AUTONOMOUS MINDS THERAPY

"A Secret Third Thing" How Autism & ADHD Create a Different Neurotype

About the term AuDHD

AuDHD isn't an official diagnosis in the DSM. It's a community-created term used to describe people who meet criteria for both autism and ADHD. That doesn't make it any less meaningful. Diagnostic categories are human-made models; they're our best attempt to organize patterns we observe, and they change as research evolves.

In fact, until 2013, the DSM did not allow someone to be diagnosed with both autism and ADHD. At the time, clinicians believed that ADHD-like traits were simply part of autism rather than a separate condition. As research accumulated, it became increasingly clear that many autistic people also met criteria for ADHD, so the DSM-5 removed that restriction and dual diagnosis became possible.

Now that clinicians are recognizing far more people who have both neurotypes, many are noticing patterns that don't fit neatly into descriptions of autism or ADHD alone. The traits described in this handout are not established diagnostic features or research-based criteria. Rather, they are recurring themes described by AuDHD adults, clinicians, and advocates that may help explain why many people with both neurotypes don't fully identify with descriptions of either one in isolation.

1. Both craving and feeling trapped by routine

You may struggle to consistently satisfy both the need for predictability and the need for novelty.
What this looks like:

- Putting a lot of effort into establishing the "perfect" routine
- Feeling regulated just from the knowledge that the routine exists
- Becoming intolerably bored by following the routine once the novelty wears off
- Feeling dysregulated when it changes
- Eventually abandoning it and starting over

2. Difficulty differentiating between overstimulation and understimulation

You may notice yourself asking, "Do I need more stimulation" and "Do I actually need less" within a short span of time. This is the case when both states manifest in very similar ways:

- Difficulty focusing
- Irritability
- Restlessness

- Shutting down
- Procrastination

3. Feeling drawn to systems but having difficulty maintaining them

You may enjoy researching planners, designing organization systems, and optimizing workflows. Once the system becomes routine, however, you tend to lose interest, regardless of whether the system feels supportive of your goals. You may perceive this as evidence that you're inconsistent by nature, which can negatively impact self-esteem.

4. Feeling simultaneously impulsive and overcontrolled

Your first instinct may be to:

- Interrupt
- Make the change
- Buy the thing
- Share the idea

But before acting, another part of you jumps into action by evaluating:

- Social rules
- Possible mistakes
- Whether you're being "too much"
- Whether you're making sense

From the outside, this may look like cautiousness, and others would likely not describe you as impulsive. However, internally, you may be paying with the energy it takes to restrain yourself. This can validate the function of hypervigilance: "If I'm not on constant guard for a consequential decision, I might just make it."

5. Hyperfocusing until your body forces you to stop

Rather than gradually losing focus (as in ADHD alone) or being forced out of monotropism by an external force (as in autism), you may forget meals, ignore internal cues for the bathroom or sleep, and lose track of time until your nervous system reaches a threshold at which it abruptly stops without warning. It's common for people with AuDHD not to notice they're approaching that limit until it's been exceeded.

6. Attention to detail and distractibility co-existing

You might feel you care a lot about details (in contrast to the ADHD criterion "carelessness"), but struggle to decide which details are deserving of your attention. What this looks like:

- Noticing tiny inconsistencies
- Spending excessive time perfecting details

While paradoxically:

- Forgetting obligations
- Overlooking obvious information
- Missing the big picture
- Skipping steps

7. Executive functioning capacities that are fluid, not fixed

Everyone has days on which typically easy things feel harder, but in AuDHD, these days don't seem to follow much of a pattern related to energy expenditure or demands, and can feel quite arbitrary. Some days, you can organize, plan, initiate, and sustain effort. Other days, identical tasks feel impossible without rhyme or reason. Motivation, novelty, sensory load, stress, sleep, transitions, and interest can all influence executive functioning, but because ADHD and autism commonly conflict in what supports them in these categories, and there is no way to decipher which is needing to be tended to more in any given moment, there is no apparent "perfect recipe" that results in a consistent capacity.

8. Simultaneously wanting to start everything and finish everything

This can create a cycle of both difficulty starting *and* difficulty stopping. You may:

- Generate a lot of ideas but struggle to choose one
- Get stuck in the planning stage and have difficulty committing to action
- Become deeply attached once you start and thus resist switching tasks
- Feel distressed leaving things unfinished

9. Mismatch between the speed of your mind and the speed of your body

You may experience:

- Quick-moving thoughts while your body is unable to initiate action around those thoughts
- Excitement about a task while feeling physically "stuck"
- Urgency without movement
- Motivation without follow-through

10. Becoming bored with your intense interests

While some people differentiate ADHD hyperfixations from autistic intense interests by how long they last and the level of depth in them, AuDHD interests may be shorter-lasting than sometimes lifelong intense interests in the autism neurotype but still reach high levels of depth in a relatively quick timeframe. Moving from thing to thing is sometimes misunderstood as identity exploration or instability, but in AuDHD, it might just be boredom. Regardless, grief in one's inability to enjoy their interests in the same way as they once did can be just as heavy as when the interest is many years long. What this may look like

- Immersion in an interest to a very intense degree for weeks to months
- Sudden loss of access after the novelty wears off (feels like hitting a ceiling)
- Potential to return to it in the future with the same intensity

11. ADHD traits and autistic traits that mask each other

One neurotype often compensates for or contradicts the other, creating a presentation that doesn't match stereotypes of either. As a result, you may appear to others, including clinicians, not to meet the criteria for either diagnosis, based on behavioral data (what is listed in the DSM) alone. As a result, AuDHDers are more suceptible to "imposter syndrome," self-doubt, identity confusion, and shame. It is difficult to tease apart the impacts of socially masking either single neurotype from the masking that automatically happens when these neurotypes co-exist. These thoughts are common examples:

- "I'm too organized to have ADHD."
- "I'm too impulsive to be autistic."
- "If I were really autistic, I couldn't socialize to the extent that I do."
- "People with ADHD don't notice details like I do."

Reflection Questions

Rather than asking "Is this my autism or my ADHD?" try asking:

- Which parts of me are pulling in different directions right now?
- Am I seeking novelty, predictability, stimulation, or regulation?
- Am I struggling because I'm not interested, because my nervous system is overwhelmed, or because both are happening at once?
- Does this feel like two competing needs rather than one clear answer?

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