What is ADHD?

Understanding inattention, hyperactivity and impulsivity

Supporting autistic children, young people, adults and their families across Barking and Dagenham, Havering and Redbridge

What is ADHD?

Attention-Deficit/Hyperactivity Disorder (ADHD) is a neurodevelopmental condition marked by persistent patterns of inattention, hyperactivity, and/or impulsivity that go beyond what is typical for a person's age and get in the way of daily life.

Like autism, ADHD begins in childhood, is lifelong, and is a genuine difference in brain development and functioning – not a result of poor parenting, laziness, or a lack of willpower.

The three core areas

Inattention

Difficulty sustaining focus, following through on tasks, staying organised, listening, or paying attention to detail; being easily distracted or forgetful in daily activities.

Hyperactivity

Restlessness, fidgeting, difficulty staying seated or keeping still, feeling an internal sense of restlessness, or talking excessively.

Impulsivity

Acting without thinking through consequences, interrupting others, difficulty waiting turns, or blurting out responses.

Three presentations

ADHD is diagnosed as one of three presentations, depending on which symptoms are most prominent:

Predominantly inattentive

Mainly difficulties with attention and organisation, with fewer hyperactive or impulsive symptoms; this presentation is quieter and easily overlooked, as children may sit still but simply not be taking things in.

- **Predominantly hyperactive-impulsive –** mainly symptoms of restlessness and impulsivity, with fewer difficulties with attention
- **Combined –** significant symptoms of both inattention and hyperactivity-impulsivity; this is the most commonly recognised and diagnosed presentation

A note on diagnosis

For a diagnosis, symptoms must have started in childhood, be present in more than one setting (e.g. home and school), and have a genuine impact on daily life – occasional forgetfulness or restlessness on its own is not the same as ADHD. The NHS in the UK currently uses ICD criteria for diagnosis, which differs slightly from the DSM-5 presentations described above, though the two systems are becoming more closely aligned over time.

ADHD and executive function

The mental skills behind daily life

Many of the everyday difficulties in ADHD stem from differences in executive function – the mental skills used to plan, organise, manage time, regulate emotions, and control impulses.

This is why ADHD can affect far more than just "paying attention": it can also show up as difficulty starting or finishing tasks, managing big emotions, regulating sleep, or estimating how long something will take.

ADHD and autism together

A frequent overlap

ADHD and autism frequently co-occur, and research suggests a large proportion of autistic children, young people and adults also meet the criteria for ADHD, though estimates vary widely between studies.

The two conditions share some underlying genetic and brain-based factors, and both involve differences in executive function, though the pattern of difficulty is not identical – for example, autism is more consistently linked with difficulty shifting between tasks, while ADHD is more consistently linked with difficulties with inhibition, working memory, and planning.

"AuDHD"

Where the two conditions co-occur, this is sometimes referred to informally as "AuDHD", and support usually needs to address both sets of needs together, since a strategy that helps with one can sometimes conflict with what helps with the other (for example, routine may help autistic anxiety but feel stifling to an ADHD need for novelty).

ADHD can look different in different people

- Girls and women are more likely to show inattentive-type symptoms, which are quieter and easier to miss than hyperactive-impulsive symptoms, contributing to later or missed diagnosis
- **Masking is common –** many people, especially girls and women, learn to hide fidgeting, disorganisation, or distractibility, at a cost to their own energy and wellbeing
- **Presentation can shift with age –** visible hyperactivity often reduces in adolescence and adulthood, while inattention and internal restlessness typically continue
- ADHD frequently co-occurs with other conditions, including autism, anxiety, and learning differences, which shapes how it presents in any individual

Support strategies

Practical, everyday approaches

Small, consistent adjustments can make a real difference at home and in school or work settings.

- Break tasks into smaller, clearly defined steps, with visual or written instructions where possible
- Use consistent routines and visual timetables, while allowing some flexibility and built-in movement breaks
- Give advance warning of transitions, and reduce unnecessary waiting where possible
- Offer positive, specific feedback promptly rather than saving it up, as this supports motivation
- Reduce unnecessary distractions in the environment when focused tasks are needed
- **Recognise that behaviour linked to inattention or impulsivity is not wilful –** approach it with the same understanding as other neurodevelopmental differences

Remember

ADHD is a genuine, lifelong difference in brain development, not a character flaw or a discipline problem. With the right understanding and support – tailored to the individual, and to any co-occurring conditions such as autism – people with ADHD can and do thrive.