

ADHD Inquiry NZ – Media Kit

From awareness to accountability: it's time for an ADHD Inquiry.

This is a grassroots, unfunded, non-partisan petition led by lived experience, calling for systemic change.

Petition Summary

Petition Title: Launch a Public Inquiry into Systemic Harm to People with ADHD in Aotearoa

Petition Request: That the House of Representatives initiate a Select Committee inquiry into ADHD-related systemic harm, including misdiagnosis, stigma, and limited access to culturally safe, neuro-affirming support in health, education and employment, and establish a National ADHD Strategy and Annual Funding Plan to address lifelong harm.

Petition Reason: ADHD affects about 280,000 New Zealanders who face stigma, misdiagnosis, and limited access to culturally safe, neuro-affirming support in schools, healthcare, workplaces, and communities. Other countries have held inquiries into ADHD policy and investment, but New Zealand does not yet have a coordinated plan. Evidence shows systemic harm, serious health impacts, and inequities for Māori, Pasifika, women and girls. The issues of people with ADHD have been seen as a personal problem.

Petition Link: <https://petitions.parliament.nz/42b5c524-f57f-4c3f-eb1f-08ddcf0ec835>

Why now? ADHD diagnosis rates are rising, but support systems haven't caught up. Without action, harm will continue to grow.

Why This Matters

New Zealand has been a global first on big issues: women's suffrage, nuclear disarmament, marriage equality. This petition is believed to be the first public-led call for a cross-sector parliamentary inquiry into systemic harm to people with ADHD.

Despite increasing awareness, people with ADHD continue to face:

- Misunderstanding in schools
- Underdiagnosis in Māori and Pasifika communities
- Misdiagnosis or very late diagnosis, especially in women and girls
- Stigma and exclusion in workplaces

- Over-representation in the justice system (up to five times more likely to be imprisoned)
- Ongoing inequities for rainbow communities
- Invisibility in funding and policy decisions
- Failure to redesign systems for neuroinclusion, a human rights issue

An inquiry must be Te Tiriti-grounded and trauma-informed, confronting racism and colonisation that continue to shape ADHD narratives, access, and neglect.

Why an Inquiry?

ADHD is cross-sectoral. Health, education, justice, and employment all touch it, but no single ministry “owns” it. Accountability keeps slipping through the cracks.

Services alone won’t fix systemic harm. More diagnosis pathways without funding, equity actions, or coordination leave people diagnosed but still unsupported.

An inquiry has decision-making weight. In New Zealand, a Select Committee inquiry:

- Has the power to call evidence from agencies and the public, and record harm on the parliamentary record so it cannot be ignored.
- Produces formal recommendations backed by Parliament.
- Requires a Government Response, unlike most advocacy campaigns or service reviews.

In practice: An inquiry can shift ADHD from being treated as an “awareness” issue to a matter of national equity, funding, and accountability – with solutions co-designed alongside the people most affected, backed by deadlines, cross-agency milestones, and a funded National ADHD Strategy.

ADHD by the Numbers

- **Justice:** Young adults with ADHD in NZ are up to 5× more likely to be imprisoned. International studies show 25–55% of adults in prison meet ADHD criteria. (*Bowden et al., 2023; Baggio et al., 2018*)
- **Life Expectancy:** Adults with ADHD live 6.8 years fewer (men) and 8.6 years fewer (women) than peers – a greater reduction than type 2 diabetes. (*O’Callaghan et al., 2025; Di Angelantonio et al., 2023*)
- **Cost of Doing Nothing:** Deloitte Access Economics (2019) estimated ADHD costs Australia A\$20.4b annually (~A\$25,000 per person). Applied to NZ, this suggests an indicative cost of NZ\$4.5–7.5b annually, though NZ has never done its own modelling. (*Deloitte Access Economics, 2019*)

Media Angles & Headlines

Systemic & Data-Driven

- “The data is there, but the frameworks don’t reflect it.”
- Life expectancy: people with ADHD lose 7–9 years on average — mostly preventable.
- The hidden bill: untreated ADHD may be costing NZ \$4–7.5b each year.
- From classrooms to courtrooms: ADHD system failure.

Education & Youth

- School refusal or school can’t?
- The ADHD that hides in plain sight.
- Teachers with ADHD get it. Too often, the system doesn’t.

Workplace Impact

- Inclusion talk vs charisma reward.
- Strategic minds without leadership seats.
- How strengths-based job descriptions could help
- Why PIPs should be thrown out
- The cost of constant social camouflage in the workplace
- Living with RSD: the constant fear you’ll be fired

Cultural & Equity

- Māori and Pasifika are over-impacted, under-recognised
- We know ADHD is over-represented in prisons. That’s systemic harm.
- Rainbow communities often report mismatched or unsafe services
- Why women with ADHD are seen as either “failures” or “too successful” to be believed

Parenting & Identity

- Late diagnosis brings both grief, confusion, and unexpected clarity
- Parenting differently while unlearning your own childhood in real time
- It’s time to end intergenerational harm
- Building an identity in systems never built for you
When sharing your diagnosis feels unsafe

Sample Headlines:

- People with ADHD aren’t the problem. The system is.
- Why is ADHD still waiting?
- What does it say about NZ if we ignore systemic harm to people with ADHD?

- Failure to redesign systems for neuroinclusion is a human rights issue.
- The cost of being missed: ADHD, suicide risk, and lives unsupported.

Message to Policymakers

This petition calls for a formal public inquiry into systemic harm to people with ADHD in Aotearoa, cross-sector, enduring, and not vulnerable to political change. It must:

- Involve Health, Education, Justice, Whaikaha, the Ministry for Pacific Peoples, and Employment; including MBIE and private sector employers.
- Align with Te Tiriti o Waitangi.
- Include Māori, Pasifika, and rainbow leadership from the outset.
- Recognise ADHD as a lifespan, systemic issue, not just an awareness topic.
- Acknowledge systemic harm as a human rights issue requiring government accountability.

Spokesperson Note

This petition was submitted by an ordinary Pākehā New Zealander, a late-diagnosed person with ADHD and parent. I am not a clinician, teacher, or researcher. I speak from lived experience, but not for all people with ADHD.

This petition recognises that Māori, Pasifika, women, girls, and rainbow communities are disproportionately affected by ADHD-related system failures. Broader representation is essential. My role is not to lead the movement, but to help open space for it.

✉ **Contact:** hello@adhdinquiry.nz

👉 **Sign the petition:**

<https://petitions.parliament.nz/42b5c524-f57f-4c3f-eb1f-08ddcf0ec835>

References

The following key sources underpin the data cited in this media kit. Further research sources are available in the *Supporting Statistics* document.

- Deloitte Access Economics. (2019). *The social and economic costs of ADHD in Australia*. Deloitte.
- O’Callaghan, E., Marston, L., Broadbent, M., El Baou, C., John, A., Lewer, D., Mandy, W., McKechnie, D. G. J., Petersen, I., & Stott, J. (2025). Life expectancy and years of life lost for adults with diagnosed ADHD in the UK: matched cohort study. *The British Journal of Psychiatry*.
- Di Angelantonio, E., et al. (2023). Life expectancy associated with different ages at diagnosis of type 2 diabetes: a multicountry analysis. *The Lancet Diabetes & Endocrinology*, 11(9), 640–650.
- Bowden, N., et al. (2023). ADHD and criminal justice outcomes in a New Zealand cohort. *Journal of Attention Disorders*.
- Baggio, S., et al. (2018). Prevalence of ADHD in prison populations: a meta-analysis. *Frontiers in Psychiatry*.