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Neurodivergent Wellbeing:

Burnout, masking, autistic fatigue and sustainable support planning

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Abstract

This report synthesises contemporary research on neurodivergent wellbeing, with a particular focus on autistic burnout, masking and autistic fatigue. Drawing on recent studies (2020–2024), it argues that these phenomena are best understood through a social model of disability, which locates distress not within the individual but within the environments, expectations and structural barriers they encounter.

The report integrates a literature review with a proposed policy framework for organisations, outlining how services can embed neurodiversity-affirming, trauma-informed, and co-produced approaches to support sustainable wellbeing. The findings highlight the need for systemic change, environmental adaptation, and organisational leadership in promoting dignity, autonomy, and inclusion for neurodivergent people.

1. Introduction

Neurodivergent wellbeing has become a central focus of contemporary disability scholarship, reflecting a shift away from medicalised interpretations of autism, ADHD, dyslexia, dyspraxia, and other neurodevelopmental differences. The neurodiversity paradigm (Singer, 1999; Walker, 2021) and the social model of disability (Oliver, 1990; Shakespeare, 2013) argue that disability arises not from individual impairment but from the interaction between a person's neurology and the social, sensory, and structural barriers they encounter. This perspective is increasingly supported by empirical research demonstrating that autistic burnout, masking, and autistic fatigue are environmentally driven phenomena, shaped by chronic stress, social expectations, and inaccessible environments.

For an organisation such as The Do Good Charity, supporting autistic people, people with learning disabilities, older adults, and survivors of modern slavery, understanding these dynamics is essential. This report provides a review of the literature, followed by a policy framework that aligns with The Do Good Charity's values of hospitality, respect and compassion into a practical approach.

2. Neurodivergent Wellbeing: A Social Model Perspective

Neurodivergent wellbeing encompasses physical, emotional, sensory, and social health. Unlike medical models that locate distress within the individual, the social model emphasises the role of environmental mismatch, sensory overload, social invalidation, and structural inequality. Recent scholarship (Botha, 2021; Walker, 2021) argues that neurodivergent people experience harm not because of their neurology but because society is structured around neurotypical norms.

Wellbeing is therefore shaped by factors such as sensory environment, predictability, autonomy, access to meaningful interests, trauma history, and the pressure to mask or conform. These determinants can be explored further through neurodivergent wellbeing factors.

3. Autistic Burnout: A Social-Environmental Phenomenon

Autistic burnout has emerged as a significant area of research in the past five years. Raymaker et al. (2020) conducted the first major mixed-methods study, defining autistic burnout as a state of chronic exhaustion, reduced tolerance to stimuli, and loss of functional skills resulting from prolonged stress and unmet needs. Crucially, participants emphasised that burnout was not a mental health disorder, but a predictable response to sustained pressures to navigate inaccessible environments.

Higgins et al. (2021) found that burnout is strongly associated with cumulative social demands, sensory overload, and expectations to perform neurotypical social behaviours. Mantzalas et al. (2022), in a systematic review, concluded that burnout is best understood through a social-environmental lens, noting that medicalised interpretations fail to capture its relational and contextual nature.

Recent qualitative research (Preece & Crane, 2023) highlights that burnout often leads to temporary loss of skills, shutdowns, and withdrawal, which are frequently misinterpreted by professionals as regression or non-compliance. This misinterpretation is more likely in services grounded in behavioural or medical models, highlighting the need for a paradigm shift.

4. Masking and Camouflaging: Social Survival and Psychological Cost

Masking, also known as camouflaging, has been extensively studied as a key factor contributing to burnout. Hull et al. (2017, 2019) developed the Camouflaging Autistic Traits Questionnaire (CAT-Q), providing empirical evidence that masking is a widespread strategy used to navigate social expectations. Masking involves suppressing natural behaviours, mimicking neurotypical communication, and managing sensory distress internally.

Recent research (Livingston et al., 2020; Pearson & Rose, 2021) demonstrates that masking is often motivated by social survival, including avoiding stigma, discrimination, or misunderstanding. Masking is particularly prevalent among autistic women, non-binary people, and individuals from marginalised ethnic backgrounds, reflecting broader societal inequities.

The psychological costs are significant. Studies consistently link masking to anxiety, depression, identity confusion, and increased suicidality (Cassidy et al., 2020). Importantly, masking is not an inherent autistic trait but a response to environments that do not accept neurodivergent ways of being. A social model interpretation therefore positions masking as a sign of environmental failure rather than individual pathology.

5. Autistic Fatigue: Energy Depletion and Cognitive Load

Autistic fatigue is increasingly recognised as a distinct construct from burnout. Buckle et al. (2021) describe autistic fatigue as a persistent depletion of cognitive and physical energy that is not alleviated by typical rest. Crane et al. (2022) found that autistic adults experience fatigue due to the cognitive load of social interpretation, sensory processing demands, and executive functioning challenges.

Autistic fatigue is closely linked to monotropism theory (Murray et al., 2005; Lawson, 2020), which suggests that autistic cognition is characterised by deep, focused attention rather than rapid task-switching. Environments that require constant shifting, unpredictability, or multitasking therefore impose disproportionate cognitive demands.

A social model interpretation reframes autistic fatigue as a signal of environmental overload, not a personal deficit. Reducing unpredictability, providing clear communication, and allowing flexible pacing can significantly mitigate fatigue and prevent escalation into burnout.

6. Sustainable Support Planning: Evidence-Based Principles

Sustainable support planning is increasingly understood as a collaborative, context-sensitive, and ethically grounded process. Research consistently shows that support is most effective when autistic people are active co-designers of their own plans. Milton (2020) argues that participatory approaches counteract epistemic injustice by centring autistic expertise, while Gillespie-Lynch et al. (2022) demonstrate that co-produced interventions lead to greater engagement, improved outcomes, and reduced power imbalances. This aligns with strengths-based practice, which reframes support around an individual's capabilities, interests, and adaptive strategies rather than deficits.

Environmental responsibility is another core pillar. Sensory processing research by Robertson and Simmons (2022) shows that sensory-safe environments, including predictable routines, reduced sensory load, and access to regulation tools, significantly reduce distress and prevent behavioural escalation. Complementing this, low-arousal approaches (McDonnell, 2021) emphasise reducing demands, avoiding confrontation, and prioritising emotional regulation, which has been shown to decrease crisis incidents and improve relational safety. Trauma-informed practice is essential, particularly for individuals who have experienced chronic invalidation, coercive care, or exploitation. Kerns et al. (2022) highlight that autistic people, including survivors of modern slavery, often present with complex trauma profiles that require predictable, choice-based, and non-coercive support environments.

Authenticity and unmasking are now recognised as critical determinants of wellbeing. Livingston et al. (2020) found that environments where neurodivergent people can safely unmask; expressing their natural communication styles, sensory needs, and stimming behaviours, are associated with improved mental health, reduced burnout risk, and greater long-term stability. This reinforces the need for support systems that do not require constant masking or compliance-based behaviour.

Together, these findings show that sustainable support planning is not merely about meeting needs, it is about designing environments and relationships that reduce harm, enhance autonomy, and promote long-term wellbeing.

Support Planning Tools – Linked to Research

Below are key categories of sustainable support planning tools, each grounded in the research above.

☑ Co-Produced Support Maps

These tools structure collaborative conversations between the autistic person and support staff. They typically include:

- personal priorities
- communication preferences
- sensory needs
- boundaries and non-negotiables
- preferred regulation strategies

They operationalise Milton's (2020) and Gillespie-Lynch et al.'s (2022) findings by embedding autistic expertise directly into planning.

☑ Sensory Environment Audits

Based on Robertson & Simmons (2022), these audits assess:

- lighting
- noise levels
- textures
- spatial layout
- predictability of routines

They guide adaptations that reduce sensory overload and support regulation.

☑ Low-Arousal Response Plans

Drawing on McDonnell (2021), these plans outline:

- de-escalation strategies
- demand-reduction techniques
- non-confrontational communication
- environmental adjustments during distress

They help prevent crisis escalation and maintain relational safety.

☑ Trauma-Informed Safety Plans

Informed by Kerns et al. (2022), these tools include:

- triggers and trauma reminders
- grounding strategies
- choice-based alternatives to coercive practices
- clear boundaries and consent-based approaches

They are essential for individuals with histories of coercion, exploitation, or chronic invalidation.

☑ Authenticity and Unmasking Profiles

Based on Livingston et al. (2020), these profiles identify:

- situations where masking occurs
- costs of masking
- conditions that enable authenticity
- supportive behaviours from others

They help create environments where autistic people can safely be themselves.

☑ Strengths-Based Capability Frameworks

These tools map:

- interests
- talents
- adaptive strategies
- meaningful activities

They shift planning away from deficit-focused models and toward long-term flourishing.

7. Policy Framework for The Do Good Charity

The following policy framework translates the literature into actionable organisational commitments. It is grounded in the social model of disability and the neurodiversity paradigm.

7.1 Policy Vision

To create environments where neurodivergent people can thrive through dignity, autonomy, sensory safety, and co-production. The framework rejects medicalised interpretations of behaviour and centres environmental responsibility.

7.2 Core Principles

Neurodiversity-affirming practice; environmental adaptation; co-production; trauma-informed care; strengths-based approaches; anti-masking culture; demand reduction; and sensory accessibility.

7.3 Policy Areas

☑ **Sensory Environment Standards**; Mandatory sensory audits, quiet spaces, adjustable lighting, predictable routines, and staff training on sensory processing.

☑ **Communication and Interaction:** Communication passports, acceptance of alternative communication, and clear, direct communication protocols.

☑ **Burnout and Fatigue Prevention:** Early identification frameworks, flexible scheduling, and reduced emphasis on compliance-based approaches.

☑ **Workforce Development:** Neurodiversity-affirming training, recruitment strategies for neurodivergent staff, and policies to reduce masking pressure.

- ☑ **Co-Production and Governance:** Neurodivergent advisory panels, lived-experience involvement in policy review, and transparent decision-making.
- ☑ **Trauma-Informed Practice:** Staff training on trauma responses, elimination of restrictive practices except in extreme circumstances, and risk-enablement approaches that prioritise autonomy.

You can explore this direction further through neuroinclusive workforce development.

8. Conclusion

The latest research on autistic burnout, masking, and autistic fatigue highlights the importance of shifting from a medicalised understanding of neurodivergence to a social model approach. These phenomena are not intrinsic impairments but predictable responses to environments that demand conformity, suppress authenticity, and overlook sensory and cognitive needs. For The Do Good Charity, adopting a social-model-aligned framework offers a powerful opportunity to enhance wellbeing, reduce distress, and create services that truly honour the dignity and autonomy of neurodivergent people.

9. References

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