



BEYOND HYPERACTIVITY

# DEBUNKING ADHD

IN ADULTS

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# INTRODUCTION

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## WHEN WE VIEW ADHD AS AN EXCUSE INSTEAD OF AN EXPLANATION, WE MINIMIZE THE PLIGHTS OF THOSE WHO ARE SUFFERING TO GRASP AND MANAGE THEIR REALITY.

We all experience an inability to focus from time to time. At some point and for various reasons, we suffer from sensory overwhelm, irritability, or dysfunctional thoughts. For most people, these feelings, although stressful and uncomfortable, occur infrequently and subside relatively quickly.

For some, though, these emotions are the norm, with sporadic interruptions of semblance. As with other psychiatric and neurodevelopmental disorders, Attention Deficit/Hyperactivity Disorder (ADHD) is categorized by a continued pattern of specified behaviors, as outlined by the Diagnostic and Statistical Manual of Mental Disorders.



# PART I

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## DEFINING ATTENTION DEFICIT/HYPERACTIVITY DISORDER (ADHD)

A lack of attention, especially in childhood, isn't unusual. Children of all ages expectedly have trouble focusing, high energy, and impulsive reactions. Sometimes, these symptoms begin disrupting necessary daily tasks, and the child doesn't "grow out of" these tendencies. As these symptoms become more severe and problematic, one may consider seeking a professional diagnostic evaluation for possible ADHD.

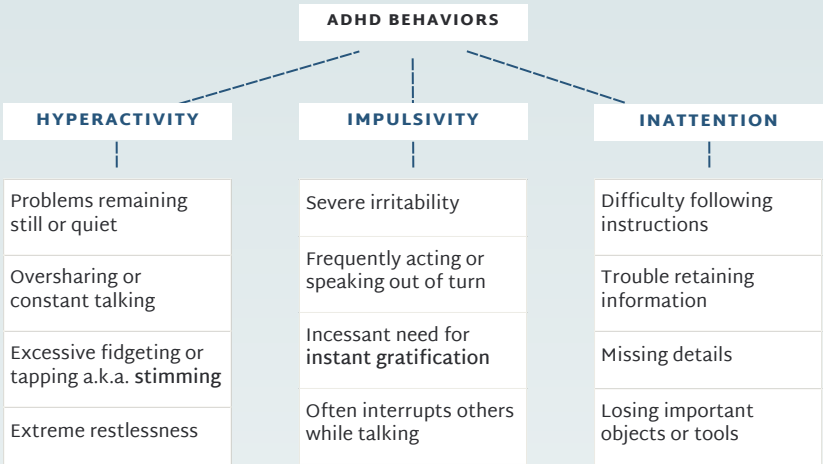
### ADD vs. ADHD

The traditional diagnosis for attention deficit (prior to 1994) was simply Attention Deficit Disorder (ADD). As research surrounding inattentive types developed over time, mental health professionals shifted this diagnosis to include hyperactivity.

Formerly, experts separated ADD into two subtypes: with and without hyperactivity. In 1987, the American Psychiatric Association combined the subcategories into one condition: ADHD. A primary symptom, along with impulsivity and inattention, hyperactivity is one of the main indicators of a modern ADHD diagnosis, but only one facet.

### Types of ADHD

As mentioned above, the three standard ADHD indicators are hyperactivity, impulsivity, and inattention. Mental health professionals categorize ADHD symptoms into one of these categories in order to narrow down a treatment plan.



The above common symptoms present themselves in various ways, manifesting as one of three subtypes:

1) Predominantly Inattentive Type

- Main characteristic is distractibility presenting as short attention span
- Inattentive behavior includes becoming bored easily, trouble following directions, misplacing necessary items, and tendency to daydream
- Diagnosed more frequently in girls than boys (particularly at a young age)

2) Predominantly Hyperactive Type

- Main characteristic is impulsivity or hyperactivity exhibiting as restlessness
- Hyperactive behavior includes fidgeting, squirming, impatience, speaking out of turn, and difficulty sitting still (often due to over or under stimulation)
- Diagnosed more frequently in boys than girls (particularly at a young age)

3) Combined Presentation

- As the name suggests, those with combined-type ADHD present symptoms of both inattention and hyperactivity
- The National Institute of Mental Health (NIMH) states that most children are diagnosed with combination type ADHD

## PART 2

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# COMMON MISCONCEPTIONS ABOUT ADHD DIAGNOSES

ADHD is one of the most prevalent childhood health conditions. The general public knows it exists, so we don't lack ADHD awareness. As with other behavioral disorders, one crucial issue facing those with ADHD is the stigma associated with the condition. The following social misconceptions perpetuate negative attitudes about the expectations of those with ADHD:

### **Stereotype #1: Only children suffer from ADHD.**

The percentage of children diagnosed with ADHD (just below 9% of children ages 3 to 17) is greater than the percentage of diagnosed adults (about 4% of those aged 35-44 years). But this statistic only scratches the surface of a more deep-seated issue. Only a quarter of those affected adults seek treatment, often because of the associated stigma.

The common misconception is that ADHD only affects children and adolescents, and children will outgrow the diagnosis by a certain age. In reality, trouble with inattentiveness and impulsivity can continue into adulthood, disrupting daily obligations and causing persistent strife. So why are adults less likely to receive an ADHD diagnosis than a child? Researchers at Medical Daily suggest:

“About 25% of the time, when a child has ADHD, there's a parent that has ADHD. We realize this is a weakness in our service delivery models, because often clinicians focus on just treating the child and ignore the fact that another family member has ADHD.”

- Mark Stein (Professor of Pediatrics and Psychiatry at the University of Chicago-Illinois)

This is only one explanation for adult misdiagnosis. Physicians have misclassified many patients, particularly women, as having mental health conditions such as anxiety, severe depression, or even bipolar disorder when they exhibited ADHD symptoms. No mental health diagnosis is cut and dry, but widespread attitudes about ADHD have caused even medical professionals to rule it out when assessing fully-developed adults. And while untreated, co-occurring emotional disorders can exacerbate the struggles of ADHD, these behaviors often mask a sufferer's primary condition.

## **Stereotype #2: ADHD is a product of laziness or lack of intellect.**

In childhood especially, hyperactivity and inattentiveness cause behavioral issues, often affecting performance in school. Misinformed teachers or counselors tend to assume low intelligence or lack of motivation as a result. When such issues persist into adulthood, these same behaviors may cause similar misconceptions in higher education and carry into the workplace.

Beginning and completing seemingly simple tasks can prove overwhelming to those with ADHD. These challenges result from troubles with executive function, or cognitive difficulty with the following skills:

- Ignoring distractions
- Following instructions
- Planning necessary steps
- Monitoring progress

Furthermore, it's easy to misconstrue common ADHD symptoms for undesirable character flaws. Innate reactions to overstimulation and other triggers can appear as erratic, obnoxious, or embarrassing to bystanders. Untreated adults in particular may exhibit disruptive, raucous, or even dangerous behavioral responses to certain stimuli.

As a result, observers may assume affected individuals are simply unwilling to work on managing their emotions or actions. People consider them as too lazy to make an effort towards being more personable, agreeable, or polite.

## PART 2

Realistically, the majority of these sufferers strive for personal growth in these areas. ADHD patients tend to spend ample time attempting to organize their lives, identify their provocations, and improve their interpersonal interactions. Unfortunately, their work in progress is too often viewed as a final product.

### Stereotype #3: “Everyone’s a little ADHD nowadays!”

As humans, we experience a spectrum of emotions influenced by all kinds of factors. We’ve all walked into a room and forgotten our objective, just as we’ve all read a whole page of text and retained no information. These are common, shared experiences of all human beings.

These obstacles are inconvenient, but infrequently cause significant disruptions in everyday life. We forget, we get distracted, and we get impatient, but rarely do these emotions impede our ability to function throughout the average day.

When someone claims, “Everyone has a little bit of ADHD these days,” they’re probably attempting to normalize ADHD struggles that exist in us all, like impulsivity or forgetfulness.

Despite their intentions, this attitude dismisses the real-life challenges of those suffering from ADHD.

Factually, inner dysregulation of the brain’s structure and chemical activity inhibits “smooth operation of self-regulatory functions” in those with ADHD. In other words, ADHD brains are biologically and physiologically different from neurotypical brains. As a result, behaviors like distractibility and trouble focusing present themselves with greater severity and frequency in people with ADHD.





## PART 3

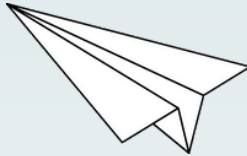
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# ADVICE FOR COPING WITH ADHD AS AN ADULT



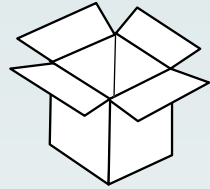
### ADVOCATE FOR YOURSELF

Unbeknownst to many, ADHD is a federally-recognized disability under the Americans with Disability Act (ADA). However, this listing currently only applies to children—no similar section exists for adults. In other words, an ADHD diagnosis alone doesn't imply eligibility for disability benefits. Nonetheless, this qualification does mean that your school or employer must make reasonable accommodations to facilitate your work if necessary. For those with ADHD, this could mean additional administrative assistance, a secluded place to reduce distractions, or more intermittent breaks. Those in need of such accommodations must disclose their condition to their HR representative or similar entity in order to receive them.



### PROGRESS ISN'T A STRAIGHT LINE.

In every aspect of life, success fluctuates. We all have good days, bad days, and in-between days. Don't feel ashamed for having an off day, or an off week. Luckily, every day, good or bad or in-between, only lasts 24 hours. This is your reminder that, up until this point, you've survived each one. You will no doubt face challenges, but challenges breed progress. Make an effort to welcome challenges, and witness inevitable growth as you overcome them. Be patient with your progress—it's not neither instant nor linear.



### DON'T PUT YOURSELF IN A BOX.

Do what works for you, how it works for you. Expanding on self-advocacy, try to develop a deep understanding of your strengths, your triggers, and your limits. You can try every life hack you see in a viral video, but truthfully, they probably won't stick. Fortunately, creative problem solving is a common strength of those with ADHD; they tend to find unconventional solutions to everyday problems. Testing out different methods of approaching a daily chore might lead to your own life hack discovery! What works for one person isn't ideal for everyone, so find what works for you and don't force a justification.

# CONCLUSION

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## ADHD IN A NUTSHELL

When we stereotype those with ADHD, we infantilize their challenges and diminish their achievements as someone struggling with a complicated neurodevelopmental condition. We can all relate to feeling overwhelmed, distracted, or restless. Regrettably, coping with these emotions is an integral part of the human experience.

You may find it difficult to understand why someone with ADHD behaves a certain way, possibly interpreting their behavior as rude, obnoxious, or intrusive. Sympathy and structure, in combination with respectful communication methods, can be vastly successful in managing these interactions. A proactive attitude is often the solution in a reactive situation, and ADHD symptoms are no exception.



# GLOSSARY

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## **CO-OCCURRING DISORDER**

PAGE 7

the presence of two (or more) mental health disorders that have a strong correlation; also referred to as "comorbidity"

## **EXECUTIVE DYSFUNCTION**

PAGE 7

a range of behavioral symptoms that change how a person regulates emotions, thoughts, and actions

## **INSTANT GRATIFICATION**

PAGE 5

the need to immediately fulfill an urge or desire; foregoing a future benefit in order to obtain a less rewarding but more immediate benefit

## **NEUROTYPICAL/NEURODIVERGENT**

PAGE 8

someone who thinks and processes information in ways that are typical within their culture / a non-medical umbrella term that describes people with variation in their mental functions

## **SELF-REGULATORY FUNCTIONS**

PAGE 8

the processes for managing and monitoring energy states, emotions, thoughts, and behaviors

## **STIMMING**

PAGE 5

repeating specific movements or sounds as a way to self-soothe or remain engaged in a situation; "fidget to focus"

# SOURCES

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