ADHD AWARENESS MONTH: AADPA Webinar 23/10/25

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Summary notes:

- Stigma impacts ADHDers on many levels: being 'aware' that ADHD exists is not enough. We need to accept that ADHD is a different way of processing and understanding the world. It's not wrong or broken.
- It is a disability at times – Remember Disability vs Disorder
- It's not all sparkly and wonderful – or always dreadful. It is a changing, fluid presentation for many.

Awareness, but not acceptance, PLUS stigma, PLUS misconceptions/myths:

Before Assessment / Diagnosis

- Delays in seeking help: Fear of being labelled as lazy, disruptive, or unintelligent can stop people (or parents) from pursuing an assessment.
- Fear of discrimination: Concerns about how a diagnosis might affect employment or school opportunities may deter people from proceeding.
- Stereotyping: ADHD is often seen as a childhood or male condition, leading to missed diagnoses in girls, women, and adults. What structures/scaffolds are in place for adults making it harder to see?
- Masking and overcompensation: Individuals may hide traits to appear "normal," which delays recognition.
- Professional bias: Teachers, GPs, and clinicians may hold outdated beliefs that ADHD is due to poor parenting or lack of discipline, resulting in under-referral, or when referred, practitioner uneducated and is not accepting this is ADHD.
- Cultural stigma: In some communities, mental health concerns are not openly discussed, further delaying assessment.

During Diagnosis

- Gaslighting or invalidation: Individuals may be told "everyone has trouble concentrating," minimising lived experience.
- Diagnostic overshadowing: Co-occurring conditions (e.g., anxiety, depression, autism) can mask ADHD or be wrongly prioritised.
- Shame and self-blame: Internalised stigma leads people to question their own experiences or feel guilty for needing support.

After Diagnosis

- Difficulty accessing services: Bias in health, education, or workplace systems may limit eligibility or support. Rural areas. Money.
- In Australia, a Deloitte-commissioned report estimated that 81% of the total financial cost of ADHD arises from lost productivity, via reduced workforce participation, absenteeism, and lower productivity when at work.
- Those costs, combined with other social and health costs, were estimated at A$20.4 billion overall in Australia.
- Medication stigma: Fear of being judged for using stimulant medication can cause people to avoid or underuse prescribed treatments.
- Misunderstanding that medication is a cure vs a support.
- That medication works for every ADHDers.

- Reduced disclosure: People may choose not to share their diagnosis at work or school, leading to a lack of reasonable adjustments.
- Impacts at work, schools and uni etc.
- Parental guilt or judgment: Parents of ADHD children are often blamed for their child's behaviour, which increases stress and burnout. Tylonol/parenting – external and internal guilt and shame.
- Fear of discrimination: Concerns about how a diagnosis might affect employment or school opportunities may deter people from proceeding.

Impact on Self-Advocacy

- Self-doubt: Repeated invalidation leads to questioning one's own needs or capabilities. "We are all a bit"
- People saying why you can't be an ADHDer. Ie you have a job.
- Fear of conflict: Anticipated judgment discourages individuals from requesting accommodations or support.
- "Different" as negatively loaded.
- Excuse vs explanation
- Learned helplessness: Over time, stigma can erode confidence in one's ability to seek and use help effectively.
- Silencing effect: People may downplay symptoms or avoid sharing strategies that work for them to avoid criticism.
- True issues: such as insurance and some jobs.

Long-Term Systemic Impacts

- Underrepresentation in data and policy: Stigma contributes to under-diagnosis, leading to gaps in service design and funding.
- Barrier to inclusive education/workplaces: Negative stereotypes perpetuate resistance to neuro-affirming practices. "Too Hard" reminder of what benefits one, usually benefits many.
- Mental health impacts: Chronic invalidation increases rates of anxiety, depression, and low self-esteem in ADHD individuals.
- Impact that the untreated and undiagnosed ADHD bec wrong treatment – not able to get good outcomes bec not treating underlying factor.
- Reduced quality of life: When stigma limits access to diagnosis, treatment, and support, functioning and wellbeing are significantly impaired.
- Suicidality 4.7 fold from non-ADHDers
- For women with ADHD specifically, one study found that ~1 in 4 (25%) had attempted suicide
- Life expectancy 6-9yrs approx. shorter

Stigma → delay → invalidation → reduced access → poorer outcomes.

So we MUST myth-bust to ensure our community truly understand what ADHD is, and is not.

- Call to action – we need to ACTIVELY work to unpack and correct these in our community. Not passively. Actively correct our colleagues and challenge the status quo. It's our duty of care to not be by-standers – whether or not in our code.
- People don't always like to be corrected, but people really don't like living in a world that adds to them feeling 'less' or 'broken'.