



# ADHD Women Unite – Session Summary

Date: 23 April 2026

Topic: Non-medication ADHD support (supplements, lifestyle strategies & alternatives)

Attendees: 8 participants

Source: Transcript

## Overview

This session focused on non-medication support for ADHD, including:

- Supplements
- Lifestyle strategies
- Therapy and coaching options
- Shared lived experiences

There was a strong emphasis on exploring alternatives for those who can't or don't want to take medication.

## Key Discussion Themes

### 1. Medication Experiences & Barriers

- Mixed experiences with ADHD medication:
  - “Crash” in afternoon (fatigue, headaches)
  - Concerns about insomnia and side effects
- Some unable to take medication due to:
  - High blood pressure
  - Interactions with other medications (e.g. antidepressants)
- Others choosing not to take medication due to risk concerns
- Frustration with services:
  - Being discharged due to physical health issues
  - Lack of alternative support offered
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**Key insight: Medication is not accessible or suitable for everyone → strong need for non-medical options**

## 2. Supplements & Physical Health Approaches

Participants shared personal experiences with:

- Vitamin B12 → improved clarity, sleep, mood
- Magnesium + turmeric → helped sleep and restless legs
- Vitamin D, iron, zinc → discussed as commonly recommended
- L-tyrosine → linked to dopamine production
- Aged garlic & oats → explored for blood pressure
- Diet changes:
  - Reducing caffeine
  - Managing blood sugar
  - Increasing whole foods (smoothies, soups)

Awareness raised about:

- Interactions (e.g. St John's Wort)
- Need to check with GP

**Key insight: Many women are self-experimenting due to gaps in medical support**

## 3. ADHD Diagnostic & Medication Access Barriers

Practical ADHD Strategies (Non-Medical)

Highly relatable and effective tools discussed:

- Body doubling In-person (e.g. daughter helping with tasks)
- Apps
- Screen time limits Locking apps at night → improved sleep
- Movement-based coping Walking while thinking
- Doing squats while brushing teeth
- "Doing two things at once" Helps maintain engagement
- Blood sugar awareness Impacts cravings, mood, focus

**Key insight: ADHD-friendly strategies often involve stimulation + structure + accountability**

## 4. Therapy, Coaching & Support Gaps

### CBT (Cognitive Behavioural Therapy)

- Mixed experiences:
  - Some found it life-changing
  - Others felt unsupported or dismissed
- Key issue: not always adapted for ADHD

### DBT (Dialectical Behaviour Therapy)

- Highlighted as useful for:
  - Emotional regulation
  - Impulsivity
- Seen as potentially more suitable for ADHD

### Coaching

- Focuses on:
  - Strengths
  - Systems and routines
  - Executive functioning
- Major issue:
  - Unregulated industry
  - Hard to access without Access to Work or private funding

#### **Key insight:**

**There's a system gap between diagnosis and practical support**

## 5. Emotional Impact of ADHD Diagnosis

- Strong discussion around grief and trauma "What could have been"
- Lifetime of misunderstanding and self-blame
- Particularly intense for:
  - Older women
  - Those diagnosed post-menopause

**Key insight: Diagnosis can trigger identity grief and emotional processing**

## 6. Hormones, ADHD & Crisis Points

- Perimenopause and PMDD identified as:
  - Major destabilising factors
- Reports of:
  - Emotional overwhelm
  - Suicidal thoughts during hormonal cycles

**Key insight: Hormonal stages can remove coping mechanisms completely**

## 7. Hormones, ADHD & Crisis Points

Power of Peer Support

- Group described as:
  - Reducing isolation
  - Providing understanding
  - Offering practical help
- Participants:
  - Look forward to sessions
  - Feel less alone

**Key quote (paraphrased): “It’s so isolating in your own head – this helps.”**

## 8. Work & Systems Challenges

- Issues raised:
  - Lack of workplace understanding
  - Need for adjustments
  - Confusion around rights

Practical tip shared:

You can request interview questions in advance as a reasonable adjustment