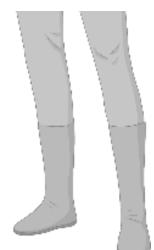# EXPLORING NEURODIVERSITY

3 Layers of ADHD

LORI SACREY, MC

Three Layers of ADHD

I like to conceptualize ADHD as comprised of three separate layers.

This idea came to me as I was recalling paging through my grandmother's encyclopedias when I was younger. I really liked the one about whales (because whales are awesome) and the one on human anatomy that contained the transparencies where you could overlay different parts from the skeleton to muscles to circulatory system to skin/clothes.

When I conceptualize neurodiversity, I think of it like those transparencies.

The skeleton is a metaphor for the diagnostic criteria as outlined in the Diagnostic and Statistical Manual (DSM).

You then overlay this with the musculature system, which includes the things that the person experiences that may or may not be a part of the DSM criteria.

Finally, the overlay with the skin/clothes represents the mask or the concept of self that one presents to the world.

Layer 1: The Skeleton of the DSM

ADHD has 3 subtypes: primarily *Inattentive* (meets 6 criteria for *Inattentive* type), primarily *Hyperactive* (meets 6 criteria for *Hyperactive* type), or *Combined* (meets 6 criteria for both *Inattentive* and *Hyperactive* types) [Note: need to met 5 criteria for individuals 17+ years]

Inattention includes the following **and** negatively impacts social, academic/ occupational activities

1. May not attend to/misses details; work produced can contain inaccuracies
2. Has difficulty keeping attention on tasks or play activities
3. Does not appear to be listening when others are speaking to them
4. May not follow instructions or leaves tasks incomplete
5. Experiences difficulty when planning/organizing tasks; misses deadlines
6. Slow to start/does not start tasks that require a lot of mental effort
7. Misplaces things that are necessary for tasks or activities
8. Easily distracted by unrelated stimuli (or thoughts in adults)
9. Forgetful in daily activities

Need to meet 6 of 9 criteria above (5 of 9 if over age 17)

Hyperactivity and Impulsivity includes the following **and** negatively impacts social, academic/ occupational activities

1. Often fidgets with hands or feet ("stim") or move around when seated
2. Often leaves seat when expected to remain seated
3. Often runs about or climbs upon things in environments where it is socially inappropriate
4. Often vocal (loud) when engaging in leisure activities
5. Often "on the go" as if "driven by a motor"
6. Often perceived as a talker/ talks excessively
7. Responds to questions before the question is finished/
8. Experiences difficulty when waiting for their turn
9. Interrupts others; joins in activities when not asked (may take over activities of others in adults)

Need to meet 6 of 9 criteria above (5 of 9 if over age 17)

(APA, 2013)

Layer 2: Soft Tissue of ADHD

Stimming & fidgeting

Executive functioning challenges

Working memory challenges

Attention and concentration challenges

Hyperactivity

Emotion regulation difficulties

Concentration difficulties

Appetite differences

Restless

Sensory sensitivities/processing differences

Trouble focusing unless highly interested in topic

Irritable

Difficulty waiting turn

Time perception impacted (time blindness)

Muscle tension

Seeks new and exciting experiences

Can tire easily/experience fatigue

Sleep irregularities

Preferred interests

Intrusive thoughts

Rejection sensitivity

Higher rates of GI (stomach) issues

Experience anxiety due to ADHD challenges

Impulsive

Self-esteem impacted

Memory challenges

Higher rates of suicidality & OCD

Energy fluctuates

Can experience indecision

Periods of time when hyper focused on topic/task

Higher rates of substance abuse

Risk-taking behaviour

Interpersonal challenges (lack of focus on social cues)

Increased risk of victimization

Interest based nervous system

Lose objects

Higher rates of eating disorders

May skin own pick or pull own hair

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(Not an exhaustive list; from Neff, 2024)

Layer 3: The Mask of ADHD

Stimming to improve focus

Put in more time and effort that allistics to achieve same goal

Develop list of reasons to use when running late

Put in extra effort right before a deadline to ensure task is done well/right

Check work multiple times to catch errors due to inattention or loss of focus

Focus during conversation to keep on track

Include in planning to be early to events to avoid 'chronic lateness'

Use multiple alarms and reminders

Keep a notebook to write everything in

If hyperactive type, purposely remain quiet or taking pauses to ensure they are not interrupting others

Monitor outward appearance to appear calm

Suppress urges to fidget or stim

Keep strong emotions bottled up

Create a routine to avoid forgetting important steps

Check with a loved one to ensure their decision/actions are not impulsive

Appear calm to avoid being seen as sensitive to rejection

Striving for perfectionism

Mirroring the way others act in social situations

Taking on too many things to create a sense of urgency (for motivation)

Focusing on a low-interest activity despite hating it

Inviting people to their house to force themselves to clean

Calling in sick to avoid stressful situations

React to situations in a way that is expected instead of how they really feel

(Attention Deficit Disorder Association, 2024)

About the author

Lori Sacrey is a registered provisional psychologist in the province of Alberta, Canada. She focuses on helping her clients manage their perceived challenges from a neurodiversity-affirming lens.

Lori also has a PhD in neuroscience and works as a research associate at the University of Alberta, where she continues to engage in research and stay up to date with the latest findings.
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