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Learn to recognize and better serve older adult clients with undiagnosed ADHD.

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Learn to recognize and better serve older adult clients with undiagnosed ADHD.

BY JAMI SHAPIRO, CSA, CSMM

Because the symptoms of ADHD can mimic those of normal aging, dementia, or other cognitive issues, older adults remain significantly underdiagnosed for the disease (Goodman et al., 2024). As a result, an epidemic of shame — and a host of inaccurate assumptions — persist regarding older adults suffering from excessive clutter, anxiety, indecisiveness, overwhelm, and more.

I've spent a large part of my career raising awareness about the intersection of aging and ADHD, working to reduce stigma and, perhaps most importantly, spreading the word about why understanding ADHD matters. Many of the unrecognized symptoms of ADHD seem like personality traits or even character flaws. These may include difficulty learning new things, periodic "blanking" of the brain, talking too much without awareness, interrupting others, forgetting appointments, and struggling with organization.

When I do presentations about ADHD, watching heads nod and having audience members come up afterwards, with tears in their eyes, feeling "understood" is among the most gratifying experiences I've had. While I was presenting at the Certified Senior Advisor Conference in Baltimore, a woman in the audience raised her hand and declared publically, "you just saved my marriage."

Growing Up with Misconceptions About ADHD

When I was growing up in the 1970s, the belief was that ADHD (Attention Deficit Hyperactivity Disorder) was something that only affected little boys and would be "outgrown". Most of us remember the disruptive boy who couldn't sit still in class, was constantly in trouble, visiting the principal's office regularly or being forced to sit with his desk next to the teacher's. So when my ex-husband, a professor of sociology, insisted that I have it, I dismissed him. I remembered my half brother being put on Ritalin so he could remain in the classroom.

Fast forward 10 years, my oldest child Will (they/them) was in eighth grade and insisted on being evaluated for ADHD. When they brought it up to me, I said: "You don't have ADHD, you've been reading since you were three." From the time Will was young, they would sit and read for hours.

Like many people, I was under the impression that if you could sit still to focus on reading, were successful or smart, you could not have ADHD. So imagine my surprise when both of us walked out of the psychiatrist's office with an ADHD diagnosis!! ADHD is said to be as heritable as height.

When someone is evaluated for ADHD, it is helpful to bring a third person to provide an objective perspective on their behavior, childhood history, and daily functioning. This "collateral information" helps clinicians identify symptoms the patient may downplay, forget, or lack insight about (American Academy of Family Physicians [AAFP], n.d.).

Ignoring My Diagnosis

At age forty-five, I was busy raising three children, starting my business as a Senior Move Manager (™) and going through a divorce. I'd graduated college with high honors and my ADHD diagnosis was placed on a shelf. My thoughts were, "I've made it this far, why does it matter?" It only took another eight years for me to realize why it did.

Discovering ADHD in My Family

In an effort to expand Silver Linings Transitions services to provide organizing, I joined the Institute for Challenging Disorganization (ICD). Members of the ICD provide organizing support for people whose chronic disorganization and clutter persists over a long period of time, frequently undermines the quality of life, and recurs despite repeated self-help attempts. Chronic disorganization may be present with brain-based challenges such as ADHD and Hoarding Disorder in addition to other conditions. In our work, I noticed patterns often existing in families – we might start work with the mother and then we'd work with the daughter when both were struggling with chronic disorganization/clutter.

Once I started learning more about ADHD, the subject became my "hyperfixation" and I voraciously absorbed all I could. It is very common for people with ADHD or autism to both hyperfocus and hyperfixate on a special interest or hobby.While listening to a podcast describing ADHD in women, a lightbulb went off. The podcast listed several health issues like fibromyalgia and migraines often linked to ADHD, both conditions my mother had been suffering with for years (Lenz, n.d.). My mother's clutter, or as she likes to call it, her collectibles, had been a source of conflict between us for years. I called my mom and told her, "I don't think you have hoarding disorder, I think YOU have ADHD!"

My mom's clutter fit the definition of hoarding – items piled onto furniture and filling rooms making them unusable. I tried helping my mom declutter, hired professional organizers to help, and yet the clutter would always come back. My mom kept a dedicated "craft room" for my children, her grandchildren, but her home was too dangerous for toddlers. Eventually, those paints dried up, the glue hardened and most of the crafts went undone. Sleepovers at Grandma's turned into babysitting in my home.

When I moved across the country, I'd meet my Mom outside her home to avoid an argument that our strained relationship could not bear.For decades, my mom lived with depression and anxiety, cycling through medications since her twenties. She dabbled in countless hobbies, started and stopped many jobs, tried finishing her college degree multiple times and "shopped" impulsively. Not one mental health professional ever suggested ADHD might be at the root of her struggles.

Everything changed when we heard that podcast. We both looked at her life and choices with a new lens. Conversations with her healthcare providers and therapists confirmed ADHD and we were able to begin building a new relationship of mutual understanding rather than judgement and pain. Now, we see our commonality and joke about leaving cabinet doors open or forgetting words. My mom no longer says, "I'm having a senior moment. Instead when she forgets what she was saying, she says, "ADHD!!"

Recognizing ADHD in Others

After realizing my mom had ADHD, I started seeing it in some of our clients whose homes I'd visit for consultations and began recalling other similar clients



we'd worked with. Many of their homes mirrored my mother's and I realized if my mom had ADHD, it was likely many of these people did too.

After completing my Level 2 ADHD Specialist Designation, I enrolled in the ADD Coach Academy (ADDCA) to become an ADHD coach, started the Grandma Has ADHD podcast, earned my Certified Senior Advisor (CSA)® designation and wrote a book, "This Explains So Much".

ADHD in Older Adults

Perhaps the biggest reason to understand ADHD was something I learned while studying for the Certified Senior Advisor exam. In his late eighties, Sociologist Erik Erikson who'd developed the Eight Stages of Psychosocial Development, realized something was missing. He revised his framework to include the concept of "Gerotranscendence" – a ninth stage of life often characterized as a contemplative way to approach the end of life, emphasizing wisdom and a sense of connection to a larger whole. In this stage, understanding the impact of ADHD (or any other undiagnosed issue) helps someone who's lived with shame, fractured relationships and "incompletions" begin to accept there was nothing "wrong with them".

An ADHD brain is "wired differently". Just as we don't choose our eye color, none of us "chooses" ADHD. Realizing one has ADHD is met with both grief and relief. "Why didn't anyone see this sooner?" "How might life have been different if it had been treated?"

As many as 80% of those with ADHD remain undiagnosed and an estimated 6.0% of U.S. adults (approximately 15.5 million people) have a current ADHD diagnosis. Studies indicate that roughly half of these adults were diagnosed in adulthood, and the prevalence has risen significantly in recent years due to increased awareness and, in part, the COVID-19 pandemic. Still, lder adults remain significantly underdiagnosed.

ADHD has been hiding in plain sight for decades. ADHD in girls might have looked like the quiet little girl in the class room, the "Chatty Cathy" the "Type A" perfectionist or the extra sensitive girl wearing her heart on her sleeve. None of these behaviors were disruptive so there would be no trips to the principal's office. Additionally until recently, most of us only recognized the "hyperactive" part of ADHD.

It's also possible we didn't see ADHD behaviors because so many from the Silent Generation and the Depression Era may have been self-medicating with cigarettes. ADHD is linked to increased risk of substance abuse (Martínez-Raga, 2019), and nicotine acts as a stimulant releasing dopamine and improving attention and executive functioning. This is also why people who stop smoking are likely to have worsening ADHD symptoms (Healthline, n.d.).

Recognizing and Supporting Older Adults with ADHD

Have you experienced the resistant client who is overwhelmed by clutter, misses appointments and becomes overwhelmed when making a decision? For Certified Senior Advisors, understanding ADHD presentation in older adults is critical to effective service delivery and client safety. What we often interpret as stubbornness, resistance, or cognitive impairment may actually be lifelong ADHD creating executive function challenges around decision-making, organization, memory, and time management.

Dr. Kathleen Nadeau, PhD, author of *Still Distracted After All These Years*, explains symptoms can look different throughout a person's lifetime, but patterns appear fairly consistently in older adults with ADHD. These patterns may include:

- **"Swiss cheese memory,"** or a memory that is not consistently failing, but also can't be reliably counted on. Certain things are easy to remember while others slip through the cracks.
- Other **working memory issues** such as being easily thrown off course mid-task
- **Misplacing items**
- **Forgetting words** or names
- Brain **going "blank"** periodically
- **Difficulty learning** new things
- **Talking too much**, often without realizing it
- **Interrupting** others
- Trouble **following conversations**
- Difficulty **maintaining relationships** and keeping in touch
- Difficulty maintaining order within their homes
- Tremendous struggles to make ends meet financially after a lifetime of poor money management

In addition to executive functioning deficits, people with ADHD are also likely to be challenged with emotional dysregulation. This makes us more sensitive to rejection, perceived or real, more likely to respond to situations inappropriately, and more likely to socially isolate. Dr. Nadeau asked older adults diagnosed with ADHD to identify their biggest challenges. Here are the main categories they identified:

1. **Not getting things done** – procrastination, lack of self-discipline
2. **Out-of-control emotions** – frequently feeling irritable struggling with anxiety and/or mood disorders
3. **Time-management challenges** – setting and sticking to a daily routine, being aware of time's passing
4. **The "remnants" of hyperactivity** – feeling restless, talking too much, "random thoughts whirling in my head"
5. **Social challenges** – feeling misunderstood or judged, speaking impulsively, missing social cues

Older adults with ADHD may also struggle with medication management, compliance with medical direction, missed bills, financial scams, distracted driving and other negative consequences. In addition to growing awareness of ADHD as our clients grow older, we are also more likely to see how compensatory strategies fail. A spouse who may have handled logistics or paid bills may have passed. Once retired, a person may have lost the deadlines and structures of a day (Nadeau, n.d.).

ADHD Coach Jeff Copper of Dig Coaching suggests another reason older adults may be impacted by ADHD is that those of us with ADHD often create an accommodation, such as verbally processing information. When a person is left to live alone, they may lose this sounding board. He refers to this as " an accommodation living in plain sight" (Copper, n.d.).

As Certified Senior Advisors, we meet clients in their homes and often have the opportunity to get a clear picture of what may really be going on. If informed, we could be the first person to identify a lifetime of struggles. However, everyone may not be ready to hear "I think you have ADHD perhaps you should be evaluated." It is possible to ask questions instead, such as:

- "Have you always struggled with this, or is this new?"
- "How did you manage this when you were working/younger?"
- "What did your spouse/partner typically handle?" (reveals what they've been compensating for)
- "Tell me about your school experience – did you have trouble finishing assignments or sitting still?"

As Dr. David Goodman says, ADHD isn't something we suddenly have at 60 (Goodman, n.d.). We may be just gaining awareness of something that has been there all along.

The cost of missing ADHD can take a toll on an older adult's physical and mental health. Many of us walk around filled with embarrassment and shame about never being able to "get it together", feeling like we didn't live up to our potential, or struggling socially.

Now what?

To quote one of my favorite poets, Maya Angelou, "Once you know better, you do better."

While I was on the runway flying to Baltimore for last year's Certified Senior Advisor conference,

I realized I'd never made a reservation at the hotel. More recently, I booked the wrong date for my daughter's flight to see her sibling and had to pay an extra $300 to make changes. Although I still pay "the ADHD Tax" on a regular basis, I am learning to slow down and have put "scaffolding" in place to make life easier.

Now, when I make a reservation, I put all of the details in my calendar.

I keep all of my information in one place and have made checking my schedule part of my routine. So I don't forget to take my medication, I put it next to my toothbrush and habit stack. I have learned to pay better attention to my energy level and shut down the negative voice in my head that wants to berate me when I make mistakes.

As a Certified Senior Advisor®, there are some big adjustments you can make when working with your clients.

1. Limit choices. We can easily be overwhelmed by too many choices. Ask your clients if they'd like you to narrow them down.
2. Recognize when your client has "hit their wall" and come back to conversations or decisions when they are fresh.
3. Realize that short term memory loss is a real thing. Suggest smart watches and other external memory cues.
4. Follow up on important conversations and provide reminders. (They aren't pesky, they are helpful.)
5. Work to learn more about ADHD and help reduce the stigma.

Older generations tend to view needing help or "disorders" as weaknesses. When we increase awareness of ADHD and focus on the strengths of an ADHD brain, my hope is this shift in perspective will help us view ADHD as a brain difference rather than a disorder.

People with ADHD tend to be more creative, have the ability to think well during crises or find solutions to problems others don't see. Our amplified emotions also make us highly empathetic and able to read other's emotions. We have a strong sense of justice. We are also humorous and curious. Just look up all the famous people and wealthy entrepreneurs who have ADHD. People with ADHD also benefit from community and like minded people. Help them to "find their tribe".

When ADHD is recognized, entire lives shift. An ADHD diagnosis didn't solve my Mom's problems, but it gave us a new perspective. This January, I flew to Jacksonville to spend her 79th birthday with her. As we were having dinner that night I asked her, "Which has been your favorite birthday?". "This one." was her reply.

If you suspect ADHD, try to find a physician, therapist or psychiatrist who has a solid understanding of ADHD in older adults. You can also consult the CHADD professional directory (https://chadd.org) or ADDA Attention Deficit Disorder Association (https://add.org).Additionally, some occupational therapists can help with ADHD and there are ADHD coaches who specifically work with Older Adults with ADHD. •CSA

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