



American  
Heart  
Association.

# WORKPLACE SUPPORT for People with Disabilities:

Strategies for Survivors of Stroke and Other Conditions



A NEW ISSUE BRIEF FOR EMPLOYERS

POWERED  
BY



American Heart Association®  
CEO Roundtable

# WORKPLACE SUPPORT for People with Disabilities:

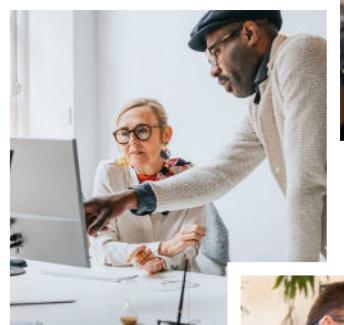
Strategies for Survivors of Stroke and  
Other Conditions

A NEW ISSUE BRIEF CREATED FOR  
MEMBER COMPANIES

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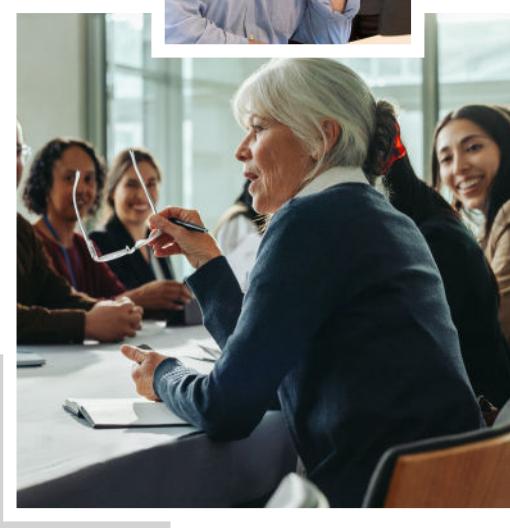
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# INTRODUCTION

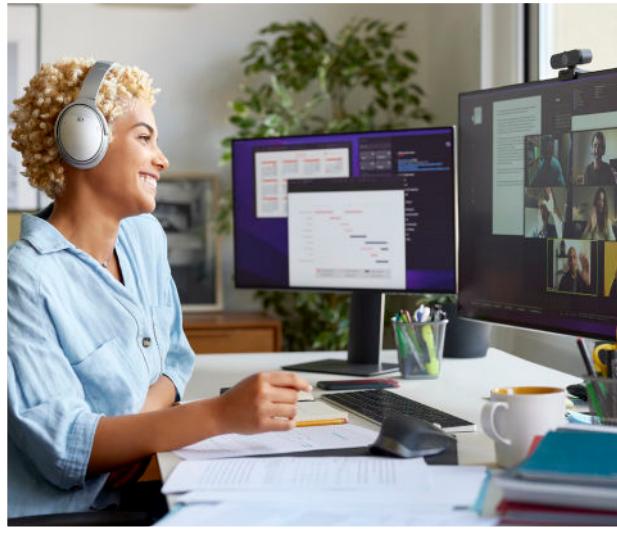
Living with a disability can present significant challenges that extend into the workplace.

A leading cause of serious disability is stroke.<sup>1</sup> Returning to work while living with a disability is possible, especially when employers provide comprehensive support. An inclusive, understanding, and empathetic environment for employees who have disabilities can foster workplace collaboration and even improve a company's revenue and productivity.<sup>2</sup>



**LESS THAN  
50%**  
of stroke survivors  
succeed in  
returning to work

Alarmingly, stroke rates are rising among people in their 20s, 30s and 40s.<sup>3</sup> Returning to work is a major goal for many; however, less than 50% of stroke survivors succeed in returning to work.<sup>4</sup> Still, the likelihood of surviving a stroke has greatly increased in the past 15 years because of advancements in emergency response, medical treatments, and comprehensive post-stroke rehabilitation and recovery.<sup>5</sup> Preventing a stroke is optimal, and employers should promote awareness of stroke risk factors and warning signs to all employees.



This issue brief addresses the importance of workplace practices to support people who have experienced stroke or other disabilities. Embracing opportunities for all workers is good for employees and good for business. As more companies recognize the benefits of employing persons with disabilities who are talented, fully engaged and hard-working, more employers are recruiting, hiring, and retaining workers with disabilities.<sup>2</sup>

# BACKGROUND

**A disability is a condition that makes it more difficult for someone to take part in certain activities and interact with the world around them.**

Disabilities may affect movement, vision, thinking, remembering, learning, hearing, communication or mental health. A disability may have been present at birth, or it may develop or become apparent later. It may result from an injury, illness or health condition. More than one in four adults in the United States, about 28.7%, have some form of disability. The term "disabilities" encompasses a diverse group with a wide range of abilities and needs. Two people with the same disability can be affected in different ways.<sup>6</sup>



**A leading cause of death and disability is stroke**, a condition that affects the arteries to and within the brain.<sup>7</sup> More than 795,000 people in the U.S. have a stroke each year, including new and recurrent cases, with approximately 160,000 deaths.<sup>1</sup> Many stroke survivors are unable to return to work. In one study of people who had a paid job at the time of their mild to moderate stroke, half were not working or were working less than before their stroke.<sup>8</sup>

**Reentering the workforce after a stroke is a major achievement**, one that can inspire hope and restore a sense of purpose. Returning to work can also bear a level of uncertainty. Careful preparation and planning can make the comeback feel more successful. It is crucial that the worker communicates openly with both their health care team and their employer.

Unemployment and underemployment are more common for people with disabilities. In 2024, the employment-population ratio for people with a disability was 40.7%, compared to 77.9% for those without a disability.<sup>9</sup> The unemployment rate for people with a disability was 8.1%, more than double the 3.9% rate for those without a disability.<sup>9</sup>

**40.7%**  
EMPLOYMENT-POPULATION  
RATIO FOR PEOPLE  
WITH DISABILITIES  
*compared to 77.9% for people  
without a disability*

Workers with a disability were more likely to be part-time employees, compared with those without a disability – about 31% versus 17%.<sup>10</sup> About 4% of workers with a disability worked part time, **although they would have preferred full-time jobs.**<sup>10</sup> Their hours were reduced, or they could not find full-time work. Part-time employment can limit access to employer-sponsored health benefits, potentially exacerbating the economic challenges faced by some individuals. A larger share of people with a disability was self-employed than those with no disability.<sup>10</sup>

## **EMPLOYMENT AND INCLUSION OPPORTUNITIES AND POSSIBILITIES**

Certain fields include higher concentrations of people with disabilities, according to a 2024 Bureau of Labor Statistics report.

Workers with a disability were more likely to hold jobs in sales and office occupations, the service industry, production, transportation, and machine operation. They were much less likely to work in management, professional and other related occupations.<sup>10</sup>

Whatever their line of work, survivors of stroke and other people with disabilities may have many reasons besides financial need to enter the workforce or return to work. A job can restore a feeling of normalcy and provide a sense of purpose. Understanding the challenges for people with disabilities along with careful planning and support can make it a rewarding journey.<sup>11</sup>



**Financial strains related to ability status may arise because of limited earnings and other factors, such as increased health care costs.**<sup>12</sup> Missed work can affect finances. For instance, in a transient ischemic attack, also known as a TIA or mini-stroke, stroke-like symptoms typically go away within

24 hours.<sup>13</sup> But people who experience a TIA can still have residual effects. Almost 1 in 5 working TIA survivors receives sick leave benefits five to 12 weeks after their TIA. Home care was initiated in nearly 1 in 6 patients ages 65 to 79.<sup>14</sup>

For stroke survivors, headaches, poor sleep, fatigue, seizures, thinking skills, emotional well-being, mobility and medications can affect the ability to work. Assessing the severity of these factors with a health care professional using the [American Stroke Association's employment readiness checklist](#) can help determine whether and when a stroke survivor is ready to return to work.<sup>15</sup> One study found that post-stroke fatigue remained associated with an inability to return to work at three months.<sup>16</sup> Another found that returning to work was a predictor of lower odds of improved general health and pain between one and five years post-stroke, emphasizing the need to balance work and health after a stroke.<sup>17</sup>

## COMMON FACTORS AFFECTING STROKE SURVIVORS' EMPLOYMENT READINESS

 Poor Sleep	 Emotional Well-being
 Fatigue	 Mobility
 Seizures	 Medications
 Thinking Skills	

**Gaps in workplace support for employees who have disabilities should be identified and addressed.** Stereotyping, prejudice or societal stigma involving people with disabilities may lead to bias in hiring, promotion and retention – an invisible and powerful challenge.<sup>18</sup> Meanwhile, physical obstacles or inadequate accommodations in procedures, policies, or systems can keep someone with a disability from performing their job duties. Modifications to the work environment can make a big difference for survivors of stroke and others with disabilities in overcoming these challenges.

### Employers can:<sup>11</sup>

- Consider flexible schedules to adjust start times
- Allow for breaks
- Add more remote work
- Use assistive technology to provide speech-to-text software tools
- Provide screen readers
- Provide large-print documents
- Provide ergonomic equipment
- Assign modified duties that align with employees' strengths and energy levels
- Make physical adjustments such as rearranged workplaces and accessible entrances

**Disabilities may also affect a person's overall health.** Adults with disabilities are more likely to experience obesity, heart disease or diabetes and are more likely to smoke.<sup>19</sup> Caregivers for people with disabilities — usually family members — often play a vital role in helping a person with a disability. Caregivers may find they, too, face emotional, physical or financial tolls and a decline in their own health.<sup>20</sup> Some employers are using services that support those affected and their caregivers, which can benefit everyone.<sup>21</sup>

## **EFFECT ON EMPLOYERS**

Though unemployment and underemployment rates are higher for people with disabilities, those workers are not the only ones missing out. Employers are missing opportunities to hire talented, committed people. Businesses that support people with disabilities – in recruitment, retention and promotion and by creating an accessible workplace – gain a competitive edge.<sup>22</sup>



Companies that lead on key disability inclusion criteria are **25% MORE LIKELY** to outperform their peers on productivity

People with disabilities provide employers with a variety of advantages, including higher revenue, enhanced productivity and a more positive and supportive work environment. Companies that led on key disability inclusion criteria had 1.6 times more revenue, 2.6 times more net income, and double the profit, according to a report from Accenture.<sup>23</sup> These companies were also 25% more likely to outperform their peers on productivity, measured as revenue per employee.<sup>2</sup> Businesses that accommodate people with disabilities may also qualify for federal tax credits and deductions.<sup>24</sup>

Notably, people with intellectual disabilities such as severe autism, Down syndrome, cerebral palsy or brain damage caused by fetal alcohol syndrome, prenatal infections, or stroke are among the most underrepresented groups in the workforce, but employers are realizing the benefits they provide to their companies. If they are hired, they tend to be loyal, long-term employees who are punctual, rarely call in sick, and want to do a good job.<sup>25</sup>



# RECOMMENDATIONS

To create an inclusive workplace for people with disabilities, companies should begin by understanding the [Americans with Disabilities Act](#), founded on the premise of equal access to opportunity.

It prohibits employers from discriminating against people with disabilities in recruitment, advancement, pay and benefits.<sup>22</sup> Then, employers should understand the everyday and long-term needs of workers with disabilities and build programs, policies and an environment to support them.



Workplace initiatives should include people with disabilities, and managers should be equipped with disability awareness. Business leaders need to understand who is part of the disability community; the language to use when talking about or to people with disabilities; and actions that can create disability inclusion.<sup>26</sup> In addition to traditional employee benefits such as employee assistance plans and health insurance, programs that aid workers who have disabilities can include one-on-one consultations for employees and their caregivers; tax-advantaged savings and investment accounts; and legal insurance and assistance programs. Companies also should make sure employees understand the workplace's family- and medical-leave policies.<sup>27</sup> On-the-job assistance for survivors of stroke returning to work may include job coaching, mentoring and ongoing adjustments to accommodations.<sup>11</sup>



Tools or other accommodations in the workplace for employees who have disabilities may range from low to high tech. It might mean updating workday policies or making use of communication advances. For example, many smartphones now have assistive capabilities to help people with vision or hearing difficulties. These features can also help people who have trouble communicating because of mental or physical limitations.<sup>28</sup>

***Recommendations for supporting employees with disabilities:***

- Turn to local, state, or educational organizations, such as the Employer Assistance and Resource Network (EARN), to identify and recruit workers with disabilities.<sup>2</sup>
- Develop leadership and education in the workplace to address disabilities and promote awareness of ADA requirements for reasonable accommodations, such as:
  - Modifying equipment or devices
  - Job restructuring
  - Part-time or modified work schedules<sup>29</sup>
- Create work arrangements that allow for more remote work or adjustable start times
- Allow flexibility in employee break times
- Assign duties that align with an employee's strengths and energy level
- Provide paid medical leave for medical treatments<sup>30</sup>
- Modify workspace to accommodate any physical limitations, such as changing the layout, easy access to needed resources or eliminating bright lights.

***Best practices for supporting employees with disabilities, including survivors of stroke:***

- Communicate with employees on how to make worksite or workstation modifications
- Use assistive technology, such as speech-to-text software,<sup>30</sup> screen readers, or ergonomic office equipment
- Provide parking spaces that are close to entrances
- Ensure floor spaces and hallways are free of equipment and other barriers
- Learn how to communicate with and about people with disabilities using people-first language emphasizing abilities, not limitations<sup>28</sup> and creating an inclusive environment
- Look for ways to educate the company's workforce on health-related topics, including stroke warning signs<sup>31</sup>
- Provide assistance to guarantee effective integration and continued employment, such as mentoring or ongoing adjustments to accommodations
- Educate employees about stroke and disability awareness to foster understanding and respect, ensuring the work environment is prepared so returning colleagues feel supported — not patronized or marginalized.

# BRINGING STORIES TO LIFE

## COMPANY SPOTLIGHT

### NATIONAL ORGANIZATION ON DISABILITY HELPS COMPANIES — AND ITSELF — ATTAIN DISABILITY INCLUSION

Creating an inclusive workplace for people with disabilities starts with realizing there's lots to learn — even for the National Organization on Disability (NOD), a nonprofit that partners with employers to increase opportunities, eliminate barriers, and optimize success for people with disabilities in the workforce.



**National  
Organization on  
Disability**

"We're still learning and trying to make things better," said Charles-Edouard Catherine, vice president for corporate and government relations for the NOD. "It's never something that we take for granted."

NOD's self-identification campaign encourages employees to share their disability status. That information, along with asking employees directly about their needs, assists in providing workers tools to succeed in their jobs.

"I remember when I joined NOD," Catherine recalled. "The very, very first thing they asked was, 'What do you need?' That was so refreshing. I am blind. I use a screen reader, and I had never been asked, 'What do you need?' right away, off the bat."

The organization offers remote work and flexible hours to provide time for things such as doctor appointments. Disabilities can encompass many physical, mental or sensory conditions. Someone can age into a disability, as with an older worker who becomes a stroke survivor. Employees who have recently acquired a disability may not yet realize the tools they need, Catherine said.

NOD, founded in 1982, often works with large companies in a broad range of industries to improve disability inclusion. The work can take a long time. "What they need help with is to know what they don't know," Catherine explained. "A lot of companies are early in the journey."

NOD usually starts with awareness trainings and assessments, then selects a specific item the company wants to focus on. That can lead to some quick progress and generate buy-in for the initiative. For example, a company may want to zero in on improving its accommodations process. NOD works to clear up misconceptions about workplace accommodations, such as they are expensive, cumbersome or difficult, by sharing data and offering objectivity and perspective.

Talent acquisition is a leading priority in NOD's surveys of companies. Catherine pointed out that framing disability as a talent issue resonates in today's world. Retaining those talented employees is also crucial.

"We know that people with disabilities tend to stay longer," he said. "People who are in an environment where they feel included ... they want to stay there, because it's just a good place to work."



## COMPANY SPOTLIGHT

### PHILIPS OFFERS INDIVIDUALIZED DISABILITY SUPPORT

Philips supports its employees with disabilities through workplace accommodations, leave policies and health benefits. When a worker at Philips seeks accommodation, communication between employees, managers and people professionals at the multinational health technology company has led to positive results. Understanding an employee's specific needs in each situation brings positive results for all, as illustrated in the following real-life scenarios.\*

# PHILIPS



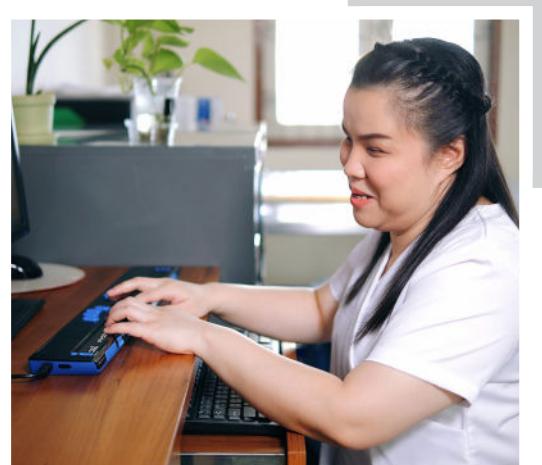
A Colombia-based employee had experienced two strokes at age 21 while working for a previous company. She had a headache, then lost her speech the next day. There was no timely stroke intervention, but she fully recovered after five months, regaining movement and speech through post-stroke therapy. Return-to-work assistance included holding her position vacant as she recovered, allowing a reduced work schedule and establishing an open line of communication. When she came to work at Philips, the company similarly engaged with the employee to adjust her work environment as necessary.

\* These Philips employees volunteered to share their success stories.

In another scenario, a Philips employee required temporary disability leave after undergoing a planned open-heart surgery. The Europe-based employee coordinated with managers beforehand about the time needed away from the job and the anticipated workplace reintegration. Recovery took six months, including three months of post-operative recuperation. During a gradual return to work, the employee faced challenges balancing “want to work” and “need to recover” and Philips worked with the employee to avoid setbacks and heal at the right pace. As the employee gradually returned to work, co-workers strove to provide workplace support. Thanks to this thoughtful approach the worker was able to recover fully and return to peak performance.

Philips supports all employees with disabilities in compliance with federal and state laws and executive orders. It also provides health and wellness benefits, such as physical therapy, mental health counseling and rehabilitation services.

Creating an ideal workplace for employees with disabilities will be guided by the company’s values, “better care for more people,” Philips says. “We envision a workplace where all employees can thrive and contribute meaningfully.”



#### PATIENT SPOTLIGHT

### STROKE SURVIVOR FINDS A PASSION FOR WORKPLACE HEALTH

**Dr. Christine Cosby-Gaither, director for Black Health Equity at Simmons College of Kentucky and Founder/Executive Director, A Stroke of Grace Stroke in 2019 at the age of 35**

In one word, what would you tell fellow survivors of stroke about navigating a new reality? “Patience,” said Dr. Christine Cosby-Gaither, director for Black Health Equity for Simmons College and Founder/Executive Director, A Stroke of Grace. Have patience with loved ones, co-workers, strangers, anyone who might not understand what you’re going through, and, mostly, yourself.

“Just make it a goal to be better than you were the day before,” said Cosby-Gaither. “Don’t compare yourself to others. Chart your own



path." She has been living with that credo since Jan. 28, 2019, when she collapsed on her way to the restroom at 4:45 a.m. She remembers reaching for her husband as she went down, then waking up days later in the hospital.

She was 35 years old, had a 2-year-old daughter and oversaw a staff of 47 at work. She lost use of her left side as well as the ability to use a computer, to write legibly in a straight line, to do simple arithmetic that she used to do without thinking. She couldn't chase her daughter or stay focused. Three months after being admitted to the hospital, she was released to a rehabilitation center and then to outpatient rehab. In December 2019, 11 months after having the stroke, Cosby-Gaither was given the all-clear to stop the physical, occupational and speech therapy that had filled her days and brought her from darkness to hope to possibility.

***You have in your head what you want to do, but until you get there, you won't fully understand what you can do.***

"I wanted to be able to contribute to society again," said Cosby-Gaither, who returned to work part time 18 months after having a stroke. "You have in your head what you want to do, but until you get there, you won't fully understand what you can do."

Her former job duties had been given to someone else, but she was offered the position she holds full-time today. Being back gave her a sense of feeling normal, of being needed. Plus, where she works did a "great job" of supporting her. If a meeting started at 11 a.m., she wasn't expected to be there until 11:15. If she needed to be across campus, a co-worker would offer her a ride. When she began teaching again, she was given a chair to sit in or lean against should she get tired. She was encouraged to have accountability partners to help her maintain her schedule. No one ever rushed her. "They gave me whatever I needed," Cosby-Gaither said. "They gave me time to adjust."

Sometimes colleagues — particularly younger ones, who thought only the elderly suffered strokes — didn't understand what she was dealing with, she said. So, she takes a deep breath and invokes the word she uses for herself: patience. "You can't truly understand the journey until you've actually been in the situation," she said.

Almost seven years after her stroke, she still isn't completely herself. She still stumbles over words. And sometimes when she's unsteady on her feet, her daughter, now 9, will anxiously ask if she's OK. "If someone texts me when I'm walking, I can't text back unless I stop," she said. "I can only give my brain so many commands at one time."

Before her stroke, she never thought about workplace health. Now it's her passion. She organizes health competitions and encourages colleagues to walk instead of drive. During American Stroke Month in May, she hosts Stroke Smart Fest, which brings together hospitals, doctors' offices and community organizations. "Whatever I can do to keep someone from going through this, I'll do," Cosby-Gaither said. "It's hard. People say, 'You make it look easy,' but there's nothing easy about this. Nothing."

***Whatever I can do to keep someone from going through this, I'll do***

#### PATIENT SPOTLIGHT

### STROKE SURVIVOR FACES CHANGES WHEN RETURNING TO WORK POST STROKE

**Flannery O'Neil, assistant director of an environmental agency**  
**Stroke in 2017 at the age of 34**

"I wish I would have given myself more time to just rest at home," said Flannery O'Neil. "It's a balance, right? I think it's to my benefit that I felt a strong motivation to be back to work, but I was dealing with a lot of post-stroke fatigue and trying to power through it."

O'Neil was at work when she had her stroke. She was a deputy director of a public health agency, overseeing multiple departments. She was surrounded by colleagues who knew exactly what was happening.



Almost immediately after the diagnosis, O'Neil felt desperate to return to some sort of normalcy. Her side effects from stroke included two separate residual deficits: one related to speech and the other affecting her mathematical skills and numerical processing, a condition called acalculia. She also lacked sensation on the right side of her body and experienced severe fatigue.

After discharge from the hospital, she received outpatient physical, occupational and speech therapy. Her rehabilitation was customized to build her confidence and prepare her to return to work. Her therapy focused on working on her computer with spreadsheets and budgets as well as practicing speaking with fluency, since she often was the company spokesperson.

After a month, O’Neil returned to work part time for the first couple of months. She then resumed her full-time schedule, with adjustments. Although she felt up to the task with her executive functions, she continued to experience fatigue. Many days, she’d turn out the lights in her office to give herself a little break and rest.

She feels lucky to have been able to alter her schedule and to have co-workers who were so understanding. Still, sometimes she felt swaddled in bubble wrap, being checked on and hovered over. “There was tension between needing to be myself and not having them worry,” she said, “like if I missed a word, having them think something was wrong. It was something we had to navigate together.”

Then, she began focusing on the mental side of her recovery. “That’s when the fears and doubts and what-ifs came into play,” she said. “Mental health became the prominent part of my recovery.” At that time, she also realized that her job was very stressful and she began looking for a different career. She wondered if she had the skills to find something else. But she did. In her current career, she’s more aware than ever of the role the workplace plays in employees’ health.

*“Mental health became the prominent part of my recovery.”*

“There needs to be an ongoing understanding that all of us have different needs and styles,” she said. “Compassion needs to be brought into the workplace. Everyone who has had a health setback should know they deserve a place at the table, though that place may look a little different.”

#### PATIENT SPOTLIGHT

### STROKE SURVIVOR RETURNS TO WORK WITH A NEW PERSPECTIVE ON RECOVERY

**Jeff Phillips, nursing home administrator**

**Stroke in 2017 at the age of 46**

Jeff Phillips likens the effects from his stroke to picking up a filing cabinet, giving it a good shake and putting it down. It may look the same on the outside, but it’s different on the inside.

“Some files you had in green folders are now in red folders,” said Phillips, a nursing home administrator. “I might tell you I love the picture on your wall with the blue sail, but it’s a red sail. I know it’s red, but when my brain reaches the filing cabinet, it says blue.”



The day of his stroke, Phillips was at work when he felt a pop on the left side of his head. At the hospital he was diagnosed with ischemic stroke caused by a hole in his heart, called patent foramen ovale (PFO). PFO is a congenital heart defect that usually closes naturally by adulthood.

Five days later, he was released from the hospital. His initial post-stroke effects included mild aphasia, a language disorder that affects a person's ability to communicate; left-side weakness; cognitive challenges, especially the ability to do math; difficulties with small tasks; and the inability to move quickly, specifically a slowness to react. Determined to get well, he worked relentlessly with his therapists and diligently went to all his doctors' appointments.

After a few weeks, his neurologist cleared him to return to work. But Phillips still felt "broken." He wondered how he could continue to successfully manage 80 residents and 99 staff.

Prior to his return, he met with the owners and workplace administrators. Words of support, understanding and encouragement made him feel like things were normal. Phillips had the most appreciation for the flexibility in his timelines and due dates, as well as the reassignment of some duties when he felt overwhelmed by his workload. These accommodations allowed him to feel like he was contributing but easing into the high-demanding job that he loved. The owners also checked in with him regularly, allowing Phillips to stay on track with his tasks and in charge of his responsibilities. Phillips also appreciated having a modified schedule, such as shorter workdays when needed, during his first couple of months back to help manage his fatigue. Phillips acknowledges that the support he was given to ease back into his role has been invaluable.

Phillips feels that his stroke changed how he interacts with people, both professionally and personally. His interactions are more personal; it's not just about business. He also is more open about his feelings and struggles. For Phillips, the emotional recovery has been the toughest part, yearning to feel like everything is back to normal. He freely shares his story with other stroke survivors in his workplace to provide hope, encouragement and inspiration. He also celebrates the anniversary of his stroke as his "new birthday" because everything changed on that day. Today, Phillips is a new person living with a new "normal."

# CONCLUSION

**With more than a quarter of American adults having some type of disability, this community is large and diverse and are hard working/productive members of the workplace.**



Stroke, injury, illness, a chronic health situation, or a birth condition may be the reason for a disability. Entering the workforce or returning to a job may be a financial necessity for workers with disabilities, but work also can provide a feeling of purpose in daily life. People with disabilities bring skills, talent, and loyalty to the companies that hire them, and they help boost the bottom line.

**Creating an accessible workplace begins with understanding the challenges and legal rights of people with disabilities.** However, it goes far beyond those starting points. Resources available through government agencies and nonprofit organizations can assist businesses in learning how to provide reasonable accommodations for people with disabilities. These accommodations may be simple and inexpensive.

**Employers must maintain impartiality in recruitment, pay, retention, and promotions.** They should strive to adopt the best practices in communicating with employees who have disabilities to find out how to support and amplify their work. Companies can provide adequate and appropriate benefit plans to support people with disabilities and their caretakers, and ensure those workers are well informed about helpful policies. Quite simply, advocating for these inclusive actions makes sense — for the employee and the employer.



# RESOURCES

## Resources from the American Heart Association and the American Stroke Association

### Family Caregivers

Your employees can be part of a growing group of caregivers, providing long-term support to a loved one. As rewarding as this task can be, it requires many sacrifices. Caregivers need care, too, and our resources can help.

### Heart & Stroke Helper™ App

This free self-management app for survivors of stroke or their caregivers helps with better management of their health all in one place and features tracking progress on lifestyle habits and health numbers, manages medications, provides trusted information and connects users with others for inspiration.

### Life After Stroke Guide

Recovery after a stroke is a long-term process and you can support your employees who have experienced stroke by sharing this helpful guide.

### Return to Work

Returning to the workplace after a stroke is a big decision. We have developed a variety of resources which outline choices, possible outcomes and strategies to help survivors of stroke in the decision process. There are resources for both employees and employers.

### Stroke Connection E-Newsletter

Your trusted monthly newsletter supporting survivors of stroke, their families and caregivers.

### Stroke Family Warmline

Talk with our trained specialists who can provide helpful information, connect you to local services or just be a listening ear. 1-888-4-STROKE (1-888-478-7653)

### Stroke Prevention Toolkit

May had been coined as the American Stroke Month, but any day of the year, is a great time to raise awareness about stroke and stroke warning signs. Our community stroke prevention toolkit contains everything you need for an employee presentation or lunch-and-learn: presentation, discussion guide, fact sheet and a short video.

### Stroke Risk Assessment

Stroke is the No. 5 cause of death and a leading cause of disability in the United States. But there are several risk factors that can be controlled or treated to reduce stroke risk. This simple 10-question assessment allows anyone to evaluate their risk for stroke.

### Support Network

Be a part of an online community of survivors and caregivers who know what you're going through and can help you find your footing on the path to better health.

## Additional Resources

### [Misconceptions that Limit Disability](#)

#### [Inclusion at Work](#)

Embracing disability inclusion is more than just a corporate responsibility—it is a strategic investment that can drive financial gains and enhance overall employee satisfaction.

### [Americans with Disabilities Act](#)

#### [National Network](#)

Find information, guidance and training on the Americans with Disabilities Act tailored to meet the needs of business, government and individuals at local, regional and national levels.

### [Office of Disability Employment Policy](#)

This federal website provides resources on programs, services, laws and regulations to help people with disabilities lead full, independent lives. Find information on topics such as tax incentives for employers, employment support, mental health and others.

### [U.S. Small Business Administration](#)

This agency provides small business owners with information and resources they need to comply with laws and regulations and to take advantage of government programs and services to help them start, expand and run their business. A one-stop access to federal, state and local government information.

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**National Organization on Disability**

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## SPECIAL THANKS

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# REFERENCES

- 1 Centers for Disease Control and Prevention. (2025). *Stroke facts*. <https://www.cdc.gov/disability-and-health/about/index.html>
- 2 Winiarski, D. (2024, January 20). How people with disabilities make a positive impact in the workplace. *Forbes*. <https://www.forbes.com/sites/dianewiniarski/2024/01/30/how-people-with-disabilities-make-a-positive-impact-in-the-workplace/>
- 3 NYU Langone Health. (2024). *Why are people in their 20s, 30s, & 40s having strokes?* <https://nyulangone.org/news/why-are-people-their-20s-30s-40s-having-strokes>
- 4 Radford, K. A., Wright-Hughes, A., Thompson, E., Clarke, D. J., Phillips, J., Holmes, J., Powers, K., Trusson, D., Craven, K., Watkins, C., Bowen, A., McEvitt, C., Stevens, J., Murray, J. D., O'Connor, R. J., Pyne, S., Risbroy, H., Cameron, R., Sach, T. H., Day, F., & Farrin, A. J. (2025). Effectiveness of early vocational rehabilitation versus usual care to support REturn to work after stroKE: A pragmatic, parallel-arm multicenter, randomized controlled trial. *International Journal of Stroke*, 20(4), 471-485. <https://doi.org/10.1177/17474930241306693>
- 5 Mayo Clinic. (2023). *Innovations spur post-stroke recovery*. <https://www.mayoclinic.org/medical-professionals/neurology-neurosurgery/news/innovations-spur-post-stroke-recovery/mac-20548836>
- 6 Centers for Disease Control and Prevention. (2025). *Disability and health overview*. <https://www.cdc.gov/disability-and-health/about/index.html>
- 7 American Stroke Association. (n.d.). *About stroke*. <https://www.stroke.org/en/about-stroke>
- 8 van der Kemp, J., Kruithof, W. J., Nijboer, T. C. W., van Bennekom, C. A. M., van Heugten, C., & Visser-Meily, J. M. A. (2019). Return to work after mild-to-moderate stroke: Work satisfaction and predictive factors. *Neuropsychological Rehabilitation*, 29(4), 638-653. <https://doi.org/10.1080/09602011.2017.1313746>
- 9 Office of Disability Employment Policy. (n.d.). *Disability employment statistics*. U.S. Department of Labor. <https://www.dol.gov/agencies/odep/research-evaluation/statistics>
- 10 U.S. Bureau of Labor Statistics. (2024). *Persons with a disability: Labor force characteristics*. <https://www.bls.gov/news.release/pdf/disabl.pdf>
- 11 Rago, F. (n.d.). *Reintegrating into the workforce after a stroke: A guide for survivors and caregivers*. The Stroke Foundation. <https://www.thestrokefoundation.org/news/reintegrating-into-the-workforce-after-a-stroke-a-guide-for-survivors-and-caregivers>
- 12 Merchant, Z., Troland, E., & Webber, D. (2025). *The hidden cost of disability*. Board of Governors of the Federal Reserve System. <https://www.federalreserve.gov/econres/notes/feds-notes/the-hidden-costs-of-disability-20250110.html>
- 13 Mayo Clinic. (2024). *Transient ischemic attack (TIA)*. <https://www.mayoclinic.org/diseases-conditions/transient-ischemic-attack/symptoms-causes/syc-20355679>
- 14 Ebbesen, B. H., Grøntved, S., Modrau, B., Rathleff, M. S., Andreasen, J., & Johnsen, S. P. (2024). Sick leave and homecare need in patients with transient ischaemic attack compared with ischaemic stroke: A nationwide follow-up study. *European Journal of Neurology*, 32(1), e16552. <https://doi.org/10.1111/ene.16552>
- 15 American Stroke Association. (n.d.). *Employment readiness checklist*. [https://www.stroke.org/-/media/stroke-files/life-after-stroke/secondary-prevention/rtw-files-012021/rtw-employmentreadinesschecklist\\_v16\\_design16560kkaccessible.pdf](https://www.stroke.org/-/media/stroke-files/life-after-stroke/secondary-prevention/rtw-files-012021/rtw-employmentreadinesschecklist_v16_design16560kkaccessible.pdf)
- 16 Rutkowski, N. A., Sabri, E., & Yang, C. (2021). Post-stroke fatigue: A factor associated with inability to return to work in patients <60 years-A 1-year follow-up. *PLoS one*, 16(8), e0255538. <https://doi.org/10.1371/journal.pone.0255538>
- 17 Westerlind, E., Persson, H. C., Palstam, A., Eriksson, M., Norrving, B., & Sunnerhagen, K. S. (2020). Differences in self-perceived general health, pain, and depression 1 to 5 years post-stroke related to work status at 1 year. *Scientific Reports*, 10(1), 13251. <https://doi.org/10.1038/s41598-020-70228-2>
- 18 Centers for Disease Control and Prevention. (2025). *Disability barriers to inclusion*. <https://www.cdc.gov/disability-inclusion/barriers/index.html>
- 19 Centers for Disease Control and Prevention. (2025). *Disability impacts all of us*. <https://www.cdc.gov/disability-and-health/articles-documents/disability-impacts-all-of-us-infographic.html>
- 20 Administration for Community Living. (2024). *Support to caregivers*. <https://acl.gov/programs/support-caregivers>
- 21 Rosalynn Carter Institute. (n.d.). *Employed caregivers: Working while caring*. <https://rosalynnccarter.org/working-while-caring/>
- 22 Office of Disability Employment Policy. (n.d.). *Employers and the ADA: Myths and facts*. U.S. Department of Labor. <https://www.dol.gov/agencies/odep/ada/MythsandFacts>
- 23 Accenture. (2023). *Companies that lead in disability inclusion outperform peers financially, reveals new research from Accenture*. <https://newsroom.accenture.com/news/2023/companies-that-lead-in-disability-inclusion-outperform-peers-financially-reveals-new-research-from-accenture>
- 24 American Stroke Association. (2024). *Tax benefits for employers*. <https://www.stroke.org/en/life-after-stroke/recovery/return-to-work/tax-benefits-for-employers>
- 25 Fonseth, K. (2025, May 23). Hiring people with intellectual disabilities: What employers need to know. *Forbes*. <https://www.forbes.com/councils/forbesnonprofitcouncil/2025/05/23/hiring-people-with-intellectual-disabilities-what-employers-need-to-know/>
- 26 Business Group on Health. (2022). *Disability inclusion is workplace inclusion*. <https://www.businessgrouphealth.org/resources/disability-inclusion-is-workplace-inclusion>
- 27 Miller, S. (2022). *Helping caregivers and employees with disabilities select the right benefits*. SHRM. <https://www.shrm.org/topics-tools/news/benefits-compensation/helping-caregivers-employees-disabilities-select-right-benefits>
- 28 Centers for Disease Control and Prevention. (2025). *Disability inclusion strategies*. <https://www.cdc.gov/disability-inclusion/strategies/index.html>
- 29 U.S. Equal Employment Opportunity Commission. (n.d.). *The ADA: Your responsibilities as an employer*. <https://www.eeoc.gov/publications/ada-your-responsibilities-employer>
- 30 American Stroke Foundation. (2024). *After stroke - Workplace accommodations after a stroke*. <https://afterstroke.org/after-stroke-workplace-accommodations-after-a-stroke>
- 31 American Stroke Association. (n.d.). *Stroke symptoms*. <https://www.stroke.org/en/about-stroke/stroke-symptoms>