individuals
- Awareness of, and intended use of the Toolkit
- Perceived relevance and quality of the training

Post- and follow up surveys aimed to explore:

- Changes in knowledge, attitudes, and confidence in the Toolkit over time
- Training effectiveness
- Patterns in Toolkit use

Secondary Data Analysis

A document review and analysis of:

- Existing feedback collected by Making Space
- Training materials, dissemination data, and implementation reports
- Monitoring data on Toolkit reach and use

3. Findings

What this section covers

- Why the Toolkit was needed
- How the Toolkit was developed
- How staff and other individuals use the Toolkit
- What helps or makes it harder to use
- What difference the Toolkit is making

Quotes from interviews and focus groups are used to show what people said. ‘S’ stands for stakeholder/professional and ‘Lived Experience’ is quotes from people who are neurodivergent and have experience of the being involved in the criminal justice system.

3.1. Rationale for the Toolkit

Issue	What was reported	Why this matters
High prevalence of neurodivergence in the criminal justice system	ND traits described as extremely common and often undiagnosed	Needs go unidentified and unsupported
Trauma and ACEs	Both people with lived experience and staff linked ND with early adversity	Heightened vulnerability and escalation risk
Invisible needs	Neurodivergence often not recognised unless formally diagnosed	Individuals punished for unmet needs
Inaccessible systems	Language, processes and environments described as overwhelming	Reduced engagement and increased harm
Misinterpretation of behaviour	ND traits seen as non-compliance or attitude	Punitive responses and escalation

3.1.1 Prevalence of neurodivergence in the criminal justice system

Neurodivergence has been present across criminal justice services for a long time, though it has not been consistently recognised. Staff across every part of the system described extremely high levels of neurodivergence among the people they work with. Despite this, it often remains unseen. Many individuals enter the system without a formal diagnosis, and some do not realise they are neurodivergent until much later. Prison Neurodiversity Leads reported a steady flow of referrals, often involving people who had struggled for years without understanding the reasons. Professionals supporting victims of crime also noted seeing a rise in the number of people they engage with who identify with ADHD or Autism. This was linked to growing awareness of how ND traits appear and vary by population and age, rather than an actual increase in prevalence. This demonstrates how neurodivergence has been misunderstood in the past and highlights the need for systems to adapt as understanding grows.

People with lived experience reinforced how commonly neurodivergence can be undetected and how they can be made to feel invisible. Without consistent recognition, ND needs are left unmet, behaviours are misunderstood, and individuals face harm by systems that do not recognise how they process information. This strengthens the case for a clear, accessible, system-wide Toolkit that focuses on what people need rather than relying solely on diagnostic labels.

"50% of our prison population has got neurodiversity… the undiagnosed, we're expecting around the 70 to 80% threshold." (S1)

"Neurodivergent people comprise quite a significant amount of the criminal justice system, and they only get diagnosed when they're in the system." (S3)

"The vast majority of detainees have some form of mental health or neurodiversity… massively overrepresented within the criminal justice system." (S5)

"Everyone should be screened… whether they've got a diagnosis or not." (S3)

"We operate a needs-based, not a diagnostic-based model… every prisoner is screened for neurodivergent traits." (S6)

"Around 15% score a 1 for ADHD… indicating they would not cope in custody without intervention. If you push that up to level 2… you're up to almost 50%." (S6)

"People have always been in our service, but people recognising and disclosing that they have ADHD and autism… that's what would come up in our data now." (S11)

"They (prison staff) don't understand… don't ask… don't have a clue." (Lived Experience)

3.1.2 Adverse Childhood Experiences and trauma

Stakeholders and people with lived experience consistently described a strong link between neurodivergence, trauma, and early adversity within the criminal justice system. Many neurodivergent individuals had experienced significant harm in childhood, including neglect, instability, or abuse. Staff working in probation and custody settings spoke about long-standing patterns of rejection, low confidence, and difficulties with emotional regulation, often rooted in these early experiences. For many, these challenges continued into adulthood and shaped how they interacted with services.

"Their self-esteem is so low… I strongly believe that's part of the triggers to the violent offences." (S1)

"Every one of us has something about our childhood that we never talked about." (Lived Experience)

"That's the common thing, trauma, and that's why we break the law." (Lived Experience)

"My brother's had psychosis since he got out of jail. He's never been the same." (Lived Experience)

People with lived experience highlighted how past trauma can resurface in moments of stress. Some described situations where they experienced an overwhelming emotional response triggered by memories of earlier abuse, leading to reactive behaviour being misunderstood by professionals resulting often in unnecessary escalation or arrest. They emphasised that if staff had been more aware of what trauma responses looked like, these situations could have been handled safely and without harm.

Several people spoke about the long-term impact of trauma, including ongoing mental health difficulties after release. Staff also noted that when trauma-related behaviours are misinterpreted as defiance or aggression, individuals can face disciplinary action rather than being met with support. This can lead to withdrawal, re-traumatisation, or self-harm behaviours. These patterns reinforce the need for approaches that recognise both neurodivergence and trauma together, instead of treating them as separate issues.

3.1.3 Recognition of long-standing gaps in neurodiversity support

Across interviews, stakeholders highlighted that the Toolkit was created in response to major and long-standing gaps in support for neurodivergent people across the criminal justice system. Multiple individuals described the justice system as fundamentally inaccessible and overwhelming for neurodivergent individuals. Professionals frequently noted the absence of appropriate resources, strategies or environmental adjustments. Staff across prisons, probation, custody and courts described routinely encountering neurodivergent individuals whose needs were misunderstood, dismissed, or misinterpreted as non-compliance. This was further reinforced by lived experience individuals expressing feeling scared, overwhelmed, misunderstood and in some cases, traumatised during their engagement with the criminal justice system. This finding highlighted the need for a resource that provides consistency, clarity and direction.

"There was such a high need for systems to be accessible for neurodivergent people… we found gaps everywhere." (S8)

"It's an area that has been neglected for so long." (S9)

3.1.4 Complexity of language and processes

Barrier	How it presents	Example impact
Complex written language	Long, legalistic letters and notices	Confusion, misunderstandings, missed appointments
Literal interpretation	Use of metaphors or ambiguous language	Unintended confrontation
Information overload	Too many documents at once	Withdrawal and disengagement
Pace of communication	Rapid speech and instructions	Heightened anxiety and shutdown
Fear of disclosure	Concern about ridicule or punishment	Needs remain hidden

Across interviews, stakeholders and people with lived experience described how current criminal justice processes are not built with neurodivergent communication, processing, or trauma needs in mind. Many professionals highlighted that the language used in legal documents, probation letters, court paperwork, and licence conditions is so complex that even highly educated staff struggle to understand it. For individuals with literacy or processing challenges, specific learning differences, ADHD, Autism, or with trauma-related cognitive overload, these materials become almost impossible to navigate.

A recurring issue was the lack of early identification of communication needs, particularly during police interviews. People who speak fluently or appear to be confident talking are often assumed to not need adjustments, when this may not be the case. This can lead to poorer-quality evidence collection, increased distress, and missed opportunities to prevent harm. Staff also described how unclear procedures, not knowing when to stand, where to go, or what behaviour is expected, can trigger panic in neurodivergent people. Behaviours that are signs of confusion or fear, such as blunt language, raising of voices, physically stimming, shutting or melting down are frequently misinterpreted as defiance, resulting in punishment or escalation.

Speech and language difficulties, which affect a large proportion of people in custody, add another layer of misunderstanding and shame. For efficiency of the process many staff communicate quickly, use figurative language, or give multi-step instructions that can be difficult for neurodivergent people to process. This can create barriers to disclosure, with some individuals hiding their needs to avoid ridicule or other negative consequences. One example that was given involved a ND person pretending they could read out of embarrassment, until they felt safe enough to admit otherwise to someone they trusted. Another example involved a ND person being unknowingly exposed to a sensory trigger repeatedly, which eventually led them to self-harm due to their cumulative distress.

"Some of the language used, I've got 2 degrees, I can't understand it." (S1)

"There's way too many words and documents… the induction pack is so wordy… warning letters are so wordy." (S3)

"They just need it to be easy to understand." (S5)

"If someone can appear… very eloquent, people will assume there are no communication needs." (S12)

"People could give better evidence if they were just being asked." (S12)

"Incorrect use of terminology can be misunderstood as confrontation." (S9)

"Incorrect terminology can cause confrontation for autistic people who take things literally." (S9)

"Language has been huge, people didn't know what they were saying was wrong." (S9)

"[The prison cook refused to make her a sandwich without tomatoes] It is just tomato to you — but to that person, it's everything." (S9)

"It's hard for me to put it (how I am feeling) across." (Lived Experience)

"We've had fidget spinners, colouring books, distraction tools for years." (S5)

People with lived experience described the system as unpredictable and overwhelming, like being placed in a setting with rigid rules that no one explains. They spoke about experiences

of being punished because of actions that were just attempts to self-regulate or feel safe. Stakeholders working with victims of crime also emphasised that neurodivergent victims face additional barriers to neurotypical victims in a system that is already difficult to navigate.

Stakeholders also provided examples of the incorrect use of language when discussing neurodivergence to neurodivergent people. One example provided was an organisation that was making positive attempts to incorporate screening within their initial assessments. However, while trying to be accessible, the phrasing of the question as 'are you neurodiverse' rather than neurodivergent caused a barrier. The stakeholder explained that a neurodivergent person may answer or check "no" to this because this is the incorrect definition. This may be because of literal understanding of phrasing but also could be because of feeling that the service has not referred to it correctly and feeling undervalued.

These patterns highlight that communication barriers are not just minor inconveniences but can be sources of real harm. They contribute to fear, escalation, re-traumatisation, and long-term mental health impacts for neurodivergent people. The Toolkit's focus on clear, adjusted communication directly responds to these issues, offering a practical way to reduce misunderstanding and support neurodivergent people more effectively across the system.

"Whilst we highlight the importance of the use of correct terminology, we emphasise a person-centred approach using a person's preferred language where possible." (S8)

"I didn't stand up because I didn't know what to do… they said we won't have that attitude in this court. I wasn't being awkward. I just didn't know when I was meant to stand up." (Lived experience)

"Anything you do could go against you, and you don't even know what you're doing wrong." (Lived experience)

"It's like being thrown into a room and not having a clue what the rules are." (Lived experience)

"I wasn't angry, I was terrified." (Lived experience)

"I was punished for trying to keep myself safe." (Lived experience)

"For something that's for neurodiverse people, it's not accessible for neurodiverse people." (S1)

"I can't decipher how it actually works." (S1)

"It feels like progress is measured in a binary way that doesn't really match a neurodivergent person's brain." (S3)

"It's about how we help that person navigate [the system]." (S2)

3.1.5 Sensory and environmental barriers

Environment	Common sensory issues	Reported effects
Police custody	Noise, lighting, unpredictability	Distress and confusion
Prison	Locked confinement, smells, bedding	Chronic overload and dysregulation
Probation offices	Bright, noisy shared spaces	Difficulty focusing
Waiting areas	Crowding, lack of privacy	Heightened anxiety
Transitions between services and processes	Sudden change and uncertainty	Disengagement and risk

Sensory and environment

Custody was consistently described as an environment that feels unsafe, unpredictable, and overwhelming. People spoke about conditions that were physically and emotionally intolerable, long periods of confinement, extreme noise, heat, and constant movement. Even for neurotypical individuals these conditions can be difficult but for neurodivergent people, they can become unmanageable. Sensory overload was described as a near-universal experience in custody, with common triggers including shouting, alarms, door slams, bright lights, strong smells, overcrowding, and uncomfortable bedding or clothing textures.

Staff and people with lived experience emphasised that many prisons are unable to change core environmental features, such as lighting or the absence of visual aids, due to safety restrictions. While the Toolkit cannot remove these structural barriers, it can offer practical strategies to reduce their impact. People who were neurodivergent repeatedly described how sensory overwhelm directly escalated distress and reactive behaviour. Crowding, proximity, unpredictable movement, and constant noise were all identified as triggers that can lead to panic, frustration, or shutdown.

The physical environment was also linked to feelings of emotional strain. People who were neurodiverse described feeling trapped, overstimulated, and unable to regulate their responses in the physical environment. Some explained how masking their distress felt exhausting and unsustainable, while others described internal experiences of overwhelm that were invisible to staff. These conditions were said to heighten anxiety, conflict, and vulnerability, sometimes leading to long-term mental health difficulties.

Overall, the accounts highlight how the sensory and physical realities of custody can intensify distress for neurodivergent individuals. This reinforces the need for environments and practices that recognise sensory processing differences and prioritise safety, predictability, and reduced overwhelm. These are aims that the Toolkit directly supports. Whilst the Toolkit cannot remove these structural barriers, there are various information guides and, check-lists among other resources in the Toolkit that can help provide strategies to reduce the impact, help people to understand themselves and build healthy coping strategies.

"The office is quite noisy, quite bright… that can be overwhelming." (S2)

"Prison… is the most inconsistent day-to-day running… I struggle with it." (S7)

"Custody is a very scary, hostile and foreign environment." (S8)

"[The stress of] 24 hours banged up." (Lived Experience)

"If someone's behind me talking it freaks me out." (Lived experience)

"People walking too close, noise everywhere — it's like being in a pressure cooker." (Lived experience)

"If you add neurodiversity on top of that, there's definitely a lot of barriers in place." (S11)

"It's constant — noise, people, movement — you never get a break." (Lived experience)

"Imagine a wing of 80 men, 40 degrees, doors banging — it's like a pressure cooker." (Lived experience)

"All night it's people booting doors, smashing things up." (Lived experience)

"We are largely impotent in that regard… I can provide earplugs but I can't change the lighting." (S6)

"Masking is like holding a beach ball underwater." (S9)

"I felt like inside my body was having a seizure, but no one could tell." (S9 recalling information from a child)

Routine

Many neurodivergent people in the criminal justice system rely heavily on structure, predictability, and consistency, which can shape both their experiences and their outcomes. A stable routine can provide a sense of safety and clarity, helping individuals manage daily expectations and reduce anxiety. When that structure is disrupted, through sudden timetable changes, frequent transfers, or inconsistent communication, it can have a significant impact on their ability to cope or engage with services. Even small alterations to planned activities can feel overwhelming, leading to frustration, withdrawal, or a breakdown in trust. At the same time, the system often places a high burden on individuals to adapt to change without offering the transitional support they may need, particularly when moving between different stages of the justice process. These challenges highlight how essential reliable routines and clear communication are for neurodivergent people navigating custodial and community settings.

"People with neurodiversity actually strive in prison because of the regime… they knew exactly what they were expecting every day." (S1)

"Some prefer prison because it feels safe and has routine." (S9)

"Coping with regime, communicating." (Lived Experience)

"Once my routine's broken, that's it." (Lived Experience)

"If you tell me a time and then change it, my whole day is gone… people don't understand how much that messes your head" (Lived Experience)

"Just don't promise something if you can't keep it." (Lived Experience)

"I got moved once a month for about two years… it's always in your mind, it's harder." (Lived Experience)

"One thing can slip and if they get enforcement, they just think, 'I'm not going to engage at all.'" (S3)

"There's a lot of expectation on the individual… that can be quite problematic." (S2)

"That move from children to adult services has no interim support." (S9)

"It's that change going in (prison) and then the change coming back out." (Lived Experience)

Overwhelm

A strong theme across accounts was the consistent misinterpretation of neurodivergent distress as aggression, threat, or deliberate non-compliance. People with lived experience described situations where individuals were trying to regulate themselves, create space, or communicate overwhelm, but these actions were viewed by staff as confrontational. This pattern was reported not only in prisons but also in courts, transport, healthcare settings, and everyday services.

People with lived experience explained that meltdowns, shutdowns, and sensory overload were often mistaken for intentional hostility. When someone was already overstimulated,

uninformed staff responses frequently escalated the situation rather than calming it. Attempts to step back, protect personal space, or manage rising panic were sometimes interpreted as resistance. As a result, neurodivergent individuals were placed at increased risk of restraint, disciplinary action, or further trauma.

These accounts highlight a critical gap in understanding around how distress behaviours linked to neurodivergence are fundamentally different from deliberate aggression, yet they are often treated the same. This misunderstanding contributes to unnecessary escalation, fear, and harm of neurodivergent people in the system. It reinforces the need for training and resources that help staff recognise neurodivergent distress responses and respond in ways that prioritise safety, de-escalation, and emotional regulation.

"There's a difference between a meltdown and someone being aggressive — staff don't know the difference." (Lived Experience)

"He was pushing himself back, trying to calm himself down, and they were roaring at him." (Lived Experience)

3.1.6 Cultural resistance, stigma and attitudinal barriers

People with lived experience described a deeply embedded punitive culture across the criminal justice system, one that often dismisses or minimises neurodivergent needs. This culture was said to discourage disclosure, increase distress, and escalate behaviours that could otherwise be de-escalated with understanding and support. Neurodiversity practitioners delivering training spoke about the emotional labour involved in challenging these attitudes, particularly when met with resistance or ridicule. While some progress is happening, it was described as inconsistent and uneven across settings.

A widespread lack of understanding of neurodivergence among staff was repeatedly highlighted. Many people felt that staff did not see neurodivergence as part of their role,

framing it instead as a health issue outside of their responsibility. As a result, adjustments were rarely made, even when needs were known or formally recorded. This led to repeated misunderstandings, conflict, and punishment for behaviours rooted in overwhelm, sensory distress, or communication differences rather than intentional defiance.

"You can get diagnosed with all of this… but once you're in trouble, no one respects it or cares." (Lived Experience)

"Nothing gets acted on. You tell them things, but there's no point because nothing changes." (Lived Experience)

"You say it to them and they say, 'We're not nurses, we're prison staff…"It's not our job." (Lived Experience)

"You might get the odd officer who understands a bit, but I'd say one in ten." (Lived Experience)

"1 in 10… 1 in 50 more like." (Lived Experience)

"They just laugh at you, slam your door." (Lived Experience)

"Your name's taken away. You're just a number to the system." (Lived Experience)

"You're not treated like a person, you're treated like an animal." (Lived Experience)

"People don't care who you are or what you need once you're in there (prison)." (Lived Experience)

"It's all about getting you off the streets and behind bars, that's it." (Lived Experience)

People with lived experience described the profound power imbalances between them and criminal justice system staff. They spoke about being ignored, mocked, or punished for expressing sensory needs or other neurodivergent traits. Some described being coerced into activities, facing retaliation for raising concerns, or feeling stripped of their identity and dignity. These experiences created a sense of futility around disclosure, as many felt that sharing their needs made no practical difference. The emotional impact of this, including fear, shame, and loss of trust, was described as significant and long-lasting.

"If you don't do the plan, it's not going to change." (Lived Experience)

"No respect for the prisoners… laugh at you if you're diagnosed." (Lived Experience)

"Meltdowns and shutdowns are treated like you're just being aggressive." (Lived Experience)

"If I'd done what they did to me, I'd get 3 years for that." (Lived Experience)

"Jail is evil. It's never going to change." (Lived Experience)

"Understanding of neurodiversity is still kind of optional… it's not embedded in the culture." (S3)

"Some people might think the Toolkit isn't punitive enough." (S3)

"There is a perception among some that we're 'going soft'." (S5)

"No one's arsed (bothered)." (Lived Experience)

"We all say we're a bit 'neurospicy' [used by some people as a slang word for neurodivergent]… we're somewhere on the spectrum." (S1)

"[you hear] Everyone has a bit of ADHD" (S9)

"[you hear] ADHD is over diagnosed" (S9)

"We can't accommodate too much, they've done something wrong." (S9)

"[Professional will say] If they're moaning about bedsheets… don't do the crime." (Lived Experience)

"You'll find officers saying, 'Did he wear ear defenders when he was robbing the bank?'" (S7)

Even when individuals had diagnoses or openly identified as neurodivergent, people with lived experience reported that this rarely translated into meaningful support. Staff attitudes ranged from scepticism to outright dismissal, with some minimising neurodivergence as something "everyone has a bit of," or questioning whether adjustments were deserved because of the person's offence. These views reinforced a culture where neurodivergent needs were deprioritised, and where distress behaviours were frequently misinterpreted as aggression or poor attitude.

The pre surveys showed that knowledge amongst professionals working in the criminal justice system was weak and confidence was low beforehand. However, only one person completed the survey at post, and two completed at follow up (and this data cannot be matched). Regardless, the data from those three people showed an improvement, with them rating their knowledge and confidence as high following the training. The survey findings, while limited, suggested that training can improve staff confidence and knowledge. However, stakeholders and people with lived experience emphasised that willingness to learn is not enough on its own and that meaningful change requires time, skill, and an overall shift in organisational culture. Lived experience accounts made clear the human cost of inaccessible systems, from re-traumatisation to long-term mental health impacts. This underscores the urgent need for neurodivergent-informed practice that is embedded, consistent, and is taken seriously across all parts of the system.

3.2 Development of the Toolkit

The Merseyside Violence Reduction Partnership (MVRP) and the Office of the Police and Crime Commissioner asked Making Space, working with Sinclair Strong Consultants, to create a Neurodiversity Toolkit. The Making Space team described the creation of the Toolkit as heavily informed by direct observation, service mapping, and frontline engagement, rather than theory alone. This included:

- A review of existing resources
- Engagement across Merseyside's prisons, probation teams, youth justice services and custody suites
- Consultation with neurodiversity leads, clinicians, specialist services and those with lived experience.

The result was a Toolkit firmly rooted in operational reality, trauma-informed practice and neuroinclusive design.

"The majority of the first six months was spent doing research in the services, identifying what was working well and where the gaps were." (S8)

3.3 Reach of the Toolkit

Training was delivered across a broad range of operational teams, frontline services, and specialist units. This included both introductory toolkit workshops and combined neurodiversity awareness sessions.

Toolkit Training Sessions

Training was provided to the following teams and services:

- Intro to toolkit workshop — introductory session for staff.
- South Liverpool PDU OMU team meeting — operational managers and casework staff.
- South Liverpool PDU full team meeting — whole-team briefing and training.
- Liverpool Safeguarding Adults Board (LSAB) Team meeting — to protect an adult's right to live in safety, free from abuse and neglect (safeguarding board staff).
- Sefton Probation Delivery Unit – a local probation office.
- Liverpool Women's PDU — specialist women's service.
- Knowsley Youth Justice Service — youth justice practitioners.
- Liaison and Diversion Team — early-intervention and custody-suite support.
- Sefton Women's PDU — women's probation service.

Combined Toolkit and Neurodiversity Training

Additional sessions blended toolkit content with wider neurodiversity awareness:

- Safer Schools Officers — police officers working with schools.
- Making Space workshops — four regional sessions with probation and prison staff across the North West.
- Liverpool Women's PDU — extended training offer.

- National Autistic Society (NAS) and partner organisations in Greater Manchester — voluntary sector and neurodiversity-focused organisations.

Networking, Engagement, and Visibility

The toolkit was also promoted through key regional and national events, strengthening partnerships and increasing awareness across the criminal justice system. Events attended included:

- N8 Policing Research Partnership (PRP) Policing Innovation Neurodiversity Conference — national platform for sharing learning.
- HMP Altcourse Recovery Event — engagement with prison-based recovery services.
- Youth Empowerment Scheme (YES) Event — youth engagement and support networks.
- HMP Kirkham Neurodiversity Event — cross-prison neurodiversity networking.
- St Helens Women's Probation Health Event — health and wellbeing-focused engagement.
- Liverpool Women's Probation Health Event — local partnership-building.

3.4 Barriers and facilitators

Barrier type	What staff described	Impact on implementation
Capacity	High caseloads, staff shortages	Limited time to use resources
Training	Inconsistent and uneven	Frontline staff lack confidence
Culture	Punitive attitudes and scepticism	Adjustments seen as optional
Systems	Poor information sharing	Repeated disclosure
Practical constraints	Poster restrictions, safety rules	Limits on visual materials

Whilst generally considered useful by stakeholders, due to the Toolkit not being fully embedded in systems and across teams, there were several logistical issues reported. Implementation varies widely across regions, teams and even individual officers, which could cause confusion. Navigation and access could be problematic for staff, for example some

probation staff reported experiencing technical issues trying to access materials and other users described difficulty navigating the breadth of materials, especially where it was not related to their role. Time limitations in processes could also restrict meaningful use for some professionals. Other staff who had no problem using the Toolkit expressed concerns about short term commissioning and projects risk ending before change embeds. These barriers highlight the need for structural integration and leadership endorsement.

"As soon as you see an e-mail like that, you're like, yeah, whatever." (S1)

"We've only really used the leaflet… when we go out and about to events." (S4)

"[probation and youth justice service] really struggled to engage with the Toolkit." (S9)

"Some people only engage when a manager tells them to." (S9)

"We had to pitch to staff why they should use it, like salespeople." (S9)

"Posters aren't allowed, they'd have to be painted onto the wall." (S8)

3.4.1 Capacity constraints and engagement

Workforce pressures were the most frequently identified barrier to delivering neuroinclusive practice. Probation staff described unmanageable caseloads, prison workers highlighted chronic staff shortages, and custody environments were said to operate at a pace that leaves little room for reflective or individualised support. These constraints meant that even when staff were motivated to help, they often lacked the time, capacity, or stability needed to implement adjustments consistently.

Making Space faced significant challenges engaging with organisations to deliver the training and introduce the Toolkit, and stakeholders struggled to engage in evaluation interviews and complete surveys due to capacity constraints. As one person with lived experience asked, "how can they make culture and procedural changes, if they cannot even do this [complete surveys or attend interviews]".

Stakeholders reported very few barriers relating to the Toolkit itself. However, some noted that the breadth of information might feel overwhelming for staff who are new to the criminal justice system or are unfamiliar with neurodivergence. This reinforced the value of curated pathways or "top resources" to support early engagement and reduce cognitive load for new practitioners.

Across settings, staff described practical limitations that restricted what they could offer to be more neuroinclusive. Some tools or strategies require staff presence or one-to-one time that simply isn't available. Others require environmental changes, such as reducing noise or adjusting lighting, that are impossible within existing prison infrastructure. High turnover of people in custody, rapid transitions between services, and the short length of stay in some establishment's, further limits opportunities for sustained intervention.

People with lived experience echoed these concerns, often describing support as a "drop in the ocean" compared to the scale of need. They emphasised that while individual staff may try their best, the system's pace and resource constraints means that meaningful neuroinclusive practice is difficult to deliver.

Overall, these accounts highlight that the main barriers are structural rather than attitudinal. Staff are stretched, environments are restrictive, and the system is not designed for the level of individualised support that neurodivergent people require. The Toolkit is seen as valuable, but its impact depends on workforce capacity, time, and organisational readiness to embed neurodivergent-informed practice.

"Staff availability is a huge barrier… they're already drowning." (S1)

"We do try as best as we can to mitigate how difficult it can be to navigate probation." (S2)

"A lot of people come into custody intoxicated… that's not the time to use it." (S5)

"Someone very new to the role might think, 'oh my God, there's a lot of information in here.'" (S12)

"The materials require a person to administer them… we don't have the personnel." (S6)

"Officers do not have enough hours in the day… key work is not proving possible to deliver." (S6)

"We turn over 850 prisoners every three months… we don't have them for long." (S6)

"We're not the right category of prison for this sort of intervention." (S6)

3.4.2 Inconsistent (wider) training

Stakeholders frequently reported that neurodiversity training across the criminal justice system is limited, inconsistently delivered, and is often targeted at the wrong groups. Many described a pattern where senior leaders receive training while frontline staff, the people who interact most frequently with neurodivergent individuals, receive little to no training. Where training does exist, it was often described as surface-level, lacking depth, and not being reinforced over time. Staff turnover further compounds this, with new officers frequently joining without neurodiversity awareness and existing staff rarely receiving refreshers.

A lack of face-to-face training was highlighted as a major gap, with stakeholders explaining that online materials alone are not enough to build confidence or change practice. People noted that even within the same custody unit, staff understanding varies widely, leading to inconsistent responses and confusion for neurodivergent individuals. Several stakeholders described a complete absence of psychoeducation, meaning staff lacked the foundational knowledge needed to recognise neurodivergent traits or respond appropriately.

The people with lived experience were not aware of training being available to staff or that staff can have specific roles to support neurodivergent people. These lived experience accounts reinforced the importance of training, describing situations where staff misinterpreted distress, dismissed needs, or escalated behaviour due to a lack of understanding. Stakeholders emphasised that without regular, accessible training, staff are left unsure how to use the Toolkit or are completely unaware that it exists at all. Some settings reported more structured training, such as custody teams receiving dedicated neurodiversity modules, but these examples were often the exception rather than the norm.

Overall, the findings show that while training is recognised as essential, it is not yet embedded across the workforce. Inconsistent access, limited depth, and lack of reinforcement mean that staff confidence remains low and neurodivergent individuals continue to experience misunderstanding and harm. Strengthening training pathways, ensuring frontline access to training, and building in regular refreshers were identified as key steps for improving neuroinclusive practice.

"There isn't any sort of face-to-face training." (S2)

"People operate differently even within the same custody unit, lack of training." (S9)

"A lack of psychoeducation – it doesn't exist." (S9)

"Neurodiversity training was only being given to senior leadership, not frontline officers who need it." (S9)

"Staff training [recommendation]." (Lived Experience)

"Because of staff turnover… we need to keep refreshing and making sure people know the Toolkit exists." (S7)

"Custody sergeants and detention officers do a 3–4 week training course… a third of that is neurodiversity." (S5)

"I didn't even know that (Neurodiversity Support Managers) existed." (Lived Experience)

3.4.3 Limitations for the evaluation

Several factors constrained the implementation and evaluation of the Neurodiversity Toolkit. The short commissioning period in the first six months created early barriers to engagement, particularly with services operating shift based or high demand environments such as custody. Staff availability across the criminal Justice System also limited participation in training and consultation activities, with workloads and competing priorities reducing overall engagement. In some teams, responsibility for neurodiversity work was unclear, leading to tasks being passed between colleagues and, in some cases, minimal engagement even

where roles were directly relevant. Communication challenges, such as unreported staff changes, further affected the coordination of training sessions.

Some services expressed uncertainty about whether neurodiversity work fell within their remit, while others were reluctant to share existing tools or resources with wider partners. A degree of resistance was also observed among a small number of staff, who raised barriers to using the toolkit that could have been mitigated through flexible approaches. Practical challenges in disseminating the toolkit, particularly during the first year, also affected reach and uptake.

The evaluation was affected by reduced engagement from professionals over time, resulting in only one focus group being completed. This limited the depth of qualitative insights from people with lived experience. Quantitative data was also constrained by low participant numbers and the inability to match responses from training surveys. Engagement appeared to be strongest among individuals with lived experience or a strong personal interest in neurodiversity, which may have introduced bias into the findings. Most qualitative data gathered came from people on probation, with limited input from victims, witnesses, families, or carers. This represents a gap for future research and development. There was also no engagement from court services.

3.4.4 Facilitators

Facilitator	Why it helps	Alignment with Toolkit
Predictable routines	Reduces anxiety	Clear step-by-step resources
Clear communication	Lowers cognitive load	Easy-read formats
Feeling taken seriously	Builds trust	Validating language
Neurodiversity champions	Drives uptake	Local leadership
Universal design	Reduces need for diagnosis	Accessible for all

Stakeholders and people with lived experience identified several key facilitators that help neurodivergent people feel safer, more regulated, and better able to engage within criminal

justice settings. Predictable routines were described as especially important, as they reduce anxiety and support emotional regulation. Clear, direct communication was also highlighted as essential, helping to lower cognitive load and prevent misunderstandings. Feeling taken seriously and having their needs acknowledged and responded to, was repeatedly linked to increased trust in the system and staff and in their own willingness to engage.

The presence of neurodiversity-aware staff or neurodiversity champions was seen as a major driver of positive change, as such roles would be useful to help colleagues adopt adjustments and contribute to modelling inclusive practice. Stakeholders also emphasised the value of universal design approaches, aimed at all people, which reduce reliance on diagnosis of neurodiversity and ensures that support is accessible to everyone. Embedding neuroinclusive practices into formal procedures was viewed as a practical way to ensure consistency and prevent adjustments from being overlooked.

The Toolkit was often described as being clear, concise, and easy to use. Stakeholders appreciated its accessibility and inclusivity whilst avoiding patronising labels. Its universal design was seen as beneficial for both neurodivergent and neurotypical users, reinforcing the need for embedding it across the system.

Neuroinclusive practices were identified, including therapeutic communities, being listened to, having needs validated, and access to predictable routines. Staff described “lightbulb moments” with clients when using communication aids such as visual tools, prompt sheets, simplified instructions, and sensory adjustments. These experiences directly align with the Toolkit’s components and demonstrate how small, practical changes can significantly improve engagement and wellbeing.

Overall, the findings strongly support the Toolkit’s emphasis on universal design, clear communication, predictable structure, and validation. These elements were described as central to creating an environment where neurodivergent people can feel safe, understood, and able to participate meaningfully.

“Talking and groups.” (Lived Experience)

"What helps people is if you (staff) take it (neuroinclusive practice) serious." (Lived Experience)

"Embedding it into formal processes… if it's in procedure, it can't be missed." (S8)

"It's the information that you want and no more faff around it." (S12)

"This isn't just for clients, it's really useful for staff as well." (S12)

3.5 Impact of the Toolkit

Setting	Key challenge	Toolkit contribution
Custody	High pressure, fear	Explains what will happen
Prison	High neurodivergence prevalence	Supports peer mentors
Probation	Administrative burden	Simplifies communication
Youth justice	Transitions	Improves continuity
Community services	Trust and engagement	Accessible public resources

Area of impact	Reported changes
Staff confidence	Greater understanding of neurodivergent traits
Communication	Clearer and calmer interactions
Engagement	Reduced withdrawal
Consistency	Shared language across teams
Reach beyond criminal justice system	Use by families and schools

"It breaks it down into very simple sentences… highlighting keywords… digestible and easy to understand." (S8)

"Everything's already in there… you don't have to go here, there and everywhere." (S12)

Across settings, individuals described how the Toolkit supports key challenges within the criminal justice system by offering clarity, predictability, and accessible communication. Each environment as they are now, present distinct pressures; fear and sensory overload in custody, high neurodivergent prevalence in prisons, administrative complexity in probation, disrupted transitions in youth justice, and barriers to trust in community services. The Toolkit was seen as helpful for addressing these issues by explaining processes step-by-step, simplifying communication, supporting peer mentoring, and improving continuity across transitions. Community organisations also valued the accessible public-facing resources in the Toolkit, which helped to build trust with victims and families.

Individuals reported a wide range of positive impacts. Staff described increased confidence and a clearer understanding of neurodivergent traits, leading to calmer, more effective communication. Neurodivergent individuals were less likely to withdraw from processes when information was presented in a predictable and digestible format. Staff in criminal justice settings reported greater consistency across teams through shared language and tools. The Toolkit's reach extended beyond the criminal justice system, with families, schools, and third-sector organisations using it to support understanding and engagement.

"It's so simple, digestible and dyslexia-friendly… it prevents cognitive overload." (S8)

"This could be the light bulb moment for people… why am I in this revolving door?" (S1)

"It's useful to have the Toolkit… to say okay, someone's told me they've got this issue — how can I support that?" (S2)

"Some worksheets can be used with anybody… it's really inclusive." (S2)

"The team came and delivered an input… which they found really helpful." (S2)

"It's useful having it all in one place… the index makes it easier." (S5)

"It encapsulates processes into an accessible format… easy read, dyslexia friendly… prevents cognitive overload." (S8)

"The Toolkit is exactly what they (neurodivergent people) were crying out for." (S9)

"Professional feedback – consistently positive." (S9)

"We get overwhelmingly positive feedback after every training session." (S9)

"It gives us a starting block… consistency… something we've never had in neurodiversity." (S10)

"Colour and font… have been taken into consideration." (S4)

"Anybody who's neurodivergent could… understand our leaflet better because of the way it's been written." (S4)

"Two different posters… one very visual… one more in-depth." (S7)

A strong theme was the protective power of relational, neurodivergent-informed practice. When individuals were told what would happen next, warned before physical contact, or guided through processes step-by-step, outcomes changed dramatically. People described these interactions as grounding, respectful, and emotionally regulating. Predictability, consistency, and trust emerged as central protective factors. Many framed the Toolkit not as a "nice extra," but as a preventative tool that reduces real harm, escalation, and crises by providing clarity and reducing uncertainty.

"If people feel like you're trying to understand them and make accommodations, it increases engagement and the professional relationship." (S3)

"Most of the time, it's something that I will raise with the individual… have you ever thought that you might be neurodiverse?" (S3)

Early findings suggested that using the Toolkit collaboratively, going through it together, one step at a time, improved confidence and engagement. This was seen as particularly helpful for new or frontline staff, families supporting someone through the system, and professionals who needed a shared reference point. Individuals emphasised that the next step is embedding the Toolkit into everyday practice so that it becomes a standard, expected resource rather than something used only by a few motivated individuals.

"There is at least one person in each service who can champion neurodiversity." (S9)

"An amazing font of knowledge" (S10)

"They've been really responsive… really supportive. An amazing asset." (S10)

"Making Space have been particularly responsive… it makes the Toolkit real." (S10)

"It's like starting to build new foundations of the system." (S3)

"Need a lot of investment for culture change." (S9)

"Courts kept saying: 'This shouldn't be our job'." (S9)

"Some areas might be reluctant to use it because it's from Merseyside, politics." (S9)

Therapeutic and relational approaches were described as highly effective when available, helping people understand themselves better and improving peer relationships. However, these opportunities were rare, inconsistently offered, and often under-resourced. Both stakeholders and people with lived experience stressed that while the Toolkit is valuable, it cannot compensate for wider cultural and systemic issues. Without meaningful culture change, tools like this alone cannot shift entrenched attitudes or inconsistent practice. Some staff remained unaware of existing neurodiversity support roles, which highlights gaps in visibility and implementation.

"We know how to prevent criminality. We just don't — because it's really expensive." (S6)

"They'd say, 'We're going to touch your arm now.' They knew me." (Lived Experience)

"If everyone was like them, this world would be a lot easier." (Lived Experience)

"If I'd known what was going to happen, I wouldn't have lost it." (Lived Experience)

"They'd tell me what was going to happen next — that changed everything." (Lived Experience)

"That's how it should be — not special, just basic decency." (Lived Experience)

"Someone just needs to walk you through it." (Lived Experience)

"This would stop things going wrong before they even start." (Lived Experience)

"It's not about being soft, it's about preventing damage." (Lived Experience)

"Being able to go through it one step at a time… that really helped her." (S12)

"Let's physically go through this together, that really helps confidence." (S12)

Professionals consistently praised the Toolkit's strengths, mainly its simplicity, visual clarity, accessible formats, and universal design. They valued having both detailed and easy-read versions, which supported staff and service users alike. The Toolkit aligned with trauma-informed practice, psychological safety, and ACEs-aware approaches. Many described it as the first time they had access to shared language, guidance, and practical tools for neuroinclusive work. Its design, dyslexia-friendly, visually clear, and cognitively accessible, was repeatedly highlighted as helping to prevent overload and supporting understanding.

"I learnt a lot about myself." (Lived Experience)

"Saw the lads changing how they treat each other." (Lived Experience)

"It's a really useful way to go through the criminal justice system." (S12)

"It would be useful for family and friends as well – 100%." (S12)

"That kind of support helps — but most jails have nothing like that." (Lived Experience)

"It's a drop in the ocean if staff don't take it on board." (Lived Experience)

"You can give them training, but some of them still won't use it." (Lived Experience)

"In an ideal world, everyone would be aware of it and it would be a standard tool." (S12)

Across all accounts, the Toolkit was seen as a foundation for more consistent, humane, and neuroinclusive practice. It supports staff confidence, improves communication, strengthens cross-agency collaboration, and enhances engagement from neurodivergent individuals. Its influence extends beyond the criminal justice system, with ripple effects into families, schools, and community organisations. Individuals described it as the beginning of building new foundations, a practical, relational resource that helps prevent harm, supports understanding, and makes the system more navigable for everyone.

4. Discussion

What this section covers

- What the findings tell us overall
- What worked well and why
- Why some challenges remain
- How the Toolkit supports people and staff
- What needs to change for the Toolkit to work well everywhere
- What this means for future work

4.1 What the findings tell us overall

Neurodivergent people are over-represented in the criminal justice system, often without diagnosis, and frequently with a history of trauma. At the same time, criminal justice processes are not designed in ways that support neurodivergent thinking, communication, or sensory needs (Wilson et al., 2024).

Across interviews and focus groups, people described:

- Confusion about what was happening to them
- Fear of getting things wrong
- Being punished for behaviours linked to distress, trauma, or unmet needs

These patterns were consistent across custody, prison, probation, and court settings.

The Making Space Neurodiversity Toolkit was developed in response to this gap. Findings suggest it addresses a real and ongoing need, not a short-term or isolated problem.

Area	Key learning
What matters most	Neurodivergent people experience higher stress and risk in the criminal justice system, because processes are not designed for how they think, communicate, or process sensory information.
	Trauma and neurodivergence overlap and should not be addressed separately.
	Not knowing what will happen next is one of the main causes of distress and escalation.
What works well	Clear, simple explanations reduce fear and help prevent crisis.
	Predictable, step-by-step information improves understanding and engagement.
	Universal design reduces the need for diagnosis and can benefit everyone.
	Calm, respectful, relational practice makes the greatest difference.
What the Toolkit does	Brings information into one clear, accessible place.
	Supports both staff and individuals.
	Reduces cognitive and sensory load.
	Helps prevent escalation before problems arise.
	Builds staff confidence without requiring specialist knowledge.
What limits impact	Lack of staff time and capacity.
	Inconsistent or optional training.
	Cultural attitudes that view adjustments as “extra” or “soft”.
	Poor information sharing across stages of the system.
What needs to happen next	Embed the Toolkit into routine processes rather than optional use.
	Make neuroinclusive support standard, not exceptional.
	Provide ongoing training, reflection, and leadership support.
	Treat accessibility as a core part of safety, fairness, and good practice.

4.2 Trauma, neurodivergence, and system design

A key finding across all data was the overlap between neurodivergence and trauma. Many neurodivergent individuals in the criminal justice system have experienced:

- Childhood adversity
- Abuse or neglect
- Repeated rejection or punishment

- Systems that are loud, unpredictable, punitive, confusing and can re-trigger trauma responses and make neurodivergent distress look like “non-compliance”.

The Toolkit aligns strongly with trauma-informed principles by:

- Reducing threat
- Increasing predictability
- Validating lived experience

This is why trauma-informed and neuroinclusive practice cannot be separated.

4.3 How the Toolkit supports neurodivergent people

The Toolkit works because it focuses on clarity, predictability, and fairness. People taking part in the evaluation consistently described how:

- Simple language reduced confusion
- Visual and step-by-step explanations helped people in understanding what would happen next
- Having something physical to take away from the setting supported memory, processing, and anxiety

For neurodivergent individuals, not knowing what will happen was often the most distressing part of the system. The Toolkit reduces this uncertainty. Importantly, the Toolkit:

- Does not rely on diagnosis
- Can be used with anyone
- Avoids medical labels or complex terminology

This makes it particularly useful where diagnosis is missing, delayed, or not disclosed. In this way, the Toolkit acts as a preventative tool. It helps stop escalation before it happens, rather than responding after harm has already occurred.

4.4 How the Toolkit supports staff

Staff described the Toolkit as helpful because it:

- Brings information together in one place
- Gives practical examples of what to do
- Reduces guesswork when working with neurodivergent people

Many staff already wanted to work in more neuro-affirming ways but lacked:

- Confidence
- Shared language
- Clear guidance

The Toolkit fills this gap.

Importantly, staff did not describe the Toolkit as something “extra” or specialist. Instead, they described it as:

- Useful for everyone
- Helpful for communication in general
- Supportive of calmer, clearer interactions

This confirms that the universal design approach is working as intended.

4.5 Why challenges remain

Although the Toolkit is valued, the evaluation shows that tools like it are not enough on their own to address neurodivergence in the criminal justice system. Three main challenges remain:

Capacity and time

Staff across the system reported:

- High caseloads
- Staff shortages

- Constant time pressure

Even useful resources can feel hard to engage with in stretched environments. This is not a lack of interest or care, it is a structural issue.

Inconsistent training

Wider training was described as:

- Variable across settings
- Services do not engage
- Often aimed at senior staff rather than frontline workers
- Not regularly refreshed
- Staff do not have capacity to attend.

This means understanding depends too much on the individual staff member someone happens to meet.

Culture and attitudes

Some attitudes within the system still frame:

- Adjustments as “special treatment”
- Distress as “bad behaviour”
- Neurodivergence as outside the role of justice staff.

These views discourage disclosure and undermine trust. The Toolkit challenges this culture, but culture change takes time and needs active support.

4.6 Why embedding the Toolkit is important

A consistent message from individuals was clear that the next step is embedding, not creating more resources. Embedding means:

- The Toolkit is part of routine processes

- It is offered automatically, not optionally
- Staff do not need to “remember” to use it

Examples include booking-in and induction, first probation appointments, keywork sessions and supervision and training. If processes and training are in place across the criminal justice service and system, neuroinclusive practice will become the default behaviour.

4.7 What this means for future practice

For the Toolkit to achieve long-term impact, the findings suggest five priorities:

1. Make neuroinclusive support routine, not exceptional
2. Invest in ongoing training, especially for frontline staff
3. Reduce repeated disclosure by improving information sharing
4. Address sensory and environmental barriers where possible
5. Support staff wellbeing, reflection, and learning

Without these conditions, the Toolkit risks becoming another well-designed resource that relies too heavily on individual goodwill. With them, it has the potential to:

- Improve safety
- Increase engagement
- Reduce harm and escalation
- Support dignity and fairness

4.8 Conclusion

The Neurodiversity Toolkit is a timely and fit-for-purpose response to longstanding gaps in neurodiversity-informed practice within the criminal justice system. It simplifies complex processes, enhances communication, supports disclosure, and contributes to safer, calmer interactions. Its universal-design principles ensure that it benefits all individuals, regardless

of diagnosis, and its trauma-informed approach aligns with the realities of criminal justice system contexts. Where implementation has progressed, early signs of cultural and behavioural change are visible. Staff report improved confidence, clearer communication, and better engagement from neurodivergent individuals. However, the Toolkit cannot overcome structural challenges alone. Workforce capacity, cultural variability, fragmented systems, and short-term commissioning remain significant barriers. For the Toolkit to realise its full potential, the next phase must prioritise system-wide embedding, investment in training, sustainable leadership support, and procedures that reinforce neuro-inclusive practice as routine rather than optional. With these conditions in place, the Toolkit can serve as a foundation for long-term cultural transformation across Merseyside's criminal justice pathway.

4.9 Recommendations

Theme	Recommendation
Embedding	Make the Toolkit part of routine processes (booking-in, induction, first appointments, keywork), so it does not rely on individual staff memory or confidence. Utilise text reminder services to remind people to attend appointments.
Training	Provide mandatory, regular, bite-sized training for frontline staff, focused on recognising distress, communication differences, and meltdowns – not just awareness of neurodiversity.
Culture and safety	Treat neurodivergent-inclusive practice as a safeguarding and de-escalation issue, not an optional adjustment or "extra support".
Information sharing	Reduce repeated disclosure by introducing simple neurodivergence flags or profiles that travel with the individual across custody, prison, courts, and probation.
Environment	Where structural change is limited, ensure small sensory adjustments (quiet space, clear explanations, predictable routines) are consistently offered and normalised.
Leadership	Identify and resource named neurodiversity leads in each setting to support consistency, challenge poor practice, and sustain momentum.
Staff support	Build time for reflection, supervision, and learning so staff are supported to use the Toolkit under pressure, not expected to manage risk alone.
Sustainability	Move from short-term pilots to longer-term investment, recognising that culture change and embedding take time.

5. References

What this section covers

- Where the information in this report comes from
- Key research and policy documents
- Guidance used to shape the Toolkit
- Further reading

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MERSEYSIDE Violence Reduction Partnership

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making space

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