

## ADHD and ASD in the Irish Workplace: Lived Experiences, Generational Differences, and Pathways to Inclusion

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### Abstract

*This study explores how neurodivergent professionals with attention-deficit/hyperactivity disorder (ADHD) and/or autism spectrum disorder (ASD) in Ireland navigate workplace identity, organisational culture, career development, and well-being, with attention to generational differences. While international research has examined disclosure, stigma, and accommodations, little is known about how these dynamics unfold in the Irish context, where neurodiversity is not explicitly recognised in employment law.*

*A qualitative design was employed, using semi-structured interviews with ten professionals across Generation X, Millennials, and Generation Z. An inductive thematic analysis identified five conceptual domains: Identity and self-presentation, workplace dynamics and inclusion, career and development, well-being and coping, and generational context. Together, these domains informed a conceptual framework that depicts workplace inclusion not as a fixed outcome but as a cyclical, non-linear process shaped by ongoing negotiation.*

*The findings show that disclosure was a situational strategy balancing authenticity and risk; managerial influence was decisive in shaping inclusion or exclusion; career success was reframed in terms of balance and meaningful contribution; well-being was precariously sustained through coping strategies and support networks; and generational context shaped diagnostic pathways, identity formation, and expectations of inclusion.*

*The study contributes by advancing a framework of inclusion as dynamic and iterative, introducing generational identity as an interpretive lens, and providing one of the first qualitative accounts of neurodivergent professionals in Ireland. These insights carry implications for organisations, managers, and policymakers, underscoring the need for systemic neuroaffirmative practices that move beyond reliance on individual disclosure or managerial discretion.*

Keywords: Autistic People—Employment—Ireland; People with Attention-deficit Hyperactivity Disorder—Employment—Ireland; Neurodivergent People; Diversity in the Workplace—Ireland; Identity (Psychology) in the Workplace—Ireland; Generational Differences in the Workplace—Ireland

## Introduction

Neurodiversity has become an increasingly visible concept in workplace and policy discourse, yet the lived experiences of neurodivergent professionals remain under-examined, particularly in specific contexts such as Ireland. The neurodiversity paradigm challenges deficit-based perspectives by recognising neurological differences as natural variations of the human mind (Singer, 2017; Stenning & Rosqvist, 2021). Neurodiversity, as a term is based on the biological fact that human brains and nervous systems differ from person to person. Asasumasu (2018), who coined the term neurodivergent writes, ‘Neurodivergen[ce] just means a brain that diverges [...]. It is specifically a tool of inclusion.’ As such, neurodiversity incorporates all forms of neurotypes, including neurotypical. According to this definition, a person cannot be neurodiverse; they can be neurodivergent. This framing has been influential in shifting research and practice from a focus on pathology toward models that emphasise equity and inclusion. Within employment contexts, scholarship has highlighted both persistent barriers and emerging opportunities for ASD and ADHD professionals, ranging from issues of disclosure and stigma to accommodations and recognition of strengths (Bury et al., 2021; Doyle, 2020; Hotte-Meunier et al., 2024). However, while the international evidence base is growing, relatively little attention has been paid to Irish workplaces, where neurodiversity is not explicitly recognised in employment law (NDA, 2025; OECD, 2021). This creates a significant gap in understanding how neurodivergent professionals in Ireland navigate identity, culture, and career and whether international findings can be translated into this distinctive context.

Workplace inclusion cannot be fully understood through static models of compliance or accommodation. Instead, it requires attention to the everyday strategies through which neurodivergent professionals negotiate identity, belonging, and well-being in professional environments. Disclosure, masking, and advocacy are not one-off acts but ongoing processes. Equally, workplace structures and managerial practices can either enable or constrain participation, shaping not only performance but also long-term career trajectories. These processes are dynamic and relational, requiring analysis that accounts for both personal agency and systemic conditions.

Generational context adds a further dimension to these dynamics. Diagnostic criteria, cultural attitudes, and access to support have shifted significantly over recent decades, influencing both when individuals receive recognition and how they present themselves at work (Abdelnour et al., 2022; McDonald, 2020). For example, Generation X professionals often have spent much of their working lives undiagnosed, relying on self-devised coping mechanisms in environments where ASD and ADHD are poorly understood. Their relationship to disclosure is therefore shaped by caution and retrospective reinterpretation. Millennials, by contrast, came of age during an era of expanding mental health discourse and digital communities, yet they still face limited workplace recognition and risk of stigma. Many in this cohort reframed their experiences through late or self-diagnosis, creating hybrid strategies of cautious disclosure and informal support-seeking (Friedman et al., 2024; McDonald, 2020). Generation Z entered education and employment at a time when diversity, equity, and inclusion discourse was more established and earlier diagnoses available. Their approach to neurodivergence tends to emphasise openness, authenticity, and collective advocacy, reflecting broader generational priorities around belonging and transparency (Deloitte, 2025; Francis & Hoefel, 2018). Examining these intergenerational shifts is essential for understanding how inclusion is differently negotiated across cohorts, and how policy and practice can respond.

Ireland represents a particularly important context for this inquiry. While the country has ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), neurodiversity remains absent from employment law, meaning that workplace inclusion relies largely on broader disability frameworks such as the Employment Equality Acts 1998–2015 (Government of Ireland, 2000). This leaves neurodivergent employees dependent on managerial discretion and organisational culture rather than clear legal protections. Recent national surveys highlight both the prevalence of neurodivergence and the limitations of current workplace practices: Nearly one in ten Irish adults identify as neurodivergent, yet half report not disclosing their neurodivergence at work, and 45% describe their workplace as non-inclusive (Bank of Ireland, 2024). Autistic professionals, in particular, face disproportionately high unemployment or underemployment rates, with up to 85% reporting exclusion from meaningful work (AsIAM, 2023). These statistics suggest that while Ireland has made progress in disability rights, neurodivergent professionals remain an under-supported and under-researched segment of the workforce.

This study addresses these gaps by exploring how neurodivergent professionals in Ireland navigate workplace dynamics through the dual lenses of lived experience and generational identity. A qualitative design was employed, using semi-structured

interviews with ten professionals diagnosed with ADHD and/or ASD across three generational cohorts (Generation X, Millennial, Generation Z). Thematic analysis identified five interrelated domains: 1) Identity and self-presentation, 2) workplace dynamics and inclusion, 3) career and development, 4) well-being and coping, and 5) generational context. Together, these provide a framework for understanding workplace inclusion not as a fixed outcome but as a cyclical, iterative process. The study contributes to understanding in three key ways: Conceptually, it extends existing models of workplace inclusion by emphasising its dynamic and cyclical character; theoretically, it integrates generational context as an interpretive dimension, showing how historical and cultural forces shape both diagnoses and workplace expectations; and empirically, it provides one of the first qualitative accounts of neurodivergent professionals in the Irish workplace, amplifying perspectives that remain under-represented in both national and international scholarship.

### **The neurodiversity paradigm**

The current neurodiversity paradigm conceptualises ASD and ADHD as natural variations of the human mind rather than pathologies (Singer, 2017; Stenning & Rosqvist, 2021). This approach challenges the medical model, which frames such phenomena as deficits, and instead situates disability as emerging from the interaction between individual traits and unsupportive environments (Chapman, 2019; Dwyer, 2022). Research emphasises that inclusive practices require systemic adaptation to cognitive and sensory diversity, recognising strengths and challenges (Cleveland Clinic, 2022; Shah et al., 2022). Neurodivergence is therefore not a fixed diagnostic category but a socially constructed and culturally mediated concept shaped by medical discourse, self-identification, and societal norms (Goldberg, 2023; Stenning & Rosqvist, 2021). In the workplace, this paradigm reframes neurodivergence as valuable rather than a liability, positioning inclusion as a matter of organisational equity and cultural change (Antony et al., 2024; Doyle, 2020).

### **Common workplace challenges and barriers for autistic individuals and those diagnosed with ADHD**

Neurodivergent employees, particularly those with ADHD and ASD, face persistent workplace barriers due to environments that are not designed with neurodiversity in mind (Hotte-Meunier et al., 2024; Pfeiffera et al., 2017). Autistic employees often struggle with unspoken social expectations, difficulties interpreting subtle social cues, and workplace cultures that favour extroversion and interpersonal fluency, factors that can lead to misunderstandings, social exclusion, or even disciplinary actions (Diener et al., 2020). Fear of disclosing a diagnosis is also common, with individuals anticipating stigma or being perceived as less capable, even when their qualifications and performance say otherwise (Diener et al., 2020). Whelpley et al. (2021) write about how autistic individuals in their study felt a 'drastic change in treatment' after disclosure, often feeling patronised – contrasting with the desire for equal treatment.

Importantly, diagnostic pathways are shaped by gendered patterns (Bölte et al., 2023; Cook et al., 2024; Craddock, 2024). Research shows that ADHD and ASD frequently present differently in women and girls, contributing to underdiagnosis or misdiagnosis

across the lifespan (Bölte et al., 2023; Cook et al., 2024). These disparities carry significant implications for workplace inclusion, as many women only receive recognition later in life, often after prolonged periods of coping without formal support (Craddock, 2024).

Employees with ADHD may face challenges such as distractibility, time management difficulties, and poorly sustained attention, especially in fast-paced or unstructured work environments (Hotte-Meunier et al., 2024). However, these challenges are often misattributed solely to individual shortcomings, rather than being seen as mismatches between the individual and their environment (Bury et al., 2021). Research shows that a poor fit between individuals and their environment significantly reduces job satisfaction and retention among autistic employees, underscoring the need for more adaptive workplace design (Pfeiffera et al., 2017). Milton (2012) highlights that many of these difficulties are relational, describing the 'double empathy problem,' where both autistic and non-autistic individuals struggle to understand one another due to their fundamentally different perspectives.

### **Frameworks for accommodations and support**

To mitigate these barriers, recent literature promotes a shift from deficit-oriented models toward neuroaffirmative, strengths-based approaches (Antony et al., 2024). Coaching tailored to the unique strengths, communication preferences, and self-advocacy needs of neurodivergent individuals has shown to have a positive impact, especially when integrated into broader workplace practices rather than being directed solely at the neurodivergent employee (Antony et al., 2024). Addressing the 'double empathy problem' requires coaching and awareness-raising efforts that include neurotypical peers and managers, fostering mutual understanding and reducing the tendency to pathologise difference (Milton et al., 2022). Practical accommodations such as consistent routines, clear communication, reduced sensory overload, and flexible work arrangements are especially effective in supporting employees with ADHD and/or ASD (Bury et al., 2021; Hotte-Meunier et al., 2024). For example, adjustments like quiet workspaces, visual aids, and predictable schedules can improve both comfort and productivity for autistic employees (Bury et al., 2021). Recruitment processes also require revision: Traditional interviews that emphasise charisma or group interaction may disadvantage neurodivergent candidates, whereas structured, skills-based hiring better supports inclusive talent acquisition (Diener et al., 2020). Ultimately, fostering neuroinclusive workplaces requires more than policy, it demands a cultural shift toward valuing neurodiversity as a source of innovation, resilience, and equity (Antony et al., 2024).

This is not to suggest that neurodivergent employees should be merely accommodated in employment. Research has indicated that many neurodivergent people possess skills and talents that surpass their neurotypical counterparts, and they can contribute as much if not more in the workplace (Loison, 2024). Whelpley et al. (2021) indicate that autistic individuals can offer significant value, including high attention to detail; ability to perform repetitive, cognitively demanding tasks; trustworthiness, reliability and potential for innovation and increased team productivity. Such findings reinforce the concept of neurodiversity as difference

instead of deficit. As such, companies such as Ernst and Young, SAP, and Microsoft have extended their inclusion policies to increase the number of neurodivergent employees in their workplace (Wiederhold, 2020). Despite these initiatives and the evidence that supports the added value of a neurodiverse workforce, neurodivergent people, particularly autistic people remain one of the least employed groups from all disability groups, and those that are employed are often under-employed (Ezerins et al., 2024; Loison, 2024). With participation rates varying between 32% of autistic adults engaging in any kind of paid work according to Romualdez et al. (2021) to only 15% in the Irish population (AsIAm,2023). The quantity of literature has expanded in line with these initiatives (Doyle & McDowall, 2021). This trend is evident in bibliometric patterns: for example, Google Scholar searches for 'neurodiversity employment' yielded approximately 2,050 results between 2013–2017, compared to more than 16,900 between 2018–2025. Similarly, the term 'neurodiversity workplace inclusion' produced just 708 results in 2013–2017, but over 11,700 in 2018–2025. Such figures highlight a dramatic growth of academic interest in the intersection of neurodiversity and work, reflecting increasing recognition of its importance within organisational research and practice.

Ezerins et al. (2024, p. 27) identify three major barriers to inclusive practice: 'the broader social context, workload, and lack of knowledge about autism.' This often means that the success of any endeavour to be neuroaffirmative is entirely reliant on individual managers' energy, skill, and time (Austin & Pisano, 2017). Findings from literature on ways to create neuroaffirmative workplaces include coaching (of the entire workforce, not exclusively the neurodivergent employees), leveraging technology to increase accessibility, overcoming geographical barriers, and offering opportunities for personalised feedback and continuous learning (Antony et al., 2024).

### **Neurodivergent inclusion in the Irish context**

Ireland's approach to neurodivergent inclusion in employment is developing with national disability policies and European Union obligations (EU-OSHA, 2025; NDA, 2025; NeuroDiversity Power Project, 2023; OECD, 2021). Although the Irish government signed the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2007, it did not ratify the convention until 2018 (NDA, 2025; United Nations, 2006). Key frameworks such as the Employment Equality Acts 1998–2015 and the Irish Human Rights and Equality Commission Act 2014 prohibit discrimination in employment and mandate reasonable accommodations (Government of Ireland 1998; Government of Ireland 2000; Government of Ireland 2014; Irish Human Rights and Equality Commission, 2020). In addition, Ireland's Autism Innovation Strategy 2024–2025 marks an important step toward more targeted inclusion (NDA, 2025). It outlines 83 actionable measures across areas including access to services, inclusion within communities, autonomy, and collaboration with neurodivergent stakeholders (NDA, 2025). However, despite extensive review of current Irish legal and policy documents, the research team found no legislation that explicitly recognises neurodiversity or mandates accommodations tailored to neurodivergent cognitive, sensory, or communicative profiles. Instead, workplace inclusion for this group relies on broader disability laws such as the Employment Equality Acts 1998–2015 and the Irish Human Rights and Equality Commission Act

2014, which prohibit discrimination and mandate ‘reasonable accommodations’ in general terms (Irish Statute Book, 1998; 2000). As a result, neuroinclusive practices in employment are uneven and largely dependent on employer interpretation, individual disclosure, and sector-specific leadership (OECD, 2021; Tromans et al., 2023).

Recent data suggests that neurodivergent individuals represent a significant and under-supported segment of the Irish workforce (Irish Congress of Trade Unions, 2024; OECD, 2021). A nationally representative survey conducted by Red C on behalf of the Bank of Ireland found that nearly one in ten Irish adults identify as neurodivergent: half with a formal diagnosis and half self-identified (Bank of Ireland, 2024).

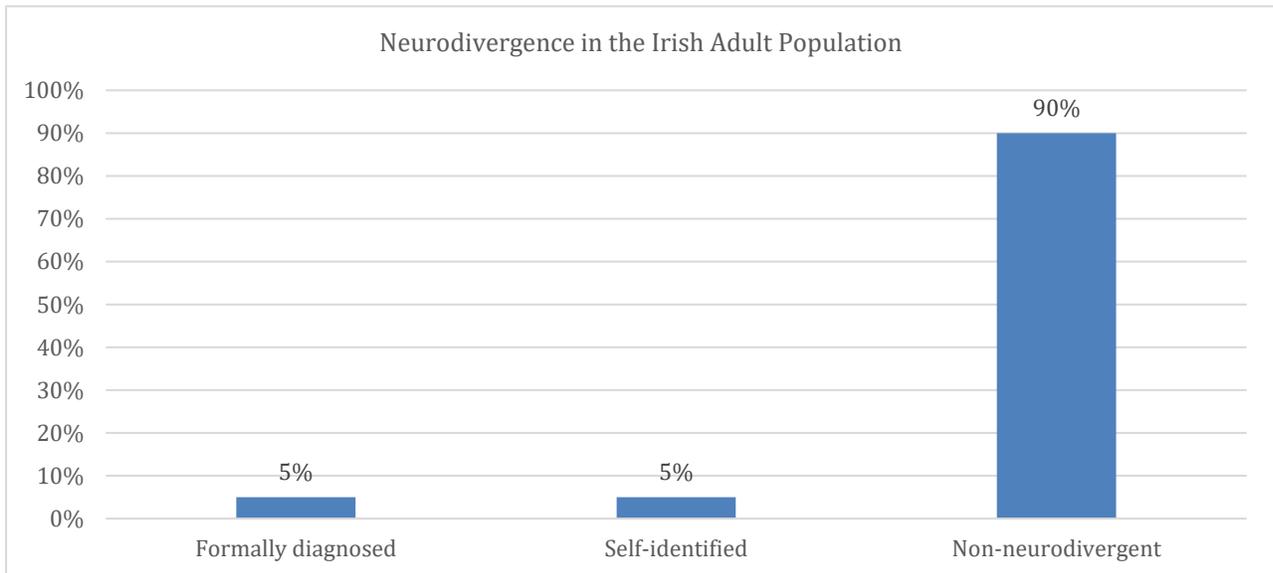


Figure 1. Prevalence of neurodivergence in the Irish adult population: 5% formally diagnosed, 5% self-identified, and 90% non-neurodivergent (Bank of Ireland, 2024).

Among those who are working, nearly half reported not disclosing their neurodivergence to their employer, and 45% said their workplace was not inclusive of neurodivergent needs (Bank of Ireland, 2024).

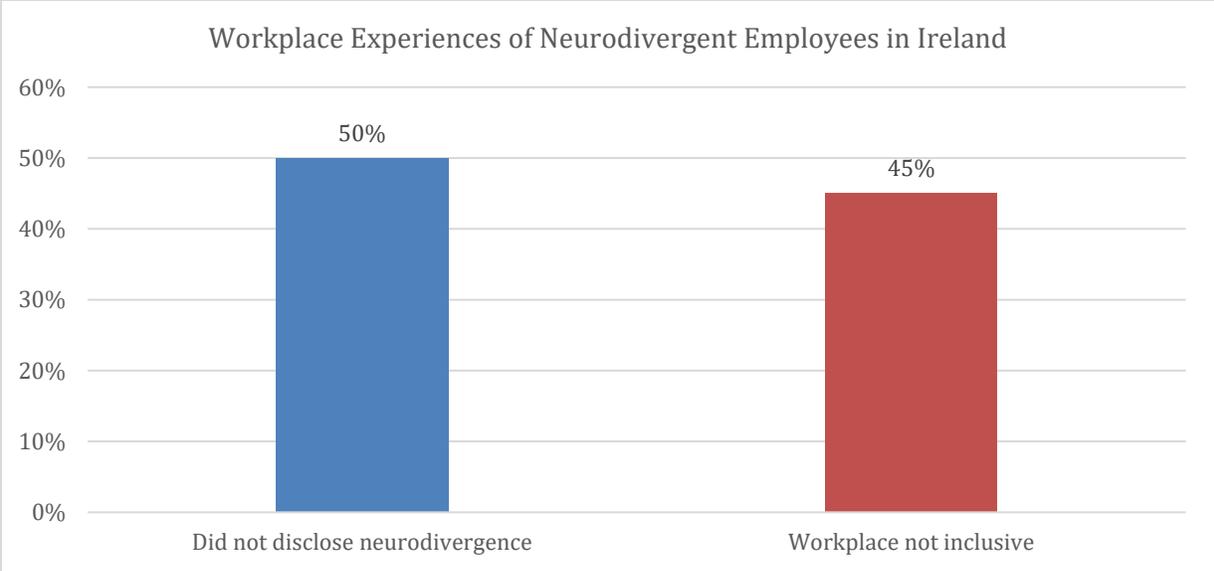


Figure 2. Workplace experiences of neurodivergent employees in Ireland, showing 50% did not disclose their neurodivergence and 45% reported non-inclusive workplaces (Bank of Ireland, 2024).

According to a report by IrishJobs and AsIAM, Ireland’s national autism charity, 85% of autistic people in Ireland face unemployment or underemployment (AsIAM, 2023).

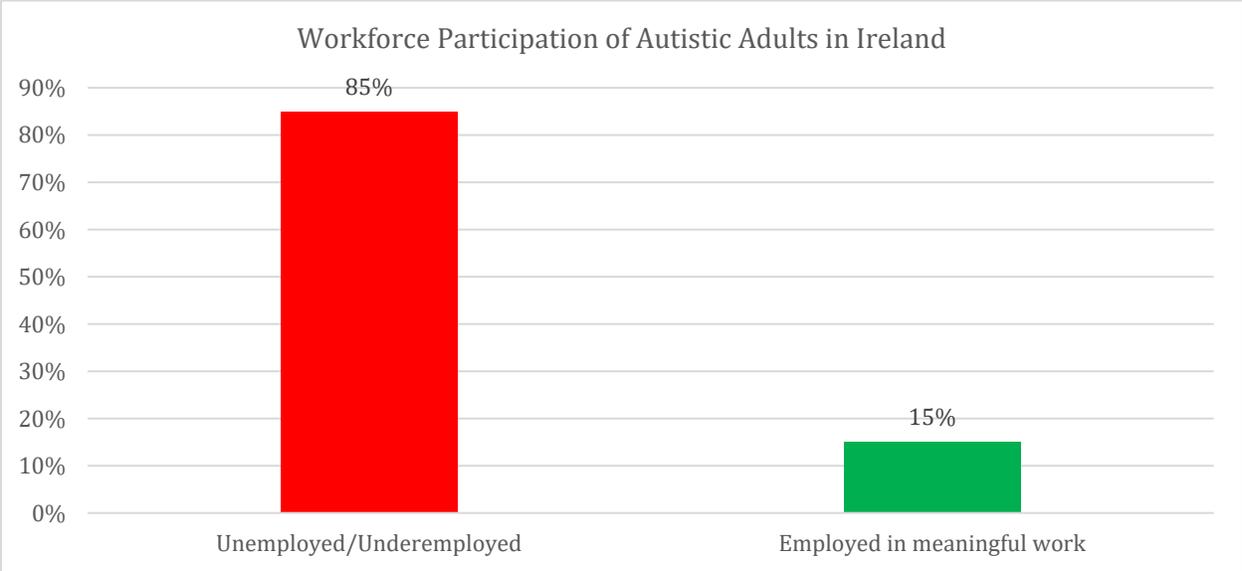


Figure 3. Employment outcomes of autistic people in Ireland, with 85% unemployed or underemployed (AsIAM, 2023). This statistic not only reflects the systemic barriers faced by neurodivergent individuals in accessing and retaining employment but also points to a broader societal issue, one that contributes to financial hardship, social exclusion, and diminished autonomy for autistic adults (Day et al., 2024). From an economic perspective, this also represents a significant loss of talent for employers and society at large (Day et al., 2024).

Employer awareness of neurodivergence in Ireland remains inconsistent, with many organisations lacking comprehensive diversity and inclusion strategies that fully address the needs of employees with disabilities (AHEAD, 2023). Evidence from the National Disability Authority shows that autism, often described as a ‘hidden disability,’ is poorly understood by managers and HR professionals, creating barriers in recruitment, onboarding, and workplace supports (NDA, 2025). A national review further indicates that reasonable accommodations are frequently provided in an ad hoc manner, without systematic follow-up or formalised policies (NDA, 2025). Survey data from the Irish Congress of Trade Unions highlights that while around 60% of autistic employees report needing workplace accommodations, fewer than 20% receive them during recruitment, and many avoid disclosure due to fear of discrimination (Irish Congress of Trade Unions, 2024). These gaps are reinforced by research on ADHD in Ireland, which finds that service limitations and low employer awareness contribute to uneven workplace supports and hinder long-term inclusion (Raaj et al., 2023).

**Generational perspectives on neurodiversity**

Understanding generational cohorts is essential when examining social advocacy trends, identity formation, and workplace expectations especially in the context of neurodiversity (Pew Research Center, 2015). Generational definitions are not based solely on age but are shaped by shared historical experiences, technological shifts, and socio-economic conditions that influence collective identity (Dimock, 2019; McKinsey & Company, 2024; Pew Research Center, 2015). To situate these differences, Table 1 summarises the defining characteristics, formative experiences, and workplace expectations of Generation X, Millennials, and Generation Z.

Table 1. Generational Cohort Characteristics

Generation	Years of birth	Formative experiences	Key traits
<b>Generation X</b>	1965–1980 (Dimock, 2019; Pew Research Center, 2015)	Economic uncertainty, end of Cold War, rise of personal computing (Dimock, 2019; Pew Research Center, 2015)	Independent, adaptable, sceptical of authority, pragmatic (Francis & Hoefel, 2018; Johns Hopkins Imagine, 2022)
<b>Millennials (aka Gen Y)</b>	1981–1996 (Dimock, 2019; Pew Research Center, 2015; The Center for Generational Kinetics, 2025)	9/11 attacks, 2008 global financial crisis, rise of internet/social media (Dimock, 2019; Johns Hopkins Imagine, 2022; Pew Research Center, 2015)	Digitally adaptable, value-driven, politically sceptical (Francis & Hoefel, 2018; McKinsey & Company, 2023)

<b>Generation Z</b>	1997 onward (Dimock, 2019; McKinsey & Company, 2023; The Center for Generational Kinetics, 2025)	Smartphones, climate crisis, COVID-19, social justice movements (Francis & Hoefel, 2018; Johns Hopkins Imagine, 2022)	Diverse, digitally fluent, identity-fluid, authenticity-focused (Johns Hopkins Imagine, 2022; McKinsey & Company, 2023; Pew Research Center, 2015)
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Generational differences in diagnosis, identity, and advocacy are increasingly recognised as shaping workplace experiences (Abdelnour et al., 2022; Hutson & Hutson, 2023; McDonald, 2020). Diagnosis of ADHD and ASD has increased markedly in recent decades, reflecting both improved awareness and evolving criteria (Arvidsson et al., 2025; Dufault et al., 2023; Grosvenor et al., 2024). Millennials often encountered limited recognition in childhood and adolescence, leading to delayed or self-diagnosis in adulthood and retrospective reinterpretation of earlier struggles (Friedman et al., 2024; McDonald, 2020). Generation Z, by contrast, has benefited from broader diagnostic frameworks and cultural visibility, resulting in earlier diagnoses, stronger identification with neurodivergent identities, and greater openness in the workplace (Leifler et al., 2022; Martin, 2024; Russell et al., 2015). Generation X professionals frequently experienced decades of work without recognition, often receiving diagnoses only in midlife, which shaped cautious disclosure strategies and reliance on coping mechanisms (Doyle, 2020; Hutson & Hutson, 2023).

These generational cohorts also differ in advocacy styles (Deloitte, 2025; Francis & Hoefel, 2018; Hutson & Hutson, 2023; Teoh & Kinman, 2017). Generation X professionals often emphasise adaptation and self-reliance, Millennials engage in cautious advocacy within formal systems, and Generation Z tends toward openness, authenticity, and collective approaches to inclusion (Deloitte, 2025; Hutson & Hutson, 2023; Teoh & Kinman, 2017). These patterns reflect broader generational shifts in workplace values, from individual pragmatism to digital activism and systemic reform (Francis & Hoefel, 2018; Johns Hopkins Imagine, 2022). Understanding neurodivergence through a generational lens therefore adds a critical interpretive dimension, highlighting how historical context shapes workplace identity, disclosure, and expectations of inclusion (Abdelnour et al., 2022; McDonald, 2020).

## Methodology

### Research aim and design

The aim of this study was to explore how professionals with ADHD and/or ASD in Ireland navigate workplace dynamics, career development, identity, and well-being and how generational context shapes these experiences. To capture the nuance of

lived accounts, the study employed a qualitative design situated within an interpretivist paradigm, which assumes that reality is socially constructed and best understood through participants’ perspectives (Creswell & Poth, 2018; Denzin & Lincoln, 2017; Schwandt, 2015). A phenomenological orientation informed the design, with its emphasis placed on how individuals experience and interpret their everyday realities (Smith et al., 2009; van Manen, 2018).

Semi-structured interviews were selected as the primary method of data collection because they allow participants to articulate experiences in their own words while ensuring coverage of core topics such as disclosure, workplace supports, and career trajectories (Maguire & Delahunt, 2017; Patton, 2014). The study was approved by the Dublin Business School Research Ethics Committee.

**Participants and sampling**

Ten professionals participated in the study, comprising six women and four men aged from 22 to 57. Participants represented Generation X, Millennials, and Generation Z, enabling intergenerational comparison. All had received a formal diagnosis of ASD, ADHD, or a co-occurring profile such as AuDHD, with several also reporting co-occurring conditions including dyslexia, generalised anxiety disorder (GAD), and obsessive-compulsive disorder (OCD). Such diversity reflects the high rates of co-occurrence reported in neurodivergent populations (Casanova et al., 2020).

Purposive sampling was used to identify individuals with direct experience of navigating the workplace as neurodivergent professionals (Palinkas et al., 2015). This strategy ensured alignment with research aims while allowing for diversity in age, gender, and occupational background. The final dataset reached thematic saturation, with no new substantive themes emerging from additional interviews (Guest et al., 2006).

Table 2. Participant demographics

Participant	Age	Diagnosis	Generation
P1	57	Autism, ADHD, GAD	Gen X
P2	41	ADHD	Millennial
P3	33	AuDHD, OCD	Millennial
P4	42	ADD	Millennial
P5	35	Autistic	Millennial
P6	55	ADHD	Gen X
P7	33	AuDHD	Millennial
P8	22	ASD	Gen Z

P9	30	ADHD (diagnosed before dual diagnoses were recognised)	Millennial
P10	36	ADHD, Dyslexia	Millennial

### Recruitment

Participants were recruited primarily through professional and personal networks of the research team, followed by snowball sampling in which initial respondents recommended others with similar profiles (Johnson, 2014). This approach was effective for reaching a number of participants that may otherwise be reluctant to publicly disclose their diagnoses. Recruitment materials included an information sheet outlining the study’s aims, voluntary participation, and confidentiality safeguards. Written informed consent was obtained prior to interviews, and participants were reminded of their right to withdraw at any stage.

### Data collection

Interviews were conducted online via Microsoft Teams between July and August 2025. Participants were offered flexibility in mode (video, phone, or email), but all chose video with cameras on. Interviews lasted between 35 and 70 minutes, depending on availability and depth of discussion. All were audio-recorded with consent and transcribed.

The semi-structured format balanced comparability across participants with flexibility to follow individual narratives. Core prompts explored educational and employment experiences, disclosure practices, workplace supports, and coping strategies. Participants were also asked about generational influences, such as family expectations, cultural attitudes, or diagnostic timing.

### Data analysis

Interview data were analysed using thematic analysis, a flexible yet systematic approach for identifying and interpreting patterns across qualitative datasets (Maguire & Delahunt, 2017). All interviews were transcribed, with pseudonyms replacing participant names to protect confidentiality. The analytic process followed Braun and Clarke’s (2006) six-phase framework: 1) familiarisation with the data; 2) generating initial codes; 3) searching for themes; 4) reviewing themes; 5) defining and naming themes; and 6) producing the report. Naeem and Ozuem’s (2022) model, which draws heavily from Braun and Clarke’s reflexive thematic analysis but proposes a conceptual model, was also used to analyse the data in this study. This model offers a more visual interpretation, condensing a large amount of data into a clear chart that demonstrates relationships between quotations and themes.

Familiarisation involved repeated reading of the transcripts to capture both explicit and latent meanings. Initial coding was conducted line by line, generating descriptive codes that highlighted significant features of the data, such as disclosure practices,

career barriers, strengths, and coping mechanisms. These codes were then organised into themes, which represented patterned responses across participants. Themes were subsequently refined into higher-order concepts, which provided an interpretive lens for understanding how individual experiences connected to broader generational and cultural contexts.

The analytic process was informed by Naeem and Ozuem's (2022) conceptual approach, emphasising iterative movement between data, codes, themes, and higher-order interpretation. This structure was adapted into a visual diagram to illustrate the analytic pathway in this study, showing how raw data were systematically transformed from codes to themes to concepts. The diagram also demonstrated the recursive nature of the process, as the research team moved back and forth between transcripts, coding tables, and emerging interpretations to ensure analytic depth and rigor.

The final analysis produced five concepts, each representing a higher-order cluster of themes:

1. Identity and self-presentation: Strategies of disclosure, masking, and authenticity in negotiating workplace identity.
2. Workplace dynamics and inclusion: Organisational cultures, practices, and supports that shaped belonging or exclusion.
3. Career and development: Trajectories of progression, barriers, and redefinitions of success.
4. Well-being and coping: Burnout, emotional regulation, and support networks.
5. Generational context (interpretive lens): Cultural and historical factors shaping diagnosis, education, and workplace expectations.

These concepts captured both commonalities across participants and intergenerational contrasts, such as differences in disclosure practices between Baby Boomers, Generation X, Millennials, and Generation Z. For example, while older participants often described stigma and limited diagnostic recognition in earlier decades, younger participants spoke of increased awareness but continued difficulties navigating disclosure and inclusion. This analytic approach enabled the research team to move beyond descriptive accounts of individual participants and to identify patterned meanings that addressed the research questions, while preserving the richness of lived experiences and ensuring that participants' voices remained central to the findings.

### **Reflexivity and trustworthiness**

Both authors identify as neurodivergent which shaped the research process. While neither was interviewed, their lived experience informed the design of interview questions and interpretation of findings. Reflexivity was maintained by documenting assumptions, engaging in iterative discussions, and grounding coding in participants' narratives rather than personal experience (Tracy, 2010).

Several strategies were employed to ensure trustworthiness. Credibility was enhanced through verbatim transcription and iterative coding (Nowell et al., 2017). Transferability was supported by providing thick description of participant

demographics and contexts (Patton, 2014). Dependability was addressed through systematic documentation of analytic decisions, and confirmability was strengthened through peer debriefing between authors (Lincoln & Guba, 1985).

**Ethical considerations**

The study was conducted with the approval of the Dublin Business School Ethics Committee and followed the established guidelines for qualitative research ethics. Participants received detailed information sheets and gave written consent prior to participation. To protect anonymity, pseudonyms were assigned and identifying details were removed during transcription. Audio files and transcripts were stored securely on password-protected devices accessible only to the research team. Given the sensitivity of discussing diagnoses and workplace challenges, interviews were conducted in a supportive manner with open-ended prompts and explicit reminders of participants’ right to withdraw.

**Thematic Analysis and Findings**

**Introduction**

The thematic analysis sought to capture the lived workplace experiences of neurodivergent professionals across three generational cohorts. Drawing on Braun and Clarke’s (2006, 2019) framework, we conducted iterative coding, categorisation, and synthesis to move from participant statements to broader conceptual clusters. This process yielded five interrelated domains: 1) identity and self-presentation, 2) workplace dynamics and inclusion, 3) career and development, 4) well-being and coping, and 5) generational context. These domains capture how neurodivergent professionals navigate professional life in Ireland, while generational context functions as an interpretive lens shaping identity, and disclosure and expectations of inclusion. Each domain is outlined below with illustrative quotations.

**Overview of themes**

The thematic analysis produced 17 themes, which were subsequently clustered into four higher-order concepts and one interpretive lens. Table 2 provides an overview of these, including a representative statement from participants and the conceptual domain each theme was assigned to.

The statements included here are illustrative rather than exhaustive, selected to capture the essence of each theme in a concise way. A more detailed account, with multiple statements and extended analysis, is provided in the following sub-section.

Table 3. Overview of themes clustered into four higher-order domains, with generational context as an interpretive lens

Statements	Keywords	Codes	Themes	Concepts
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<p>'I'm pretty open about [my diagnosis] at work.... And I said I want you to understand that sometimes if I talk too fast and I momentarily get frustrated or have a brief emotional moment, here is why.' (P4)</p>	<p>Openness, disclosure, transparency, authenticity, explaining behaviours</p>	<p>Radical openness and authenticity</p>	<p>Disclosure and identity</p>	<p>Identity and self-presentation</p>
<p>'I [always] felt comfortable in the back office. I'm struggling a little bit with the client-facing stuff, but I have to have more of a mask... I feel a little bit more that I'm trying to mask my real self.' (P6)</p>	<p>Back office, client-facing, mask, real self</p>	<p>Masking vs. authenticity</p>	<p>Masking and social navigation</p>	
<p>'If you can't bring your true self and all of your true self to work, then it's not the right company.' (P4)</p>	<p>True self, culture fit, leave/move if misfit</p>	<p>Authenticity and person-organisation fit</p>	<p>Advice to ND Employees</p>	
<p>'I've disclosed it to colleagues I'm comfortable with. I haven't to managers. I brought it up once in a meeting asking for help, very much begging for help, and was passed over. No help was given, and at that point I said I wasn't going to do it again.' (P9)</p>	<p>Disclosure, colleagues, managers, help denied</p>	<p>Unsupportive leadership</p>	<p>Workplace inclusion and exclusion</p>	<p>Workplace dynamics and inclusion</p>
<p>'I wear earplugs... I have a jam card... If something gets too much [in a meeting] I can leave... have a mentor I requested... I also have a jam card... I can leave if meetings overwhelm me.' (P8)</p>	<p>Earplugs, jam card, mentor, meetings, overwhelm, leaving</p>	<p>Granted accommodations and tools</p>	<p>Workplace accommodations</p>	
<p>'All the advice you give to managers goes against how they're taught... see people as people not numbers... not everyone's a cookie cutter... there's more to your employees than a performance review.' (P9)</p>	<p>Managers, cookie cutter, numbers</p>	<p>Shift from traditional to human-centred management</p>	<p>Managerial awareness and adaptation</p>	
<p>'I don't want to be a statistic for someone, I don't want to be a tick the box... I never wanted to get something because of that, or not get something because of it either.'(P3)</p>	<p>Tokenism, quotas, fairness, stigma</p>	<p>Fairness and systemic justice</p>	<p>Justice orientation and advocacy</p>	
<p>'[The manager] was very receptive towards education, very receptive towards what I was doing... basically said to me, look, I will help you, I will facilitate you as best I can, because the knowledge that you're gaining can be used.' (P1)</p>	<p>Manager support, education, facilitation, encouragement</p>	<p>Managerial support and flexibility</p>	<p>Workplace support</p>	

<p>'I do like it. I like its completely controlled environment... everything is ruled by standards... whatever rules and manuals.' (P5)</p>	<p>Structure, predictability</p>	<p>Environmental fit and supportive conditions</p>	<p>Career and environmental fit</p>	<p>Career and development</p>
<p>'By luck or by chance, I ended up in a career that was perfect for my profile... I finally found a place that I'm comfortable in.' (P6)</p>	<p>Career fit, comfort, belonging, stability</p>	<p>Career fit and personal alignment</p>	<p>Career satisfaction</p>	
<p>'I never thought I could learn... now I know that's not true, I just couldn't learn in an exam format... with a one-to-one [language] tutor I did really well.' (P8)</p>	<p>Couldn't learn, exams, one-to-one tutor, success</p>	<p>Traditional academics as barrier</p>	<p>Educational experiences</p>	
<p>'I actually think that being successful in a job is about being happy and having a work life balance...being able to perform at your peak and being able to be recognized for it and to be able to succeed, 'cause I think a lot of people with neurodivergence especially have talent that they're not able to unlock as easy.' (P10)</p>	<p>Happiness, success, balance, recognition, talent, neurodivergence</p>	<p>Success as autonomy, happiness and balance</p>	<p>Redefining success and progression</p>	
<p>'They worked me to the bone. I was probably quite burned out... I was doing about ten people's jobs for a good nine months and because of the ADHD ability to just do things under pressure, I was doing a pretty good job.' (P7)</p>	<p>Overwork, burnout</p>	<p>Chronic burnout and constant stress</p>	<p>Burnout and well-being</p>	<p>Well-being and coping</p>
<p>'I've got an app on my phone. You add your task today and you get check them off. It's like a little bit of dopamine hit for me, creating this sense of urgency. And the other thing for me is getting out for a walk every single day.' (P4)</p>	<p>Mobile app, dopamine reward, daily walks</p>	<p>Self-regulation mechanisms</p>	<p>Coping strategies and self-regulation</p>	
<p>"When I grew up... there was a recession... I never felt that I didn't have to look for anything else.... [It was] suggested to me was to get that secure job... get married, have the children.' (P1)</p>	<p>Recession, secure job, cultural expectations, marriage</p>	<p>Economic conditions and stability seeking</p>	<p>Generational context (cultural/economic)</p>	<p>Generational context (interpretive lens)</p>
<p>'Education was important in my family... it was very much expected in my family that you went and you did a degree... So I went ahead and went into college. It was kind of expected of me.' (P9)</p>	<p>Education, family expectation, degree</p>	<p>Educational expectations and pressures</p>	<p>Family influence</p>	

'I AM 55. I have ADHD and I was diagnosed two years ago.' (P6)	ADHD, diagnosis	Late diagnosis	Generational pathways to diagnosis	
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## Thematic Narratives

### *Identity and self-presentation*

Participants described strategies of disclosure, masking, and advice-giving that reflect the constant negotiation between authenticity, protection, and stigma. Three interrelated themes emerged: disclosure and identity, masking and social navigation, and advice to neurodivergent employees.

### *Disclosure*

Disclosure was not a fixed act but situational. Some participants adopted minimal disclosure, presenting only strengths framed instrumentally:

I'd rarely say I'm autistic... it makes me better at writing emails. My grammar is very good (P7).

Others embraced openness as authenticity:

I disclose too much... I'm not gonna pretend I'm not who I am (P2).

Several adopted pragmatic disclosure when issues arose:

I'm very comfortable telling my manager... I had to talk to them because of issues with a coworker (P5).

These examples show disclosure as a continuum shaped by workplace culture.

### *Masking*

Masking was reported as protective but draining. One participant explained:

Because I wasn't a bold child, I wasn't diagnosed with ADHD... I was able to kind of mask it (P10).

Others described masking as a double bind, necessary for belonging but at the cost of authenticity and delayed recognition:

If you conform, you're copying them, and if you don't conform, you're weird (P6).

### *Advice to neurodivergent employees*

Narratives often included advice. Some promoted strength-based approaches:

Do something that gives you joy... managers can get amazing things out of that (P2).

Others stressed caution:

Don't disclose unless... you can point to things you've achieved (P7).

A contrasting view resisted placing the burden on employees:

People with ADHD and ASD are already doing everything they can... it's really the managers (P9).

This tension between empowerment, caution, and resistance highlights the uneven expectations placed on neurodivergent employees and the structural imbalance that persists in workplace cultures.

Table 4. Identity and self-presentation themes illustrating disclosure, masking, and authenticity strategies

Statements	Keywords	Codes	Themes
'I'd rarely say I'm autistic... it makes me better at writing emails. My grammar is very good, but apart from that, I don't think it affects my work.' (P7)	Selective mention, minimising impact, instrumental benefit	Selective/minimal disclosure	Disclosure and identity
'I disclose too much... I actually want this to become more open.... I'm not gonna pretend I'm not who I am or my kids aren't who they are' (P2)	Disclosure, openness	Radical openness and authenticity	
'I'm very comfortable telling my manager... I had to talk to them because of issues with a coworker getting in my space.' (P5)	Disclosure, manager support, comfort, coworker	Practical disclosure to managers	
'[Socially], I always had a best buddy to stick with... like a shield. I always find shields.' (P5)	Social shield, protection	Strategies around masking: shields and withdrawal	Masking and social navigation
'Because I wasn't a bold child, I wasn't diagnosed with ADHD I think I was able to kind of mask it' (P10)	Not bold, masking, undiagnosed	Masking hides symptoms, delays diagnosis	
'I had a real problem with other kids my age... It's like if you conform, you're copying [them], and if you don't conform, then you're weird.' (P6)	Peer norms, conformity, weird, double bind	Masking to meet social/peer expectations	

<p>'Do something that gives you joy.... What if you can work with the ways you think differently? Managers can get amazing things out of that.' (P2)</p>	<p>Advice, joy, work differently, manager's asset</p>	<p>Joy and strength-based focus</p>	<p>Advice to ND employees</p>
<p>"Make sure that you disclose it because you need to give your employer the opportunity to give you what you need.... The fear would always be there, but I still think that the positive would outweigh that.' (P10)</p>	<p>Disclosure, fear, opportunity, employer</p>	<p>Encouragement of disclosure despite risks</p>	
<p>"Don't disclose unless/until you need to, there's a lot of bias out there whether it's conscious or unconscious. In my experience it's worked better to be able to point to things you have achieved because of your neurodivergence.' (P7)</p>	<p>Advice, achievements, bias, disclosure</p>	<p>Strategic non-disclosure and self-protection</p>	
<p>'We're not to be advising the employees, people who have ADHD and ASD are already doing everything they can. They're already trying hard enough. It's really the people who are judging on the other side, the managers, the superiors, those who are doing performance reviews, et cetera. That's that's a lot.' (P9)</p>	<p>Advice to employees, unfair expectations</p>	<p>Rejecting burden on ND employees</p>	

*Workplace dynamics and inclusion*

This concept explores how organisational cultures, practices, and managerial approaches shaped whether participants experienced inclusion or exclusion. Narratives highlighted both enabling and exclusionary dynamics across four themes: workplace inclusion and exclusion, workplace accommodations, workplace support, justice orientation and advocacy, and managerial awareness and adaptation.

*Accommodations*

Access to supports often required self-advocacy. For some, disclosure enabled adjustments:

I have a clinical need to move around and sit different ways all day... they then can't argue, and they're like, we understand (P7).

Others reported systemic gaps:

There are no employee support programs... not in my old job and not in my new job (P10).

In inclusive cultures, accommodations were normalised:

If it makes you more understanding... then I'm all for it (P1).

### *Managerial support*

The role of managers was pivotal in shaping whether support was absent, perfunctory, or transformative. Some participants described dismissal and inaction:

I told my manager... she was like, I'm not their manager. There's nothing I can do (P5).

Others experienced deep loyalty to managers who demonstrated empathy and flexibility:

When I told her about ADHD she goes, I knew that all along... you've still got superpowers... I followed her to her company (P10).

Managerial support was also expressed through small but meaningful adaptations:

My manager is very good because she did a small training course on disability... just being supportive. She didn't know at the start and that was the problem (P8).

### *Justice orientation and advocacy*

Participants often grounded their views of inclusion in wider commitments to fairness, justice, and equity. Strongly rejecting tokenism and discrimination, they emphasised values-based inclusion:

I've no time for discrimination, I've no time for narrow-mindedness, I've no time for racism, I have no time for bigotry (P1).

I'd like to have a positive impact... make the workplace more inclusive (P8).

### *Managerial awareness and adaptation*

Many participants offered advice directed at managers, highlighting the importance of awareness, empathy, and tailored approaches. They urged managers to see beyond numbers and stereotypes:

Managers [should]... try to understand where that person is coming from, no matter how 'crazy' it might seem... give them the benefit of the doubt (P4).

Don't be afraid to offer them a bit of micromanagement if they need it... it's scaffolding: regular checks, deadlines (P6).

Managers [should], just get to know the person who is working for you, because if you know one autistic person, you know one autistic person (P5).

The workplace dynamics and inclusion conceptual cluster illustrates how organisational structures and managerial practices create divergent realities for neurodivergent employees. For some, workplaces were exclusionary and unresponsive, with cultural blind spots and unsupported disclosure. For others, accommodations and supportive managers fostered environments where they could thrive. Across accounts, participants consistently stressed that inclusion requires

more than policies – it depends on cultures of fairness, managerial empathy, and everyday practices that recognise and celebrate individual strengths.

Table 5. Workplace dynamics and inclusion themes: Illustrative quotes on accommodations, managerial support, justice orientation, and cultural fit

Statements	Keywords	Codes	Themes
'My workplace did an employee experience survey... I was the only one who thought that some people's "true selves" aren't pleasant or appropriate... The other three people [managers] said they "never would have made that connection" and they "can't even imagine how I think." (P7)	Leadership blind spots, inclusion boundaries, culture risk	Cultural exclusion	Workplace inclusion and exclusion
'I arrested five people in one year. And the manager said to me, I think you need to do better. So I arrested four the next year. And I said to him, "you didn't say whether more or less arrests were better or not." What about the crime we are preventing, how is that measured?" (P1)	Metrics, misunderstanding, and prevention	Misaligned performance evaluation	
'They've sent around emails to say they're encouraging us to disclose if we're neuro divergent and they're trying to up the diversity and up the awareness and everything' (P10)	Disclosure, diversity, policy	Disclosure and accommodation gaps	
'I don't know network very well. So I only meet with my superiors when I have to and don't tend to actually try and, you know, bolster a relationship there at all.' (P9)	Networking, limited relationships	Difficulty accessing informal networks	
'I have [disclosed to colleagues]. I think I only officially did it with health and safety when they started	Ergonomics, movement need,	Access via disclosure	Workplace accommodations

<p>bothering me about my chair... I have a clinical need to move around and sit different ways all day... I need to be able to move around because of my disability... And they're like, we understand.' (P7)</p>	<p>self-advocacy, policy challenge</p>		
<p>'There are no available employee support program or a coach or anything not in my old job and not in my new job.' (P10)</p>	<p>Employee support program, coach, absence, lack of resources</p>	<p>Systemic support gaps</p>	
<p>'I would say the culture in the present workplace that I am in is hugely supportive, and why not? if we can make allowances for anybody... if it doesn't impact your workload, in fact, if it makes you more understanding... then I'm all for it.' (P1)</p>	<p>Culture, wheelchair ramps, allowances, supportive, inclusion</p>	<p>Cultural support for accommodations</p>	
<p>'My manager is very good because she did a small training course on disability... just being supportive... she didn't know at the start and that was the problem.' (P8)</p>	<p>Manager, training, support, and disability awareness</p>	<p>Training managers build capacity</p>	<p>Managerial awareness and adaptation</p>
<p>'[Managers should remember] everybody comes from, a different walk of life with a different perspective and they're going to have different experiences and to try and understand where that person is coming from, no matter how batshit crazy it might seem to be, you know, so to really give them the benefit of the doubt' (P4)</p>	<p>managers, empathy, see other's perspective, benefit of doubt</p>	<p>Inclusive acceptance and empathy</p>	

<p>'[To managers], don't be afraid to offer them a bit of micromanagement if they need it. It's always seen as a bad thing, but sometimes it could be more supportive, I think. It's scaffolding: regular checks, insurance. It's much easier to focus your mind on something if you know that you've got to talk to someone about it at three pm or nine tomorrow morning or whatever. It's giving people clear deadlines.' (P6)</p>	<p>Micromanagement, scaffolding, check-ins, deadlines</p>	<p>Structured support and scaffolding</p>	
<p>'I had a manager, who was very supportive. I worked with her for about eight years. When I told her about my diagnosis of ADHD, she goes, "I knew that all along... well, you've still got superpowers." I followed her to her company after she left a year later. I'm now working with her again because I feel and want to work for an individual that really sees who I am and celebrates it.' (P10)</p>	<p>Manager, supportive, superpowers, followed</p>	<p>Supportive manager validates identity and builds loyalty</p>	
<p>'Managers [should], just get to know the person who is working for you, because if you know one autistic person, you know one autistic person... Get to know, uh, what will... make them feel okay.' (P5)</p>	<p>Managers, individuality, getting to know a person</p>	<p>Individualised understanding and tailored support</p>	

<p>'I've not time for discrimination, I've no time for narrow-mindedness, I've no time for racism, I have no time for bigotry.' (P1)</p>	<p>Anti-discrimination, anti-racism, strong values</p>	<p>Fairness and systemic justice</p>	<p>Justice orientation and advocacy</p>
<p>'I'd like to have a positive impact... make the workplace more inclusive.' (P8)</p>	<p>Mentor, advocate, inclusion, positive impact</p>	<p>Equity and inclusion in the workplace</p>	
<p>'I started going to big demonstrations when I was 15, peace and technically campaigning and stuff... anti- nuclear group.... The last demos I went to was when I was when I lived in London as a student, probably anti-criminal justice bill.' (P2)</p>	<p>Demonstrations, campaigning</p>	<p>Activism action</p>	
<p>'My manager is very good at accommodating for me.' (P8)</p>	<p>Manager, accommodation, understanding, support</p>	<p>Managerial support and flexibility</p>	<p>Workplace support</p>
<p>'I haven't had negative experiences, nobody judged.' (P6)</p>	<p>Disclosure, acceptance, culture, non-judgement</p>	<p>Cultural support and openness</p>	
<p>'I told my manager... she was like, "listen, I'm not their manager. There's nothing I can do about that."' (P5)</p>	<p>Manager, lack of action, conflict, boundary</p>	<p>Lack of managerial support (negative)</p>	
<p>'Having a work-life balance... being recognised for it... a lot of people with neurodivergency especially have talent that they're not able to unlock as easy.' (P10)</p>	<p>Happiness, recognition, neurodivergent talent</p>	<p>Recognition and value of talent</p>	

## Career and development

This concept explores how neurodivergent professionals experience career pathways, environmental fit, and evolving definitions of success. Narratives reveal both structural barriers and enabling conditions across three clusters: career and environmental fit, educational experiences, and redefining success and progression.

### *Career and environmental fit*

Misalignment between individual needs and workplace structures often prompted job changes:

Most employments... value the timely person who can do the same task day in and day out... for me, it's only interesting as long as it's novel (P9).

Others described drift between roles:

First job was [in a] call centre... then heating oil... then fund accounting (P7).

Yet when environments matched strengths, satisfaction was evident:

When I first landed in this job... I like working with the team... it's a good job for me (P6).

### *Educational experiences*

Schooling was a recurring reference point, shaping self-concept and early career pathways. Several recalled pressure and lack of support:

There was no support at school... I only got diagnosed at end of fifth year (P8).

Others internalised inadequacy:

Everyone else gets it and then there was me who had to read it over and over... I felt pretty stupid (P4).

Yet isolated supportive teachers had lasting impact:

There was a teacher that understood my learning style... my attendance record was perfect that year (P10).

### *Redefining success and progression*

Success, for participants, was not defined narrowly as career advancement but reframed in diverse and often personal terms. Participants challenged conventional metrics, framing success as balance, contribution, and recognition.

Success... being comfortable, and having time with family and social time too (P5).

Others stressed meaningful impact:

I'd love to move into mental health and make a positive impact (P2).

The career and development conceptual cluster reveals both systemic barriers and individual adaptations in navigating professional life. Participants described mismatches between their needs and rigid workplace expectations, but also highlighted the conditions under which they could thrive: flexible environments, supportive managers, and roles that leveraged their strengths. Education was remembered as both a site of exclusion and a formative context, with lasting impacts on confidence and career trajectories. Ultimately, participants challenged traditional definitions of success, reframing achievement in terms of balance, meaning, and recognition of their distinctive contributions.

Table 6. Career and development themes illustrative of career fit, educational experiences, and redefinitions of success

Statements	Keywords	Codes	Themes
'In my [customer-facing role] I would freeze up because of the noise... I didn't really know how to do customer service... now I know I should probably have a script.' (P8)	Sensory overwhelm, freezing, lack of strategy	Environmental misfit and sensory or structural barriers	Career and environmental fit
'I don't tend to get along well in places because [in] most employments, they value the timely person who is able to do the same task day in and day out with a big smile on their face... whereas for me, it's only interesting as long as it's novel. So the first little while will be interesting and then it's boring.... I don't tend to stay in places long.... I leave because I get bored... and then I'm like maybe this would be better every time.' (P9)	Repetition, boredom, novelty, instability	Need for novelty vs. job instability	
'I just didn't have a clear vision or direction.... First job, well, there was the part time work.... I worked in a call centre... after that... selling home heating oil... then moved on to working in fund accounting and finance.... I work as an analyst.' (P7)	Wandering career, trial and error	Unclear direction and career drift	
'[I switched jobs because] I've been in the same company a long time, wanted something	Need for change, family needs, bullying	Family and external pressures on career path	

<p>different... really wanted to be there for my son. I feel like he really needed me... I felt very much like I was being bullied by my line manager... made an official complaint.' (P10)</p>			
<p>'When I first landed in this [current] job, I thought, "yeah, this is the job that I've wanted to have...." Now I'm here. I'm kind of thinking, I like working with the team.... [This job] is a good job for me.' (P6)</p>	<p>Comfort, team role</p>	<p>Environmental fit and supportive conditions</p>	
<p>'Our deadlines are more by the day or by the week rather than throughout the day. So if I don't feel like I can work in the morning, I can't just do nothing all day and I can come back to it in the evening if I'm feeling better then so it's easier to manage.' (P7)</p>	<p>Flexible scheduling, autonomy</p>		
<p>'Took the full-time job in the other place because they are paying for my degree.' (P3)</p>	<p>Full-time job, financial support, education funding, career move, opportunity-driven</p>	<p>Financial security and stability</p>	<p>Career satisfaction</p>
<p>'It is a better working environment.... I have like a millennial manager... he believes if you're not engaged, take a walk or break.... So it's</p>	<p>Supportive manager, breaks, less burnout</p>	<p>Supportive work environment and leadership</p>	

<p>much less of a chance to get burned out... working in a place with good colleagues and a good manager. That's the biggest thing... those things can ruin your life outside of work.' (P7)</p>			
<p>'I'm at my best when there's a problem no one can solve.' (P2)</p>	<p>Problem solving, strengths</p>	<p>Growth, challenge and stimulation</p>	
<p>'I just like organising things and bringing people together and making people happy and you know, I can thrive on that stressful environment.' (P4)</p>	<p>Organising, bringing people together, thriving, stressful environment</p>	<p>Meaningful relationships and recognition</p>	
<p>'I didn't enjoy school... I still see it as very pressured, in need of a radical overhaul.' (P1)</p>	<p>School, pressure</p>	<p>School as a pressured system</p>	<p>Educational experiences</p>
<p>'[School] reports on my emotional regulation wouldn't have been great... there would have been fighting going on in the yard and stuff like that.' (P2)</p>	<p>Primary school, emotional regulation</p>	<p>Behavioural struggles in school</p>	
<p>'In school I would never speak, I was so focused on what I was doing [at a given time].... I was strongly encouraged to attend a special school.' (P3)</p>	<p>School, silent, hyper focused, special school recommendation</p>	<p>Misinterpretation of ND traits</p>	
<p>'I kind of enjoyed [school]. I enjoyed playing sports, music.... I didn't enjoy things academically, I felt... everyone else gets it and then there was me who had to read it over and</p>	<p>School, academics, effort, feeling stupid</p>	<p>Internalised inadequacy</p>	

<p>over and over again... I felt pretty stupid.' (P4)</p>			
<p>'I looked back over them [academic performances]... I had a lot of intelligence. If only I'd apply myself, if only I'd stop daydreaming... when he's in the classroom, he's, you know, he's able to apply himself in certain subjects, and if the subject didn't interest me, sure, it was a waste of time me being there.' (P10)</p>	<p>Intelligence, daydreaming, interest, wasted time</p>	<p>Traditional academics as barrier</p>	
<p>'I really hated studying and hated exams, it was too much pressure... I changed school... I didn't really make a lot of friends.' (P8)</p>	<p>Hated exams, pressure, school transfer, no friends</p>	<p>Exam stress and social challenges</p>	
<p>'There was no support at school... I only got diagnosed at end of fifth year... their approach was "you have accommodations now, what else could you want?"' (P8)</p>	<p>No support, late diagnosis, limited accommodations</p>	<p>Systemic lack of support</p>	
<p>'There was parts of school I loved... I had a teacher that I gelled with... she just kind of understood my learning style and I got on very well in that class.... [E]ven my attendance record was perfect that year.... But then kind of later on in secondary school there was challenges.' (P10)</p>	<p>Teacher, learning style, attendance, challenges</p>	<p>Positive alternative experience (supportive teacher) contrasted with systemic challenges</p>	

'I consider myself empathetic... facial expressions... it is being probably the biggest kind of superpower.' (P4)	Empathy, strengths, superpower, identity	Strengths-based success (superpowers)	Redefining success and progression
'Ultimately I would love to move into the service, particularly mental health, and try and like make a difference in there... because I'd love to be able to make a positive impact.' (P2)	Positive impact, mental health, meaning	Success as meaningful contribution	
'The dream... [is] be promoted to a more senior role... [and] save up for a down payment on an apartment.' (P8)	Promotion, career advancement, housing, savings, goals	Success as progression and achievement	
'This job is a little bit less or a little bit more or is it interesting enough to keep me going?' (P9)	Change, interest, variety, engagement	Success as ongoing interest and stimulation	
'Success for me, looking in five years' time, would be... progressing... not just position-wise, but salary-wise... being comfortable, and having time with family and social time too.' (P5)	Progression, salary, comfort, family time, social life, balance	Success as autonomy, happiness and balance	

### Well-being and coping

This conceptual cluster explores how participants experienced the strain of neurodivergence in professional contexts, alongside the coping strategies they developed to manage stress, emotions, and energy. Narratives highlight two interconnected themes: burnout and well-being; and coping strategies and self-regulation.

#### *Burnout and well-being*

Burnout emerged as a recurring experience, and was described not only as exhaustion but as a cumulative outcome of intense focus, overcommitment, and cognitive overload.

I get burnout for sure... the constant flow of thoughts... empathetic burnout in a leadership capacity (P4).

Others described inefficiency from overload:

I waste hours because if there's a small distraction, I have to restart... doing the same thing two or three times (P10).

**Coping strategies and self-regulation**

Coping strategies ranged from relational supports to creative outlets. One participant noted:

My spouse has been fantastic... it's nice when you have a support network that believes in you (P10).

Others moderated compulsions for social acceptability:

I learned when you're walking with your friends, you cannot count your steps and say we need to go back here (P3).

Creative practices such as knitting were described as therapeutic:

I find knitting really, really therapeutic... I get to count my stitches (P3).

These examples show both resilience and the costs of maintaining equilibrium.

Table 7. Well-being and coping themes illustrating burnout, emotional regulation, and coping strategies

Statements	Keywords	Codes	Themes
'[I get] burnout for sure. And because you care so, so, so intensely about what you're doing... I'm almost interrupting myself constantly because of the constant flow of thoughts.... And that's exhausting... empathetic burnout and in a leadership capacity.' (P4)	Over-caring, nonstop thoughts, and leadership burnout	Chronic burnout / constant stress	Burnout and well-being
'The amount of hours that I waste in a ... day, in a week, in a month because I'm trying to do something that should take me, say, 20 minutes. And if there's a small little distraction or something happens, suddenly I have to restart and then I might be five minutes back or doing the same thing two, maybe three times.' (P10)	Time loss, inefficiency	Cognitive/task overload	
'[S]ometimes I'd say nothing and just bury things that would really annoy me and	Suppressed emotions,	Emotional regulation strain	

then they would build and I would have these explosive reactions.’(P4)	explosive reactions		
‘The right people at the right place at the right time have kind of encouraged me, a lot of self-motivation too.... [My spouse has] been fantastic at being able to support me... given me a lot of courage... it’s nice when you do have a support network around you that does believe in you.’ (P10)	Support network, spouse, encouragement, confidence	Support systems and professional help	Coping strategies and self-regulation
‘[I’m] still do the one with the cup and stuff, but I learned... when you’re walking with your friends you cannot count your steps and be like, guys, we need to go back here.’ (P3)	Step-counting, learned moderation, social adaptation	Compulsive/maladaptive coping	
‘I find knitting really, really therapeutic, because then I can listen to a podcast... I get to count my stitches.’ (P3)	Knitting, therapy, distraction	Adaptive coping practices	

**Generational context**

This conceptual cluster highlights how broader cultural, economic, and familial conditions shaped the trajectories of neurodivergent professionals. Unlike the other clusters, which focus on workplace experiences, generational context operates as an interpretive lens that situates individual narratives within wider historical and social structures. Three intersecting themes emerged: generational pathways to diagnosis, cultural and economic influences on work, and family influence.

*Generational pathways to diagnosis*

Experiences of diagnosis were deeply shaped by generational timing, cultural stigma, and evolving medical frameworks. For many participants, diagnoses occurred only in adulthood, long after symptoms first emerged:

I’m 35... It was [diagnosed] February of last year (P5).

I am 41... I only got diagnosed officially in May of this year (P2).

[I was] 29 when got diagnosed (P10).

Delays were often tied to stigma or systemic barriers:

At the time... it wasn’t as socially acceptable. And so if you were getting a diagnosis, there was something wrong, you know (P9).

Diagnosed at 28... public system refused dual diagnosis... said one can make the other appear on the test (P9).

Others described shifts in diagnostic categories that redefined their identities:

I was initially diagnosed with Asperger’s when I was nine... and they changed it to autism because it was removed from the DSM [Diagnostic and Statistical Manual of Mental Disorders] when I was 27 (P3).

*Cultural and economic influences on work*

Economic conditions and cultural expectations strongly shaped participants’ early career choices. Recessions, labour market instability, and cultural norms of stability influenced not only entry points in working life but also long-term priorities:

After 2008 was pretty tough being an engineer... not great, but we still had our house. A couple of years we couldn’t afford Christmas or big holidays (P7).

I grew up in the ’90s... born and raised [abroad]. The public jobs are pretty good for [job function], and I had a few friends already on the job, so that led me to it (P5).

*Family influence*

Family expectations and support further mediated participants’ educational and career pathways. For some, parents emphasised education to achieve opportunities they themselves had been denied:

My parents... school was very important to them. The main reason why it was so important... they didn’t have the opportunity to go to college (P5).

Others experienced direct guidance into careers through family connections:

My uncle worked in the bank so my mam said I was to go work in the bank... they paid for college and gave study leave (P2).

Yet not all experiences were pressure-driven; in some cases, parents encouraged exploration without demanding persistence:

My parents wanted me to try college to see if it suited me, but there was no pressure to stay (P8).

Table 8. Generational context themes including diagnostic pathways, cultural/economic influences, and family expectations

Statements	Keywords	Codes	Themes
‘I grew up in the 90s... born and raised [abroad]. The public jobs are pretty good for [job function], and I had a few friends already on the job, so that led me to it.’ (P5)	1990s, public jobs, social networks, international	Cultural and social pathways to work	Generational context (cultural/economic)
‘After 2008, [it] was pretty tough being an engineer... not great, but we still had our house. A couple of years we couldn’t afford Christmas or big holidays.’ (P7)	2008 crash, financial hardship, family security	Economic conditions and stability seeking	

<p>'I'm 35.... It was [diagnosed] February of last year.' (P5)</p>	<p>Age 35, adulthood, late diagnosis</p>	<p>Late diagnosis</p>	<p>Generational pathways to diagnosis</p>
<p>'[I was] 29 when [I] got diagnosed.' (P10)</p>	<p>Age 29, young adulthood, late diagnosis</p>		
<p>'I am 41 of age.... I only got diagnosed officially in May of this year.' (P2)</p>	<p>Age 41, adulthood, late diagnosis</p>		
<p>'At the time, I know it kind of felt like, you know, it wasn't as socially acceptable. And so if you were getting a diagnosis, there was something wrong, you know.' (P9)</p>	<p>Diagnosis, stigma, social acceptability, perceived deficit, school context</p>	<p>Delays tied to masking or stigma</p>	
<p>'[I was] diagnosed at 28.... [The] public system refused dual diagnosis... said one can make the other appear on the test.' (P9)</p>	<p>Dual diagnosis, outdated system</p>	<p>Late diagnosis: barriers in healthcare systems</p>	
<p>'I was initially diagnosed with Asperger's when I was nine... and they changed it to autism because it was removed from the DSM when I was... 27.' (P3)</p>	<p>Childhood diagnosis, reclassification, DSM change</p>	<p>Changing diagnostic categories</p>	
<p>'My parents... school was very important to them. The main reason why it was so important to them is because they didn't have the opportunity to go to college.' (P5)</p>	<p>Parents, importance of school, college, no opportunity</p>	<p>Educational expectations and pressures</p>	<p>Family influence</p>
<p>'My uncle worked in the bank so my mam said I was to go work in the bank... they paid for college and gave study leave.' (P2)</p>	<p>Family connection, banking job, study leave</p>	<p>Family-directed career pathways</p>	

'My parents wanted me to try college to see if it suited me, but there was no pressure to stay.' (P8)	Parents, try college, no pressure, family education	Family support	
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## Synthesis of Findings

From the analysis, five conceptual clusters were identified: identity and self-presentation, workplace dynamics and inclusion, career and development, well-being and coping, and generational context. Each cluster captures distinct aspects of participants' lived experiences, but together they reveal a dynamic and interdependent system rather than isolated domains.

### Interconnections across clusters

The clusters are tightly interwoven. Choices around disclosure and masking (identity and self-presentation) directly influenced access to accommodations, workplace relationships, and perceptions of inclusion (workplace dynamics and inclusion). Experiences of support or exclusion in turn shaped career stability, opportunities for progression, and broader definitions of success (career and development). Where misfit or lack of support persisted, participants described heightened risks of stress and burnout (well-being and coping). These pathways were never purely individual but were profoundly shaped by cultural, economic, and familial conditions that varied across generations (generational context).

### Iterative and cyclical pathways

A key insight from the findings is that participants' experiences do not follow a linear trajectory but unfold through recurring cycles of self-presentation, negotiation of workplace dynamics, career recalibration, and coping. For instance, an employee may disclose a diagnosis to secure accommodations, encounter either supportive or dismissive managerial responses, adjust their career plans in light of these experiences, and then develop coping strategies to manage the resulting impacts on well-being. Over time, these processes loop back on one another, shaping future disclosure decisions, workplace interactions, and career aspirations.

When these iterative cycles are seen as part of a broader generational context, the latter can function as an interpretive lens around it. Cultural norms, economic conditions, and family expectations influenced not only when participants received diagnoses but also the kinds of career pathways and workplace supports perceived as attainable. Thus, while the inner cycle captures the dynamic negotiations of workplace neurodiversity on a personal and organisational level, the generational layer highlights how broader historical and cultural forces frame and constrain these pathways.

### Integrating the findings into a model

Based on these findings and our observations, we propose the Workplace Neurodiversity Dynamics: Navigating Inclusion and Exclusion Model. It illustrates how neurodivergent professionals continuously move through interconnected domains of identity and self-presentation, workplace dynamics and inclusion, career development, and well-being and coping (Figure 4).

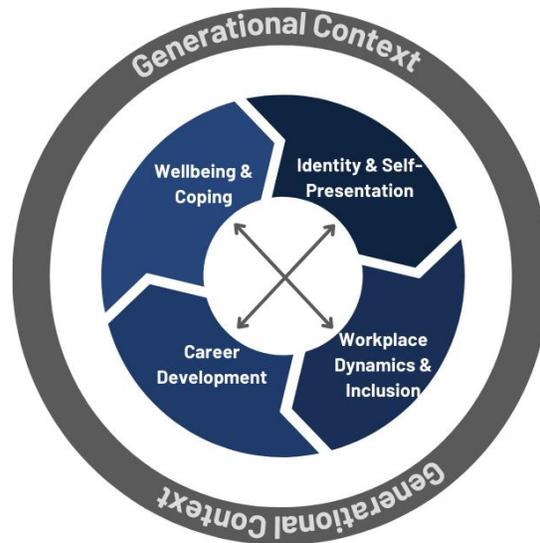


Figure 4. Workplace Neurodiversity Dynamics: Navigating Inclusion and Exclusion Model.

The model depicts four interconnected domains: identity and self-presentation, workplace dynamics and inclusion, career and development, and well-being and coping, linked in cyclical, non-linear pathways with no fixed entry point. Generational context surrounds the cycle as an interpretive lens, highlighting how cultural and historical factors shape workplace experiences of neurodivergent professionals.

The model represents participants' experiences as a cyclical and non-linear process. Rather than progressing through fixed stages, neurodivergent professionals move between the four interconnected domains. Experiences in one domain consistently flow into and reshape the others. For example, disclosure practices influence workplace dynamics, which in turn shape career satisfaction and well-being, ultimately feeding back into new identity decisions.

The model emphasises that there is no single-entry point. Participants entered the cycle through different domains. Some enter at the moment of late diagnosis (identity), while others do so through exclusion or support in the workplace, and still others during times of burnout or career transition. Movement is not always sequential; participants often described 'shortcuts' across domains, such as masking leading directly to burnout, or workplace exclusion triggering withdrawal from identity

disclosure. The arrows in the model highlight these iterative loops, underscoring that inclusion and exclusion are constantly renegotiated rather than achieved once and for all.

On the perimeter, generational context functions as a surrounding interpretive lens. Cultural and historical conditions such as economic recessions, shifting diagnostic categories, and evolving awareness of ADHD and autism in Ireland shape how individuals have encountered each domain and the kinds of opportunities or barriers they faced. This broader lens reminds us that while neurodivergent professionals actively navigate their workplaces, their pathways are embedded within generational structures that enable, constrain, or redirect the cycle. Taken together, the model reconceptualises workplace inclusion not as a static end state, but as a dynamic, iterative, and contextually shaped process.

## **Discussion**

### **Introduction**

This study examined how neurodivergent professionals with ADHD and/or autism in Ireland navigate workplace identity, organisational culture, career development, and well-being, with attention to generational differences. The thematic analysis generated five interrelated domains: 1) identity and self-presentation, 2) workplace dynamics and inclusion, 3) career and development, 4) well-being and coping, and 5) generational context. The last of these captured in a cyclical conceptual model of workplace inclusion. This discussion interprets the findings in relation to existing literature, highlights contributions, and outlines implications for organisations, managers, and policymakers.

### **Identity and self-presentation**

The findings demonstrate that disclosure is not a fixed act but a dynamic, situational process. Participants adopted varied approaches: Selective disclosure that emphasised strengths, radical openness as authenticity, and strategic non-disclosure until performance evidence could counter bias. These strategies align with already-existing scholarship conceptualising disclosure as a continuum rather than a binary choice (Doyle & McDowall, 2021; Hutson & Hutson, 2023). The accounts also highlight that disclosure outcomes depend less on individual strategies than on organisational culture. Inconsistent or negative responses from managers often curtailed future openness, reinforcing earlier findings that disclosure remains a risky strategy in workplaces lacking psychological safety (Bury et al., 2021; Diener et al., 2020).

Masking emerged as a common practice, used to navigate expectations but linked to exhaustion, delayed diagnosis, and reduced authenticity. This echoes literature connecting masking to stress and burnout (Botha et al., 2023) and reflects the 'double empathy problem,' where mutual misunderstandings between autistic and non-autistic individuals reinforce misrecognition (Milton, 2012). Generational patterns were clear: Generation X participants, diagnosed later in life, relied heavily on masking and long-term coping, while Generation Z were more likely to integrate neurodivergence into identity and disclose openly. This supports research showing that generational shifts

in awareness and diagnostic access shape whether neurodivergence is framed retrospectively as a challenge or prospectively as an identity (Abdelnour et al., 2022; McDonald, 2020).

### **Workplace dynamics and inclusion**

Managerial influence was decisive in shaping whether participants experienced belonging or exclusion. Supportive managers facilitated flexibility, recognition, and inclusion while dismissive responses led to disengagement or the employees leaving. These findings confirm research that shows inclusion often relies on individual managers' awareness and goodwill rather than embedded organisational structures (Austin & Pisano, 2017; Ezerins et al., 2024). Participants described loyalty to managers who recognised their strengths and provided meaningful – albeit small – accommodations. This aligns with literature on neuroaffirmative leadership practices (Antony et al., 2024).

Conversely, when disclosure was ignored or dismissed, employees reported isolation, reinforcing concerns that reliance on ad hoc accommodations creates inconsistency and inequity (Bury et al., 2021). Tokenistic diversity initiatives were perceived as particularly damaging, as they undermined trust and authenticity, echoing critiques of superficial inclusion efforts (Whelpley et al., 2021).

Generation X participants recalled workplaces where disability was rarely acknowledged and accommodations depended almost entirely on managerial discretion. Millennials described more formal policies but limited enforcement, while Generation Z entered workplaces where diversity discourse was more visible but not always implemented in practice. This progression reflects wider cultural shifts in Ireland and internationally, where inclusion has become a normative expectation but gaps persist between policy and lived experience (AHEAD, 2023; OECD, 2021).

### **Career and development**

The career trajectories of participants were often non-linear and shaped by environmental fit rather than conventional progression. Many participants described frequent job changes due to misalignment with workplace expectations, supporting research that poor environment fit is a major barrier for neurodivergent professionals (Pfeiffera et al., 2017). Where workplaces offered flexibility and recognition of strengths, participants reported satisfaction and stability. This aligns with studies showing that adaptive environments can unlock the unique contributions of neurodivergent employees (Hotte-Meunier et al., 2024; Loison, 2024).

Education emerged as a formative influence, with participants recalling exclusionary experiences such as pressure, lack of accommodations, or misinterpretation of traits as behavioural problems. These accounts echo evidence that traditional educational systems often fail to support neurodivergent learners, shaping long-term confidence and career choices (Rau et al., 2020; Sainsbury et al., 2023). Yet isolated supportive educators made a significant difference, suggesting that relational support can offset systemic barriers.

A notable contribution of this study is the reframing of success. Rather than equating achievement with promotion or salary, success was defined as balance, well-being, and meaningful contribution. This challenges linear models of career progression and resonates with strengths-based approaches that value diverse contributions (Loison, 2024; Whelpley et al., 2021). Generational contrasts again appeared: Generation X emphasised security and stability, Millennials often described retrospective reinterpretation of their careers, and Generation Z highlighted purpose and authenticity, consistent with broader generational trends (Deloitte, 2025; Francis & Hoefel, 2018).

### **Well-being and coping**

Well-being was precariously balanced between personal coping strategies and structural barriers. Participants described burnout as cumulative, arising from masking, overcommitment, and cognitive intensity. This finding reinforces literature linking masking fatigue and sensory overload to heightened burnout risk (Botha et al., 2023; Milton et al., 2022). Emotional regulation challenges were compounded by environments poorly suited to neurodivergent needs, highlighting that workplace stressors are relational rather than purely individual (Bury et al., 2021).

Coping strategies ranged from adaptive practices, walking, creative hobbies, digital task aids, to moderated compulsions adapted for social acceptability. These strategies illustrate resilience and creativity but also the burden of constant self-regulation. Support networks, especially family and trusted colleagues, were described as critical buffers against burnout, aligning with findings that relational contexts play a vital role in sustaining well-being (Doyle, 2020; Hutson & Hutson, 2023). Generational patterns were again visible: Generation X participants described chronic burnout as linked to decades of coping without support, while the younger cohorts were more likely to frame well-being in terms of balance and proactive coping, reflecting cultural normalisation of mental health discourse (Deloitte, 2025; McDonald, 2020).

### **Generational context as interpretive lens**

A distinctive contribution of this study is the integration of generational context. Diagnostic access, stigma, and workplace expectations varied markedly across all three cohorts. Generation X participants frequently received diagnoses only in midlife, retrospectively reassessing long-standing challenges. Millennials often turned to online communities for self-identification prior to formal diagnosis, while Generation Z benefitted from broader diagnostic frameworks and earlier recognition. These findings enrich biopsychosocial models of neurodiversity (Doyle, 2020; Hutson & Hutson, 2023) by embedding them in wider contexts.

Family expectations and economic conditions also shaped career trajectories. Generation X emphasised security, reflecting recessions and labour market instability during their formative years, while Millennials and Generation Z prioritised purpose, flexibility, and balance, consistent with cultural shifts in workplace values (Francis & Hoefel, 2018; Johns Hopkins Imagine, 2022). This generational framing highlights that inclusion cannot be understood solely at the individual or organisational level; it must

also be situated within historical conditions that structure opportunities and constraints.

### **Contribution of the study**

This study makes both conceptual and empirical contributions to the field of neurodiversity and workplace inclusion. Drawing on the authors' observations and participants' narratives, the study advances a conceptual framework that depicts workplace inclusion for neurodivergent professionals as a cyclical, non-linear process. Rather than treating inclusion as a fixed outcome or the result of discrete accommodations, the framework highlights the iterative negotiations through which professionals manage identity, organisational culture, career development, and well-being. Although based on a small sample, this framework provides a useful interpretive lens for understanding the dynamics of inclusion and offers a foundation for future research to refine and test in broader contexts.

A second contribution is the use of generational context as an interpretive lens. The findings show how diagnostic access, stigma, and expectations of inclusion were patterned across cohorts. Generation X emphasised coping before late-life diagnosis, Millennials navigating retrospective reinterpretation, and Generation Z framing neurodivergence as a more visible and integral identity. This generational framing suggests that inclusion is shaped not only by organisational culture but also by the historical moment in which individuals come of age.

Empirically, this research provides one of the first qualitative examinations of ADHD and ASD in the Irish workplace. While international literature has explored disclosure, accommodations, and stigma, there remains limited insight into how these issues unfold in Ireland, where neurodiversity is not explicitly recognised in employment law (NDA, 2025; OECD, 2021). By capturing the lived experiences of Irish professionals across generational cohorts, this study addresses that gap and contributes evidence directly relevant to national debates about inclusion.

Finally, the study amplifies the ways neurodivergent professionals themselves define success, resilience, and inclusion. Participants consistently reframed achievement in terms of balance, well-being, and meaningful contribution, challenging deficit-oriented perspectives and supporting strengths-based, neuroaffirmative approaches (Antony et al., 2024; Loison, 2024; Whelpley et al., 2021).

Together, these contributions position the study as both an interpretive framework and an empirical resource. By situating lived experiences within generational and cultural contexts, the research adds nuance to existing scholarship and highlights directions for future investigation, while offering practical insights into how workplaces might better support neurodivergent employees.

### **Implications**

The findings carry important implications for organisations, managers, policymakers, and neurodivergent employees.

For organisations, inclusion should move beyond ad hoc accommodations towards systemic neuroaffirmative practices. Embedding flexible policies, adaptive

recruitment, and inclusive workplace design is critical to ensuring support does not depend solely on managerial discretion.

For managers, the findings highlight the pivotal role of everyday practices. Empathy, flexibility, and recognition of individual strengths was shown to enable participants to thrive, while dismissive responses undermined their trust. Training that equips managers to adapt communication styles, offer structured scaffolding, and resist tokenism could significantly reduce burnout and employee turnover.

For policymakers, the absence of explicit recognition of neurodiversity in Irish employment law creates inconsistency in workplace practices. Embedding neurodiversity explicitly within national strategies, informed by lived experience, could strengthen accountability and reduce reliance on individual disclosure.

For neurodivergent employees, the study validates diverse strategies of identity management and coping. Disclosure, masking, or selective openness were shown to be context-dependent rather than fixed. Recognising this diversity may empower individuals to adopt strategies suited to their circumstances while also advocating for systemic change.

### **Strengths and limitations**

A key strength of the study lies in centring lived experience, offering nuanced insight into how neurodivergent professionals navigate identity, workplace culture, and career to support their well-being. The incorporation of a generational lens adds a distinctive interpretive layer rarely applied in neurodiversity research. The Irish focus further contributes value by situating findings within a national context where policy gaps remain.

Limitations include the modest sample size of ten participants, which, while sufficient for thematic saturation, restricts generalisability. The focus on ADHD and ASD excludes other neurodivergent profiles such as dyslexia or dyspraxia. Recruitment through personal networks may have favoured participants more comfortable with disclosure, potentially limiting diversity of perspective. Finally, the majority of participants were Millennials, which may skew intergenerational comparisons.

### **Future research**

Future studies should include larger and more diverse samples, encompassing a broader range of neurodivergent profiles and occupational sectors. Longitudinal designs could trace how disclosure strategies, career trajectories, and well-being evolve over time, capturing the cyclical processes described here. Comparative research across cultural and policy contexts could illuminate how legal recognition and organisational frameworks shape inclusion. Finally, the conceptual framework developed here offers a foundation for mixed-methods research to test the prevalence and impact of the cyclical dynamics identified.

### **Conclusion of discussion**

This study highlights that workplace inclusion for neurodivergent professionals is not a static outcome but a cyclical process shaped by identity negotiation, organisational

culture, career development, and well-being. Generational context further conditions these dynamics, influencing diagnostic pathways, advocacy styles, and expectations of inclusion. By situating lived experiences in an under-researched context, the study extends scholarship conceptually and empirically while offering practical guidance for organisations and policymakers. Building neuroaffirmative workplaces requires moving beyond reliance on individual disclosure or managerial goodwill toward systemic practices that recognise inclusion as an ongoing, dynamic process.

## **Conclusion**

The aim of this study was to explore how neurodivergent professionals with ADHD and/or ASD in Ireland navigate workplace identity, organisational culture, career development, and well-being and how generational context shapes these experiences. Using inductive thematic analysis, the research examined the lived accounts of participants across Generation X, Millennials, and Generation Z to understand the conditions that enable or constrain inclusion.

The findings highlight five key insights. First, disclosure and identity management emerged as dynamic, situational strategies rather than fixed choices, with participants continually weighing authenticity against risk. Second, organisational culture and managerial practices played a decisive role in shaping whether employees experienced belonging or exclusion, reinforcing the importance of systemic rather than ad hoc approaches to inclusion. Third, participants' career pathways often diverged from linear models of advancement, instead emphasising environmental fit, balance, and meaningful contribution as markers of success. Fourth, well-being was precariously balanced between personal coping strategies and structural barriers, with burnout linked to long-term masking and inconsistent support. Finally, generational context provided an interpretive lens for understanding these experiences: late-life diagnoses and coping strategies characterised Generation X; retrospective reinterpretation was prominent among Millennials; and greater openness and advocacy were more common among Generation Z.

The study makes two main contributions. Conceptually, it offers a framework that reconceptualises workplace inclusion as a cyclical, non-linear process shaped by ongoing negotiations across identity, culture, career, and well-being. It also introduces generational context as a critical lens, showing how historical conditions shape diagnostic access, identity, and expectations of inclusion. Empirically, it provides one of the first qualitative examinations of neurodivergent professionals in the Irish workplace, addressing a gap in the literature.

While the study is limited by its modest sample size and focus on ASD and ADHD, it offers valuable exploratory insights that can inform future research. Larger, more diverse, and longitudinal studies are needed to refine and test the framework, and comparative research across national contexts could further illuminate how policy and culture shape workplace inclusion.

Ultimately, the findings underscore that inclusion for neurodivergent professionals cannot be reduced to isolated accommodations or individual acts of disclosure. Instead, it is an iterative process, co-constructed through everyday interactions,

organisational cultures, and generational contexts. Recognising inclusion as dynamic rather than static offers both scholars and practitioners a more accurate and actionable way of understanding the realities of work, and a pathway toward building more sustainable and equitable workplaces in Ireland and beyond.

## References

- Abdelnour, E., Jansen, M.O., and Gold, J.A. (2022) 'ADHD diagnostic trends: Increased recognition or overdiagnosis?', *Missouri Medicine*, 119 (5), pp. 467–473. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9616454/> (Accessed: August 8, 2025).
- AHEAD Journal (2023) 'How inclusive are diversity and inclusion strategies for people with disabilities in the workplace?' Dublin: Association for Higher Education Access and Disability. <https://chatgpt.com/g/g-p-6845004d90fc8191aaae0a56adeca8fe-new-research-neurodiversity-in-the-workplace/c/68cc6431-33bc-8325-893f-7322fb8695ad> (Accessed: June 30, 2025).
- Antony, S., Ramnath, R., and Ellikkal, A. (2024) 'Empowering neuro-diversity: A neuroaffirmative approach to workplace coaching', *International Coaching Psychology Review*, 19, pp. 49–59. 10.53841/bpsicpr.2024.19.1.49.
- Arvidsson, O. et al. (2025) 'ASD and ADHD symptoms in 18-year-olds – A population-based study of twins born 1993 to 2001', *Psychiatry Research*, 351, 116613. Available at: doi:10.1016/j.psychres.2025.116613.
- Asasumasu, K. (2018) 'PSA from the actual coiner of “Neurodivergent.”' Tumblr (blog). Available at: <https://sherlocksflataffect.tumblr.com/post/121295972384/psa-from-the-actual-coiner-of-neurodivergent> <https://sherlocksflataffect.tumblr.com/post/121295972384/psa-from-the-actual-coiner-of-neurodivergent> (Accessed: Nov 11 2025).
- AsIAm (2023) AsIAm: Ireland's National Autism Charity. Available at: <https://asiam.ie/> (Accessed: June 30, 2025).
- Austin, R.D. and Pisano, G.P. (2017) 'Neurodiversity as a competitive advantage', *Harvard Business Review*, 95, pp. 96–103. Available at: <https://hbr.org/2017/05/neurodiversity-as-a-competitive-advantage>
- Bank of Ireland (2024) '48% of neurodivergent people have not disclosed their condition in work, according to RED C poll'. Press release, 15 April. Available at: <https://www.bankofireland.com/about-bank-of-ireland/press-releases/2024/48-of-neurodivergent-people-have-not-disclosed-their-condition-in-work-according-to-red-c-poll/#:~:text=Almost%201%20in%2010%20adults,up%20effort%20and%20focused%20action> (Accessed: June 30, 2025).
- Bölte, S., Neufeld, J., Marschik, P.B., Williams, Z.J., Gallagher, L., and Lai, M.C. (2023) 'Sex and gender in neurodevelopmental conditions', *Nature Reviews Neurology*, 19 (3), pp. 136–159. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC10154737/> (Accessed: August 8, 2025).
- Botha, M., Hanlon, J., and Williams, G.L. (2023) 'Does language matter? Identity-first versus person-first language use in autism research: A response to Vivanti',

- Journal of Autism and Developmental Disorders*, 53 (2), pp. 870–878. doi:10.1007/s10803-020-04858-w. Available at: <https://pubmed.ncbi.nlm.nih.gov/33474662/> (Accessed: June, 2, 2025).
- Braun, V. and Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3 (2), pp. 77–101. Available at: <https://doi.org/10.1191/1478088706qp063oa>
- Bury, S.M., Flower, R.L., Zulla, R., Nicholas, D.B., and Hedley, D. (2021) 'Workplace Social Challenges Experienced by Employees on the Autism Spectrum: An International Exploratory Study Examining Employee and Supervisor Perspectives', *Journal of Autism and Developmental Disorders*, 51, pp. 1614–1627. Available at: doi: 10.1007/s10803-020-04662-6
- Casanova, M.F., Frye, R.E., Gillberg, C., and Casanova, E.L. (2020) 'Editorial: Comorbidity and Autism Spectrum Disorder', *Frontiers in Psychiatry*, 11, 617395. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC7714785/> (Accessed: 8 September 2025).
- Center for Generational Kinetics. (2025) The Center for Generational Kinetics. Available at: <https://genhq.com/> (Accessed: August 8, 2025).
- Chapman, R. (2019) 'Mental disorder within the neurodiversity paradigm,' (*Psychology Today* blog), 30 July. Available at: <https://www.psychologytoday.com/ca/blog/neurodiverse-age/201907/mental-disorder-within-the-neurodiversity-paradigm> (Accessed: June, 2, 2025).
- Cleveland Clinic (2022) 'What does it mean to be neurodivergent?' Available at: <https://my.clevelandclinic.org/health/symptoms/23154-neurodivergent> (Accessed: June, 2, 2025).
- Craddock, E. (2024) 'Being a woman is 100% significant to my experiences of attention deficit hyperactivity disorder and autism: Exploring the gendered implications of an adulthood combined autism and attention deficit hyperactivity disorder diagnosis', *Qualitative Health Research*, 34 (14), pp. 1442–1455. doi:10.1177/10497323241253412. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC11580322/#:~:text=The%20neurodiversity%20paradigm%20subverts%20this,a%20gap%20this%20article%20addresses> (Accessed: August 8, 2025).
- Creswell, J.W. and Poth, C.N. (2018) *Qualitative inquiry and research design: Choosing among five approaches*. 4th ed. Thousand Oaks, CA: SAGE Publications.
- Day, M., Wood, C., Corker, E., and Freeth, M. (2024) 'Understanding the barriers to hiring autistic people as perceived by employers in the United Kingdom', *Autism*, 29 (5), pp. 1263–1274. doi:10.1177/13623613241301493. Available at: <https://journals.sagepub.com/doi/pdf/10.1177/13623613241301493> (Accessed: June 30, 2025).

- Deloitte (2025) '2025 Gen Z and Millennial Survey'. Available at: <https://www.deloitte.com/global/en/issues/work/genz-millennial-survey.html> (Accessed: 8 September 2025).
- Denzin, N.K. and Lincoln, Y.S. (eds.). (2017) *The SAGE Handbook of Qualitative Research*. 5th ed. Thousand Oaks, CA: SAGE Publications.
- Diener, M.L., Wright, C.A., Taylor, C., D'Astous, V., and Lasrich, L. (2020) 'Dual perspectives in autism spectrum disorders and employment: Toward a better fit in the workplace Department of Family and Consumer Studies, University of Utah, Salt Lake City, UT', *USA Work*, 67, (2020) pp. 223–237.
- Dimock, M. (2019) 'Where Millennials end and Generation Z begins'. Washington, DC: Pew Research Center. Available at: <https://www.pewresearch.org/short-reads/2019/01/17/where-millennials-end-and-generation-z-begins/> (Accessed: June 30, 2025).
- Doyle, N. (2020) 'Neurodiversity at work: A biopsychosocial model and the impact on working adults', *British Medical Bulletin*, 135 (1), pp. 108–125. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC7732033/> (Accessed: 8 September 2025).
- Doyle, N., and McDowall, A. (2021) 'Diamond in the rough? An empty review of research into neurodiversity and a road map for developing the inclusion agenda', *Equality, Diversity and Inclusion: An International Journal*, 41, pp. 352–382.
- Dufault, R.J. et al. (2023) 'Higher rates of autism and attention deficit/hyperactivity disorder in American children: Are food quality issues impacting epigenetic inheritance?', *World Journal of Clinical Pediatrics*, 12 (2), pp. 25–37. doi:10.5409/wjcp.v12.i2.25.
- Dwyer, P. (2022) 'The neurodiversity approach(es): What are they and what do they mean for researchers?', *Human Development*, 66 (2), pp. 73–92. doi:10.1159/000523723. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9261839/> (Accessed: June, 2, 2025).
- European Agency for Safety and Health at Work (EU-OSHA). (2025) 'Neurodiversity at work: impact on occupational safety and health (OSH)'. Available at: <https://oshwiki.osha.europa.eu/en/themes/neurodiversity-work-impact-osh> (Accessed: June 15, 2025).
- Ezerins, M.E., Simons, L.S., Vogus, T.J. (2023) 'Autism and employment: a review of the new frontier of diversity research journal of management', pp. 1–43. Available at: 10.1177/01492063231193362. © The Author(s) 2023
- Francis, T. and Hoefel, F. (2018) '*True Gen*: Generation Z and its implications for companies'. New York: McKinsey & Company. Available at: <https://www.mckinsey.com/industries/consumer-packaged-goods/our-insights/true-gen-generation-z-and-its-implications-for-companies#/> (Accessed: August 8, 2025).

- Friedman, A., Paltoglou, A., and Sorte, R. (2024) 'A qualitative exploration of the experiences of self-diagnosed autistic women and gender-diverse individuals who are not pursuing an autism diagnosis', *Neurodiversity*, 2, 27546330241307828. Available at: <https://journals.sagepub.com/doi/10.1177/27546330241307828> (Accessed: August 8, 2025).
- Goldberg, H. (2023) 'Unraveling Neurodiversity: Insights from Neuroscientific Perspectives', *Encyclopedia*, 3 (3), pp. 972–980. doi:10.3390/encyclopedia3030070. Available at: <https://www.mdpi.com/2673-8392/3/3/70> (Accessed: June, 2, 2025).
- Government of Ireland (1998) *Employment Equality Act 1998*. (Act No. 21 of 1998). Available at: <https://www.irishstatutebook.ie/eli/1998/act/21/enacted/en/html> (Accessed: June 30, 2025).
- Government of Ireland (2000) *Equal Status Act 2000*. (Act No. 8 of 2000). Available at: <https://www.irishstatutebook.ie/eli/2000/act/8/enacted/en/html> (Accessed: June 30, 2025).
- Government of Ireland (2014) *Irish Human Rights and Equality Commission Act 2014*. (Act No. 25 of 2014). Available at: <https://www.irishstatutebook.ie/eli/2014/act/25/enacted/en/html> (Accessed: June 30, 2025).
- Grosvenor, L.P. et al. (2024) 'Autism diagnosis among US children and adults, 2011–2022', *JAMA Network Open*, 7 (10), e2442218. Available at: <https://pubmed.ncbi.nlm.nih.gov/39476234/> (Accessed: August 8, 2025).
- Guest, G., Bunce, A., and Johnson, L. (2006) How many interviews are enough? an experiment with data saturation and variability. *Field Methods*, 18 (1), 59–82. <https://doi.org/10.1177/1525822X05279903> (Original work published 2006)
- Hotte-Meunier, A. et al. (2024) 'Strengths and challenges to embrace attention-deficit/hyperactivity disorder in employment—A systematic review', *Neurodiversity*, 2, pp. 1–13.
- Hutson, P. and Hutson, J. (2023) 'Neurodiversity and inclusivity in the workplace: Biopsychosocial interventions for promoting competitive advantage', *Journal of Organizational Psychology*, 23 (2), pp. 1–16. Available at: [https://www.researchgate.net/publication/372015769\\_Neurodiversity\\_and\\_Inclusivity\\_in\\_the\\_Workplace\\_Biopsychosocial\\_Interventions\\_for\\_Promoting\\_Competitive\\_Advantage](https://www.researchgate.net/publication/372015769_Neurodiversity_and_Inclusivity_in_the_Workplace_Biopsychosocial_Interventions_for_Promoting_Competitive_Advantage) (Accessed: 18 September 2025).
- Irish Congress of Trade Unions (ICTU). (2024) *Neurodiversity in the workplace: A guide for trade union representatives*. Dublin: ICTU. Available at: <https://www.ictu.ie/publications/neurodiversity-guide> (Accessed: June 30, 2025).
- Irish Human Rights and Equality Commission (IHREC). (2020) *Employment Rights*. Dublin: IHREC. Available at:

- <https://www.ihrec.ie/app/uploads/2022/08/IHREC-Employment-Rights-Leaflet-2019-WEB.pdf> (Accessed: June 30, 2025).
- Johns Hopkins University (2022a) 'Neurodivergence at a glance', *Imagine Blog*, 5 October. Available at: <https://imagine.jhu.edu/blog/2022/10/05/neurodivergence-at-a-glance/> (Accessed: June 2, 2025).
- Johns Hopkins University (2022b) 'The changing generational values', *Imagine Blog*, 17 November. Available at: <https://imagine.jhu.edu/blog/2022/11/17/the-changing-generational-values/> (Accessed: June 30, 2025).
- Johnson, T.P. (2014) 'Snowball Sampling: Introduction'. In *Wiley StatsRef: Statistics Reference Online* (eds N. Balakrishnan et al.). Available at: <https://onlinelibrary.wiley.com/doi/10.1002/9781118445112.stat05720>
- Leifler, E., Borg, A., and Bölte, S. (2024) 'A multi-perspective study of perceived inclusive education for students with neurodevelopmental disorders', *Journal of Autism and Developmental Disorders*, 54 (4), pp. 1611–1617. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC10981633/> (Accessed: August 8, 2025).
- Loison, A. (2024) 'Neurodiversity in Employment: A literature review', *DBS Journal of Theory and Applied Research*.
- Maguire, M. and Delahunt, B. (2017) 'Doing a thematic analysis: A practical, step-by-step guide for learning and teaching scholars', *All Ireland Journal of Higher Education*, 9 (3). Available at: <https://ojs.aishe.org/index.php/aishe-j/article/view/335> (Accessed: 8 September 2025).
- McDonald, T.A. (2020) 'Autism identity and the “lost generation”: Structural validation of the Autism Spectrum Identity Scale and comparison of diagnosed and self-diagnosed adults on the autism spectrum', *Autism in Adulthood*, 2 (1). doi:10.1089/aut.2019.0069. Available at: [https://www.researchgate.net/publication/339519460\\_Autism\\_Identity\\_and\\_the\\_Lost\\_Generation\\_Structural\\_Validation\\_of\\_the\\_Autism\\_Spectrum\\_Identity\\_Scale\\_and\\_Comparison\\_of\\_Diagnosed\\_and\\_Self-Diagnosed\\_Adults\\_on\\_the\\_Autism\\_Spectrum](https://www.researchgate.net/publication/339519460_Autism_Identity_and_the_Lost_Generation_Structural_Validation_of_the_Autism_Spectrum_Identity_Scale_and_Comparison_of_Diagnosed_and_Self-Diagnosed_Adults_on_the_Autism_Spectrum) (Accessed: August 8, 2025).
- McKinsey & Company (2024) *What is Generation Z?* New York: McKinsey & Company. Available at: <https://www.mckinsey.com/featured-insights/mckinsey-explainers/what-is-gen-z> (Accessed: June 30, 2025).
- Milton, D. (2012) 'On the ontological status of autism: The “double empathy problem”', *Disability and Society*, 27 (3), pp. 883–887.
- Milton, D., Gurbuz, E., and López, B. (2022) 'The “double empathy problem”: Ten years on', *Autism*, 26 (8), pp. 1901–1903. Available at: <https://doi.org/10.1177/13623613221129123> (Original work published 2022)
- Naeem M. and Ozuem, W. (2022) 'Understanding misinformation and rumors that generated panic buying as a social practice during COVID-19 pandemic:

- Evidence from twitter, YouTube and focus group interviews', *Information Technology & People*, 35 (7), pp. 2140–2166.
- Naeem, M., Ozuem, W., Howell, K., and Ranfagni, S. (2023) 'A step-by-step process of thematic analysis to develop a conceptual model in qualitative research', *International Journal of Qualitative Methods*, 22. Available at: <https://doi.org/10.1177/16094069231205789>
- National Disability Authority (NDA). (2025a) *About the Autism Innovation Strategy*. Available at: <https://nda.ie/disability-policy/national-disability-strategies/autism/about-the-autism-innovation-strategy> (Accessed: June 15, 2025).
- National Disability Authority (NDA). (2025b) *Autism Innovation Strategy*. Available at: <https://nda.ie/disability-policy/national-disability-strategies/autism/about-the-autism-innovation-strategy> (Accessed: June 15, 2025).
- National Disability Authority (NDA). (2025c) *UN Convention on the Rights of Persons with Disabilities (UNCRPD)*. Available at: <https://nda.ie/disability-policy/uncrpd> (Accessed: June 15, 2025).
- Negrin, K. A., Slaughter, S. E., Dahlke, S., and Olson, J. (2022) 'Successful recruitment to qualitative research: A critical reflection', *International Journal of Qualitative Methods*, 21. <https://doi.org/10.1177/16094069221119576>
- Neurodiversity Power Project. (2023) *NeuroDiversity Power Handbook: Methodologies, techniques, and tools for Managing Neurodiversity at Workplace*. Version 4, Part B completed. Available at: [https://neurodiversitypower.eu/wp-content/uploads/2025/03/IO1\\_NeuroDiversity-Handbook-v.4.-with-Part-B-completed.pdf](https://neurodiversitypower.eu/wp-content/uploads/2025/03/IO1_NeuroDiversity-Handbook-v.4.-with-Part-B-completed.pdf) (Accessed: June 15, 2025).
- Nowell, L.S., Norris, J.M., White, D.E., and Moules, N.J. (2017) 'Thematic analysis: Striving to meet the trustworthiness criteria', *International Journal of Qualitative Methods*, 16 (1), pp. 1–13. Available at: <https://journals.sagepub.com/doi/10.1177/1609406917733847> (Accessed: 8 September 2025).
- Organisation for Economic Co-operation and Development (OECD). (2021) *Disability, work and inclusion in Ireland: Engaging and supporting employers*. Paris: OECD Publishing. Available at: [https://www.oecd.org/content/dam/oecd/en/publications/reports/2021/09/disability-work-and-inclusion-in-ireland\\_c6df4722/74b45baa-en.pdf](https://www.oecd.org/content/dam/oecd/en/publications/reports/2021/09/disability-work-and-inclusion-in-ireland_c6df4722/74b45baa-en.pdf) (Accessed: June 15, 2025).
- Palinkas, L.A., Horwitz, S.M., Green, C.A., Wisdom, J.P., Duan, N. and Hoagwood, K. (2015) 'Purposeful sampling for qualitative data collection and analysis in mixed method implementation research', *Administration and Policy in Mental Health and Mental Health Services Research*, 42 (5), pp. 533–544. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC4012002/> (Accessed: 8 September 2025).

- Patton, M.Q. (2015) *Qualitative Research & Evaluation Methods: Integrating Theory and Practice*. 4th ed. Thousand Oaks, CA: SAGE Publications.
- Pew Research Center. (2015) *The Whys and Hows of Generations Research*. Washington, DC: Pew Research Center. Available at: <https://www.pewresearch.org/politics/2015/09/03/the-whys-and-hows-of-generations-research/> (Accessed: June 30, 2025).
- Pfeiffera, B., Brusilovskiya, E., Davidsona, A., and Perschb, A. (2017) 'Impact of person-environment fit on job satisfaction for working adults with autism spectrum disorders', *Journal of Vocational Rehabilitation*, 48, pp. 49–57.
- Raaj, S., Wrigley, M., and Farrelly, R. (2023) 'Adult ADHD in the Republic of Ireland: The evolving response', *BJPsych Bulletin*, 48, pp. 1–4.
- Rau, S. et al. (2020) 'Identifying comorbid ADHD in autism: Attending to the inattentive presentation', *Research in Autism Spectrum Disorders*, 69, 101468. Available at: <https://www.sciencedirect.com/science/article/pii/S1750946719301564> (Accessed: August 8, 2025).
- Sainsbury, W.J., Carrasco, K., Whitehouse, A.J.O., McNeil, L., and Waddington, H. (2023) 'Age of diagnosis for co-occurring autism and attention deficit hyperactivity disorder during childhood and adolescence: A systematic review', *Review Journal of Autism and Developmental Disorders*, 10 (2), pp. 563–575.
- Schwandt, T.A. (2015) *The SAGE Dictionary of Qualitative Inquiry*. 4th ed. Thousand Oaks, CA: SAGE Publications.
- Shah, P.J. et al. (2022) 'Neurodevelopmental disorders and neurodiversity: Definition of terms from Scotland's National Autism Implementation Team', *The British Journal of Psychiatry*, 221, pp. 577–579.
- Shaw, K.A. et al. (2025) 'Prevalence and early identification of autism spectrum disorder among children aged 4 and 8 years – Autism and Developmental Disabilities Monitoring Network, 16 sites, United States, 2022', *MMWR Surveillance Summaries*, 74 (SS-2), pp. 1–22.
- Singer, J. (2017) *Neurodiversity: The Birth of an Idea*. Sydney: Judy Singer.
- Smith, J.A., Flowers, P., and Larkin, M. (2009) *Interpretative Phenomenological Analysis: Theory, Method and Research*. London: SAGE Publications.
- Stenning, A. and Rosqvist, H.B. (2021) 'Neurodiversity studies: Mapping out possibilities of a new critical paradigm', *Disability & Society*, 36 (9), pp. 1532–1537. Available at: <https://www.tandfonline.com/doi/full/10.1080/09687599.2021.1919503> (Accessed: June, 2, 2025).
- Tracy, S.J. (2010) 'Qualitative quality: Eight “big-tent” criteria for excellent qualitative research', *Qualitative Inquiry*, 16 (10), pp. 837–851. Available at:

<https://journals.sagepub.com/doi/10.1177/1077800410383121> (Accessed: 8 September 2025).

- Tran, T.P.T. et al. (2025) 'Building trust for community-engaged research: recommendations from a qualitative study', *Journal of Participatory Research Methods*, 6 (2), pp. 89–113. <https://doi.org/10.35844/001c.131692>
- Tromans, S.J., Drewett, A., Lee, P.H., and O'Reilly, M. (2023) 'A survey of the workplace experiences of police force employees who are autistic and/or have attention deficit hyperactivity disorder', *BJPsych Open*, 9 (4), e128. Available at: <https://www.cambridge.org/core/journals/bjpsych-open/article/survey-of-the-workplace-experiences-of-police-force-employees-who-are-autistic-andor-have-attention-deficit-hyperactivity-disorder/652CD1132A319434BA89CDE7A93A2B42> (Accessed: June 30, 2025).
- United Nations Department of Economic and Social Affairs (UN DESA). (2006) *Convention on the Rights of Persons with Disabilities (CRPD)*. Available at: <https://social.desa.un.org/issues/disability/crpd/convention-on-the-rights-of-persons-with-disabilities-crpd> (Accessed: June 15, 2025).
- van Manen, M. (2018) *Researching Lived Experience: Human Science for an Action Sensitive Pedagogy*. 2nd ed. New York: Routledge.
- Whelpley C.E., Banks, G.C., Bochantin, J.E., Sandoval, R. (2021) 'Tensions on the spectrum: an inductive investigation of employee and manager experiences of autism', *Journal of Business and Psychology*, 36, pp. 283–297.
- Wiederhold, B.K. (2020) 'Our neurodiverse society: The role of advanced technology', *Cyberpsychology, Behavior, and Social Networking*, 23, pp. 1–2.