## A Mile in My Shoes by Jason Bodle

Jason: Hello and welcome to A Mile in My Shoes, this is Jason Bodle coming to you from RTRFM 92.1 . Today I am privileged to be able to raise and discuss something I'm sure most people have heard of by now, that being a condition called ADHD, or Attention Deposite Hyperactivity Disorder.

> If for any reason you aren't aware of what ADHD is, then today's segment may be of great interest to you. I'll quickly state that although I myself have ADHD and have researched the topic extensively, I'm not a trained mental health care provider.

> That being said, I still have much to offer in terms of lived experience and information I've acquired over my life. When I was 9 years old, I was diagnosed with autistic spectrum disorder, ADHD, obsessive compulsive disorder and generalised anxiety disorder.

Of these conditions, today we'll be focusing on my ADHD. Over the last 10 years, I've spent hundreds of hours studying my diagnosis and contemplating my own mind in a bid to better understand myself, and today I've decided to share my knowledge and lived experience with you.

We'll start with the question everyone wants to know. What is ADHD? Well, unfortunately there's a large number of people who still don't believe in ADHD, considering it nothing more than a label. However, thanks to the studies and analysis of brain scans of people with ADHD, it's now known that ADHD brains have physical structural differences in areas of the brain that play important roles in movement, reward and motivation, learning and processing of information, response to threatened consequence, and memory.

The American Psychiatric Association's Diagnostic Statistic Manual for Mental Disorders, DSM -5, classifies ADHD as the following. A persistent pattern of inattention and or hyperactivity slash impulsivity that interferes with functioning or development.

The aforementioned DSM -5 aims to set the standard for what's considered inattention with these nine criteria. Often fails to give close

attention to details or makes careless mistakes in school work, at work or with other activities.

Often has trouble holding attention on tasks or play activities. Often does not listen when spoken to directly. Often does not follow through on instructions and fails to finish school work, chores or duties in the workplace, such as getting sidetracked or losing focus.

Often has trouble organizing tasks and activities. Often avoids dislikes or is reluctant to do tasks that require mental effort over a long period of time, such as school work or homework. often loses things necessary for tasks and activities.

Pens, books, wallets, keys, paperwork, phone, glasses, etc. is often easily distracted and finally is often forgetful in daily activities. The DSM defines hyperactive impulsivity with these nine criteria.

Often fidgets with or taps hands or feet or squirms in seat. Often leaves seat in situations when remaining seated as expected. Runs about or climbs in situations where it's not appropriate you know for adolescents and adults this may just be limited to feeling restless.

Often is unable to play or take part in leisure activities quietly. Is often on the go or acting as if driven by a motor. Often talks excessively. Often blurts out an answer before a question has been completed.

Often has trouble waiting their turn. And finally often interrupts or intrudes on others e .g. budding into conversations or games. Now for children up to 16 meeting six of the criteria for inattention and or six for hyperactivity slash impulsivity qualifies them for an ADHD diagnosis. For adults 17 and over meeting five or more criteria qualifies them for an ADHD diagnosis. The DSM also mentions that persons must have exhibited these symptoms for more than six months.

That some symptoms must have been present before age 12. That these symptoms can't be explained easily by another condition. That they are inappropriate for one's developmental level. That they occur in two or more settings such as at home and in the workplace and most importantly that these symptoms interfere with one's functioning or development. Here's where things get complicated. It may surprise you to know that there is no one test that can be done to diagnose ADHD. Instead, a registered mental health professional must assess a person, sometimes over an extended period of time, and assemble a portfolio of the patient's symptoms before making a judgment.

This means that each diagnosis is dependent on the individual professional's personal opinion. Guidelines such as the DSM -5 seek to standardize this diagnosis with a set list of symptoms to prevent personal biases and human error affecting a process, but it's important to note that ADHD and its symptoms manifest differently for everyone.

Any list of symptoms will never be able to cover all presentations and symptoms of the condition with a hundred percent accuracy to each patient. The DSM -5 now states that there are three main subtypes of ADHD, that being predominantly inattentive type, predominantly hyperactive impulsive type, and combination type.

These broad terms are meant to encompass all people with ADHD and attempt to categorise and explain them. However, due to the unpredictable inconsistencies of human behaviour, it becomes problematic to rely too heavily on what's written in black and white.

Humanity's knowledge of psychology is constantly changing and evolving, and it's important to listen to those affected and read between the lines of rigid diagnostic criteria. With this in mind, we can now begin to discuss ADHD in a broader sense, one larger than the labels applied to us by so called experts and their subjective second -hand knowledge.

What does ADHD feel like? What does it mean to people afflicted by it? Well today I will only be able to offer a peek into my own life, but in future I hope to bring more insight into ADHD through the eyes of others.

I have what is considered combination type ADHD, and that means I struggle with both the inattentive and hyperactive impulsive traits of the condition. I'll start with an anecdote. I woke up at 8am on the day of writing this.

It took me until 3pm to get around to working on this script, and within 20 minutes I began going down a series of rabbit holes related to various ideas I have for the podcast. It's currently 10.40pm, and I've written down an astonishing two paragraphs.

To my credit I have been working very hard at researching numerous facts for the podcast, but the point is that despite my hard work, I haven't met the goals I set to accomplish this morning. This is the ADHD experience.

Welcome to my world. That was the opening paragraph of the first draft of this speech, which I started on the 15th of August last year. I worked on that draft for over two weeks before abandoning the project until the 3rd of March this year, at which point I decided to completely rewrite the script and churn out half the speech in an afternoon.

I think this is a good insight into what ADHD is like for me.

Despite the misleading term of attention deficit, I'm fully capable of being focused. In fact, I'd say I'm often more focused than everyone else half the time. The real problem is not being able to choose what I focus on.

Imagine what your workplace would be like without cabinets, shelves and filing systems. Think about how inefficient it would be to have to sift through thousands of files and documents to find the one you need.

Think about how unorganised you would be if all of your tools and utensils lay scattered across the floor. ADHD functions in a way that prevents the brain from organizing information in an efficient and appropriate way.

Much like the workplace in the analogy, the ADHD brain does possess the required information but lacks the framework to function most efficiently. This is why I'm capable of writing this essay, but it took me over seven months to finish.

I have the knowledge, but I struggle to relay that knowledge in an efficient way. Put simply, I'm usually dealing with multiple thoughts at the same time, so it takes me a while to sort through all those thoughts and find the most productive one. For people like myself, focus is not an effort -based affair, nor is it something you can learn. Some days are better than others, but you take every day as it comes and you keep inching forward. So, what can you do if you believe you or a loved one may have ADHD?

Well, the first thing you should do is begin your own personal research. Search for many different accounts of the condition and think long and hard about these accounts and how they differ or coincide to you or your loved one's life.

There are some excellent online resources from ADHD and mental health organizations that offer information on symptoms and advice on ways to cope with the condition. There is also some great references from people like myself that have lived experience with ADHD.

If you believe there's a chance you're ADHD, then for adults, you would go to your GP, who can then refer you to a psychiatrist. For children and adolescents under 18, your GP will need to refer you to a paediatrician or child psychiatrist for official diagnosis.

It's wise to assemble your own portfolio of symptoms and personal accounts to assist your psychiatrist or pediatrician in understanding you better.

Keep in mind that you might not get answers as soon as you hope to and that the answer you're given may not be what you expected. The human mind is incredibly complex and there are many different possible explanations for why a person may display symptoms of ADHD without actually having it.

That being said there are also many undiagnosed ADHD sufferers that attribute their condition to other factors. If you are not satisfied with the results you are given always seek a second opinion. False negative evaluations and misdiagnosis are unfortunately common given that professionals are prone to human error and that our understanding of ADHD is changing as we learn.

Professionals have become better at understanding, but I suggest you be firm and go in well researched and informed. Also be aware this process takes a long time and getting into a professional can take many months, even years. Well, I hope that I was able to offer some valuable insight into the world of ADHD and that you the listener learnt something new. I hope this piece will inspire more people like me to be more confident in what they can achieve.

Around 1 in 20 Australians has ADHD according to the government, so I hope that what I've said will really resonate with some of you. I'll be releasing more on ADHD in the future, but that's all for today.

To rehear this episode and listen to my other episodes, make sure to find them on the RTRFM website under podcasts. This is Jason Bodle on RTRFM 92.1. Thank you for your time.