ADHD in the Workplace: Challenges and Supportive Practices – A Systematic Literature Review

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Abstract

This systematic literature review examines how adults with Attention-Deficit/Hyperactivity Disorder (ADHD) experience challenges in the workplace and how organisations can better support these employees through workplace accommodations and broader organisational practices. The review addresses two research questions: (1) what is known about the workplace challenges experienced by employees with Attention-Deficit/Hyperactivity Disorder ADHD? (2) What workplace accommodations and organisational practices support employees with ADHD, and what associated outcomes, including productivity and wellbeing, have been reported?

Peer-reviewed empirical studies published between 2014 and 2026 were identified using a systematic search guided by the PRISMA 2020 framework. Studies were screened against predefined inclusion and exclusion criteria relating to relevance, methodological quality, language, and publication type. Searches were conducted across Scopus, EBSCOhost, PsycINFO, and ERIC. From an initial pool of approximately 377 records, 34 studies met the inclusion criteria and were included in the final review. 7 organisational grey literature reports were included from a reviewed list of 270 webpage and site hits.

The findings suggest that workplace experiences for employees with ADHD are shaped not only by individual characteristics, but also by the organisational environments in which they work. While academic literature largely focuses on workplace challenges, organisational reports tend to emphasise strengths, neuroinclusion, and organisational responsibility. Across both bodies of literature, it became clear that workplace accommodations are effective when supported by capable managers, psychologically safe cultures, and organisational systems that enable employees to access the support they need.

Overall, this study found that improving workplace outcomes for employees with ADHD involves more than providing individual accommodations. It requires organisations to consider how work is designed, how managers support employees, and how organisational systems shape everyday experiences at work. By bringing together academic and organisational evidence, this

review offers practical insights for employers while identifying priorities for future workplace research.

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Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor used artificial intelligence tools or generative artificial intelligence tools (unless it is clearly stated, and referenced, along with the purpose of use), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Declared by,
Brittany Little

Artificial Intelligence Declaration

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If you do plan to use AI tools, this declaration should be submitted with the initial research proposal, Confirmation of Candidature, and when you submit your research component for examination. You must complete the template below for each AI output used detailing the following:

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Specify the chapter number(s) in your research proposal/research component where AI was used.	
Chapter number(s):	**All chapters**
Briefly explain why the AI tool was used (e.g., idea generation, summarization, data analysis, image creation, etc.).	
Purpose of AI Use:	AI was used to help with editing, repetition/structure/logic checking, cross checking theme inclusion, and summarising.
Clearly state the AI tools used.	
AI Tool(s) Used:	**Open AI Chat Paid version with configured data control/privacy settings as guided by AUT Postgraduate AI Guidelines.**
Prompts or queries entered into the AI tool (only the instructive portion of the prompt is required). Include all relevant variations.	
Prompts Used:	**Can you help me make this sound clearer?** **Is there any repetition in this section?** **Can you give me a score on repetition, clarity, and how strong my argument is being made?** **Does this paragraph have a good PEEL paragraph structure?** **Going off my coding sheet I made can I add any other of my included articles to this point I am making?** **Those sentences sound overly complicated, can you help me write those more thoughts more straight forward and with broken up sentences?** **Can we remove the amount of points in that sentence?** **Can you check this for structure and logic?** **Is this writing at a masters dissertation distinction level? What would make it closer to that level?** **Does what I have written match my other [section/themes/findings] etc?**

	Can you help me build a stronger link back to my main argument in this section? **Is this the correct APA 7 formatting?** **Does this article support the claim I am making?** **Can you summaries the key points this findings section is making?** **Can you summarise the key points this future research section excerpt is making?** **Can you summarise the methodology of this methods section excerpt?** **How can I strengthen the critical arguments in this section but not add extra points to my argument?** **Are you sure that argues that point? It seems like it is starting a new line of arguments and evidence?** **From my coding sheet what authors are making the closest point to this argument I am making in this paragraph?** **I think this articles findings go in this theme would you agree? Why/ why not if different**
A summary or description of the AI-generated output. (Optional: attach output in an appendix.)	
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Describe how the AI output was used, edited, or transformed.	
Post-AI Processing Methods:	**AI outputs were considered suggestions for my work. It was important to me to take suggestions, review them and then decide if it made sense in relation to my overall research questions and arguments.** **In terms of editing work, I would take those suggestions, rewrite them into my text,and ask for reclassification if edit suggestions were producing overly complicated sentences that were repetitive or not logical.** **If summaries were generated from excerpts, I would check them back against the original source document to make sure it aligned and was not hallucinating. Any outputs produced by AI for that were around gathering inclusion for themes or arguments , I would check back my coding documentation and the source articles themselves. I would also ask for AI to keep summarised text in these instances in bullet point form so I could rewrite anything in my own words.** **If I used my own generated coding sheet to cross check any arguments, I would manually cross check my coding sheet as well. Final decisions on inclusion and evidence were my own.**

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I write this research for all those who experience challenges in their neuro diversity in the workplace. I hope that this research helps alleviate the suffering of ADHDers in workplaces worldwide. And that our strengths and self compassion can help us flourish when we have greater knowledge of our needs in the workplace to let our best selves shine.

Chapter 1: Introduction

Neurodiversity refers to the natural variation in human brain functioning and cognition and is recognised in academic literature as a legitimate form of human diversity rather than a deviation from neurotypical norms (Walker, 2021; Branton et al., 2023). The term is commonly used to describe a range of neurodevelopmental conditions, including autism, Attention-Deficit/Hyperactivity Disorder (ADHD), Tourette's syndrome, and dyslexia (Koi, 2021; Macdonald, 2019), which involve patterns of cognitive functioning that differ from neurotypical expectations (Stenning & Rosqvist, 2021). For the purposes of this dissertation, neurodiversity is understood as variation in neurological functioning, comparable to other forms of human diversity such as ethnicity or gender (McLennan, 2025).

The concept of neurodiversity emerged in part from disability rights and social justice movements, particularly the online activism of autistic communities in the 1990s, which sought to challenge deficit-based understandings of neurological difference (Singer, 1998; Botha et al., 2024). This perspective reframed neurodevelopmental conditions not only as impairments to be corrected, but as differences shaped by environmental and societal systems as articulated within the social model of neurodiversity (den Houting, 2019). Further research has extended this framing by arguing that while neurodivergent individuals may demonstrate strengths linked to their brain function, these supports and accommodations still require attention (Armstrong, 2015; Garner, 2021; Sonuga-Barke et al., 2023; Stenning & Rosqvist, 2021).

Neurodiversity is often positioned within a social model of disability, whereby disadvantage occurs not only from neurological difference itself, but from physical, organisational, and attitude barriers within institutions (Oliver et al., 2012; Constantino, 2018; den Houting, 2019; Pellicano & den Houting, 2022). This framing is particularly relevant in workplace contexts, where job design, performance expectations, and managerial practices play a central role in shaping neurodivergent employees' experiences (Doyle, 2020). As organisations face pressure to address inclusion, wellbeing, and productivity (World Health Organization, 2022), understanding neurodiversity within employment settings has become an object of interest for researchers.

1.1 Neurodiversity in the Workplace

Research interest in neurodiversity in the workplace has grown along with broader social, legal, and organisational shifts over recent decades (Doyle et al., 2026). Early disability rights movements of the 1990s challenged exclusionary employment practices and reframed disability as a human rights issue rather than an individual deficit (Barnes, 2014; Shakespeare, 2006). These trends began laying foundations for more inclusive workplace paradigms in the early 2000s (Harpur, 2012). Understanding of disability has gradually evolved, and as a result, inclusion began extending beyond narrow biomedical and physically focused models to encompass social, behavioural, and cognitive differences (Tate, 2003). In the contemporary digital era, neurodiversity is gaining heightened visibility through social media, popular culture, and increasing public discussion of lived experience. Public discussion has contributed to broader societal awareness and understanding of neurodiversity (Jawed et al., 2023). This growing visibility is reflected in employees' workplace experiences and is shaping how neurodivergent individuals understand, disclose, and navigate their working lives (Doyle, 2020).

Furthermore, technological acceleration, economic uncertainty, and geopolitical disruption have increased cognitive and emotional demands at work (World Health Organization, 2022). These changes have intensified challenges related to attention, regulation, and employee wellbeing across the workforce (Petriglieri, 2020). Employees with neurodivergence are likely to be more affected by these changing social, technological and political changes warranting further research.

1.2 Key Terms and Definitions

- **Grey literature:** Research and information produced outside traditional academic publishing channels. This includes; organisational reports, policy documents, professional publications, and other practice-based sources. At times referred to as organisational reports in this review.
- **Neurodiversity:** A framework that views neurological differences; including ADHD, autism, dyslexia, and related conditions.
- **Neuroinclusion:** Organisational practices, policies, and workplace environments designed to support the participation, belonging, and success of neurodivergent individuals.
- **Neurodivergent:** An individual whose neurological functioning differs from what is typically considered neurotypical. This includes people with ADHD, autism, dyslexia, dyspraxia, and related conditions.
- **ADHD: (Attention-Deficit/Hyperactivity Disorder):** A neurodevelopmental condition that may affect daily functioning and characterised by persistent patterns of one or multiple symptoms such as inattention, hyperactivity, and/or impulsivity.
- **Productivity:** An employees' ability to effectively complete work tasks, achieve expected performance outcomes, and manage their workload.
- **Accommodations:** Are modifications or adjustments to the work environment, job design, policies, practices, or equipment offered to employees to promote equity and reduce barriers associated with a disability or health condition.
- **Organisational practices:** Workplace policies, procedures, initiatives, and management approaches that are implemented to support employees to achieve organisational goals.
- **Disclosure:** The process by which an employee voluntarily shares information about their ADHD or neurodivergent identity within a workplace context.
- **Managerial Support:** Actions undertaken by supervisors or managers to assist employees. Through actions such as; communication, flexibility, accommodations, guidance, and/or other forms of workplace support.
- **Wellbeing:** An individual's overall psychological, emotional, and occupational health. Including their ability to function effectively and experience positive work-related outcomes.

1.3 ADHD as a Distinct Form of Neurodiversity

Although occupational research concerning adults with ADHD has historically been limited (Adamou et al., 2013), ADHD remains comparatively underrepresented within contemporary organisational research, particularly in comparison with autism (Doyle & McDowall, 2022; Vargas-Salas et al., 2025), calling for further research, with recent reviews continuing to identify gaps in context-specific workplace research (de Moura & Cruz, 2025). ADHD is a neurodevelopmental condition characterised by persistent patterns of inattention, hyperactivity, and impulsivity that influence executive functioning and self-regulation (Barkley & Murphy, 2008; Kooij et al., 2019). Workplace research continues to treat neurodivergent individuals as a relatively homogeneous group, with ADHD frequently discussed within broader neurodiversity or autism-focused research (Doyle & McDowall, 2022; Högstedt et al., 2023; Vargas-Salas et al., 2025). Such broad framing can obscure condition-specific differences in workplace experiences and support needs (Doyle, 2020). Further to this, although ADHD is associated with challenges relating to executive functioning and self-regulation, it has also been associated with strengths including creativity and divergent thinking, particularly in supportive or stimulating environments (Hotte-Meunier et al., 2024). Therefore, this review focuses specifically on ADHD to better understand employees' workplace challenges and employer responses where possible. This reinforces the need to examine ADHD as a distinct area of workplace research rather than solely within broader neurodiversity frameworks.

Organisations are beginning to place greater emphasis on inclusion and neurodiversity. As workplace environments continue to evolve and be challenged by external factors -

understanding the distinct workplace experiences of employees with ADHD is the first step needing to be achieved by workplaces prior to creating accommodations or supports.

1.4 Research Questions

This systematic literature review is guided by the following research questions:

RQ1: What is known about the workplace challenges experienced by employees with Attention-Deficit/Hyperactivity Disorder (ADHD)?

RQ2: What workplace accommodations and organisational practices support employees with ADHD, and what associated outcomes, including productivity and wellbeing, have been reported?

This dual focus of the two research questions enables the review to move beyond problem identification alone, offering insights with direct relevance for employers and future research.

1.5 Overview of Methodology and Dissertation Structure

This dissertation adopts a systematic literature review (SLR) methodology guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework. The PRISMA approach supports a transparent, structured, and replicable review process through defined search strategies, inclusion and exclusion criteria, and systematic screening procedures. Academic literature was identified across multiple databases to capture interdisciplinary

perspectives on ADHD in the workplace. Databases reviewed included research fields across management, psychology, and human resource research.

Following this introduction, the methodology chapter outlines the review design in detail, including database selection, search terms, screening procedures, and quality appraisal processes. The findings chapters are organised by research question, with one section evaluating literature on ADHD-related workplace challenges and a second examining accommodations and supportive practices. The discussion chapter critically integrates evidence from both the academic and organisational literature to examine how workplace challenges, organisational responses, and workplace accommodations interact to shape employee wellbeing and productivity. It concludes by considering implications for employers and priorities for future research. The dissertation concludes by summarising key contributions, limitations, and directions for future research and organisational practice.

Chapter 2: Research Design

This chapter outlines the research design adopted to examine existing literature on ADHD in workplace contexts. Overall, the study seeks to collate knowledge regarding the experiences of employees with ADHD at work and the organisational support practices and accommodations used to support their productivity and wellbeing. To address these aims, a systematic literature review (SLR) was selected as the most appropriate methodological approach. As research relating to ADHD in workplace settings spans multiple disciplines and remains relatively fragmented, a SLR provides a structured means of identifying, evaluating, and synthesising existing evidence. The SLR therefore helps to develop a comprehensive understanding of the topic.

2.1 Systematic Literature Review

An SLR enables structured and transparent consolidation of interdisciplinary research which was why it was selected for this research project. The SLR supports systematic identification, selection, and analysis of relevant studies. The approach helps build clarity around the fragmented nature of ADHD workplace research across multiple fields, fields that include; human resource development (HRD), organisational studies, and psychology. This approach allows for the identification of patterns, gaps, and areas of inconsistency with methodological clarity.

The review was guided by the PRISMA 2020 reporting framework to enhance transparency and replicability. The PRISMA approach allows methodological flexibility appropriate to qualitative

and organisational research contexts (Page et al., 2021). The sections that follow outline the search strategy, inclusion and exclusion criteria, data extraction procedures, quality appraisal considerations, and the thematic analysis process of this research approach.

Following study selection, the choice of thematic analysis was employed to identify and analyse patterns and insights across the included literature. This method enables the systematic identification and interpretation of recurring themes, allowing for a coherent evaluation of findings (Paul & Criado, 2020). The combined use of PRISMA and thematic analysis provides a robust framework for organising and evaluating existing research, while also supporting the identification of gaps and inconsistencies within the neurodiversity and HRD literature.

2.2 Search Strategy

Academic literature was sourced from EBSCO Information Services, ProQuest, PsycINFO, Scopus, and New Zealand–based research organisational databases. The search was limited to peer-reviewed journal articles to ensure academic quality and relevance. The search strategy was designed to identify literature relating to ADHD in workplace, organisational, and learning and development contexts.

In addition to academic literature, grey literature, such as organisational reports or workplace programmes, was included in this review. The inclusion was used to capture applied organisational practices relating to ADHD that were not represented in peer-reviewed research, or showed the literature being reinforced in practice. Grey literature refers to research and information produced outside traditional academic publishing channels, including organisational reports, policy documents, professional publications, and other practice-based sources (Adams et

al., 2017). Grey literature was identified through structured Google and LinkedIn searches focused on workplace learning, development, and inclusion practices. Organisations identified through this process included UNICEF, Bupa UK, EY Oceania, KPMG Australia, Microsoft, Services Australia and IBM. These sources were included to provide insight into real-world approaches to ADHD-related workplace accommodations that are not always documented within peer-reviewed research.

Studies published between 2014 and 2026 were included in the SLR to capture both foundational and contemporary developments in ADHD workplace research. Given the evolving nature of organisational neurodiversity initiatives, grey literature was limited to sources published between 2023 and 2026.

Searches were conducted across the selected academic databases including Eric, Scopus, EBSCO, Psychinfo, ERIC, Proquest, using keyword combinations relating to ADHD with, employment, workplace experiences, organisational practices, and/or learning or training interventions. Search terms were developed iteratively, with refinements made as familiarity with the literature increased. Search results were screened in stages, beginning with title review, followed by abstract screening and full-text assessment for relevance to the research questions.

This review adopts a PRISMA-informed approach. PRISMA provides a useful framework for transparent reporting of search and screening decisions as mentioned in earlier sections of this chapter; however, it was developed primarily for systematic reviews evaluating interventions within health research (Page et al., 2021). Given the emerging nature of ADHD workplace research, the variability of study designs, and the inclusion of grey literature, a more flexible approach was considered appropriate. Accordingly, the chosen methodological approach was

used to guide documentation and reporting, while allowing adaptation to support systematic mapping and thematic evaluation of the available evidence.

While the review followed a structured process, researcher judgement remained throughout the screening and analysis, particularly when assessing relevance and interpreting findings across diverse sources. Following screening and eligibility checks, 34 peer-reviewed journal articles and 7 grey literature sources were included in the final review and analysed in the findings chapter.

2.3 Data Collection and Extraction

Table 1: Keyword search based on research questions

	Research Question	**Keyword search**
1	What is known about the workplace challenges experienced by employees with ADHD?	ADHD, “attention deficit hyperactivity disorder”, “attention deficit disorder”, workplace, work*, employment, job*, career*, “ accommodation*”
2	What workplace accommodations and organisational practices support employees with ADHD, and what associated outcomes, including productivity and wellbeing, have been reported?	ADHD, “attention deficit hyperactivity disorder”, workplace, employment, organisation*, employee*, accommodation*, “reasonable adjustment*”, support*, intervention*, productivity, well-being, wellbeing

Note: Keywords were combined using Boolean operators (AND/OR) and adapted across databases as required.

Data collection drew on secondary sources identified through the search strategy outlined in

Section 2.1. Following title, abstract, and full-text screening, relevant academic and grey literature were systematically reviewed and extracted for analysis. This approach aligns with established guidance for conducting systematic literature reviews in management and human resource development research. This process outlines best practice in these fields, where secondary data is used to synthesise existing knowledge and identify patterns across studies (Snyder, 2019).

Extracted information from peer-reviewed articles included study aims, research design, workplace setting, and key findings relating to ADHD-associated challenges, accommodations, or organisational practices. Attention was given to how studies conceptualised ADHD at work. Data collection extracted the reported implications for employee productivity, wellbeing, and engagement. Information extracted from the included grey literature comprised employer-led workplace practices, accommodation approaches, organisational context, and any reported outcomes or limitations.

To support consistency and transparency, extracted data from both academic and grey literature were organised using predefined criteria aligned with the research questions. These criteria included the type of workplace support or accommodation described, the organisational or training context in which it was applied, and any reported outcomes or limitations. This approach enabled comparison across sources while allowing flexibility to accommodate variation in study design, methodology, and reporting styles across the literature (Booth et al., 2022).

2.3.1 Quality appraisal and consideration of Bias

Rather than applying a formal clinical risk-of-bias assessment tool, this review adopted a critical appraisal approach appropriate to qualitative and mixed-methods workplace research. Included studies were assessed based on relevance to the research questions, clarity of aims, transparency of methods, and coherence between findings and conclusions. Peer-reviewed studies published in reputable academic journals were prioritised to support methodological quality and credibility. Prioritising peer-reviewed sources helped ensure that the review was grounded in methodologically robust and credible evidence.

This approach aligns with contemporary guidance for systematic literature reviews in management research. In this guidance, where methodological transparency, clear reporting procedures, and systematic documentation is used to ensure rigour and replicability (Sauer & Seuring, 2023). In management and organisational research contexts, systematic reviews often prioritise conceptual contribution and interpretive rigour over experimental control alone (Williams et al., 2021).

Potential sources of bias were considered throughout the research process, in line with best practice for systematic reviews (e.g., PRISMA 2020 Statement). These included variability in study design, as the included literature comprised a combination of qualitative, quantitative, and review-based studies, each characterised by differing methodological assumptions, analytical approaches, and levels of generalisability. These differences across research approaches may have limited the comparability of findings and the ability to compare findings across studies. Additional sources of potential bias included the reliance on self-reported data, inconsistent use of ADHD-related terminology, and variation in reporting quality across studies. In addition, grey

literature sources reflect organisational perspectives and positive reporting bias. To address these limitations, findings were interpreted cautiously and emphasis was placed on identifying patterns across multiple sources rather than relying on individual studies.

2.3.2 Inclusion and Exclusion Criteria

Table 2: Inclusion and Exclusion Procedures

Criteria	**Inclusion**	**Exclusion**
Population	Adults with ADHD	Children / adolescents / students/ university students
Focus	ADHD in the workplace, organisational or training contexts	Clinical diagnosis or treatment only
Keywords and subject relevance	Articles on the topics of ADHD and workplace/employment and workplace accommodations, organisational practices, training, managerial support	Neurodiversity without ADHD-specific focus
Timeframe	Articles and grey literature published between 2014-2026	Outside of this time frame
Language	English	Non-English-based studies and publications
Article Quality	Peer reviewed academic studies. Grey literature.	Incomplete papers, out of scope websites, book reviews, shorter reports
Methodology	Theoretical and practical studies. Organisational practices	Non-relevant items such as opinion pieces, blogs, magazines

Clear inclusion and exclusion criteria were established to ensure that the literature reviewed was directly relevant to the research questions. Given the emerging and interdisciplinary nature of ADHD workplace research, the criteria were designed to balance relevance with inclusivity, while maintaining academic rigour. This approach is consistent with contemporary guidance for systematic literature reviews in management research. The approach emphasises the importance

of clearly defined inclusion and exclusion criteria to enhance transparency and methodological coherence (Tranfield, et al., 2003). Transparent documentation of sample selection decisions are central to management research, as reviewing the scope and study eligibility can significantly shape findings (Hiebl, 2021).

Population

The population of interest for this review was adults with ADHD. Studies were included where they focused on adult populations in employment, organisational, or workplace training contexts. This criterion reflects the research questions, which are concerned with workplace experiences, organisational practices, and employer responses relevant to adults with ADHD. Studies focusing primarily on children, adolescents, or student populations, including school or university students, were excluded. While such research contributes valuable insight into ADHD experiences more broadly, it was considered outside the scope of this review due to the distinct contextual, developmental, and organisational differences between educational and workplace settings.

Focus

In terms of focus, included sources were required to address ADHD in workplace, organisational, or training contexts, including workplace accommodations, organisational practices, learning and development approaches, or managerial support strategies. Studies that focused exclusively on clinical diagnosis, pharmacological treatment, or medical management of ADHD without explicit reference to workplace implications were excluded. This distinction was applied to ensure that the review remained aligned with its applied focus on employment and

organisational contexts rather than clinical or therapeutic outcomes.

Keywords and Subject Relevance

Eligibility decisions were guided primarily by relevance to the research questions and alignment with the conceptual focus of the review. Although ADHD is frequently situated within broader neurodiversity frameworks (Vargas-Salas et al., 2025), studies were only included where ADHD was explicitly addressed within workplace, organisational, employment, or training contexts. Studies examining neurodiversity more broadly without specific reference to ADHD were excluded. The principal keyword search outlined in Table 1 was used to guide the identification of relevant literature and support consistency throughout the screening process.

Timeframe

A defined publication timeframe was applied to ensure that the review captured both foundational and contemporary developments in ADHD workplace research. Literature published between 2014 and 2026 was included. This timeframe reflects the increasing recognition of adult ADHD in employment contexts and the more recent growth of research examining workplace accommodations, organisational practices, and employer responses. Earlier literature was excluded where it did not align with contemporary understandings of ADHD at work.

Language

Only English-language academic literature and grey literature were included in the review. This criterion was applied due to the language proficiency, time constraints, and available resources

of the study. Limiting inclusion to English-language sources also supported consistency in screening and interpretation across studies.

Article Quality and Source Type

The review prioritised peer-reviewed journal articles to ensure academic quality and methodological transparency. Grey literature sources were primarily drawn from organisational websites and reports, and were required to demonstrate clear relevance to workplace accommodations, organisational policies, or employer-led initiatives supporting employees with ADHD. Exclusions were; book reviews, opinion pieces, brief commentaries, and other sources lacking substantive empirical or analytical content.

Methodological Scope

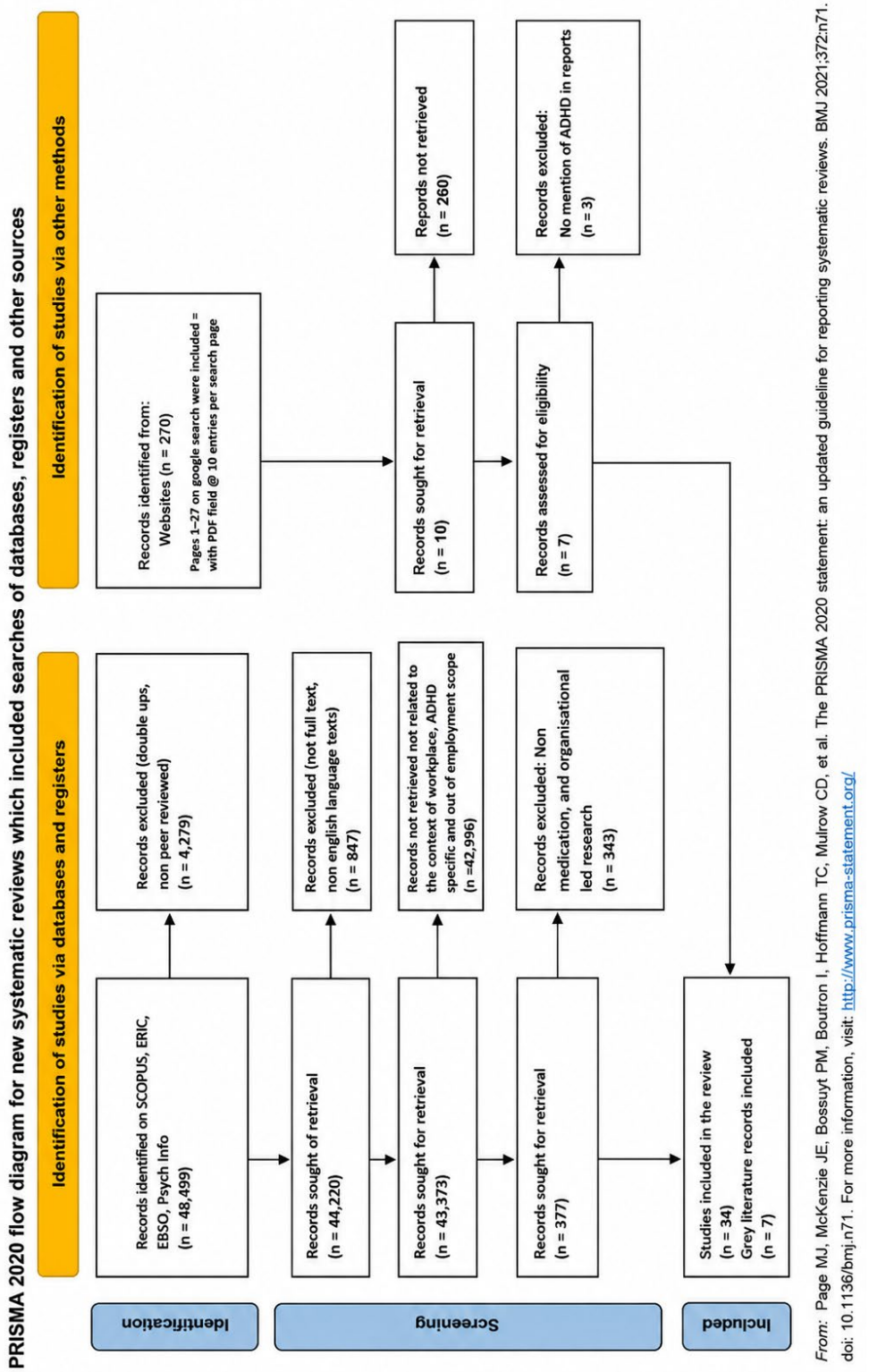
Both qualitative and quantitative studies were included to reflect the methodological diversity of ADHD workplace research. Studies employing mixed-methods approaches were also eligible for inclusion. The review focused on literature examining workplace experiences, organisational practices, training approaches, managerial support, or accommodations relevant to adults with ADHD. Thematic analysis was used to identify findings across included sources, as outlined in Section 2.4. Studies lacking clear relevance to these areas were not included in the final review.

Screening and Study Selection Process

The PRISMA flow diagram (Figure 1) outlines the identification, screening, eligibility assessment, and inclusion stages applied in this review. Search results were exported in RIS format and managed using reference management software prior to screening. Duplicate records

were identified and removed before the remaining sources were uploaded to a screening platform to support consistent assessment. Titles and abstracts were reviewed to determine relevance, with records excluded where they were duplicated, not published in English, or did not meet the inclusion criteria. Following this process, 377 records were initially identified, 343 were excluded during screening due to lack of relevance to ADHD workplace contexts or failure to meet the inclusion criteria. The final set of included studies formed the basis of the thematic analysis presented in the findings chapter.

Figure #1: PRISMA Flow diagram of the study selection process for both research questions



From: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372:n71. doi: 10.1136/bmj.n71. For more information, visit: http://www.prisma-statement.org/

2.4 Thematic Analysis

The literature review followed PRISMA guidelines for study identification and screening. The included academic and grey literature were analysed using reflexive thematic analysis (Braun & Clarke, 2006) to identify patterns across workplace experiences, organisational practices, and reported supports relating to ADHD. Thematic analysis is a flexible qualitative approach that enables the identification and organisation of recurring ideas within a body of data, supporting interpretation beyond surface-level description (Braun & Clarke, 2006). This approach was considered appropriate for the aims of the study, as the literature on ADHD in workplace contexts is diverse in design, scope, and disciplinary orientation.

The thematic analysis was informed by the six-phase approach outlined by Braun and Clarke (2006), including familiarisation with the data, initial coding, theme development, review, and refinement. While the process followed a systematic structure, interpretation remained central to recognise that meaning is constructed through engagement with the literature rather than extracted as objective fact. This approach is consistent with qualitative research processes in applied workplace and organisational research, where variation in context and perspective is expected.

Following completion of data extraction, all included academic and grey literature were coded manually within a structured coding document. Coding focused on workplace experiences, organisational practices, accommodations, training interventions, and reported outcomes relating to ADHD. Codes were generated inductively in response to patterns observed across the literature rather than being predetermined, consistent with reflexive thematic analysis principles (Braun & Clarke, 2006).

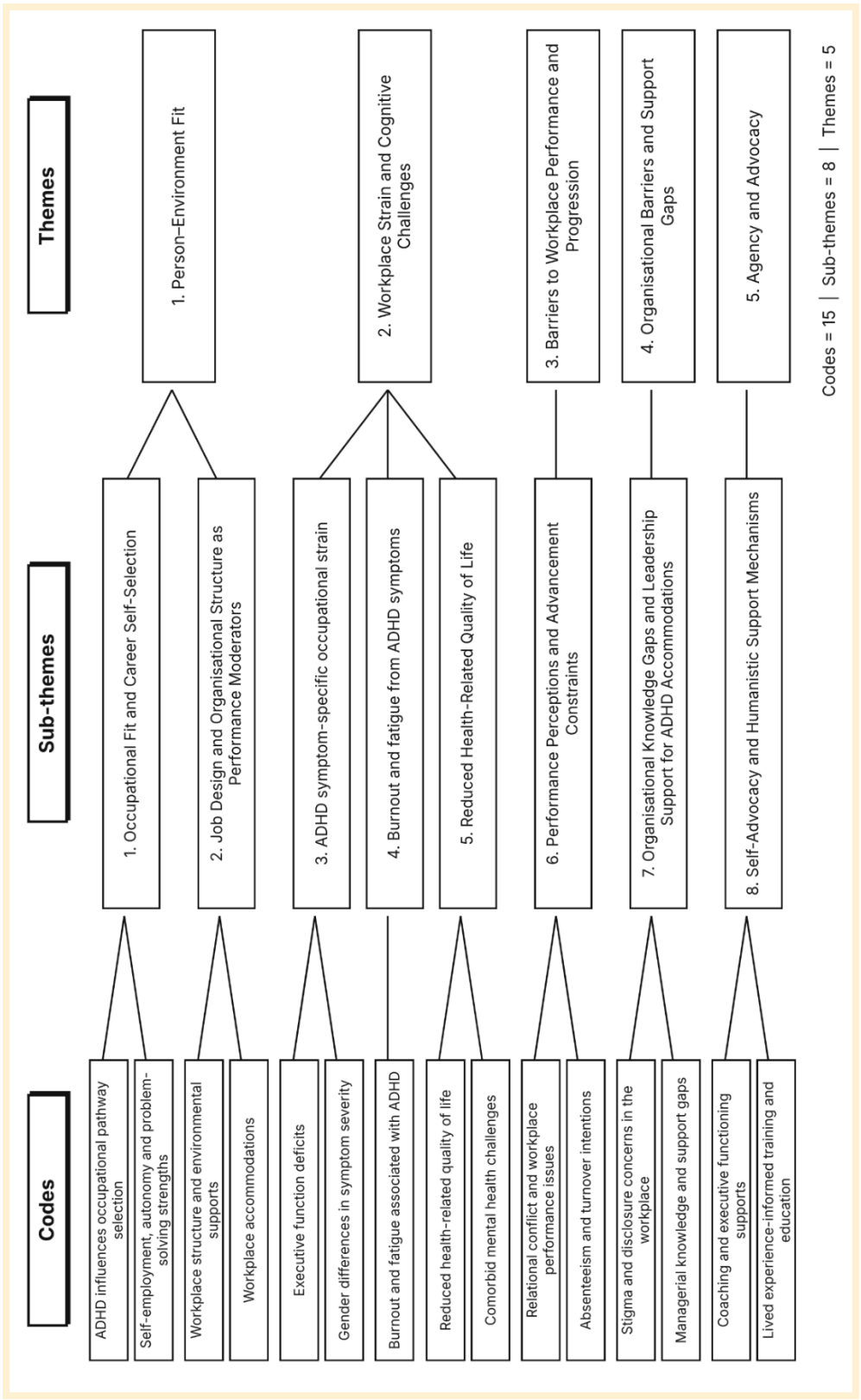
Codes were then reviewed and grouped into related sub-themes based on shared characteristics and conceptual similarity. These sub-themes were subsequently organised into broader themes that captured higher-level patterns across the literature. Throughout this process, attention was given to how ADHD was conceptualised, the types of workplace supports described, and the organisational or managerial contexts in which these practices were situated. Codes that did not clearly align with emerging themes were retained and revisited during later stages of analysis to ensure that potentially relevant insights were not prematurely excluded.

The final themes generated through this process reflect recurring areas of focus within the ADHD workplace literature, including challenges experienced by employees with ADHD, organisational and managerial responses, workplace accommodations and training practices, and broader issues of stigma, disclosure, and support. These themes are presented in the findings chapter and directly address the research questions guiding this review.

This process enabled comparison across diverse sources while maintaining sensitivity to differences in research design and context.

Figure 2 illustrates the thematic analysis process used to move from initial codes to sub-themes and overarching themes.

Figure #2: Thematic Analysis Process



Chapter 3: Findings

This chapter presents the findings of the study, organised into key themes identified through the PRISMA-guided thematic analysis. These themes directly address the two research questions guiding the study. Drawing on 34 peer-reviewed studies identified through database searching, outlined in Appendix #2, this chapter highlights key trends across the literature. Tables of the reviewed articles are provided to document the selection process and to show how themes were derived from the findings in Table #2. A further table, Table #3 in section 4.3, presents results from seven organisational websites and PDFs included in the study, highlighting connections between theoretical frameworks and organisational practice. Further developed in Appendix #3, Grey Literature findings in more detail.

All included studies were reviewed in full and systematically categorised across: (1) author and contextual information, (2) study aims, (3) methodological approach, (4) sample characteristics, (5) theoretical frameworks, and (6) reported findings. Extracted data was then organised to enable consistent comparison and thematic groupings. Five themes are then presented from the thematic/PRISMA analysis process.

3.1 Study Characteristics

The literature sample encompassed a range of study designs, including literature reviews, primary data studies, a mixed-methods study, and narrative reviews, reflecting evidence drawn from global contexts. These are outlined in Data Extraction and Coding in Appendix #2.

Organisational sources presented in Appendix #3 outlined a range of workplace programs and policies, describing their intended purpose and, where available, evidence of outcomes over time.

The final review included 34 studies published between 2014 and 2026, with most research emerging from 2021 onwards, reflecting growing interest in ADHD and neurodiversity within workplace contexts. Quantitative research was the predominant methodological approach, particularly cross-sectional survey designs, while qualitative, mixed-methods, intervention, and review studies provided complementary evidence. Research was conducted across a range of countries including the United Kingdom, Sweden, Israel, Portugal, South Africa, Australia, New Zealand, and North America.

The studies represented a diverse range of workplace contexts, spanning both public and private sector organisations. Research was undertaken across industries including policing, healthcare, education, pharmaceutical organisations, and general organisational settings, while several reviews investigated evidence across multiple employment contexts. Most studies focused on the experiences of individual employees with ADHD, although a smaller number examined organisational interventions, leadership practices, or broader workplace systems.

Overall, the evidence base was characterised by an applied rather than theory-driven focus. Most studies examined workplace experiences, organisational support, disclosure, or interventions to improve occupational functioning. Relatively few academic articles explicitly adopted formal theoretical frameworks. Where theory was used, perspectives included Time Perspective Theory, the NIOSH Job Stress Model, and metacognitive or occupational psychology approaches. The body of literature reflects a methodologically diverse but still developing field, with increasing

attention to organisational factors influencing the employment experiences of adults with ADHD.

3.2 Thematic Analysis Results

Five themes were identified through the thematic analysis, illustrating key challenges experienced by people with ADHD in the workplace and the accommodations provided to support employees (both research questions).

1. Person-environment fit
2. Workplace strain and cognitive challenges
3. Barriers to workplace performance and progression
4. Organisational barriers and support gaps
5. Agency and advocacy

Person–Environment Fit was identified as the most prominent theme, appearing in 24 studies, followed by *Workplace Strain and Cognitive Challenges* (22 studies). More specific themes included *Barriers to Workplace Performance and Progression* (10 studies), *Agency and Advocacy* (8 studies), and *Organisational Barriers and Support Gaps* (9 studies). This distribution indicates that the literature considers both individual-level experiences of ADHD and the interaction between employees and their work environments, while comparatively fewer studies examine organisational support gaps and employee agency.

Some variation across studies also pointed to the influence of gender and contextual factors, including socioeconomic conditions, although these patterns were not consistently explored.

Themes 1–3 primarily relating to workplace challenges experienced by employees with ADHD. While Themes 4-5 relate to barriers, support mechanisms, disclosure, agency, and organisational responses.

3.3 Thematic Findings

3.3.1: Theme 1: Person–Environment Fit

Person-Environment Fit is the most prominent theme in this study, found in 24 studies examined, and relates to occupational fit and career self-selection. Individuals with ADHD were found to follow diverse and often non-linear career pathways, with some evidence suggesting a greater tendency toward self-employment or alternative career routes often associated with increased autonomy and flexibility (Verheul et al., 2016; Gordon & Fabiano, 2019). However, these pathways did not consistently result in improved outcomes. Studies showed lower earnings and limited financial stability in some self-employment contexts (Patel et al., 2021). Wolfe et al. (2025) further highlighted the importance of person-environment fit for those individuals who took the self-employment path. The study revealed that the relationship between ADHD traits and self-employment depended on factors such as temporal balance and self-regulation. They suggested that self-employment may not necessarily provide a better occupational fit for individuals with ADHD. As a result, outcomes may depend on how well the working environment supports individual needs. These findings highlight challenges to person-environment fit for self-employment or traditional employment routes.

Patterns of employment instability identified across the literature also reflected potential misalignment between individual needs and workplace demands (Baric et al., 2017; Fuermaier et

al., 2021; Gordon & Fabiano, 2019; Nakai et al., 2022). Broader evidence of work impairment and barriers to labour market participation show that employment outcomes extend beyond individual performance difficulties to influencing longer-term occupational stability (Baric et al., 2017; Fuermaier et al., 2021). Career trajectories were also shaped by wider contextual influences, including educational attainment and socioeconomic background (Park et al., 2024). In addition, social and relational factors also influenced employment participation (Anker et al., 2019), while access to vocational training, workplace supports, and early career interventions contributed to more positive employment outcomes (Glynn & Schaller, 2017).

Work environments were shown to play a foundational role in moderating ADHD-related challenges. Stimulating and meaningful work was associated with improved attention and engagement (Sarkis, 2014), with task novelty and interest further supporting positive performance outcomes (Blondel et al., 2025). In contrast, under-stimulating or monotonous work environments contributed to disengagement and reduced job satisfaction (Oscarsson et al., 2022). Organisational factors such as job control and autonomy were also identified as protective, helping to buffer stress and improve functioning among employees with ADHD (Nagata et al., 2019). Similarly, workplace environments characterised by low support and high demands were associated with poorer health and reduced wellbeing (Hedlund & Jordal, 2025).

The role of organisational support and workplace accommodations further reinforced the importance of person–environment fit. Structured interventions, including metacognitive training and clear task expectations, were associated with improved work performance (Grinblat & Rosenblum, 2023; Sarkis, 2014). Access to vocational support and targeted training was also linked to improved employment outcomes, particularly among younger individuals transitioning into the workforce (Glynn & Schaller, 2017; Baric et al., 2017). However, gaps remained in both

the availability and implementation of such support, with research highlighting a lack of ADHD-specific workplace intervention research (Lauder et al., 2022) and inconsistent implementation of requested workplace accommodations (Tromans et al., 2023). This was further reflected in employee reports of unmet needs for workplace adjustments and organisational barriers to accessing appropriate support (Tromans et al., 2023; O'Reilly et al., 2026).

Together, these findings indicate that occupational outcomes for individuals with ADHD are shaped not solely by individual traits, but by the degree of alignment between ADHD characteristics and the structural, social, and task-related demands of the workplace.

3.3.2 Theme 2: Workplace Strain and Cognitive Challenges

Workplace Strain and Cognitive Challenges was the second most prevalent theme, identified across 22 studies. Rather than describing isolated symptoms, the literature consistently conceptualised workplace strain as the cumulative interaction of cognitive, emotional, and interpersonal challenges. Across studies, executive functioning difficulties emerged as the primary mechanism underpinning occupational strain, with emotional dysregulation, social challenges, and comorbid mental health conditions further compounding these effects.

Executive functioning difficulties were consistently identified as the foundation of workplace strain. Difficulties relating to attention regulation, organisation, time management and planning were associated with reduced occupational functioning across diverse workplace contexts (Fuermaier et al., 2021; Tromans et al., 2023; Liebel et al., 2024). Several studies further suggested these challenges extended beyond everyday productivity, influencing labour market

participation, perceived work demands and overall occupational responsibilities. In particular, inattention emerged as the strongest predictor of work-related impairment (Fuermaier et al., 2021), while Hedlund and Jordal (2025) found it was more strongly associated with perceived work demands than diagnostic category alone. Schein et al. (2023) further demonstrated that cumulative symptom burden amplified productivity challenges and employment difficulties.

Beyond executive functioning, emotional dysregulation emerged as a second interconnected source of workplace strain. Rather than existing independently, emotional challenges frequently developed alongside cognitive demands, contributing to chronic stress, burnout and exhaustion. Studies linked executive functioning deficits with burnout pathways (Turjeman-Levi et al., 2024), while difficulties regulating effort and self-control increased the risk of overinvestment followed by exhaustion (Blondel et al., 2025). These experiences were further intensified within demanding workplace environments that exceeded employees' cognitive capacity (Oscarsson et al., 2022).

Although workplace strain was consistently reported across studies, several authors highlighted that these experiences were not uniform. Joseph et al. (2019) found that women with ADHD reported higher levels of work-related impairment. Schreuer and Dorot (2017) provided further insight into employed women's difficulties navigating workplace expectations such as having challenges with social and hierarchical norms.

Importantly, these challenges were cumulative and compounded over time. Tromans et al. (2023) identified challenges associated with role intensity and burnout, while Turjeman-Levi et al. (2024) demonstrated that sustained cognitive and self-regulatory demands contribute to chronic exhaustion. These patterns were further exacerbated by comorbid mental health conditions.

Anker et al. (2018) highlighted the high prevalence of psychiatric comorbidity among adults with ADHD, while Joseph et al. (2019) and Schein et al. (2023) linked greater symptom severity and work impairment to reduced quality of life and increased psychological distress. These findings indicate that workplace challenges cannot be understood solely as consequences of ADHD symptoms, but instead emerge through the interaction of cognitive difficulties, co-occurring mental health conditions, and sustained occupational demands.

Collectively, the evidence suggests that workplace strain associated with ADHD is best understood as a cumulative process rather than a collection of discrete symptoms. Executive functioning difficulties, emotional dysregulation, interpersonal demands and co-occurring mental health conditions interacted to shape employees' wellbeing and occupational functioning, highlighting the multidimensional nature of workplace strain across the literature.

3.3.3 Theme 3: Barriers to Workplace Performance and Progression

Barriers to Workplace Performance and Progression was found to be the third most prevalent theme across the literature, with 10 studies highlighting the ways in which ADHD-related challenges impact not only daily functioning - but also longer-term employment stability and career development. The studies reviewed demonstrate that individuals with ADHD were found to experience significantly higher levels of work impairment, reduced productivity, and increased employment instability compared to non-ADHD populations (Fuermaier et al., 2021; Nakai et al., 2022; Gordon & Fabiano, 2019). These challenges often resulted in negative job outcomes, such as, increased job changes, reduced working hours, and difficulties maintaining consistent performance over time (Nakai et al., 2022).

A key element of this theme is related to perceived underperformance and constraints on career progression. Several studies highlighted that individuals with ADHD frequently experienced a gap between their capabilities and their realised performance, often perceiving themselves as underachieving relative to their potential (Fuermaier et al., 2021). This was compounded by symptom specific disruptions, such as inattention, sleep difficulties, and emotional dysregulation. These symptoms were associated with increased work and activity impairment (Schein et al., 2023). Importantly, ADHD did not always predict poorer performance outcomes in every context. Olinover et al. (2022) stated evidence suggesting that when environmental and contextual factors were accounted for, performance differences were less pronounced.

Interpersonal and relational challenges further contributed to barriers in workplace performance and progression. Difficulties associated with hyperactivity and impulsivity were linked to increased workplace conflict and strained relationships with colleagues and supervisors (Sarkis, 2014). In addition, fear of negative judgement and being perceived as lazy, incompetent, or ‘too much’ emerged as a significant factor influencing behaviour and engagement at work (Oscarsson et al., 2022). Emotional dysregulation and heightened sensitivity to criticism were also found to negatively impact motivation, confidence, and performance outcomes, further contributing to relational strain in workplace settings (Schein et al., 2023; Hedlund & Jordal, 2025).

A further pattern identified across the literature was the cumulative and multidimensional nature of these barriers, as challenges rarely occur in isolation. As outlined in Theme 1, cognitive and emotional difficulties often interacted with interpersonal challenges to produce broader patterns of occupational impairment (Sarkis, 2014; Schein et al., 2023). These combined challenges were reflected in reduced work productivity and daily functioning, often linked to underlying health-related impairments (Joseph et al., 2019). However, some studies also pointed to a duality in

ADHD experiences, where individuals demonstrated both occupational strengths and challenges depending on contextual demands and role fit (O'Reilly et al., 2026). Collectively, these findings highlight that barriers to workplace performance and progression are shaped not only by individual challenges, but by the interaction between ADHD traits, workplace expectations, and broader contextual factors.

3.3.4 Theme 4: Organisational Barriers and Support Gaps

Organisational barriers and support gaps were found across 9 studies. This theme highlights the ways in which workplace environments can constrain disclosure, limit access to support, and reduce overall functioning for individuals with ADHD.

A central pattern identified across this literature was the relationship between organisational stigma and disclosure decisions. Employees with ADHD consistently reported weighing the potential benefits of disclosure against concerns about negative judgement and career consequences (McIntosh et al., 2023; Tromans et al., 2023; Hotte-Meunier et al., 2024). This was reinforced by findings that anticipated stigma and perceived employment risk reduced willingness to disclose in workplace contexts (Tromans et al., 2023). In some cases, stigma was internalised, with individuals reporting feelings of shame and actively concealing their difficulties at work (Hotte-Meunier et al., 2024). Disclosure decisions were also shaped by perceptions of competence, with fears of being judged as 'less capable' discouraging openness (McIntosh et al., 2023).

A second grouping in the literature concerned the influence of organisational climate on disclosure and access to support. Workplace context and psychological safety played a key role in shaping these disclosure experiences. Individuals are more likely to disclose when they felt

supported and safe within their work environment (McIntosh et al., 2023). In contrast, organisational cultures characterised by poor communication or limited understanding of ADHD were associated with lower disclosure and reduced engagement with available supports (O'Reilly et al. 2026).

A further dimension of this theme relates to organisational knowledge, leadership, and support systems. Limited understanding of ADHD across workplaces, including among managers, colleagues, and those responsible for implementing workplace supports, was consistently identified as a barrier to effective accommodations and inclusive practice (O'Reilly et al., 2026). This lack of organisational capability was associated with poorer communication, reduced employee wellbeing, and lower engagement with available supports (Hedlund & Jordal, 2025; Lauder et al., 2022).

Overall, organisational factors, including stigma, workplace culture, and leadership capability, are found to play a central role in shaping whether individuals with ADHD feel able to disclose their needs and access appropriate support in the workplace.

3.3.5 Theme 5: Agency and Advocacy

Agency and Advocacy was identified across 8 studies and represented a smaller but emerging area of the literature. The theme highlights the active role employees with ADHD may play in navigating workplace support through self-management, self-advocacy, and communication of their needs. Across studies, interventions that supported autonomy, self-awareness, and skill development were associated with improved functioning and enhanced work-related outcomes.

A key aspect of this theme relates to the effectiveness of coaching and executive function support. Coaching interventions grounded in psychoeducation and autonomy-supportive approaches were found to improve self-regulation, task management, and overall work performance (Lauder et al., 2022). Similarly, occupational interventions combining behavioural approaches, sometimes alongside pharmacological support, were associated with improved functioning (Sarkis, 2014). Structured metacognitive interventions, including telehealth-based programmes, were also associated with improved occupational outcomes among adults with ADHD (Grinblat & Rosenblum, 2023).

A further dimension of *Agency and Advocacy* related to the role of lived experience in those providing interventions for employees with ADHD. O'Reilly et al. (2026) found that employees used their lived experience to support colleagues, advocate for organisational change, and contribute to neurodiversity training of employees with ADHD.

Additional studies in this theme suggest that agency building interventions support the development of self-advocacy skills (Lauder et al, 2022) and enable individuals to better communicate their needs and navigate workplace expectations (Sarkis, 2014).

Improvements in wellbeing and quality of life were also associated with targeted ADHD interventions, with studies reporting sustained benefits following work-focused support programmes (Grinblat & Rosenblum, 2023; Lauder et al., 2022). Interventions were not intended to eliminate ADHD-related differences, but rather to support functioning within existing environments, reflecting a more humanistic and strengths-based perspective (Sarkis, 2014).

The collection of findings in this theme shows that workplace outcomes for individuals with ADHD are enhanced through a combination of skill development, supportive interventions, and

increased self-advocacy. Overall, this theme highlights the importance of both individual agency and accessible support mechanisms in shaping workplace experiences.

3.4 Grey Literature Insights into Organisational Practice

Grey literature findings broadly align with the themes identified within the academic literature. The findings from the grey literature reviewed for this study provides additional insight into how organisations are operationalising support for employees with ADHD in practice. In contrast to the literature's focus on challenges and barriers, the grey literature focused more on how organisations responded to neurodiversity. Common approaches included structured workplace adjustments, inclusive recruitment practices, and guidance for managers.

As mentioned in earlier chapters, across the sources reviewed, ADHD was typically addressed within broader neurodiversity or disability inclusion frameworks rather than through ADHD-specific organisational guidance. Consequently, the grey literature reviewed reflects both ADHD-specific organisational guidance, where available, and broader neurodiversity frameworks that explicitly included ADHD within their support recommendations.

A key finding from review of the grey literature was the formalisation of workplace accommodations within organisational systems. Employers described structured approaches to adjustments, including flexible work design, task restructuring, and formal adjustment pathways for employees with ADHD, suggesting a shift away from ad hoc support towards more standardised and scalable practices (Microsoft, n.d.; KPMG, 2024.; EY, 2025). These findings reinforce academic evidence highlighting the importance of workplace accommodations, while extending understanding of how such supports are implemented in practice.

Managerial capability also emerged as a central enabler of effective support. Several organisations published guidance for managers supporting neurodivergent employees. Such guidance included; recommendations relating to clear communication, workload management, flexible task allocation, and regular check-ins (UNICEF, 2025; IBM, n.d.; Bupa, 2025). Although much of this guidance for manager capability building was framed around neurodiversity more broadly, it aligns with the findings highlighting managerial understanding as a key influence on employees' workplace experiences. Ultimately, this suggests that organisational outcomes are shaped not only by the availability of accommodations but also by the capability of those responsible for implementing them.

A review of the grey literature further identified recruitment as a key site of organisational intervention. Microsoft (n.d.) described adapting recruitment processes by offering interview adjustments, providing questions in advance where appropriate, allowing additional processing time, and focusing assessments on job-relevant skills rather than conventional interview performance. Similarly, Services Australia (2026) outlined alternative recruitment pathways and adjustments designed to reduce barriers for neurodivergent applicants, including flexible assessment formats and tailored support throughout the recruitment process. These approaches challenge traditional recruitment practices, as identified in the academic literature, as potentially exclusionary, particularly for individuals experiencing executive functioning difficulties.

3.5 Summary

This chapter has presented the key findings of the review in relation to the research questions, identifying several interconnected themes relating to the workplace experiences of employees with ADHD and the organisational support available to them. Across the literature, workplace

challenges were consistently linked to executive functioning difficulties, workplace structures, and interpersonal dynamics. Organisational responses centred on accommodations, managerial support, and evolving inclusion practices, although gaps in support remained evident.

In addition, grey literature provided further insight into how organisations are operationalising these supports in practice. These findings begin to highlight both progress and ongoing gaps in implementation of academic research.

The following chapter will critically discuss these findings in relation to the broader literature, with particular attention to the implications for employers and future research.

Chapter 4: Discussion

4.1 Introduction

This chapter discusses the research findings analysis in relation to the two research questions: 1) what is known about the challenges of ADHD in the workplace, and 2) What workplace accommodations and organisational practices support employees with ADHD, and what associated outcomes, including productivity and wellbeing, have been reported? Section 4.2 will speak to research question one by critically examining the workplace challenges experienced by employees with ADHD and considering how these challenges emerge through the interaction between individual characteristics and organisational contexts.

To answer research question two, section 4.3 focuses on workplace accommodations for employees with ADHD and their reported impacts on wellbeing and productivity. For the purposes of this discussion, workplace outcomes refer broadly to wellbeing, occupational functioning, engagement, and work performance. Such framing of workplace outcomes in this broad context was a decision made to reflect the range of outcomes examined across the reviewed literature. Although this discussion explores the relationships between workplace accommodations, organisational practices, and workplace outcomes - it does not seek to fully explain the complex interactions between these constructs. Rather, it synthesises the available evidence within existing literature. Workplace accommodations could not be meaningfully discussed in isolation from the organisational contexts in which they are implemented. This discussion adopts a broader organisational perspective while remaining focused on ADHD-specific workplace studies and reports. Although some workplace practices have broader

applicability across other neurodevelopmental conditions, disabilities, or mental health conditions, this discussion is limited to evidence relating to ADHD in workplace contexts where ADHD-specific evidence was available.

Three Key Insights Emerged from this Study:

Firstly, workplace challenges associated with ADHD appear to be shaped as much by the interaction between individual characteristics and organisational contexts, challenging assumptions that workplace outcomes are solely the result of individual impairment.

Secondly, organisational conceptualisations of ADHD appear to shape not only the workplace supports organisations prioritise, but also how those supports are implemented in practice. While broader neurodiversity and strengths-based approaches promote inclusion, they also can overlook ADHD-specific workplace experiences. As a result, these broader conceptualisations can create a mismatch in the support needs of individuals with ADHD.

Thirdly, the effectiveness of workplace accommodations can depend less on the existence of formal policies than on how those accommodations are enacted through managerial capability, organisational culture, and employees' willingness to disclose their condition.

Together, these insights suggest that improving workplace outcomes for employees with ADHD requires more than identifying and providing effective workplace accommodations. The analysis suggests that improving workplace outcomes depends on how organisations conceptualise ADHD and translate that understanding into workplace practice. The discussion also highlights that organisational priorities and motivations may influence how ADHD is framed, how support

is prioritised, and ultimately how workplace initiatives are implemented. This chapter concludes by considering the implications of these findings for employers and priorities for future research.

4.2 ADHD Challenges in the Workplace Extend Beyond Individual Deficits

Employees with ADHD face workplace challenges that arise through the interaction between individual characteristics and organisational systems (Hedlund & Jordal, 2025). Workplace outcomes therefore cannot be understood solely in terms of ADHD symptoms, but must also be considered within the organisational environments in which employees work (Oscarsson et al., 2022; Nakai et al., 2022; Hedlund & Jordal, 2025). Organisational environments may either contribute to, or help reduce workplace challenges (Nagata et al., 2019; Steele et al., 2021). These interactions can be examined across individual, workplace, and broader societal levels.

On the individual level of challenge for employees with ADHD, this study revealed that executive functioning difficulties consistently emerged as key contributors to occupational strain. Across the literature, repeated challenges were linked to burnout and reduced workplace functioning. Such as planning, organisation, attention regulation, and self-management (Turjeman-Levi et al., 2024; Sarkis, 2014; Hotte-Meunier et al., 2024). However, this pattern discussed should not be interpreted as evidence that workplace challenges arise solely from individual deficits. Such contributions suggest that executive functioning difficulties become particularly consequential within organisational environments that are designed around neurotypical assumptions.

At the interactional level, the literature suggests that workplace outcomes emerge through the relationship between individual characteristics and workplace demands. Across the reviewed studies there were implicit workplace expectations that created occupational strain, such as, high communication demands, sensory overstimulation and rapid task switching (Oscarsson et al., 2022; Schreuer & Dorot, 2017; Tromans et al., 2023; Liebel et al., 2024). Therefore, organisational environments are shown to either amplify or reduce workplace challenges depending on the degree of person-environment fit. These findings position person–environment fit as a central explanation for why ADHD-related workplace challenges vary across occupational contexts. However, caution is warranted when drawing broader conclusions, as the literature is typically derived from relatively small samples across different occupations and contexts.

Beyond the interaction between individual characteristics and workplace environments, responding to workplace challenges also raises broader organisational considerations. Supporting employees with ADHD through greater flexibility, autonomy, or tailored work practices can require organisations to navigate competing elements of their operation; such as, operational priorities, organisational structures, and established assumptions about work (Högstedt et al., 2023; Lauder et al., 2022). Therefore, supporting employees with ADHD requires more than adapting individuals to existing workplaces. These findings also encourage organisations to reconsider how work is designed and organised (Högstedt et al., 2023; Schreuer & Dorot, 2017). This could be developed further to include questioning how broader organisational and economic assumptions about productivity shape workplace support. Examining these wider organisational interactions extends beyond the scope of the present review but provides context for understanding the organisational responses discussed in the following sections.

An additional consideration relates to the nature of the evidence base itself. Approximately 18 of the 28 primary empirical studies included in this review relied primarily on participant self-report surveys or questionnaires (e.g., Oscarsson et al., 2022; Tromans et al., 2023; Turjeman-Levi et al., 2024; Hedlund & Jordal, 2025). As these experiences were captured through employee reports within workplace settings, responses may have been influenced by broader organisational dynamics that are difficult to capture through these methods. Such constraints include concerns regarding anonymity, professional reputation, workplace relationships, and job security. This highlights the challenges of isolating individual factors from broader environmental influences and reinforces the interactional nature of ADHD workplace experiences.

The organisational responses identified across the academic and grey literature are summarised in Table 3 in section 4.3 and provide the foundation for the following discussion of organisational approaches to supporting employees with ADHD.

4.3 Organisational Conceptualisations and Accommodations

Having established that workplace challenges associated with ADHD extend beyond individual deficits, it is also a need to consider how organisations conceptualise ADHD and neurodiversity when developing workplace accommodations and supports. Understanding these conceptualisations is central to the second research question of how accommodations support wellbeing and productivity of employees with ADHD. How an organisation views ADHD or neurodiversity shapes which accommodations are implemented and how responsibility for supporting employees with ADHD is understood in practice. The review of the grey literature

found that neuroinclusion is often framed by organisations in three distinct categories that are explored further in the next section.

Table 3: A Summary of Workplace Supports and Accommodations Identified across the Academic and Grey Literature

Category of Accommodations	Key Academic Literature	Examples of Supports	Grey Literature Examples	Intended Outcomes
Manager Capability and Education	McIntosh et al. (2023); Tromans et al. (2023); van Wijk & Firfirey (2020); Oscarsson et al. (2022)	Manager toolkits; ADHD awareness training; communication guidance; accommodation implementation guidance; strengths-based leadership; workload planning	UNICEF, Bupa, IBM, EY	Improved manager confidence, support quality, accommodation implementation
Job Design and Workplace Accommodations	Lauder et al. (2022); Oscarsson et al. (2022); O'Reilly et al. (2026); Steele et al. (2021); Wolfe et al. (2025).	Flexible work arrangements; flexible scheduling; task restructuring; role clarity; autonomy; workload management; reduced multitasking; alternative communication methods	Microsoft, Bupa, EY, KPMG	Improved productivity, wellbeing, job performance
Physical Work Environment	Oscarsson et al. (2022); Grinblat & Rosenblum (2023)	Quiet workspaces; hybrid/remote work; sensory adjustments; reduced distractions; workspace flexibility; environmental modifications	Microsoft, EY, KPMG, Bupa	Reduced cognitive load, improved concentration
Digital Tools and Assistive Technology	Sarkis (2014)	Productivity software; scheduling tools; reminder systems; accessibility software; digital workflow supports; assistive technologies	Microsoft, IBM, EY	Improved organisation, task management and accessibility
Psychological Safety and Disclosure	McIntosh et al. (2023); Tromans et al. (2023); van Wijk & Firfirey (2020)	Confidential disclosure pathways; privacy protections; accommodation request processes; neurodiversity champions; anti-stigma initiatives; employee choice regarding disclosure	EY, KPMG, Microsoft	Increased disclosure confidence, support-seeking and trust
Humanistic and Strengths-Based Supports	Lauder et al. (2022); Sarkis (2014); O'Reilly et al. (2026); Grinblat & Rosenblum (2023)	Coaching; mentoring; peer support; strengths identification; career development; employee resource groups; personalised support planning	IBM, Microsoft	Increased self-efficacy, wellbeing and engagement

Inclusive Recruitment and Career Development	Hotte-Meunier et al. (2024);	Recruitment accommodations; alternative interviews; strengths-based hiring; tailored onboarding; supported transitions; career progression pathways	Microsoft, Services Australia, IBM	Improved access to employment and career progression
Storytelling, Communication and Visibility	O'Reilly et al. (2026)	Employee stories; lived-experience narratives; neurodiversity badges; ally programmes; awareness campaigns; educational resources; leadership advocacy	Microsoft, IBM, EY	Increased awareness, visibility and acceptance
Organisational Accountability and Inclusive Practice	McIntosh et al. (2023); Tromans et al. (2023); and Lauder et al. (2022)	Accessibility plans; inclusion strategies; policy commitments; governance structures; neurodiversity councils; diversity and inclusion committees; employee advisory groups; accountability mechanisms; disability inclusion frameworks; human rights approaches; organisational action plans	UNICEF, EY, KPMG, Services Australia	Sustainable organisational commitment, accountability, inclusion and systemic change
Organisational Culture and Neuroinclusion	Hedlund & Jordal (2025); Hotte-Meunier et al. (2024); McIntosh et al. (2023) Oscarsson et al. (2022)	Neurodiversity networks; employee resource groups; inclusion initiatives; belonging activities; leadership advocacy; culture change programmes; stigma reduction efforts; community-building initiatives	Microsoft, IBM, EY, KPMG	Increased belonging, inclusio retention and psychological safety

Table 3 above summarises the workplace support and accommodations identified across both the academic and grey literature. Forms of support were identified across both evidence sources. However, the grey literature also showed differences in how organisations understood and approached ADHD in the workplace.

Three dominant conceptualisations emerged from the organisational literature that included 1) Strength-based conceptualisation of ADHD accommodations and supports; 2) Organisational Responsibility 3) ADHD-specific support within neuroinclusion frameworks. The academic literature also highlighted the importance of intersectionality, which showed that workplace experiences and accommodation needs vary across employees with ADHD.

4.3.1 Strength-based Conceptualisation of ADHD Accommodations and Supports

The most prominent conceptualisation identified across the organisational literature was a strengths-based framing of ADHD. Rather than emphasising workplace challenges there was a focus on the value neurodivergent employees bring to organisations. The value often highlighted by these organisational reports commonly included innovation, creativity, cognitive diversity. This framing was particularly evident within reports produced by organisations such as EY (2025) and KPMG (2024). In these two examples, neurodiversity was frequently presented as a source of organisational capability and competitive advantage. In contrast, Bupa (2025) placed greater emphasis on person-environment fit and employee wellbeing, illustrating that strengths-based narratives are linked to broader employee support objectives.

These differences reflect the organisational context in which these reports were produced and how they view neuroinclusion. Some organisations positioned ADHD within disability inclusion frameworks (UNICEF, 2025), while others focused more broadly on accessibility, employee wellbeing, or neuroinclusion. For example, disability inclusion approaches like Bupa (2025) tended to prioritise workplace adjustments and accessibility, whereas neuroinclusion and strengths-based approaches such as KPMG (2024) and EY (2025) more frequently highlighted belonging and the value of cognitive diversity. Several organisations included in this review operate within knowledge-intensive industries where innovation and specialised expertise are viewed as competitive advantages. This partly explains why reports in that cluster emphasised the strategic value of neurodiversity and positive aspects. Organisational priorities for supporting employees with ADHD can therefore arguably be framed by how ADHD is conceptualised by each organisation.

The contrast between the academic and grey literature is particularly evident in their treatment of ADHD strengths. Approximately 23 of the 34 academic studies included in this review focused primarily on workplace challenges facing employees with ADHD. Many also examined challenges to wellbeing, intervention effectiveness, or barriers to workplace participation (e.g., Joseph et al., 2019; Oscarsson et al., 2022; Schein et al., 2022; Tromans et al., 2023; Turjeman-Levi et al., 2024). By comparison, the seven grey literature sources more frequently emphasised strengths, inclusion, and practical organisational guidance (e.g., UNICEF, 2025; EY, 2025; Microsoft, 2024). This difference reflects the different purposes of the two types of literature. Academic research has largely focused on understanding workplace challenges, including burnout, stigma, and

occupational strain. Organisational literature had a stronger focus on practical guidance and workplace inclusion. A noticeable contrast in context.

These portrayals suggest the two evidence bases are addressing different questions rather than presenting conflicting understandings of ADHD. Nevertheless, the stronger emphasis on strengths within organisational literature reduces attention to the ongoing workplace challenges and accommodation needs that is seen in the academic research.

Although the strengths-based narratives found in grey literature helps reduce stigma and promote more inclusive workplace cultures, they should be interpreted cautiously. Across the academic literature, executive dysfunction, workload strain, burnout, and cumulative self-regulatory demands consistently emerged as central contributors to occupational difficulty (Turjeman-Levi et al., 2024; Oscarsson et al., 2022). Several studies suggested that ADHD-related strengths emerge under supportive workplace conditions (Hotte-Meunier et al., 2024; Blondel et al., 2025; Gordon & Fabiano, 2019). However, Blondel et al. (2025) highlighted that positive occupational outcomes coexist alongside considerable energetic and self-regulatory effort. Further indicating that workplace success should not automatically be interpreted as evidence that accommodation needs have been resolved. Collectively, these insights suggest that strengths-based narratives may complement, but should not replace, ADHD-specific challenge based research when developing accommodations.

Overall, neither deficit-oriented academic perspectives nor strengths-based organisational narratives appear to fully capture the complexity of ADHD workplace experiences. While academic literature underemphasises the value that ADHD-related characteristics can bring to

organisations, organisational narratives understate the ongoing cognitive, emotional, and self-regulatory demands identified throughout the empirical literature. This contrast suggests that strengths-based conceptualisations are most effective when they complement, rather than replace ADHD-specific understanding and workplace accommodations. How organisations conceptualise ADHD in this way, could benefit from giving the challenges equal weight to the strengths. Such a reframe is as needed as the specific accommodations they provide.

4.3.2 Conceptualisation of Organisational Responsibility

The second organisational conceptualisation positioned ADHD support as a systemic organisational responsibility rather than the responsibility of individual employees (EY, 2025; KPMG, 2024; Microsoft, 2024). Support extended beyond individual workplace adjustments to include leadership, workplace design, recruitment, communication, and governance in grey literature reports. This suggests that responsibility for workplace inclusion should be shared across different levels of an organisation. It does not rest solely with employees or individual managers.

Organisational culture was also a factor of this approach. Supporting employees with ADHD in the grey literature was linked to belonging, psychological safety, wellbeing, and engagement (Microsoft, 2024; UNICEF, 2025; EY, 2025). These broader approaches were accompanied by practical supports across both the academic and grey literature, including flexible working arrangements, quiet workspaces, clear communication and goals, and manager or colleague support (Hotte-Meunier et al., 2024; Schreuer & Dorot, 2017; see Table 3 in 4.3 and Appendix #2). This is also reflected in the academic literature, where organisational responsibility for supporting employees with ADHD extended to job control, and organisational conditions that

were associated with employee functioning and wellbeing (Nagata et al., 2019; Hedlund & Jordal, 2025). However, there is limited evidence showing whether these broader organisational approaches improve the everyday workplace experiences of employees with ADHD. Leadership commitment and awareness initiatives show positive organisational intent, but their effectiveness remains largely unevaluated. This highlights a gap between organisational approaches to neuroinclusion and evidence of their impact in practice.

4.3.3 ADHD-specific Support within Neuroinclusion Frameworks

While organisations are taking greater responsibility for support, ADHD is typically grouped within broader neurodiversity and neuroinclusion frameworks. This represents a central shift towards more inclusive organisational thinking. However, comparatively little ADHD-specific guidance was identified across the organisational literature reviewed. ADHD was frequently discussed within broader neurodiversity initiatives rather than as a distinct occupational experience requiring specific workplace support. For example, Microsoft (2024), UNICEF (2025), and Bupa (2025) embedded ADHD within wider neurodiversity strategies, whereas Services Australia (2026) provided more detailed ADHD-specific workplace guidance. The commitment to neuroinclusion by these organisations, therefore does not necessarily result in ADHD-specific workplace support.

The use of broader neurodiversity frameworks also creates challenges when organisations try to put these principles into practice. Managers need to interpret general neurodiversity guidance when responding to the needs of employees with ADHD. This need is notable where managers have limited knowledge of ADHD or workplace accommodations, which has been identified as a barrier to effective workplace support (Lauder et al., 2022; O'Reilly et al., 2026). This highlights

a potential gap between broader neuroinclusion principles and the implementation of ADHD-specific support.

A key question arising from these findings is whether broad neurodiversity frameworks can adequately account for the specific workplace experiences associated with ADHD. While these frameworks can improve organisational awareness and reduce stigma, a general approach would not fully account for the different ways ADHD affects employees at work. Given the heterogeneity of ADHD itself, co-occurring neurodevelopmental and mental health conditions contribute to differences in workplace experiences, support needs, and functioning (Schein et al., 2023). Organisations therefore need to balance broader neuroinclusive practices with more individualised approaches to ADHD support.

4.3.4 Intersectionality within ADHD Populations

The academic literature further outlines that workplace experiences of employees with ADHD are influenced not only by ADHD characteristics, but also by gender, co-occurring neurodevelopmental and mental health conditions, and wider social contexts (Joseph et al., 2019; Schein et al., 2023). ADHD populations experience differences in executive functioning, emotional regulation, co-occurring conditions, and individual symptom profiles (Asherson et al., 2024). Given this variability in symptom presentation, it is reasonable to suggest that workplace accommodations need to vary according to individual needs (Högstedt et al., 2023; Hotte-Meunier et al., 2024; Schreuer & Dorot, 2017).

Employees with ADHD require different forms of support depending on their individual circumstances (Lauder et al., 2022; Schreuer & Dorot, 2017). Therefore, organisations would benefit from viewing ADHD-specific guidance as a flexible framework rather than a prescriptive

set of accommodations, allowing workplace support to be adapted to the diverse ways ADHD is experienced. Flexibility and individualisation are therefore as important as the accommodations themselves (Högstedt et al., 2023; Hotte-Meunier et al., 2024). These findings reinforce the importance of moving beyond standardised accommodation approaches towards more flexible and individualised positioning.

4.3.5 Summary

In summary, the conceptualisations identified within the grey literature suggest that organisational responses to ADHD extend beyond the provision of workplace accommodations alone. Workplace support is influenced by how organisations conceptualise ADHD, the priorities underpinning workplace initiatives, and the extent to which broader neurodiversity principles are translated into ADHD-specific practice. Moreover, understanding organisational conceptualisations provides relevant insights into how workplace support is developed and implemented, representing a key contribution to the second research question.

4.4 Mechanisms for Effective Organisational Practice

While the evidence base for specific ADHD workplace support is still emerging, six organisational mechanisms emerged as factors that influence the effectiveness of workplace accommodations for employees with ADHD: job design, organisation of everyday work, psychological safety, person-environment fit, agency and advocacy, and manager capability. Understanding these mechanisms therefore provides a practical contribution to the second research question.

The first mechanism that enables effective workplace accommodations is job design. The literature highlights that organisational support for employees with ADHD starts with how work is designed, organised, and supported. Across the literature, autonomy, task novelty, flexibility, meaningful work, and supportive workplace environments were consistently associated with improved engagement and occupational functioning among employees with ADHD (Nagata et al., 2019; Steele et al., 2021; Oscarsson et al., 2022). This reveals that effective workplace support requires designing work in ways that better align with the needs of employees with ADHD.

The second mechanism influencing accommodation effectiveness relates to the organisation of everyday work. Contemporary workplace norms shape how that role is experienced on a day-to-day basis. Constant accessibility, fragmented attention demands, continuous communication, and high levels of self-management were consistently associated with occupational strain among employees with ADHD (Oscarsson et al., 2022; Schreuer & Dorot, 2017; Tromans et al., 2023). Interestingly, this contrasts with evidence that suggests that stimulating and varied work enhances attention and engagement for some employees with ADHD (Gordon & Fabiano, 2019). O'Reilly et al. (2026) similarly identified preferences for fast-paced and varied work. Together, this analysis confirms an apparent tension within the literature. While employees with ADHD benefit from stimulating and varied work, contemporary workplace fast paced practices, split attention and constant accessibility appear to contribute to occupational strain. This suggests that workplace stimulation influences employees' wellbeing and productivity at work with ADHD and is complex in nature.

The third mechanism influencing accommodation effectiveness is psychological safety. Employees with ADHD can only be supported if they feel safe to disclose their support needs

and access available adjustments. However, employees are often reluctant to disclose ADHD because of concerns about stigma, discrimination, or being perceived as less competent (McIntosh et al., 2023; Tromans et al., 2023; Hotte-Meunier et al., 2024). Consequently, the availability of workplace accommodations does not necessarily mean they are accessed in practice.

Underlying these organisational mechanisms is the broader principle of person–environment fit as the fourth mechanism. The findings suggest that accommodation effectiveness depends on the interaction between individual characteristics and organisational environments (Hotte-Meunier et al., 2024; Högstedt et al., 2023; Oscarsson et al., 2022). Greater job control and social support were associated with lower psychological distress, particularly among employees with higher ADHD symptom levels (Nagata et al., 2019), while women with ADHD described valuing both organisational structure and opportunities for autonomy within their work environments (Schreuer & Dorot, 2017). Similarly, meaningful work, temporal balance, and organisational alignment were associated with improved attention, engagement, and workplace functioning (Blondel et al., 2025; Steele et al., 2021; Wolfe et al., 2025). Overall, these patterns suggest that workplace accommodations support employee wellbeing and productivity when organisational environments align with employees' cognitive and occupational needs. Overall, this highlights the importance of person–environment fit in workplace support.

Psychological safety emerged as a critical gateway mechanism, enabling other forms of ADHD workplace support rather than functioning as an accommodation in itself. It enables employees to disclose ADHD, seek support, and access available workplace accommodations (McIntosh et al., 2023; Tromans et al., 2023). McIntosh et al. (2023) found that psychologically safe workplace climates support proactive ADHD disclosure. The author also found that concerns about negative

competence judgements contributed to concealment and reduced willingness to seek support. KPMG (2024) similarly recognised this challenge by emphasising confidential disclosure processes and employee choice regarding whether neurodivergence was shared more broadly within the organisation. This illustrates that psychological safety can be embedded through organisational systems as well as workplace culture, as mentioned in this chapter in earlier sections. Rather than operating independently, leadership commitment, manager capability, communication, and inclusive workplace cultures appear to strengthen this gateway by creating conditions in which employees feel able to seek support (Hedlund & Jordal, 2025; O'Reilly et al., 2026). Therefore, the effectiveness of workplace accommodations depends not only on what organisations provide, but also on whether employees feel safe enough to access those supports.

The fifth organisational mechanism influencing accommodation effectiveness is manager capability. Throughout the literature, managers emerged as a key influence on employees' everyday workplace experiences (Schreuer & Dorot, 2017; Tromans et al., 2023). While organisations establish policies and workplace accommodations, managers are shown to determine how those supports are recognised, implemented, and sustained in practice (Schreuer & Dorot, 2017; Tromans et al., 2023). Schreuer and Dorot (2017), for example, identified supportive mentoring relationships and structured organisational practices as key facilitators of workplace inclusion for women with ADHD. Similarly, workplace conditions and organisational expectations were found to influence occupational experiences among employees with ADHD (Nagata et al., 2019; Oscarsson et al., 2022). This is notable given evidence of a gap between employees' need for workplace adjustments and their implementation in practice (Tromans et al., 2023) to which managers are the gateway to that day-to-day experience. Managers shape disclosure experiences, adjust workloads, facilitate flexibility, and respond to employees'

individual support needs. Therefore, manager capability influences not only whether workplace accommodations are implemented, but also how organisational support is experienced by employees with ADHD. Bupa (2025), for example, published dedicated guidance for managers supporting neurodivergent employees. Manager-focused guidance was also identified across UNICEF (2025), IBM (2021), and EY (2025), including awareness training, communication guidance, and support for implementing workplace adjustments (see Table 3). These examples suggest that organisations view manager capability as central to translating organisational commitments into everyday workplace practice.

Interestingly a sixth emerging mechanism is agency and advocacy for employees with ADHD. The findings also suggest that employees are not passive recipients of workplace support. Agency and advocacy emerged through disclosure decisions, communication of support needs, self-management strategies, and the use of lived experience to shape workplace practices (McIntosh et al., 2023; Schreuer & Dorot, 2017; O'Reilly et al., 2026). This was also reflected in the grey literature through employee resource groups, peer support, and lived-experience initiatives (Microsoft, 2024; IBM, 2021; see Table 3). However, the ability to exercise this agency appears partly dependent on organisational conditions, particularly whether employees feel psychologically safe to disclose and advocate for their needs (McIntosh et al., 2023).

Of all the mechanisms, it can be argued that managerial capability and wider disclosure and visibility initiatives provide a key practical implication for the second research question. These factors are therefore key in determining whether employees can access and benefit from workplace accommodations. These two factors therefore largely improve employee wellbeing and productivity when targeted by organisations.

There are also considerations beyond the organisational mechanisms discussed above to note. In particular, this review highlights challenges relating to the implementation and evaluation of workplace accommodations. Although both the academic and organisational literature provide increasing guidance regarding ADHD-supportive workplace practices, considerably less attention has been given to how these supports are implemented, evaluated, and sustained over time. Some ADHD-supportive practices, including greater autonomy and flexibility, are not equally achievable across all organisational settings (Nagata et al., 2019; Steele et al., 2021; Oscarsson et al., 2022; Wolfe et al., 2025). As a result, implementation decisions are influenced not only by evidence of effectiveness, but also by organisational feasibility.

This implementation challenge was also reflected within the organisational literature itself. Although some organisations, particularly KPMG (2024), presented comparatively detailed implementation frameworks, this level of operational detail was not consistently evident across organisational reports. Furthermore, reports predominantly described intended initiatives rather than evaluating whether these approaches resulted in improved workplace experiences for employees with ADHD. A similar gap was identified from the review of the academic literature. Tromans et al., (2023) found that employees reported a high need for workplace adjustments, but these were not always implemented in practice. How support is implemented and sustained is therefore just as relevant as the support in place. Together, these findings highlight that the presence of organisational policies or guidance does not necessarily translate into support being experienced by employees. Implementation and sustainability therefore represent a key next step in understanding whether workplace accommodations can meaningfully contribute to employee wellbeing and productivity.

Overall, this review outlines that the effectiveness of workplace accommodations depends not only on the accommodations themselves, but also on the organisational mechanisms that enable them to function in practice. Improved employee wellbeing and productivity for employees with ADHD, are shaped by job design, the organisation of everyday work, psychological safety, and manager capability. Across the mechanisms identified, manager capability and psychologically safe disclosure processes appear influential because they determine whether workplace accommodations are accessed and effectively implemented. The review also highlights the need for stronger evaluation of organisational initiatives to understand whether workplace supports lead to sustained improvements over time.

4.5 Organisational Responses: A Critical Appraisal

While the organisational literature made a recognised contribution to understanding emerging workplace practice, several characteristics of this evidence base warrant critical consideration when interpreting the findings of this review. In particular, issues relating to representativeness, organisational purpose, evidence focus, and evaluation influence the conclusions that can be drawn from the grey literature responses identified.

The first consideration relates to the representativeness of the organisational literature. All seven grey literature sources included in this review were produced by organisations publicly promoting neurodiversity, disability inclusion, or workplace accessibility initiatives (Bupa, 2025; EY, 2025; KPMG, 2024; Microsoft, 2024; Services Australia, 2026; UNICEF, 2025; IBM, 2021). As a result, these organisations represent examples of leading practice rather than typical organisational practice. This pattern is consistent with the strengths and limitations of grey literature, which often reflects emerging practice and organisational priorities rather than

representative evidence across an entire sector (Adams et al., 2017). As a result, the organisational responses identified should not be assumed to reflect the experiences of organisations that have not yet established or publicly communicated comparable neurodiversity initiatives.

A second consideration relates to the role organisational reports play as evidence sources. Unlike academic research, organisational reports are not typically produced to evaluate interventions or generate independent empirical evidence (Adams et al., 2017). Instead, they communicate organisational priorities, policies, and examples of emerging practice. Across the seven organisational reports reviewed, considerable attention was given to describing workplace initiatives, leadership commitments, and accommodation strategies (e.g., EY, 2025; KPMG, 2024; Microsoft, 2024). These reports therefore provide valuable insight into emerging organisational practice, but serve a different purpose from empirical intervention research.

A further consideration relates to the different forms of knowledge generated by the academic and organisational literature. Academic studies primarily examined employee experiences, occupational functioning, workplace challenges, and factors associated with workplace outcomes (Joseph et al., 2019; Oscarsson et al., 2022; Tromans et al., 2023; Turjeman-Levi et al., 2024), with a smaller body of research evaluating workplace-relevant interventions (Grinblat & Rosenblum, 2023; Lauder et al., 2022). In contrast, organisational reports document organisational approaches, guidance, and examples of emerging practice (Bupa, 2025; EY, 2025; Microsoft, 2024). This highlights that the two evidence sources should not be expected to produce identical findings, but rather provide complementary perspectives on ADHD in the workplace.

A final consideration relates to the evaluation of organisational initiatives. Several organisations, particularly EY (2025) and KPMG (2024), reported implementation frameworks, governance structures, employee survey findings, and organisational inclusion measures. However, these findings were largely reported by the organisations themselves and varied considerably in the extent to which they evaluated ADHD-specific workplace outcomes. This limits the extent to which reported organisational initiatives can be linked to improved outcomes for employees with ADHD. This limitation is notable given the limited workplace-specific intervention research within the academic literature (Lauder et al., 2022).

The four considerations discussed in this section suggest that both the academic and organisational literature makes distinct contributions to understanding ADHD in the workplace. Academic research provides greater insight into employees' workplace experiences and challenges, whereas organisational literature offers emerging examples of workplace responses and evolving practice. Integrating both evidence sources provides a broader understanding of ADHD in the workplace than either could offer independently. However, further research is needed to evaluate how organisational initiatives are implemented, experienced by employees with ADHD, and sustained over time. Such work would strengthen the evidence base for translating organisational commitment into more positive workplace outcomes.

4.6 Summary

Overall, this discussion highlighted that although some organisations are taking actions towards committing to neurodiversity and workplace inclusion, considerably less is known about how these initiatives are implemented, experienced, and sustained over time. Especially from non-biased sources or empirical studies. This distinction is important to note, as organisational

commitments alone do not necessarily translate into improvements in workplace experiences for employees with ADHD.

The discussion provides key insights into both research questions. Regarding the first research question, the evidence uncovered that workplace challenges experienced by employees with ADHD should be understood through the interaction between individual characteristics and organisational systems rather than as individual deficits alone. It also reinforces the importance of recognising ADHD as a distinct workplace experience within broader neurodiversity frameworks. In answering the second research question, the findings demonstrate that effective workplace support depends on more than identifying appropriate accommodations. Organisations also need to operationalise support through thoughtful job design, the organisation of everyday work, psychological safety, manager capability, and broader organisational systems that enable employees to access and benefit from available accommodations. Employees also play an active role in this process through disclosure decisions, communication of support needs, self-management, and advocacy, although their ability to exercise this agency is shaped by organisational conditions.

Chapter 5: Conclusion

This review brings together academic and organisational literature to provide a comprehensive understanding of ADHD in contemporary workplaces. Much of the existing research has examined either the workplace challenges experienced by employees with ADHD or the organisational responses developed to support them. By considering these perspectives together, the review highlights how organisational practices and workplace environments influence employee wellbeing and productivity.

5.1 Contributions

One of the main contributions of this review is demonstrating that workplace experiences associated with ADHD arise through the interaction between individual characteristics and organisational environments. Although executive functioning difficulties were consistently linked to workplace challenges, the extent to which these challenges affected employees depended heavily on workplace structures, communication practices, job design, and organisational expectations. This reinforces the view that workplace outcomes are shaped not only by individual characteristics, but also by the environments in which people work.

This study also highlighted differences in how ADHD is conceptualised across academic and organisational literature. Academic studies predominantly examined burnout, disclosure, workplace strain, and intervention effectiveness, whereas in contrast, organisational reports more commonly adopted strengths-based and neurodiversity perspectives. The findings suggest that while these approaches can encourage greater inclusion and reduce stigma, broad neurodiversity

frameworks do not always address the specific workplace experiences. Balancing strengths-based narratives with practical support therefore appears essential.

Another contribution is the finding that workplace accommodations do not operate in isolation. Their effectiveness depends on the broader organisational context in which they are implemented. Across the literature, factors such as psychological safety, supportive leadership, clear communication, and thoughtful job design consistently influenced whether accommodations translated into meaningful improvements in wellbeing and work performance. Several of the practices in the grey literature, such as flexible work and clear communication, are described as benefiting all employees. Accommodations therefore need to be addressed within these broader frameworks in parallel.

This study also identified a smaller but emerging role for employee agency and advocacy. Employees were not always passive recipients of workplace support, but actively navigated how they accessed accommodations in the workplace. Examples of this agency and advocacy included; disclosure decisions, communicated support needs, developed self-management strategies, and in some cases used their lived experience to advocate for organisational change. However, the ability to exercise this agency appeared partly dependent on organisational conditions. In particular, psychological safety and feeling able to disclose ADHD without fear of negative judgement were key conditions for enabling employees to advocate for the accommodations and support they needed.

A central question emerging from this study concerns how broad neurodiversity principles are translated into ADHD-specific workplace practice. Although many organisations now promote neurodiversity and inclusion, considerably less guidance is available regarding how ADHD-specific workplace needs should be interpreted and implemented in day-to-day organisational settings. This raises several questions for organisations and future research. Who is responsible for interpreting broad neurodiversity frameworks when ADHD-specific guidance is limited? How should managers determine appropriate accommodations while maintaining consistency across employees? To what extent should responsibility sit with organisational policy, managerial capability, or individual employees themselves? Do workplace accommodations require greater organisational oversight and accountability, similar to established HR or health and safety practices practices? While these questions extend beyond the scope of this review, they highlight a possible direction for future organisational practice and research.

5.2 Limitations

This study should be considered in light of several limitations. As with any systematic literature review, the findings are constrained by the quality, scope, and methodological approaches of the studies that were available for inclusion. Although bringing together evidence from multiple sources provides a broader understanding of ADHD in workplace settings, the review cannot extend beyond what has been investigated within the existing literature.

The evidence base itself also presents several limitations. Many of the academic studies relied on cross-sectional designs and self-reported workplace experiences. While these methods offer valuable insight into employees' perspectives, they provide only a snapshot in time and cannot

capture how workplace experiences or organisational support evolve. In addition, several studies drew on relatively small samples or focused on particular occupations, limiting the extent to which their findings can be generalised across industries and workplace settings.

Including grey literature broadened the review by capturing emerging organisational practices that are often absent from academic research. However, these reports were commonly produced by organisations with established neurodiversity strategies and were generally intended to showcase initiatives rather than investigate their effectiveness. Therefore, they are better viewed as examples of developing practice than as evidence of widespread implementation.

The review was also intentionally limited to English-language literature published between 2014 and 2026 that focused specifically on adults with ADHD in workplace contexts. Research involving broader neurodiversity, disability, or mental health populations was included only where ADHD-specific findings could be identified. Although these criteria helped maintain a clear focus, relevant evidence published outside these boundaries have been excluded.

Finally, this review explored the relationships between workplace wellbeing, productivity, organisational practices, and accommodations. The review was not designed to establish cause-and-effect relationships. Instead, the findings should be understood as an overview of the current evidence and the patterns that emerge across the literature. Despite these limitations, integrating academic and organisational perspectives provides a more comprehensive understanding of ADHD in contemporary workplaces than either evidence base offers alone.

5.3 Avenues for Future Research

This study identifies several directions for future research. Consistent with earlier reviews, the findings underscore the need for stronger theoretical development, more rigorous and consistent methodologies, and greater attention to ADHD within workplace research (Lauder et al., 2022; Hotte-Meunier et al., 2024). Beyond reaffirming these recommendations, the present review also reveals additional knowledge gaps that remain underexplored.

Future studies should continue to investigate ADHD as a distinct workplace experience rather than relying solely on broader neurodiversity frameworks. Although neurodiversity perspectives more broadly have advanced workplace inclusion, employees with ADHD often face challenges related to their specific condition that warrant more focused investigation.

There is also a need for longitudinal and intervention-based research. There are early examples of organisations introducing neurodiversity initiatives and workplace accommodations, yet relatively little evidence has examined whether these approaches lead to sustained improvements for employees with ADHD over time. Better evaluation of organisational initiatives would strengthen confidence in the practices being adopted.

Most of the organisational literature identified in this review was produced by large multinational organisations and public sector employers with well-established inclusion strategies. Future research involving small and medium-sized enterprises, different industries, and more diverse organisational contexts would provide a fuller understanding of how ADHD is experienced and supported across the labour market.

Finally, greater attention should be given to the diversity within ADHD populations themselves. Factors such as gender, career stage, co-occurring neurodevelopmental conditions, and organisational contexts shape workplace experiences in different ways. Qualitative research could also complement existing quantitative evidence by providing richer insight into how employees navigate workplace systems, advocate for their needs, access support, and make sense of their everyday experiences.

5.4 Closing

This study sets out to examine the workplace experiences of adults with ADHD by bringing together evidence on workplace challenges, organisational responses, and employer accommodations. Exploration of both academic and organisational literature revealed a consistent message: workplace outcomes are shaped by far more than the characteristics of ADHD alone. Organisational structures, leadership practices, communication, and workplace culture all influence whether employees are able to perform effectively and experience positive wellbeing at work.

Academic and organisational literature offered different but complementary perspectives on ADHD at work. Both perspectives contribute valuable knowledge, but neither provides a complete picture in isolation. Effective workplace support requires organisations to recognise the strengths associated with ADHD while also responding to the practical challenges that many employees continue to face.

Ultimately, the evidence shows that creating more inclusive workplaces involves more than providing individual accommodations. Support is most effective when it is embedded within

organisational systems that promote flexibility, psychological safety, capable management, and well-designed work. As awareness of ADHD continues to grow, organisations have an opportunity to move beyond compliance-based approaches and create environments that recognise and support different ways of working. In doing so, workplaces improve outcomes not only for employees with ADHD, but for the wider workforce as well.

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APPENDIX

Appendix #1: Researcher Positionality and Reflexive Statement

Pre-research Reflection

This research is informed by my lived experience as a woman who was diagnosed with inattentive ADHD in my late twenties. Prior to diagnosis, I experienced recurring patterns of burnout throughout my studies and professional career and recognised a strong need for variety and task diversity in my work. I did not understand these experiences within the context of ADHD at the time, however, receiving a diagnosis provided a framework through which many of these experiences became more understandable and sparked my interest in how organisations can better support employees with ADHD. This personal connection motivated my decision to explore workplace challenges and accommodations for adults with ADHD. I begin this journey optimistic to find what works for employees with ADHD in the workplace. While I acknowledge that my experiences may have shaped an initial expectation that workplace accommodations can positively influence employee wellbeing and performance - I approach this review with reflexivity and a commitment to critically evaluating the evidence presented within the literature.

Post-Research Reflection

Reflecting on both the findings of this review, and my own experience navigating a late ADHD diagnosis and workplace accommodations during the completion of this research - there are some elements to be hopeful about and some elements that raise concern. The hopeful; 1) The conversation societally is increasing: Awareness is evolving in a mostly positive direction, 2)

Diagnosis are increasing: More diagnosis even if later in life is positive in validating lived experience and challenge with ADHD, particularly for older women, and 3) Accommodations are beginning: There are early signs of acceptance and accommodations in workplaces.

However, alongside this research I personally observed a notable gap between organisational commitments to inclusion and the practical realities of implementing these accommodations. This is a concern.

After reading the research and seeing my own and friends lived experience with ADHD in the workplace, I would argue for three main areas of change, particularly for late diagnosed women that include; Firstly, ongoing CBT support should be implemented as the highest priority accommodation to first put in place. As this support can be the mechanism and tool that helps the person with ADHD continue to advocate for their needs in an environment that is not designed for them. This emotional and accountability support is an incredibly powerful tool when coming up against the realities of many workplaces when accommodations are requested. As well as processing a new part of your identity and grief associated with how the undiagnosed condition has impacted your life. Additionally, CBT creates a therapeutic container where you can feel supported in the often long bureaucratic processes of getting your accommodations actioned. Managers and senior leaders in organisations are overloaded, and therefore ADHD accommodations can be lost in the system. Which often adds to the person with ADHD feeling even more overwhelmed to advocate for themselves in a space where they already feel challenged.

Secondly, earlier identification and diagnosis, particularly for women who have historically been underdiagnosed, should be prioritised to help reduce the cumulative effects of ADHD.

Thirdly, it could be helpful to have wider network groups that could advocate for neurodivergent workers across multiple industries due to the complexity of organisation supports.

Appendix #2: Coding table of included PRISMA articles

#	Authors / Year	Article	Research purpose / aim / setting / context	Methodology / sample / study design	Key findings	Code / Subtheme / Theme	Theoretical perspective
1	van Wijk & Firfirey 2020	South African Journal of Psychiatry: A brief screen for attention-deficit/hyperactivity disorder in the South African workplace	• To examine disclosure • Evaluate a brief DSM-5-aligned adult ADHD screening approach in a South African workplace sample and identify symptom items useful for screening. • Setting/context: South Africa; Workplace; occupational mental health surveillance initiatives; multiple sites and occupational contexts.	Quantitative Sample size = 2,048 Cross-sectional survey Secondary analysis / cross-sectional diagnostic screening study using ROC curve analysis. 2,048 full-time workers; 43.9% women; skilled labour with vocational training.	The estimated prevalence of likely DSM-5 adult ADHD was 3.2% in the occupational sample. All 18 ADHD symptoms demonstrated acceptable predictive validity and negative predictive value, although sensitivity and specificity varied. Four ADHD symptoms showed particularly strong performance in identifying likely adult ADHD. Difficulty sustaining attention and fidgetiness were the most sensitive indicators, each demonstrating sensitivity above 0.90 and negative predictive value above 0.95. These two prominent symptoms were consistent with features identified in the authors' previous occupational sample.	Codes • Executive function deficits Subthemes • ADHD symptom-specific occupational strain Themes • Workplace Strain and Cognitive Challenges	Clinical / psychiatric diagnostic; psychometric screening perspective grounded in DSM-5 criteria.
2	Grinblat & Rosenblum 2023	Work-MAP Telehealth Metacognitive Work-Performance Intervention for Adults With ADHD: Randomized Controlled Trial	Evaluate the Work-MAP telehealth metacognitive intervention for improving work performance among adults with ADHD. Setting/context: Israel; Workplace functioning intervention delivered through hybrid telehealth and face-to-face occupational therapy sessions.	Quantitative Sample size = 52 (Experimental) Randomised controlled trial Randomized controlled trial with waiting-list control; CONSORT-registered; intervention/follow-up design. 52 adults with ADHD randomized; 46 completed intervention; participants from communities across Israel. Participants received 11 weekly, 1-hour individual Work-MAP sessions, primarily delivered online, with three face-to-face sessions. Outcomes were measured pre-intervention, post-intervention and at 3-month follow-up using the COPM, BRIEF-A and Adult ADHD Quality-of-Life Questionnaire.	Structured metacognitive interventions improved occupational functioning and performance. Structured interventions and clear task expectations improved work performance. Significant improvements to participants' perceived work performance and satisfaction with self-selected work goals, executive functioning, and quality of life improvements maintained at 3-month follow-up. Work-goal performance and satisfaction showed strong effects. Executive functioning improved with moderate-to-strong effects. Participants commonly targeted work challenges involving deadlines and creating/managing daily and weekly routines.	Codes • Structured supports / workplace interventions • Structure and environment supports • Job Design and organisational structure as performance moderators Subthemes • Coaching and executive skill supports improve functioning • Self-Advocacy and humanistic support mechanisms Themes • Agency and Advocacy • Person-Environment Fit	Person–Environment–Occupation–Performance (PEOP) model and dynamic Interactional Model of Cognition, Within an occupational therapy framework.

3	Park et al. 2024	Young Adult Career Outcomes for Adolescents With ADHD, High Ability, or Twice-Exceptionality	Examine young adult career outcomes for adolescents with ADHD, high ability, or twice-exceptionality using longitudinal data. Setting/context: Educational-to-career transition context; school-based cohort followed into adult career outcomes.	Longitudinal secondary data analysis using Add Health waves. Sample: Nationally representative U.S. adolescent cohort from Add Health; students originally in Grades 7–12 followed into young adulthood.	Depression symptoms negatively impact educational aspiration and perceived social class in individuals with ADHD. School attachment positively influences educational aspiration and reduces anxiety and depression, supporting long-term career outcomes. Educational aspiration and attainment pathways (GPA, postsecondary education) strongly predict occupational status and career outcomes.	Codes • Burnout and fatigue from ADHD symptoms • Career pathways / employment trajectories Subthemes • Comorbid mental health challenges • Occupational fit and career self-selection • Reduced health-related quality of life Themes • Workplace Strain and Cognitive Challenges	Developmental / life-course and career trajectory perspective.
4	Nakai et al. 2022	Working Conditions, Work Productivity, Quality of Life, and Depressive Symptoms in Undiagnosed Adults with and without ADHD Symptoms During the COVID-19 Pandemic	Compare working conditions, productivity, quality of life and depressive symptoms among undiagnosed adults with and without ADHD symptoms. Setting/context: Japanese workforce; Online healthcare/panel survey; employment and work productivity context during COVID-19.	Quantitative Observational panel survey Sample size = 1,891 Observational web-based survey using baseline panel data and follow-up targeted survey. Adults from Medilead Healthcare Panel who completed surveys and ADHD screening. Japan	Participants with ADHD symptoms were more likely to change employers or transfer jobs than those without ADHD symptoms. ADHD symptoms were associated with reduced working hours and greater employment instability during the COVID-19 pandemic. Higher ADHD symptom severity was associated with greater work productivity impairment. Work productivity improved during the pandemic for participants with and without ADHD symptoms, although those with higher ADHD symptoms continued to report greater impairment. •Unemployment rates did not significantly differ between participants with and without ADHD symptoms during the pandemic.	Codes • Comorbid mental health challenges •Reduced health-related quality of life •Absenteeism, turnover •Career pathways / employment trajectories •Work performance difficulties Subthemes • Comorbid mental health challenges • Reduced health-related quality of life • Performance perceptions and advancement constraints Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression	Occupational health / clinical symptom perspective.
5	Anker et al. 2019	Work participation in ADHD and associations with social characteristics, education, lifetime depression, and ADHD symptom severity	Examine work participation among adults with ADHD and associations with social characteristics, education, lifetime depression and ADHD symptom severity. Setting/context: Private outpatient ADHD clinic in Oslo; work participation examined as an outcome.	Study design: Cross-sectional clinical sample study. Sample size: N = 813 adult patients with ADHD. Inclusion/diagnosis: Participants met DSM-IV diagnostic criteria for ADHD. Recruitment period: 2005–2017. Setting: Private specialised ADHD outpatient clinic in Oslo, Norway. Recruitment: 1,050 eligible patients were invited; 813 (77.4%) were included. Patients were self-referred (54.5%) or referred by GPs, specialists or neuropsychologists (45.5%).	59.7% of adults with ADHD were participating in paid work, with significantly higher work participation among men than women. Lifetime depression was associated with significantly lower work participation, including after adjustment for other factors. Work participation was significantly associated with social characteristics, including being married/cohabiting and living with children. Higher education was associated with greater work participation, particularly among participants with more than 15 years of education. ADHD symptom severity and ADHD subtype were not significantly associated with work participation, suggesting employment participation was more strongly associated with social, educational and	Codes • Comorbid mental health challenges • Career Pathways / employment trajectories • Gender differences in symptom severity Subthemes • Reduced health-related quality of life • Performance perceptions and advancement constraints • Occupational fit and career self-selection Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression • Person–Environment Fit	Clinical psychiatric / epidemiological perspective on functional outcomes.

					mental-health factors than ADHD symptom severity itself.		
6	Hedlund & Jordal 2025	What about neurodiversity among nurses? A cross-sectional exploration of work environment and health among nurses with ADHD and/or autism	Explore work environment and health among registered nurses with ADHD and/or autism. Setting/context: Sweden; Nursing workplaces; online recruitment through Swedish Facebook groups for nurses with ADHD/autism.	Quantitative Sample size N = 99 Cross-sectional survey Cross-sectional correlational study following STROBE guidance. Registered nurses with confirmed ADHD and/or autism diagnosis; target at least 85 nurses. Sweden	Nurses reported high work demands, alongside relatively low workplace community, managerial support, and perceived health. Higher inattention was significantly associated with greater perceived quantitative work demands. Inattention remained a significant predictor of perceived work demands after accounting for diagnosis and long-term sick leave. ADHD traits were more informative than diagnostic category in explaining perceived quantitative work demands. Despite high work demands and relatively low organisational support, nurses reported high satisfaction with the care they provided.	Codes • Executive function deficits • Comorbid mental health challenges • Reduced health-related quality of life • Absenteeism, turnover • Career pathways / employment trajectories • Work performance difficulties Subthemes • ADHD symptom specific occupational strain Reduced health-related quality of life Performance perceptions and advancement constraints Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit	Occupational health / neurodiversity in nursing workplace perspective.
7	Schein et al. 2023	Symptoms associated with ADHD/treatment-related adverse side effects and their impact on quality of life and work productivity in adults with ADHD	Examine the relationship between ADHD symptom burden and work productivity, employment, and quality of life Assess symptoms/adverse side effects associated with ADHD treatment and their impact on quality of life and work productivity among treated adults with ADHD. Setting/context: US; Online survey panel; adult ADHD treatment and work productivity context.	Quantitative Sample size = 585 adults with ADHD Cross-sectional survey Online cross-sectional survey Sample/recruitment = Adults with ADHD receiving ADHD medication in the United States, recruited through the Dynata market research panel Data collection = 26–30 July 2021 Analysis = Linear regression analyses examining associations between ADHD/treatment-related symptoms and QoL, employment, and work impairment	Adults with ADHD experienced an average of six concurrent symptoms. Greater symptom burden associated with a lower likelihood of being employed. Having more symptoms was linked to greater work and everyday activity impairment. People with more symptoms reported a lower quality of life. Sleep problems and difficulty managing emotions were linked to poorer quality of life. Sleep problems and difficulty managing emotions, made it harder to be productive and stay in work. Having more symptoms was linked to greater work and everyday activity impairment. People with more symptoms were less likely to be employed.	Codes • Executive function deficits •Reduced health-related quality of life •Relational conflict & performance issues •Career pathways / employment trajectories •Absenteeism and turnover intentions Subthemes •ADHD symptom specific occupational strain • Reduced health-related quality of life •Performance perceptions and advancement constraints •Occupational fit and career self-selection Themes • Workplace Strain and Cognitive Challenges •Barriers to Workplace Performance and Progression •Person–Environment Fit	Clinical treatment / health outcomes perspective.

8	Tromans et al. 2023	A survey of the workplace experiences of police force employees who are autistic and/or have attention deficit hyperactivity disorder	To investigate workplace experiences, benefits, challenges, support and career progression among police employees who are autistic and/or have ADHD. Setting/context: Police force workplace; UK police forces and National Police Autism Association networks.	Mixed-methods online survey with quantitative and qualitative elements. Sample size = 117 UK-based police force employees; 66 identified as autistic and 51 as having ADHD (including 17 identifying as both). Participants were recruited through email invitations to National Police Autism Association (NPAA) members and UK-based police forces, and through the NPAA newsletter. Online survey covering perceived benefits and challenges of autistic/ADHD features at work, colleagues' awareness of diagnosis, workplace support and adjustments, understanding of needs, colleague/public understanding, career progression, demographics, and co-occurring mental and physical health conditions.	Challenges with intensity of the role, workload, social interactions and burnout. 78% reported benefits from ADHD characteristics in police work, particularly variety and challenge. Employees reported organisational barriers to career progression, including promotion processes and inadequate support. 72% reported needing workplace adjustments; 51% requested them, but only 35% of requests were implemented. Workplace adjustments were frequently requested but not provided. Fear of stigma, inadequate support, and career consequences discouraged ADHD disclosure. Poor leadership, limited ADHD knowledge, workload, and bureaucracy contributed to workplace difficulties.	Codes • Executive function deficits •Structure and environment supports •Workplace accommodations •Stigma in the workplace for disclosure •Burnout and fatigue from ADHD symptoms • Career pathways / employment trajectories • Managerial knowledge and support gaps Subthemes •ADHD symptom specific occupational strain •Job design and organisational structure as performance moderators •Organisational knowledge gaps and •Leadership support for ADHD accommodations •Occupational fit and career self-selection •Performance perceptions and advancement constraints Themes •Workplace Strain and Cognitive Challenges •Person–Environment Fit •Organisational Barriers and Support Gaps •Barriers to Workplace Performance and Progression	Neurodiversity / disability workplace experience perspective.
9	Oscarsson et al. 2022	Stress and work-related mental illness among working adults with ADHD: a qualitative study	To explore stress and work-related mental illness experiences among working adults with ADHD. Setting/context: Sweden; Workplace experience context; recruited via Swedish ADHD patient interest group/social media.	Qualitative Sample size = 20 Qualitative study using in-depth interviews and purposive stratified sampling. 20 adults with ADHD; half women/half men; ADHD diagnosis; working at least half-time with at least three years full-time equivalent work experience.	Fear of negative judgement influenced workplace engagement and contributed to reduced performance and participation. Under-stimulating work environments contributed to disengagement and reduced job satisfaction.	Codes • Executive function deficits • Burnout and fatigue from ADHD symptoms • Relational conflict & performance issues • Structure and environment supports • Absenteeism, turnover Self-advocacy and agency Subthemes • ADHD symptom specific occupational strain • Cumulative workplace strain and burnout • Performance perceptions and advancement constraints • Job design and organisational structure as performance moderators Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression • Person–Environment Fit	Qualitative lived-experience / occupational stress perspective.

10	Hotte-Meunier et al. 2024	Strengths and challenges to embrace attention-deficit/hyperactivity disorder in employment—A systematic review	Systematically review strengths and challenges associated with ADHD in employment outcomes among adults. Setting/context: Not applicable; Review of employment-related ADHD literature; not a primary setting.	Review Sample size = not applicable Systemic review Systematic literature review following PRISMA 2020; OSF-registered protocol. Adults with ADHD represented across included employment-outcome studies.	Executive functioning difficulties affected organisation, time management, memory, prioritisation, and task completion. Hyperactivity and impulsivity contributed to restlessness and problematic workplace behaviours, while symptom regulation could be exhausting. Workplace fit influenced job satisfaction, performance and job retention, with stimulating, flexible and autonomous environments better suited to some employees with ADHD. Shame, self-stigma, and fear of being perceived as incompetent contributed to nondisclosure. Quiet spaces, flexible hours, assistive tools, and interpersonal support helped employees manage workplace demands. Inattention, impulsivity, and social difficulties affected workplace relationships and colleagues' perceptions. Employees reported lower job satisfaction, with person–environment fit influencing satisfaction, performance, and retention. ADHD characteristics could provide strengths, including creativity, resilience, hyperfocus, and empathy, when supported by the work environment.	Codes • Executive function deficits • ADHD traits influence occupational pathway selection • Stigma in the workplace for disclosure • Structure and environment supports • Relational conflict & performance issues Subthemes • ADHD symptom specific occupational strain • Occupational fit and career self-selection • Organisational knowledge gaps and leadership support for ADHD accommodations • Job design and organisational structure as performance moderators • Performance perceptions and advancement constraints Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit • Organisational Barriers and Support Gaps • Barriers to Workplace Performance and Progression	Employment / occupational functioning review perspective; broad biopsychosocial /neurodiversity-compatible lens.
11	Glynn & Schaller 2017	Predictors of employment outcomes for transition-age state-federal vocational rehabilitation consumers with attention-deficit/hyperactivity disorder	Identify predictors of successful employment outcomes among transition-age vocational rehabilitation consumers with ADHD. Setting/context: U.S. state-federal vocational rehabilitation system.	Correlational secondary analysis of RSA-911 administrative data. Sample: VR consumers with primary disability of ADHD who exited the program in FY2012; White, Hispanic or African American; successful/unsuccessful employment outcomes.	Employment-focused vocational rehabilitation services (job search assistance, job placement, and on-the-job supports) significantly increase likelihood of successful employment in individuals with ADHD. Demographic factors, including race/ethnicity, significantly influence employment outcomes, with disparities observed across groups. Reliance on public or informal support (e.g., family/friends) at application is negatively associated with successful employment outcomes.	Codes • Structure and environment supports • Career pathways / employment trajectories • Workplace accommodations Subthemes • Occupational fit and career self-selection • Job design and organisational Themes • Person–Environment Fit	Vocational rehabilitation / transition-to-work perspective.

12	Baric et al., 2017	The Occupational Transition Process to Upper Secondary School, Further Education and/or Work in Sweden: As Described by Young Adults with Asperger Syndrome and Attention Deficit Hyperactivity Disorder	Understand the occupational transition process to upper secondary school, further education and/or work among young adults with AS or ADHD. Setting/context: Sweden; Community/municipality services; transition to education and work; work experience through individual placements in regular workplaces.	Study type: Qualitative phenomenological study Participants: 15 young adults in Sweden 5 with ADHD 10 with Asperger syndrome Age: 20–29 years Data collection: Individual semi-structured interviews Analysis: Qualitative content analysis Qualitative interview study analysed using a hermeneutical approach. Young adults with primary diagnosis of AS or ADHD recruited through municipality services in mid-east Sweden.	Difficulties with planning, organisation and managing stress made it harder for some participants to find and maintain employment. Stress, anxiety and emotional distress could make it harder for participants to remain in employment or education. Participants experienced repeated education and unsuccessful employment while seeking suitable work or study. Ongoing workplace support strengthened practical skills, confidence, and employment retention, while broader support assisted routines and wellbeing. Support beyond the workplace was highlighted for daily routines and emotional wellbeing influencing their motivation and capacity for work. Individualised career planning helped participants identify strengths, interests, and suitable education and employment goals.	Codes • Executive function deficits • Career pathways / employment trajectories • Structure and environment supports •Coaching and executive functioning supports •ADHD symptom specific occupational strain Subthemes • Occupational fit and career self-selection • Job design and organisational structure as performance moderators •Coaching, behavioural and self-management supports Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit • Agency and Advocacy	Hermeneutic qualitative / occupational therapy perspective; person-occupation-environment lens.
13	Joseph et al. 2019	Health-Related Quality of Life and Work Productivity of Adults With ADHD: A U.K. Web-Based Cross-Sectional Survey	Examine quality of life and productivity in ADHD Setting/context: UK; Online patient-community survey in the UK; work productivity measured rather than single workplace site.	Cross-sectional survey Quantitative Sample size = 233 18 to 55 year olds Web-based cross-sectional survey plus telephone-administered ADHD severity assessment. Adults resident in the UK reporting formal ADHD diagnosis and meeting DSM-5-aligned adult ADHD screening criteria; planned sample 300.	Women with ADHD report higher levels of work-related impairment. Greater ADHD symptom severity was significantly associated with poorer health-related quality of life (HRQoL). Employed participants reported substantial occupational impairment, including 15.7% work time missed and 45.7% overall work impairment due to health problems. Greater ADHD symptom severity was associated with greater daily activity impairment. Participants with chronic medical comorbidities experienced significantly greater impairment while working. Women reported greater ADHD symptom severity and work and daily activity impairment than men.	Codes • Reduced health-related quality of life ADHD symptom specific occupational strain Gender differences in symptom severity • Absenteeism, turnover • Relational conflict & performance issues Subthemes • Psychological distress and burnout • ADHD symptom specific occupational strain • Performance perceptions and advancement constraints Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression	Clinical / health outcomes and occupational productivity perspective.

14	Dipeolu et al., 2015	Enhancing ADHD and LD Diagnostic Accuracy Using Career Instruments	Examine workplace challenges and diagnostic indicators in ADHD Examine whether career instruments can enhance diagnostic accuracy for ADHD and learning disabilities. Setting/context: High school / educational transition setting, not workplace.	Study design/type: Quantitative comparative assessment study Sample size: 258 Population: High school students Groups: 119 students with ADHD; 139 students with learning disabilities Setting: United States; high school/school district setting Qualitative component: None Interviews: No	Young people with ADHD and learning disabilities showed different patterns of career decision-making and career readiness. Decision-making confusion, external conflict and career readiness were the strongest factors distinguishing the ADHD and learning-disability groups. Commitment anxiety and vocational identity contributed less strongly to differences between the ADHD and learning-disability groups.	Codes • Career Pathways / employment trajectories Subthemes • Occupational fit and career self-selection Theme • Person–Environment Fit	Career development / vocational assessment and diagnostic differentiation perspective.
15	Anker et al. 2018	Comorbid psychiatric disorders in a clinical sample of adults with ADHD, and associations with education, work and social characteristics: a cross-sectional study	Examine comorbid psychiatric disorders among adults with ADHD and associations with education, work and social characteristics. Setting/context: Norway; Private outpatient ADHD clinic in Oslo; employment/work characteristics assessed as outcomes.	Cross-sectional clinical study Quantitative Sample size = 548 Cross-sectional clinical sample study. 548 adult ADHD patients meeting DSM-IV criteria; recruited 2005–2015.	Half of participants had at least one comorbid psychiatric disorder, and approximately one quarter had two or more. The most common psychiatric comorbidities were major depression, substance abuse/dependence, and social phobia. Participants with combined-type ADHD had significantly higher rates of psychiatric comorbidity than those with predominantly inattentive ADHD. Higher work participation was associated with a lower probability of psychiatric comorbidity. Work participation was specifically associated with lower rates of major depression, substance abuse/dependence, and PTSD.	Codes • Comorbid mental health challenges • ADHD symptom specific occupational strain • Gender differences in symptom severity Subtheme • Psychological distress and burnout • ADHD symptom specific occupational strain Themes • Workplace Strain and Cognitive Challenges	Clinical psychiatric / comorbidity perspective.
16	Kercood, et al.,; 2017	Cognitive Flexibility and Its Relationship to Academic Achievement and Career Choice of College Students With and Without Attention Deficit Hyperactivity Disorder	Examine cognitive flexibility in relation to academic achievement and career choice among college students with and without ADHD. Setting/context: University/college campus; academic and career-choice context.	Study design: Quantitative comparative, cross-sectional study. Sample: 55 college students aged 18+ with and without ADHD; recruited through campus posters, online campus announcements, emails via the university's Student Disabilities Services (SDS), and the Department of Psychology research participation system. Important detail: Students in the ADHD group had to provide documentation of a current ADHD diagnosis; students with verbal or non-verbal learning disabilities were excluded.	Greater inattention and ADHD symptoms were associated with lower cognitive flexibility. Among participants with ADHD, cognitive flexibility was associated with career confidence, although it was not associated with choice or number of academic pathways pursued.	Codes • Executive function deficits • ADHD traits influence occupational pathway selection Subthemes • ADHD symptom specific occupational strain • Occupational fit and career self-selection Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit	Cognitive / executive functioning and career choice perspective.

17	Nagata et al. 2019	Effect Modification by Attention Deficit Hyperactivity Disorder (ADHD) Symptoms on the Association of Psychosocial Work Environments With Psychological Distress and Work Engagement	Examine whether ADHD symptoms modify associations between psychosocial work environments, psychological distress and work engagement. Setting/context: Not reported; Single pharmaceutical company workplace.	Quantitative Sample size = 2,693 Observational study Cross-sectional self-administered employee questionnaire study. Employees of a pharmaceutical company; questionnaires distributed to all employees (n = 4,738).	5.9% of workers screened positive for ADHD symptoms in the study sample. Job control significantly moderated the relationship between ADHD symptoms and psychological distress. Social support also significantly moderated the relationship between ADHD symptoms and psychological distress. Job control and social support were more strongly associated with psychological distress at higher ADHD symptom levels. Work environment factors did not significantly moderate work engagement, and job demands did not interact with ADHD symptoms to predict distress.	Code • Structure and environment supports • Workplace accommodations • Burnout and fatigue from ADHD symptoms Subtheme • Job design and organisational structure as performance moderators • ADHD symptom specific occupational strain Themes • Person–Environment Fit • Workplace Strain and Cognitive Challenges	Occupational stress / psychosocial work environment perspective; NIOSH job stress model via BJSQ.
18	Patel et al. 2021	Attention Deficit Hyperactivity Disorder (ADHD) and Earnings in Later-Life Self-Employment	Examine ADHD genetic liability in relation to later-life self-employment and earnings. Setting/context: Population panel / labour-market and self-employment context.	Study design: Longitudinal secondary data analysis using U.S. Health and Retirement Study (HRS) panel data merged with an ADHD polygenic risk score (PRS). Sample: 7,905 working individuals of European ancestry aged 50–65, representing 31,546 individual-year observations.	Higher ADHD genetic risk was associated with greater likelihood of self-employment. Self-employment mediated a substantial proportion of the association between ADHD genetic risk and lower earnings. Higher ADHD genetic risk was associated with lower earnings overall. Self-employment explained much of the relationship between ADHD genetic risk and lower earnings. There was limited evidence that self-employment provided an economic advantage for people with higher ADHD genetic risk.	Codes • Career pathways / employment trajectories Subthemes • Occupational fit and career self-selection Themes • Person–Environment Fit	Entrepreneurship / labour economics with genetic/biometric ADHD risk perspective.
19	Steele et al. 2021	The Advantage of Disadvantage: Is ADHD Associated with Idea Generation at Work?	Examine whether ADHD symptoms are associated with idea generation at work and potential mediating mechanisms. Setting/context: Online panel of employed adults; workplace creativity/job context.	Study design: Cross-sectional online survey with mediation analysis. Sample: 258 employed adults from Israel; 51% female. Recruitment: Online panel company in Israel. Mean age: 39.53 years (SD = 9.48). Employment: Participants worked across a wide variety of occupations.	Higher ADHD symptoms were associated with greater work-related discrepancies, where work situations did not unfold as expected or planned. Greater work-related discrepancies were associated with greater idea generation. Higher ADHD symptoms were associated with lower perceived meaningfulness of work. Greater work meaningfulness was associated with greater idea generation.	Codes • Executive function deficits Subthemes • ADHD symptom specific occupational strain • Job design and organisational structure as performance moderators Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit	Organisational psychology / creativity at work perspective; ADHD symptoms as continuous traits.

20	Van Wijk, 2019	Adult ADHD in the South African workplace: the usefulness of a self-report screening measure and preliminary prevalence estimates	Assess usefulness of a self-report ADHD screening measure and estimate preliminary ADHD prevalence in South African workplace populations. Setting/context: Workplace; different sites and occupational contexts in South Africa.	Cross-sectional workplace survey / screening measure validation context. Sample: 1,917 full-time workers; skilled labour with vocational training/formal employer-provided training.	The AASS-5 demonstrated good internal reliability and predictive validity for identifying ADHD symptoms. Estimated ADHD prevalence in the occupational sample ranged from 1.7% to 3.3%, depending on the scoring method used. There were no significant differences in estimated ADHD prevalence between women and men. Younger workers appeared to show somewhat higher ADHD prevalence than older workers, particularly for hyperactivity-impulsivity symptoms. ADHD prevalence appeared to vary across fields of work, although this finding was considered tentative due to unequal group sizes and methodological limitations.	Codes • ADHD traits influence occupational pathway selection Subthemes • Occupational fit and career self-selection Themes • Person–Environment Fit	Clinical / psychiatric diagnostic screening; psychometric and prevalence perspective.
21	Verheul et al. 2016	The association between attention-deficit/hyperactivity (ADHD) symptoms and self-employment	Examine associations between ADHD symptoms and self-employment using Swedish twin data and related measures. Setting/context: Population-representative twin registry; self-employment labour-market context.	Study design: Secondary data analysis using the Swedish Twin Registry STAGE cohort; replicated using the Dutch GUESSS student sample. Sample: STAGE cohort: 7,208 participants (58% female; mean age = 43.9 years) after restricting to participants with self-employment data and randomly removing one twin from each pair. Initial STAGE respondents: 25,364 respondents (59.6% response rate; 56% female) from 42,582 Swedish twins born 1959–1985 who were invited to participate. Replication sample: GUESSS Netherlands: 13,119 students (56% female; mean age = 22.96 years), including 374 student entrepreneurs.	Hyperactivity symptoms are positively associated with self-employment across both samples. Attention-deficit symptoms show no or negative association with self-employment. General ADHD symptoms are positively associated with self-employment in the Swedish sample, but this association was not replicated in the Dutch sample. ADHD symptoms are associated with an increased likelihood of unemployment. ADHD symptoms show no significant association with wage employment.	Codes • Career pathways / employment trajectories • ADHD traits influence occupational pathway selection Subthemes • Occupational fit and career self-selection Themes • Person–Environment Fit	Entrepreneurship / labour economics with ADHD symptoms and genetic/epidemiological perspective.

22	Fuermaier et al. 2021	ADHD at the workplace: ADHD symptoms, diagnostic status, and work-related functioning	To examine work-related impairment Setting/context: Community and clinical samples; Community online panel and clinical diagnostic setting; work-related functioning assessed.	Quantitative Sample size = 134 Cross-sectional comparative design S = Community + clinical samples Quantitative comparative study using community sample, ADHD symptom subgroup, matched comparison group and diagnosed ADHD patient sample. Community sample of 1,231 adults plus 134 diagnosed ADHD patients; matched comparison group of 268.	Adults diagnosed with ADHD reported significantly more work-related problems than the community comparison group across almost all work domains. 69% of adults with ADHD reported multiple work-related problems, compared with most of the community sample reporting no or only one problem. 55–69% reported difficulties working efficiently and performing to their perceived potential. Work impairment was associated with ADHD symptoms, particularly inattention. Objective neuropsychological performance did not significantly predict work impairment.	Codes • Executive function deficits • Relational conflict & performance issues • Absenteeism, turnover • ADHD symptom specific occupational strain Subthemes • ADHD symptom specific occupational strain • Performance perceptions and advancement constraints Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression	Clinical neuropsychology / occupational functioning perspective.
23	Blondel et al. 2025	Thriving for Nothing? The Hidden Costs of Thriving for Employees With Attention Deficit Hyperactivity Disorder and Their Employers	Examine antecedents and costs/outcomes of thriving for employees with ADHD and their employers. Setting/context: Not reported; Workplace context measured through online survey of employed adults with ADHD.	Study type: Quantitative Study design: Cross-sectional online survey Recruitment: Prolific online panel Sample size: 166 Sample: 166 adults diagnosed with ADHD who were currently or recently employed ≥31 hours/week Demographics: 56% male; predominantly White	Engaging, novel and meaningful work, alongside a supportive work environment, enabled employees with ADHD to thrive. Hyperfocus can lead employees with ADHD to work excessively and neglect their wellbeing. Thriving could involve successful performance but excessive workload and declining wellbeing.. Low self-regulation, self-esteem, and fear of failure contributed to cycles of overwork. Engaging work helps employees with ADHD thrive. Thriving did not necessarily support career progression, with some employees avoiding advancement or frequently changing jobs. External and managerial support helped employees regulate overwork and pursue career development.	Codes • Executive function deficits • Burnout and fatigue from ADHD symptoms • Structure and environment supports • Career pathways / employment trajectories • Self-employment, autonomy and problem-solving strategies Subthemes • ADHD symptom specific occupational strain • Burnout and fatigue from ADHD symptoms • Job design and organisational structure as performance moderators Occupational fit and career self-selection; • Performance perceptions and advancement constraints •Self-advocacy and humanistic Support Mechanisms Themes • Workplace Strain and Cognitive Challenges • Person–Environment Fit • Barriers to Workplace Performance and Progression • Agency and Advocacy	Organisational psychology / disability disclosure and thriving at work perspective.
24	Gordon & Fabiano 2019	The Transition of Youth with ADHD into the Workforce: Review and Future Directions	Review longitudinal evidence on the transition of youth with ADHD into adult occupational outcomes and identify future directions. Setting/context: Evidence synthesis of youth-to-workforce transition studies.	Narrative systematic review of longitudinal studies; no meta-analysis. Sample: 35 articles representing 19 longitudinal studies; adults 18+ with childhood ADHD diagnosis and occupational/earnings outcomes.	ADHD was associated with lower occupational attainment and employment. ADHD was associated with greater job instability, including more frequent job changes, dismissals, layoffs and quitting.	Codes • ADHD symptom specific occupational strain • Executive function deficits • Absenteeism, turnover • Relational conflict & performance issues • ADHD traits influence occupational pathway selection	Developmental transition-to-work / vocational outcomes perspective.

					Employees with ADHD showed greater workplace impairment, poorer performance, and more disciplinary action. Greater ADHD symptom severity was associated with poorer performance and greater risk of quitting or dismissal. Workplace functioning was context-dependent. Stimulating, novel, challenging, fast-paced or hands-on environments were reported to improve focus.	• Structure and environment supports Subthemes • ADHD symptom specific occupational strain • Performance perceptions and advancement constraints • Occupational fit and career self-selection job design and organisational structure as performance moderators Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression • Person–Environment Fit	
25	Lauder et al. 2022	A systematic review of interventions to support adults with ADHD at work-Implications from the paucity of context-specific research for theory and practice	Review interventions aimed at supporting adults with ADHD at work and consider implications given limited work-specific evidence. Setting/context: Various international adult ADHD intervention contexts, predominantly clinical, healthcare, university and research settings; no included interventions were specifically designed for workplace settings.	Systematic review / realist synthesis Sample size = 143 included studies; expert panel N = 4 Systematic review of adult ADHD interventions with expert panel consultation and content analysis. Included primary intervention studies involving adults aged 18+ with a formal ADHD diagnosis; expert panel included employment-support practitioners, an ADHD researcher and a psychoanalyst, with two panel members reporting lived experience of ADHD.	Very little ADHD intervention research has been conducted specifically in workplace settings. Most adult ADHD interventions focus on reducing symptoms rather than improving employment or workplace outcomes. Pharmacological interventions dominate the evidence, while workplace psychosocial interventions remain understudied. Psychoeducation may improve ADHD knowledge, executive functioning, organisation, and time management. Coaching and skills-based interventions may support everyday functioning. Supportive others may strengthen employment, organisational, relationship, and self-esteem outcomes. Employment-specific outcomes and workplace contexts are rarely assessed. Exclusion of co-occurring conditions may limit real-world applicability.	Codes • Workplace accommodations • Coaching and executive skill supports improve functioning Sub-themes • Organisational knowledge gaps and leadership support for ADHD accommodations • Self-advocacy and humanistic Support Mechanisms Themes • Organisational Barriers and Support Gaps • Agency and Advocacy	Workplace intervention / CIMO framework; expert-informed realist-style/context-mechanism-outcome orientation.
26	McIntosh et al. 2023	Thriving at work with ADHD: antecedents and outcomes of proactive disclosure	Examine antecedents and outcomes of proactive ADHD disclosure at work. Setting/context: Workplace; online survey of employed adults with ADHD examining disclosure, stigma consciousness, psychological safety, job demands and thriving at work.	Quantitative Sample size = 166 Quantitative survey Cross-sectional online survey via Prolific.	Higher stigma concerns reduced the likelihood of employees disclosing their ADHD at work. Psychological safety increased likelihood of disclosure, while organisational climate was more influential than workload. Job demands did not significantly influence ADHD disclosure.	Codes • Stigma in the workplace for disclosure Subthemes • Organisational knowledge gaps and leadership support for ADHD accommodations	Disability disclosure / organisational psychology perspective.

				166 adults diagnosed with ADHD, currently or within the previous six months working at least 31 hours/week; 56% male.	Proactive ADHD disclosure was associated with greater thriving, including feeling more energetic and able to learn and grow at work. Employees often concealed ADHD because they feared being viewed as lazy, unfocused or unprofessional. Psychological safety supported thriving partly through proactive disclosure. Stigma consciousness was indirectly associated with lower thriving through disclosure.	• Self-advocacy and humanistic support Mechanisms Themes • Organisational Barriers and Support Gaps • Agency and Advocacy	
27	Olinover et al. 2022	Strategies for improving decision making of leaders with ADHD and without ADHD in combat military context	Examine decision-making strategies among leaders/candidates with and without ADHD in a combat military context. Setting/context: Not reported; Israel Defense Force combat units / officer candidate context.	Quantitative Quantitative correlational design Sample size = 112 Quantitative comparative study with military situational judgment tests. 1,301 combat squad commanders/candidates for officer role; 112 identified as having ADHD; 87.9% male.	ADHD diagnosis alone did not significantly predict leadership decision-making performance. Working in isolation improved decision-making regardless of ADHD status. Face-to-face interaction had a stronger positive effect on performance for leaders with ADHD. Externally structured conditions may support performance among leaders with ADHD. A 12-second delay did not improve performance beyond face-to-face interaction.	Codes • Structure and environment supports • Workplace accommodations Subthemes • Job design and organisational structure as performance moderators Themes • Person–Environment Fit	Military leadership / cognitive decision-making perspective; situational judgment testing.
28	Sarkis 2014	Addressing Attention-Deficit/Hyperactivity Disorder in the Workplace	Review literature relevant to ADHD, work productivity, work and coaching in workplace contexts. Setting/context: Workplace-focused literature review; no primary data setting.	Narrative review Sample size = not applicable Narrative review Narrative literature review. Not applicable; review of published literature and selected references.	Inattention and related social-functioning difficulties can contribute to poorer occupational outcomes. Executive function difficulties can affect organisation, time management, task completion, and performance. Hyperactivity and impulsivity can contribute to workplace interpersonal difficulties. ADHD symptoms can affect relationships, task completion, punctuality, attendance, and responsibilities. ADHD was associated with lower employment, shorter job tenure, turnover, absenteeism, and reduced productivity. Flexible scheduling, reduced distractions, structure, supervisor support, and planning tools were recommended accommodations.	Codes • Executive function deficits • Relational conflict & performance issues • Structure and environment supports Absenteeism and turnover intentions • Career Pathways / Employment Trajectories • Workplace accommodations Subthemes • ADHD symptom specific occupational strain • Performance perceptions and advancement constraints • Occupational fit and career self-selection • Job design and organisational structure as performance moderators Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression • Person–Environment Fit	Clinical and workplace accommodation perspective; strengths-based coaching approach.

29	Schreuer & Dorot 2017	Experiences of employed women with attention deficit hyperactive disorder: A phenomenological study	Explore lived workplace experiences of employed tertiary-educated women with ADHD. Setting/context: Israel; Participants' physical and human workplaces; employed women across professional roles in Israel.	Qualitative Sample size = 11 Phenomenological study Qualitative phenomenological study using thematic analysis of in-depth interviews. 11 employed women with documented ADHD diagnosis; tertiary educated; no other self-reported disability/health issue.	Women with ADHD reported sensory, emotional regulation, time management, and workplace expectation difficulties (e.g. social or hierarchy). ADHD-related difficulties contributed to conflict, dismissal, missed promotions, job changes, and unsuitable employment. Participants needed both structure and flexibility, autonomy, and individualised work practices. Self-management strategies included suitable job selection, flexible working, stimulating jobs, self-talk, breaks, reminders, task lists, adapting work habits, and external assistance. Helpful supports included quiet workspaces, clear instructions, supportive cultures, mentoring, goals, employer awareness and colleague assistance. Understanding of ADHD needs was helpful, while lack of managerial awareness and rigid workplace norms could hinder performance. ADHD-related strengths included creativity, problem-solving, energy, and managing complexity.	Codes • Executive function deficits • Relational conflict and workplace performance issues • ADHD influences occupational pathway selection • Self-employment, autonomy and problem-solving strengths • Workplace structure and environment supports • Workplace accommodations • Managerial knowledge and support gaps • Coaching and executive functioning supports • Self-employment, autonomy and problem-solving strengths Subthemes • ADHD symptom-specific occupational strain • Performance perceptions and advancement constraints • Occupational fit and career self-selection • Job design and organisational structure as performance moderators • Organisational knowledge gaps and leadership support for ADHD accommodations • Coaching, behavioural and self-management supports • Self-advocacy and humanistic support Mechanisms Themes • Workplace Strain and Cognitive Challenges • Barriers to Workplace Performance and Progression • Person–Environment Fit • Organisational Barriers and Support Gap • Agency and Advocacy	Phenomenological qualitative perspective; inductive personal-knowledge paradigm.
30	Turjeman-Levi et al. 2024	Executive function deficits mediate the relationship between employees' ADHD and job burnout	Test whether executive function deficits mediate the relationship between employee ADHD symptoms and job burnout. Setting/context: Online worker survey via Prolific Academic during the COVID-19 pandemic; participants from mixed occupational contexts including sales, office administration and education.	Quantitative Sample size = 171 Cross-sectional (mediation analysis) Cross-sectional online survey with mediation analysis. 171 employed participants after excluding out-of-work/retired respondents; 60.48% female.	Employees with ADHD experienced significantly higher job burnout than employees without ADHD. Employees with ADHD experienced greater executive function difficulties than employees without ADHD. Executive function difficulties partly explained why employees with ADHD experienced higher job burnout.	Codes • Executive function deficits • Burnout and fatigue from ADHD symptoms Subthemes • ADHD symptom specific occupational strain • Burnout and fatigue from ADHD symptoms Themes: • Workplace Strain and Cognitive Challenges	Executive functioning / occupational burnout mediation perspective.

					Time management and organisation/problem-solving difficulties mediated ADHD-related job burnout. Time-management difficulties were associated with greater physical fatigue. Organisation/problem-solving difficulties were associated with emotional exhaustion and cognitive weariness.		
31	Wolfe et al. (2025) Portuguese private firms; organisational context with individual employment-choice outcomes.	On an even keel: Temporal balance, ADHD, and self-employment.	Investigate whether temporal balance shapes the relationship between ADHD symptoms and choice of self-employment versus wage employment. Setting/context: Portuguese private-sector employment context; respondents from firms across multiple industries, comparing self-employed and wage-employed individuals.	Quantitative Sample size = 864 Cross-sectional survey Cross-sectional quantitative online survey. Online survey of individual respondents within Portuguese private firms; quantitative analysis of self-employment versus wage-employment choice. 864 complete responses; 510 self-employed and 354 wage-employed.	Higher hyperactivity/impulsivity was associated with self-employment. Temporal balance strengthened the relationship between hyperactivity/impulsivity and self-employment. Inattention was not significantly associated with self-employment. Temporal balance did not moderate the relationship between inattention and self-employment. ADHD symptoms and temporal balance did not predict firm financial performance. Higher inattention was associated with lower temporal balance. ADHD characteristics varied across types of self-employment.	Codes • Career pathways / employment trajectories • ADHD traits influence occupational pathway selection Subthemes • Occupational fit and career self-selection Themes • Person–Environment Fit	Entrepreneurship / temporal balance and self-employment decision-making perspective.
32	O'Reilly, Tromans & Drewett, 2026. UK policing; police officers	The benefits and challenges of autistic police force employees and those with ADHD supporting neurodivergent colleagues and neurodivergent victims, witnesses and suspects	Explore autistic police officers/staff and those with ADHD's views on the benefits and challenges of neurodivergent police supporting neurodivergent colleagues and members of the public. Setting/context: UK policing; police force employees across UK police forces, with recruitment supported through the National Police Autism Association (NPAA).	Qualitative Sample size = 37 Qualitative interview study Online reflective interviews; reflexive thematic analysis. 37 UK police force employees who were autistic and/or had ADHD.	Lived experience helped neurodivergent police employees support neurodivergent members of the public. Employees used lived experience to support neurodivergent colleagues and establish support groups. Poor organisational understanding contributed to workplace difficulties and nondisclosure. Existing ADHD and autism training lacked sufficient depth and specificity. Participants supported mandatory neurodiversity training to improve organisational support. Neurodivergent employees advocating for organisational change and greater awareness.	Codes • Lived experience training vs non lived • Stigma in the workplace for disclosure • Managerial support lacking • Structure and environment supports Subthemes • Self-Advocacy and humanistic support mechanisms • Organisational knowledge gaps and leadership support for ADHD accommodations Themes • Agency and Advocacy • Organisational Barriers and Support Gaps	Reflexive thematic analysis; double empathy problem is used to interpret the value of shared neurodivergent experience.

					Participants recommended involving neurodivergent employees in training. Organisations could better use neurodivergent employees' strengths and lived experience.		
33	Vargas-Salas et al., 2025.	Neurodivergence and the Workplace: A Systematic Review of the Literature	Organise literature on neurodivergent individuals and their interaction with the work environment, identifying key challenges and opportunities for improvement. Setting/context: International workplace and employment contexts involving neurodivergent individuals; included studies were conducted across the United Kingdom, Australia, United States, Canada, Mexico, Continental Europe, Poland and Thailand.	Study design: Systematic literature review following PRISMA. Sample size = 18 studies Data sources/method: Scopus, EBSCO and Web of Science; 18 studies published between 2018–2024.	Stigma and discrimination can create employment barriers and contribute to masking and nondisclosure. Masking can contribute to stress, burnout, and poorer wellbeing. Recruitment biases and inadequate implementation of inclusive policies can disadvantage neurodivergent employees. Flexible and remote work can reduce workplace demands, although remote work may limit social and development opportunities. Neurodivergence-aware leadership, accommodations, training, and tailored support can improve workplace inclusion. Supportive environments can enable strengths including creativity, concentration, analytical thinking, and problem-solving. Neurodivergent strengths include creativity, concentration, analytical thinking, and problem-solving. Accommodations and inclusive policies may be limited by inadequate implementation.	Codes • Workplace accommodations • Structure and environment supports • Stigma in the workplace for disclosure • Managerial support lacking • Career pathways / employment trajectories Subthemes • Job design and organisational structure as performance moderators • Organisational knowledge gaps and leadership support for ADHD accommodations • Occupational fit and career self-selection Themes • Person–Environment Fit • Organisational Barriers and Support Gaps	Workplace inclusion, employment barriers and advantages/challenges of neurodivergent workers.

34	Liebel, G., Langlois, N., & Gama, K. (2024).	Challenges, strengths, and strategies of software engineers with ADHD: A case study.	To explore the workplace challenges, strengths, and coping strategies experienced by software engineering professionals with ADHD, addressing the limited ADHD-specific research within software engineering contexts	Exploratory qualitative single-case study. Semi-structured interviews with n = 19 software engineering professionals with ADHD across multiple geographic regions and roles. Data analysed iteratively using in-vivo coding and grouped into categories, with member checking undertaken. Findings and industry implications were subsequently discussed through interviews with four experienced software engineering managers.	Challenges with organisation, planning, deadlines and time estimation. Difficulties with focus, task initiation/completion, context switching and meetings. Communication challenges, stigma and work-related anxiety were also reported. Strengths included creativity, problem-solving, systems thinking and increased focus on engaging tasks. Helpful strategies included flexible work, environmental adjustments, clear communication, externalising tasks, coaching/body doubling and manager support.	Codes • Executive function deficits; • ADHD traits influence occupational pathway selection • Structure and environment supports • Coaching and executive skill supports improve functioning • Stigma in the workplace for disclosure • Managerial support lacking Subthemes • ADHD symptom specific occupational strain • Occupational fit and career self-selection • Job design and organisational structure as performance moderators • Self-advocacy and humanistic Support Mechanisms • Organisational knowledge gaps and leadership support for ADHD accommodations Themes • Organisational Barriers and Support Gaps • Agency and Advocacy • Person–Environment Fit • Workplace Strain and Cognitive Challenges	Constructivist worldview examining no predefined theoretical base Executive Function (EF) perspectives Self-Regulation theory/perspectives

Appendix #3: Grey Literature Findings

Organisation Date Audience		Type of Document	ADHD and Neurodiversity Mentions ADHD Specificity	Key Findings Relevant to RQs	Discourse Orientation Organisational Focus Codes/sub-themes/themes
#1	UNICEF, 2025, Global Audience Downloadable PDF, 26 pages	Manager guide *A Manager's Guide to Nurturing Neurodivergent Talent in an Inclusive Workplace*	**ADHD mentions:** 17 **Neurodiversity mentions:** 14 **ADHD specificity:** Primarily broader neurodiversity framing with limited ADHD references	Challenges experienced: Bias, stigma, masking, neuronormative workplace expectations, exclusion Accommodations given: Flexible work, assistive technology, multimodal communication, structured feedback, quiet workspaces, Interview questions in advance, flexible interview formats, accommodation pathways Manager guidance: Regular check-ins, confidentiality, strength-based management, inclusive communication	**Discourse orientation:** Human rights and disability inclusion framework with strengths-based neurodiversity framing. **Organisational focus:** Strong accommodation and managerial support emphasis **Codes:** ● Structure and environment supports, ● Coaching and executive skill supports improve functioning, ● Managerial support lacking **Sub-themes:** ● Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations, ● Self-Advocacy and Humanistic Support Mechanisms **Themes:** ● Organisational Barriers and Support Gaps, ● Agency and Advocacy (strong) "They are asking to be understood, included, and supported through appropriate accommodations." (UNICEF, 2025, p. 4).
#2	Microsoft, 2024 Global Audience Downloadable PDF, 15 pages	Corporate neurodiversity program report on hiring program *Building a Dynamic Workforce*	**ADHD mentions:** 3 **Neurodiversity mentions:** 34 (minus page footers) **ADHD Specificity:**	Inclusive recruitment and workplace supports **Challenges experienced:** Traditional hiring processes overlook neurodivergent talent **Accommodations given:** Dedicated accommodations teams, mock interviews, transparency, simplified communication, recruitment process: Monthly webinars,	**Discourse orientation:** Organisational neuroinclusion and strengths-based workforce innovation framework with Innovation and workforce competitiveness framing **Organisational Focus:** Strong organisational awareness, coaching, and accommodation emphasis **Codes:** ● Coaching and executive skill supports improve functioning,

		Through Neurodiversity	Primarily broader neurodiversity framing with limited ADHD references	accommodation pathways, career site enhancements **Manager guidance:** Train hiring teams to support different communication styles	• Structure and environment supports, • Self employment, autonomy and problem solving strengths **Sub-themes:** • Self-Advocacy and Humanistic Support Mechanisms • Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations (*WITHOUT ADHD as neurodiversity leaning)* **Themes:** • Agency and Advocacy • Organisational Barriers and Support Gaps ““Traditional hiring processes often overlook neurodivergent talent.” (Microsoft, 2024, p. 4). “Small changes can lead to significant improvements in performance and morale.” (Microsoft, 2024, p. 2).
#3	IBM, 2021 Global, Article 2 pages	Corporate Inclusion article on Neurodiversity program *Neurodiversity Acceptance Month 2021 article*	**ADHD mentions:** 0 **Neurodiversity mentions:** 14 **ADHD Specificity:** Primarily broader neurodiversity framing with limited ADHD references	Hiring initiatives and internal training **Challenges experienced:** Need for neurodivergent voices and representation **Accommodations given:** Training, safe-space communities, taskforces, leadership opportunities. Recruitment: Global neurodiversity hiring programs. **Manager guidance:** Leadership and allyship promotion	**Discourse Orientation:** Strengths-based neurodiversity advocacy and organisational inclusion framework **Organisational Focus:** Strong advocacy, awareness, and community support emphasis **Codes:** • Self employment, autonomy and problem solving strengths • ADHD traits influence occupational pathway selection **Sub-themes:** • Self-Advocacy and Humanistic Support Mechanisms, • Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations **Themes:** • Agency and Advocacy,

					● Organisational Barriers and Support Gaps
#4	Bupa, 2025, UK/Global, downloadable PDF, 11 pages	Manager guide *Supporting Neurodiversity in the Workplace*	**ADHD mentions:** 7 **Neurodiversity mentions:** 62 **ADHD Specificity:** ADHD-explicit references within broader neurodiversity framing	Practical workplace adjustments and flexibility **Challenges experienced:** Traditional workplaces not designed for neurodivergent people **Accommodations given:** Flexible supports and understanding neurodivergent strengths **Manager guidance:** n/a	**Discourse Orientation:** Workplace wellbeing and neuroinclusive support framework Strength-based and wellbeing framing **Organisational Focus:** Moderate accommodation and managerial guidance emphasis **Codes:** ● Structure and environment supports, ● Managerial support lacking (which created this guide to address) **Sub-themes:** ● Psychological distress and burnout ● organisational culture, knowledge and representation of leadership lacking for ADHD accommodations **Sub-themes:** ● Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations, ● Job Design and Organisational Structure as Performance Moderators **Themes:** ● Organisational Barriers and Support Gaps, ● Workplace Strain and Cognitive Challenges

#5	EY Oceania, 22 pages downloadable PDF	Inclusion action plan EY Oceania Accessibility and Inclusion Plan 2025–2027	**ADHD mentions:** 2 **Neurodiversity mentions:** 21 **ADHD Specificity:** Primarily broader neurodiversity and disability inclusion framing	Organisational processes and staff support **Challenges experienced:** Need for accessible systems and inclusive workplaces **Accommodations given:** Centralised workplace adjustments, accessibility practices. In recruitment: Structural equity in recruitment processes **Manager guidance:** Upskilling leaders and talent teams in inclusion	**Discourse Orientation:** Corporate accessibility and disability inclusion strategy framework **Organisational Focus:** Strong organisational systems, accessibility, and leadership support emphasis **Codes:** ● Structure and environmental supports, ● Coaching and executive skill supports improve functioning, ● Managerial support lacking **Sub-themes:** ● Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations, ● Job Design and Organisational Structure as Performance Moderators **Themes:** ● Organisational Barriers and Support Gaps, ● Person–Environment Fit
#6	KPMG, 2024 Australia, 26 pages, downloadable PDF	Inclusion plan Access & Inclusion Plan 2024–2027	**ADHD mentions:** 3 **Neurodiversity mentions:** 3 **ADHD Specificity:** Primarily broader neurodiversity and disability inclusion framing (ADHD as a case study only)	Governance and adjustment frameworks **Challenges experienced:** Low disability disclosure and participation rates **Accommodations given:** Workplace adjustments and accessible practices **Manager guidance:** Leadership commitment to inclusion (n/a otherwise)	**Discourse Orientation:** Corporate disability inclusion and lived-experience advocacy framework **Organisational Focus:** Moderate organisational awareness and inclusion support emphasis. Strong strategic planning emphasis. **Codes:** ● Structure and environment supports ● Managerial support lacking **Sub-themes:** ● Organisational Knowledge Gaps and Leadership Support for ADHD Accommodations, ● Self-Advocacy and Humanistic Support Mechanisms **Themes:** ● Organisational Barriers and Support Gaps,

					• Agency and Advocacy
#7	Services Australia, 2026, webpage	Career pathway / recruitment program *Aurora Neuroinclusion Program*	**ADHD mentions:** 8 **Neurodiversity mentions:** 12 **ADHD Specificity:** ADHD-explicit recruitment and workplace support framing	Tailored recruitment pathways **Challenges experienced:** Employment barriers for people with autism or ADHD **Accommodations offered:** Neurodiversity coaches, buddy systems, tailored assessments. Recruitment: Flexible assessment process, no psychometric testing **Manager guidance:** Managers and teams receive Neurodiversity Awareness and Managing Diversity training as part of the Aurora Neuroinclusion Program	**Discourse Orientation:** Inclusive recruitment and employment pathway framework, and affirmative recruitment framing **Organisational Focus:** Strong recruitment redesign, coaching, and workplace adjustment emphasis **Codes:** • Career Pathways / Employment Trajectories, • ADHD traits influence occupational pathway selection, • Coaching and executive skill supports improve functioning **Sub-themes:** • Occupational Fit and Career Self-Selection, • Job Design and Organisational Structure as Performance Moderators **Themes:** • Person–Environment Fit, • Organisational Barriers and Support Gaps "We also provide a neurodiversity coach throughout the program to support and guide you in your career and personal objectives." (Step 5: support) "Managers and teams will receive Neurodiversity Awareness and Managing Diversity training." (Step 5: support)

This table summarises key organisational initiatives identified within the grey literature. Across these sources, initiatives primarily focused on three areas: manager capability, workplace adjustments, and inclusive recruitment practices. All sources explicitly referenced ADHD. However, the level of ADHD-specific guidance varied, with some providing targeted support and others including ADHD within broader neurodiversity frameworks.