



ADHD for all

Module One

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Introduction

Welcome

A heartfelt welcome to you all! Katie and Alex are thrilled to have you join Module 1: ADHD for All. This unique module is built around 10 key concepts derived from various fields, including Psychiatry, Psychology, Psychotherapy, and Coaching. These concepts serve as a comprehensive lens through which we can understand the intricacies of living with ADHD.

While these 10 concepts are not all-encompassing, the 10 we have chosen to highlight establish a solid foundation for this course. This foundation allows us to delve into both the challenges and the astounding capacities of the ADHD brain.

In this booklet, we've broken down each of these 10 concepts. To aid your exploration, we've provided points of further exploration for more in-depth reading, supplementary resources, and research. We strongly encourage you to delve into and familiarize yourself with these as we journey through the course. This is because many of our group discussions will pivot around these concepts and their intersections.

look forward to sharing this enlightening journey with you all.

Alex + Katie



Pre-Learning

Prior to each live session together, we will provide you with an audio discussion between Alex & Katie as they explore some of the complexities of the concepts in relation to everyday living with ADHD.

The expectation is that you have listened to the audio discussion before each live session, processed it in your own way, and are ready to share your thoughts.

With these course notes and pre-learning material, we encourage you to follow your interests without the need to 'get it right' and 'learn everything'.

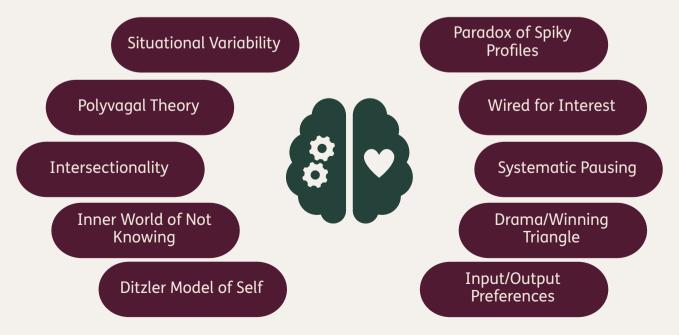
We have tried to design this course to support the learning and processing of the wonderful ADHD brain and not to shut it down. We are going to make mistakes and want to make it okay for you to make mistakes too.

We welcome feedback as we have high standards, and we need you on our team to meet them!

All course materials can be found on our online community, you can access it below:

https://goldmind.circle.so

10 Key Concepts



Course Overview

So where are we headed over the next 8 weeks together? Below is a breakdown of each session & objective. You can find more about the 6 executive functions on the next page.

Session 1 Introduction	•	Set up how we want to show up in a group learning environment & how to interact with and anchor the key concepts.
Session 2 Activation	•	To consider the ADHD lens on activating , what gets in the way, and workarounds to how and when you activate best
Session 3 Focus	•	To consider the ADHD lens on focus , what gets in the way, and workarounds to how and when you activate best
Session 4 Effort	•	To consider the ADHD lens on effort , and how sprinters (us ADHDers) can live in marathon runner worlds.
Session 5 Emotion	•	To consider the ADHD lens on emotion , what gets in the way and workarounds to how and when emotion can be harnessed.
Session 6 Memory	•	To consider the ADHD lens on memory , what gets in the way and workarounds to how and when memory can be harnessed.
Session 7 Action	•	To consider the ADHD lens on monitoring action , how it impacts us and interacts with the other 6 executive functions.
Session 8 Self-Recovery	•	Putting what we have learnt so far all together in light of the importance of self-recovery/ compassion. Also, an exploration of what might be some next steps on your journey moving forward.

Executive Functions

Executive Functions are effectively the brain's management system.

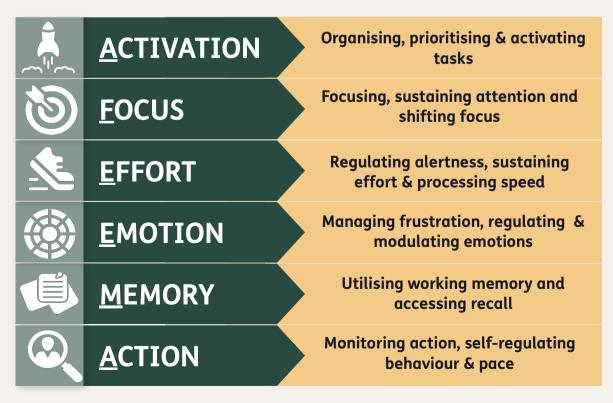
After the first session, our next 7 sessions will be structured around Dr. Thomas Brown's Model of Executive Functions (see table below), focussing on 1 Executive Function (EF) per class. Whilst we will be looking at EFs separately, they continually interact and overlap with each other. In a neurotypical brain, EFs work together rapidly and unconsciously to help each individual manage many tasks of daily life.

For ADHDers, our EF can be up to 30% impaired, which affects our ability to manage those tasks. It's important to remember that EF impairments affect individuals with ADHD differently. This can depend on the environment, the task, the ADHDers' stage of life and their privilege with regard to their agency and choice.

It is important to note that many strengths occur from adapting to EF impairment. An example being, that ADHDers can innovate and find novel approaches because of intuitively finding 'work arounds' for their EF challenges.

EF challenges can change due to situations which can cause the ADHDers and those around them to misinterpret difficulties as a lack of willpower. Our experience of coaching/counselling late-diagnosed ADHDers is that they have been trying phenomenally hard their whole lives. Once they understand their EF challenge, it stops being about trying harder and becomes about operating differently.

- Take the EF Test: executivefunctions.paperform.co
- https://www.brownadhdclinic.com/the-brown-model-of-add-adhd
- https://psychcentral.com/adhd/dr-brown-adhd-model#whats-the-brown-adhd-model



Key Concepts

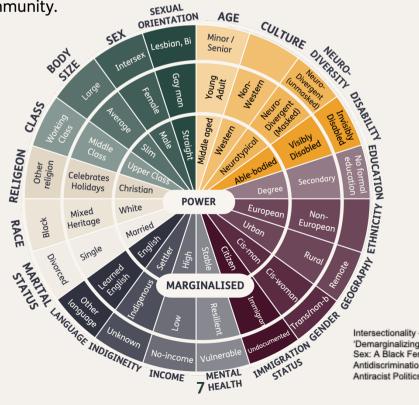
Intersectionality

Intersectionality is the intersection of different social identities and their related systems of oppression, domination, or discrimination. It was coined by Professor Kimberle Crenshaw in 1989 in her paper 'Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics'. In the context of ADHD, Intersectionality means understanding the unique experiences and challenges faced by adults with ADHD who also fall into marginalized communities.

For example, a black man with ADHD may face not only ableism and stigma surrounding his ADHD diagnosis but also racism and discrimination in both his personal and professional life. Similarly, an undocumented woman with ADHD could experience not only neurotypical and ableist prejudice but also xenophobia and additional barriers to accessing resources and support.

Different cultures may have increased social stigma around mental health and brain differences. In addition to this, those who are 'othered' in society for their intersecting identities may find it harder to recognise their brain differences. This could be where behaviour in one family is understood as a cultural difference when in fact, it may also be that neurodiversity is at play.

By acknowledging intersectionality within discussions of ADHD and mental health, we can better understand and address the diverse needs of individuals within our community. Additionally, intersectionality can help challenge traditional notions of what it means to have ADHD and create more inclusive spaces for marginalized members of the neurodivergent community.



Intersectionality - coined by Kimberlé Crenshaw, 'Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics' (1989)

Situational Variability

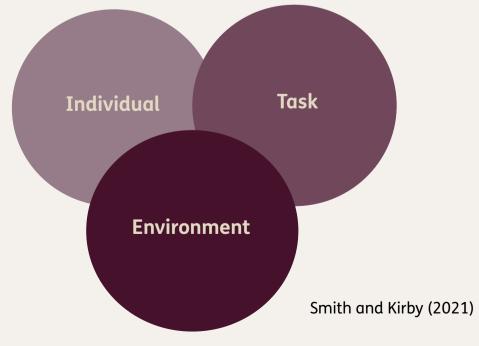
Situational Variability refers to the fact that symptoms of ADHD can vary greatly from one situation to another. For example, a person with ADHD may be able to focus well when they're doing something they enjoy but struggle to focus when they're in a boring or challenging environment. Situational variability is often used to explain why people with ADHD may be able to function well in some situations but not others.

The term was first coined by Dr. Russell A. Barkley in his book, "Taking Charge of ADHD." Since then, it has been widely used by researchers and clinicians to better understand and manage the symptoms of ADHD. Situational variability can be a helpful way to think about ADHD because it acknowledges that symptoms can change based on the circumstances. It's important to keep in mind, however, that Situational Variability is just one of many factors that can affect how someone with ADHD experiences the world.

TASK, INDIVIDUAL ENVIRONMENT (TIE) MODEL

We find that the 'Task, Individual, Environment (TIE)' Model proposed by Smith and Kirby (2002) is helpful in understanding the influencing factors for Situational Variability. The model shows that there are three key elements to consider when looking at how to best support employees with Neurodivergent conditions: the task they are required to do, the individual's strengths and weaknesses, and finally, the environment in which they will be carrying out the task. Please note that by 'environment', we are often talking about the people around us, including our managers and colleagues and the relationships we have with them. By taking all of these factors into account, employers can make adjustments to the way tasks are carried out or the work environment itself in order to create a more inclusive and supportive workplace for all employees.

- <u>https://chadd.org/adhd-news/adhd-news-adults/how-to-deal-with-situational-variability/</u>
- <u>https://www.amazon.co.uk/dp/1398600245/ref=cm_sw_em_r_mt_dp_Z1KH6</u> <u>WNAVPB5CYB83V3H</u>



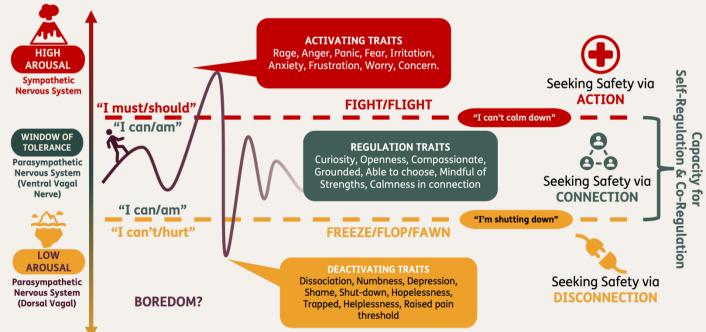
Window of Tolerance

Dr. Stephen Porges developed Polyvagal Theory (1994). This theory states that there are two different parts of the autonomic nervous system (ANS): the sympathetic nervous system and the vagus nerve.

The sympathetic nervous system is responsible for the "fight, flight, faun or freeze" response, while the vagus nerve is responsible for the "rest-and-digest" response. ADHDers have dysfunction in the vagus nerve, which causes individuals to have trouble regulating their emotions. This theory has been supported by research showing that ADHD is more common in individuals who have a history of trauma or stress. While the Polyvagal Theory is still being developed, it provides a new way of understanding ADHD and its relation to the autonomic nervous system and emotional regulation, which, as yet, is still not included in the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5).

The Window of Tolerance model, proposed by Dr. Dan Siegel, provides an easily comprehensible framework for understanding emotional regulation. This model depicts an individual's optimal zone of arousal where one can effectively process stimuli without becoming too overwhelmed or too disengaged. On the other hand, Dr. Stephen Porges' Polyvagal Theory delves into the intricate functions of the vagus nerve and how it impacts our physiological responses to stress. Siegel's Window of Tolerance offers a visual and conceptual gateway to understand the more complex mechanisms outlined in Porges' theory. By aligning these two concepts, one can better grasp how shifts outside our window of tolerance can activate our body's survival instincts, either propelling us into fight-flight modes or plunging us into a dissociative state.

- Porges on Polyvagal Theory:
- https://www.youtube.com/watch?v=ec3AUMDjtKQ
- Polyval Theory and ADHD: <u>https://www.youtube.com/watch?v=-tQ2e4V4wjY</u>
- https://www.additudemag.com/polyvagal-theory-adhd-brain-cant-getanything-done/



⁽Dr Daniel Siegel, 1999 & Dr Stephen Porges, 1994)

Inner World of Not Knowing

The 'Inner World of Not Knowing' is our concept that describes a specific set of thoughts and feelings when a person doesn't have the language to understand and clearly describe their experience. These thoughts and feelings are compounded by not 'fitting in' to society/systems and not fully understanding why.

The 'Inner World of Not Knowing' often causes an individual to blame themselves and try even harder at tasks/situations they find dicult (often trying to be something they are not).

There are understandable concerns around 'labelling' and how this will be received in a world that still lacks considerable understanding of ADHD. However, evidence suggests that late-diagnosed individuals welcome the clarity and acceptance that a label can bring when there is an opportunity to process this fully.

INNER WORLD OF NOT KNOWING MODEL



Drama & Winning Triangle

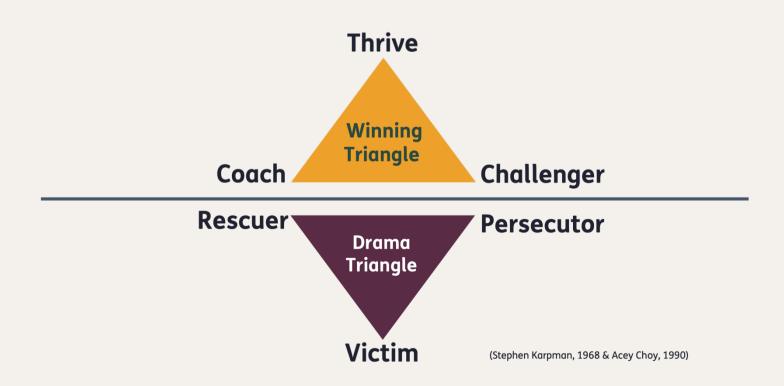
Karpman's Drama Triangle is a model of human interaction that describes the three common ways that people respond to conflict: victim, persecutor, and rescuer. The Victim is someone who feels powerless and helpless and is often blaming themselves and/or others. The Persecutor is someone who is aggressive and controlling. They are often in an actual or perceived position of power. The Rescuer is someone who tries to help (rescue) the Victim by taking on the problem. They often have a lack of boundaries and are seeking to rescue because they are avoiding what needs rescuing in them.

DRAMA TRIANGLE, WINNING TRIANGLE & ADHD.

- Any person at any given moment can be 'in drama' or 'winning'.
- When we are stressed, feeling under pressure, or tired, it is harder to keep out 'drama'.
- Unmanaged ADHD can lead to being in 'drama' more often. This in itself causes stress.
- According to the psychology of Transactional Analysis, being in 'drama' is also referred to as being in your 'child ego state'. Winning is being in your 'adult ego state'.
- Systematic Pausing (see page XX) is one way to help yourself out of 'drama' and into a calm 'winning' state.

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- https://karpmandramatriangle.com
- https://www.abebooks.co.uk/9780990586708/Game-Free-Life-definitivebook-0990586707/plp



Ditzler Model of Self

The model of self is a theory created by Jinny Ditzler. It's a set of beliefs and assumptions we have about who we are and what we are capable of. This theory suggests that our sense of self is based on our past experiences and how we interpret them. It also states that our sense of self can change over time depending on our experiences and how we learn from them.

Depending on your intersecting identity and the privilege you hold, you may be under more or less pressure to pretend to be something/someone.

Ultimately, the Model of Self is a helpful tool for understanding how our sense of self is formed and why it can change over time.

FURTHER RESOURCES

• Jinny Ditzler: https://www.youtube.com/watch?v=1aUAVep-x8I

WHO I PRETEND TO BE

WHO I AM SCARED I AM

WHO I REALLY AM

Spiky Profiles

A "spiky profile refers to an individual's uneven distribution of strengths and weaknesses across different cognitive domains. When visualised on a graph, these disparities can appear as spikes, with some areas showing often extreme strengths and others severe challenges.

Here's a breakdown of the concept:

- 1. **Cognitive Domains**: Human cognition can be divided into multiple domains, such as verbal comprehension, perceptual reasoning, working memory, and processing speed. These domains can be assessed using standardized tests, like those found in an IQ test or a neuropsychological assessment.
- 2. **Uneven Distribution**: Neurotypical individuals cab have relatively even cognitive profiles, meaning their abilities across different domains are fairly consistent. However, some individuals might excel in one area (e.g., verbal comprehension) but struggle in another (e.g., processing speed). This uneven distribution is what's referred to as a "spiky profile."
- 3. **Implications**: Recognising a spiky profile can be crucial for understanding an individual's unique cognitive strengths and challenges. For instance, a student with a spiky profile might excel in subjects that leverage their strengths but might need additional support in areas that tap into their challenges.
- 4. **Understanding the Unique Brain**: Everyone's brain is unique, and cognitive profiles provide a snapshot of how an individual processes information. By understanding someone's spiky profile, we can appreciate their unique way of thinking, learning, and problem-solving. It also helps in fostering empathy and tailoring support to individual needs.
- 5. **Associated Conditions**: Some neurodevelopmental and neurological conditions, such as ADHD can be associated with spiky profiles. Recognising these patterns can aid in diagnosis and intervention.

6.

In summary, the concept of a spiky profile provides a nuanced understanding of an individual's cognitive landscape. By recognising and appreciating these differences, we can better support and nurture each person's unique potential.



Wired for Interest

Most people are wired for importance. This means that their brains are wired to focus on things that are important to them at any given time. For ADHDers, however, our brains are wired for interest, meaning we are more likely to focus on things that are interesting to us, regardless of whether or not they are important. As a result, ADHDers may find it dicult to focus on tasks that are less interesting, even if those tasks/people are very important to them.

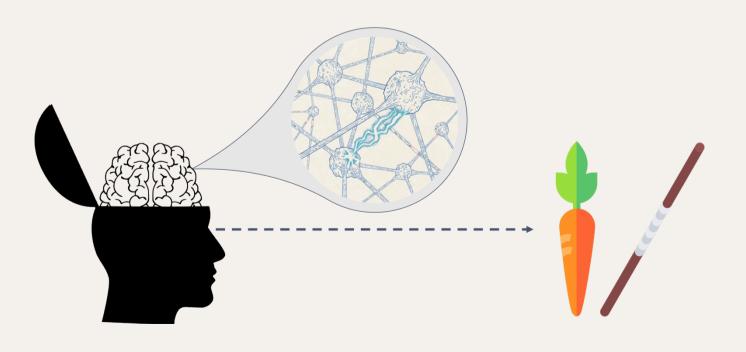
We have separated out the two below:

Importance-Based Brain (More able to see time, prioritise and to compartmentalise)

- **Primary Importance.** You deem a task to be important, or if it is required for one of your priorities.
- Secondary Importance. A task is important to someone important to you teacher, parent, friend.
- Long-term Reward & Consequences. Completing a task will lead to a reward, and/or not completing a task will lead to a consequence.

Interest-Based Brain (Seeking dopamine whether we like it or not)

- I Want (Attraction)
 - Personal Interest
 - Belonging
 - Connection
 - Challenge
- I Fear (Running From)
 - Not belonging
 - Crisis
 - Immediate Consequences (often shame-based)



Input/Output Preferences

Input/Output Preferences are the different ways that people understand, process and act on information. Input is about how we take in information through our senses. Output is how we communicate.

There is mounting evidence that everyone's sensory processing is different. This has huge implications for the many assumptions that have been made about the common human experience. We feel this is an important perspective when considering the diversity within the ADHD community.

Input/Output Preferences may change depending on an individual's situation (Situational Variability). For example, an ADHDer may prefer to communicate verbally as this can be their faster mode and may take in information better when it is spoken. However, there are times when planning and more time is needed in order to create clarity and process effectively.

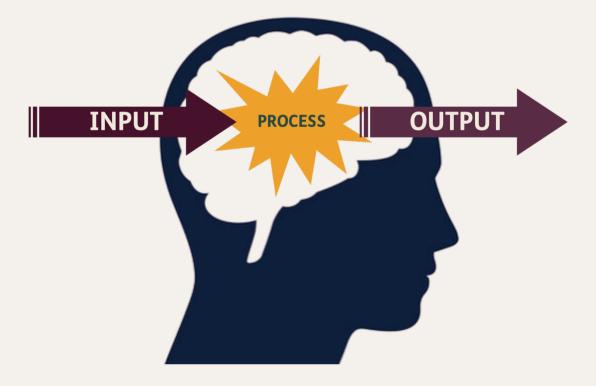
It is important to note that Input/Output Preferences are not fixed. They are dynamic. The more an ADHDer can be familiar with their needs and preferences in different situations, the more they can advocate for themselves and save energy. This energy is often taken up with the fallout of miscommunication and the 'drama' that we then go into with ourselves and/or others.

FURTHER RESOURCES

- Theory of Constructed Emotion: https://www.youtube.com/watch?v=0gks6ceq4eQ
- Sensory Processing:

https://www.autism.org.uk/advice-and-guidance/topics/sensory-differences/sensory-differences/sensory-differences/all-audiences

• Additude: https://www.additudemag.com/what-is-sensory-processing-disorder/



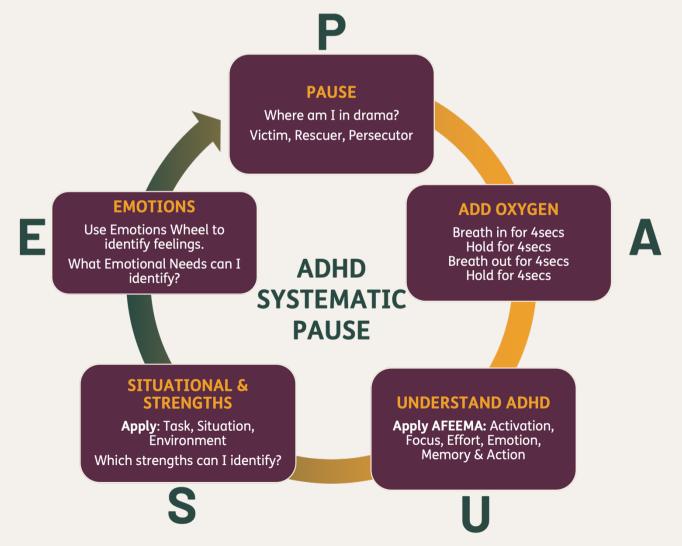
Systematic Pause

Pausing is a great idea for all of us! It allows us to take stock, process thoughts/feelings and sometimes get intentional. Those of us with *"Ferrari engines brains but with bicycle breaks"* (Ned Hallowell M.D.) need to systematically pause even more than everyone else.

Systematic Pausing implies the structure needed for ADHDers to remember the importance and feel the benefits over time. If we can practice pausing outside the moment of greatest need, we get better at pausing in-the-moment.

ADHDers need to understand the energy cost of not pausing. This may be outside of their awareness to begin with, and the thought of pausing can feel very scary to a 'speedy brain'. Pausing needs to be customised to fit the ADHD brain, and it takes practice. The 3 ways ADHDers can Systematically Pause:

- 1. **Habitual Pause** times that are intentionally planned in our day/week/month to slow our brains down in order to reflect. For example, yoga sessions, walking, meditation, journaling, a bath, and time outs etc.
- 2. **In-the Moment Pause** times when we are overwhelmed, operating at speed, emotionally flooded and allow ourselves to pause, go into our bodies and reflect on what might be happening.
- 3. **Retrospective Pause** times when we reflect back on a challenging or overwhelming time to check in with ourselves in order to gain clarity on the situation that we may not have been aware of in-the-moment.



Reading List

Please note, we do not expect you to have read all these books. Past course attendees have asked for a short list of books for further reading. If you have read books related to ADHD that you found help in the early days of your discovery, please do let us know!

ADHD 2.0 By Dr. Edward Hallowell & Dr John Ratey

ADHD... Explained By Dr. Edward Hallowell

Women with ADHD By Sari Solden & Michelle Frank

Divergent Mind By Jenara Nerenberg

Drama Triangle Explained By Chris West

Neurodiversity at Work By Theo Smith & Amanda Kirby

The Listening Space Tamsin Hartley

Time to Think Nancy Kline

Character Strengths Interventions: A Field Guide for Practitioners Ryan M. Niemiec



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