

Abstract

Attention Deficit Hyperactivity Disorder – or ADHD – is a neurodevelopmental disorder that has been recognized in young boys for decades. Meanwhile, a significant part of the population has been suffering with it, often unknowingly, in silence. ADHD is one of the best-researched disorders in medicine, but only regarding boys, and there is a need for broader research on ADHD – especially in girls and women. Only within the past thirty years has diagnostic criteria been introduced that is inclusive of the experiences of the adult, and female, population. This study deals with the female experience of ADHD in 21st century Norway. This study also holds a second goal, which is to contribute to more research on ADHD within the anthropological discipline, Anthropological studies regarding ADHD in women are even tougher to come by.

This project is developed from an autoethnographic basis, as the project has been conducted by a woman with ADHD. In combination with the film *“How Can I Explain To You What I Am Trying To Explain To You?”* this thesis seeks to enable for an insight in to a lesser known reality of the disorder, as well as an insight into the challenges one can face when in a process of researching oneself.

Keywords: attention deficit hyperactivity disorder, ADHD, women, autoethnography, medical anthropology, stigma.

Acknowledgements and thanks

I have to acknowledge is that I am so incredibly fortunate to have so many people to thank in relation to this project. A series of fortuitous events, goodwill, stubbornness, and chance has enabled me to undertake this project, that I consider to be of such high importance and need, and I feel immense pride that I have been able to come all this way; a pride I share with many.

First and foremost, I would like to thank Anne-Lene, Britta, Guro, and Monica. Without your time, warmth, wisdom, patience, humor, understanding, honesty and friendship, there would be no project. Spending time with you and learning from you has been a priceless experience. Thank you for opening up your hearts and homes to me, for all your stories and for your trust.

Many thanks to ADHD Norge, specifically Nina and Monika, for believing in my project when I had nothing to show for it but my engagement. Had it not been for you, I would never have been able to mess up in the right place or met my participants.

My supervisors, Natalia Magnani and Trond Waage, both deserve to be thanked. As a person that comes up with a thousand new and increasingly complicated ideas every day, that also gets incredibly engrossed and protective of her work, I am convinced I haven't been an easy person to work with or supervise. A great thanks must also go to professors and staff, for supporting me, letting me tread my own path and for letting me dive into my creativity.

A huge thanks to my family for housing me, supporting me and being proud of me, even if you "*wouldn't be able to explain to anyone what you actually do*". I am so glad that I got to spend so much time with you. It is the best by-product of a project I could ever ask for.

I have so many great friends to thank for keeping me going through this degree. I would love to thank all of you by name, but instead I will list some of the things I am grateful for: walks, drives, sleepovers, dinners, drinks, game nights, parties, coffees, conspiracies, real talk, deep talk and talking nonsense. I have so many to share my ups and downs with that I often wonder what I did to deserve all this love.

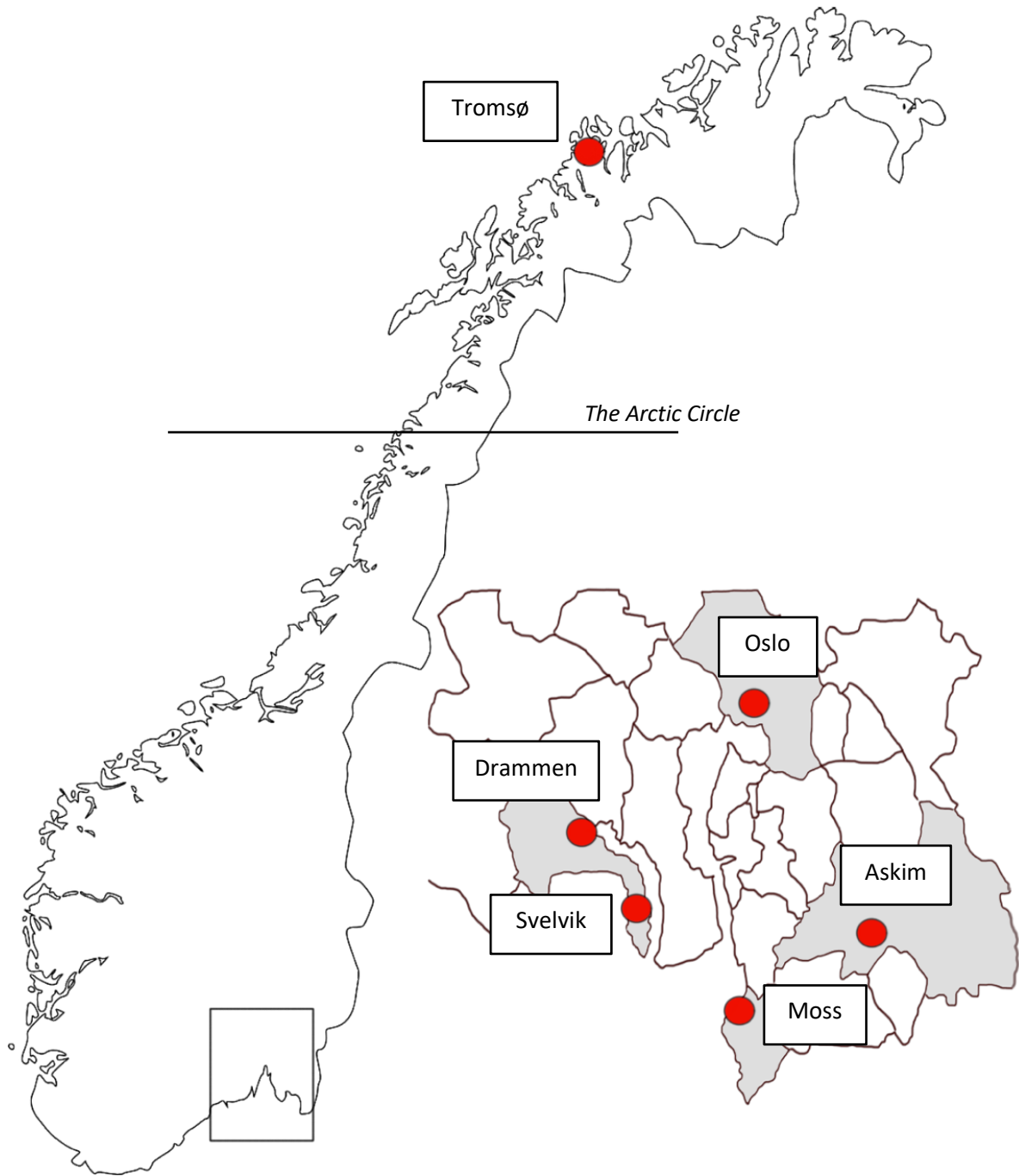
I would like to thank my father, for imbuing me with his work ethic and will – even if we both sometimes take it a bit too far. I would also like to thank him for telling me the things I don't want to hear – because sometimes that's exactly what I need to hear.

My most heartfelt thanks go to my incredible partner Vetle. Few would be able to ride the rollercoaster it is to share a life with me, but your patience, your love and your wit knows no bounds. You teach me every day that it takes more than a measly pebble to tear down a bridge, that dishes can be done in the morning, that 'good enough' also is a unit of measurement, and that being myself is more than good enough.

Lastly, I would like to thank my brain for being a horribly conducted symphony. Without my ADHD, this project would never have seen the light of day!

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The beginning, the end, and the in-between.

In the North of a small Scandinavian country called Norway, north of the arctic circle, there's a small city called Tromsø. Some even call it "The Paris of the North". Though the locals insist that the town is in fact not *that* small, that it is - with its seventy-or-so thousand inhabitants - in fact the largest town in Northern Norway, it doesn't really say that much. I was recently informed of the fact that the size of this town equates to what a German would describe as "*a little place*" (at least the German that told me this did so). However, this town, that's small, and perhaps somewhat insignificant, at an international scale, but big-ish on a Norwegian scale, has a university. This is where our story begins, on the gloomy morning of November 8th, 2021, as I was making my way to the university campus.

Five-hundred-and-forty-six days later, almost exactly a year and a half later, and on a day equally as gloomy as the day where it all began, by a desk, in an office at the university campus, in the same, somewhat insignificant, city, the story is coming close to an end. Or at least it's supposed to. It's May 8th, 2023, and as salty tears ripple quietly down my hot, flushed cheeks, I can't help but grin sheepishly as I catch myself Googling "*How to get out of ADHD paralysis?*". It's no more than seven days – a mere week - left until the thesis deadline. Since New Year's, I have turned up to the office almost every single day to edit my film and write my thesis. I have never been so dedicated and structured and planned this much ahead in my entire life. Surrounded by yellow sticky notes, color coded calendars, stacks of books, heaps of paper, a shelf full of notebooks, dirty coffee mugs and half full containers of Ritalin, chewing on the back of a ballpoint pen and bouncing my leg, here I am: Seven days left, and seemingly nowhere close to a finished thesis.

This thesis has become so much more than a thesis to me. As it was my ADHD that launched me into this project, enchanted me, took me by the hand and ran with me, at a time in my life where the label was still so new to me and I still had so much yet to learn, and made me so enthralled and excited that any breaks or second guessing went out the window, it has become the magnifying glass through which I have attempted to make sense of this slice of reality. I believe this has given my work strength, as I have never once stopped questioning what I do or what I feel, or why I connect things the way I do. Inescapably, every rise and fall of this project is something I've had to physically and mentally experience and subsequently decode, and I have remained aware of this; using it as a tool for self-surveillance (White,

2011: 2-4). This journey, that officially has been a year and a half of a master's project, has for me incidentally become a learning journey of my own, and an analysis and reexamination of my twenty-five years on this earth. Therefore, this story will be told from my vulnerable perspective - as an anecdotal field guide of sorts - attempting to provide some answer to the question:

Why can the female experience of living with ADHD differ from the stereotypical image of the disorder - and how does this manifest in different elements of individuals' life and relate to stigma and shame?

Attention deficit hyperactivity disorder – or ADHD - has long been a contentious topic and is still a controversial diagnosis in the Western world today (Nielsen, 2020: 74). It was long believed that ADHD was mostly found in young boys, and something which one would outgrow, and though ADHD has been increasingly explored and researched over the past few decades, and our collective understanding of the phenomenon broadens, there is still a great need for more research, specific and cross-disciplinary, and alternative perspectives outside the confines of psychiatry and medicine (Helman, 2007: VII; Nielsen, 2020: 144). The project I conducted aims to provide towards this goal of multifaceted research, and towards developing a different and more nuanced image of this topic. The female experience of living with ADHD is a perspective which is broadly underrepresented, and a small and unexplored field within the anthropological discipline specifically. I believe this has to change, and through combining empirical material from my fieldwork, theoretical perspectives, personal experiences and reflexivity into *autoethnography* (Angrosino, 2007: 161-166), I will attempt to present not just a different side of the phenomenon, but a sincere portrait of a reality coexisting with, and just as valid as, the more stereotypical presentations of ADHD. Together with my participants; Anne-Lene, Britta, Guro, and Monica; we explored the personal experiences of living with the disorder, how individuals cope, how they perceive and identify themselves, and how individual experiences can vary greatly. This project explores the presence, effects and connections between *stigma*, *shame*, *gender*, and ADHD. Also, there was a camera involved, which proved to be a catalyst, equally as invaluable as it was deeply frustrating.

Something the observant reader might notice moving forward is the deliberate use of the word '*participants*' in place of the word '*informants*'. The word '*material*' is also applied

in favor of the word 'data'. Though they might seem like interchangeable terms to some, the use of terminology is a conscious decision, as I feel it helps convey the relations between participant and researcher in a more accurate way. I wish to linguistically illustrate that the women involved in this project are actively *participating* in the production and translation of knowledge, and the negotiation of the broader collective topics, rather than passively sourcing me with whatever answers I need. My impression is that the terminology I have chosen to apply inhabits a greater sense of *warmth* and *collaboration* than the ones I have chosen to forgo.

You will find that the style of this thesis will not be according to some tried-and-true academic blueprint, and some people might not like that, which is something I am prepared for. In some ways, there's something poetic about that, as that in many ways is the same approach that I, and so many people with ADHD, must uphold when transparently meeting the world. Many people will not accept the way that we are, what the label represents to them or acknowledge our needs or our realities. Some people will even tell you, to your face, that ADHD does not exist. Just as I stand by that people with ADHD don't owe anyone "normality" (which in itself is quite the oxymoron), I stand by the idea that there might just be as many ways of doing good and "proper" anthropology as there are anthropologists, and that it is the content; the empirical material; the theoretical grounding; the professional integrity; not merely the style, that defines whether it is a worthwhile piece of work. Even though they were published almost two decades ago already, I believe these words from Thomas Hylland Eriksen still ring true today:

*"(...) refusing to acknowledge that texts sometimes have to offer resistance, especially if they are trying to say something new, would be blatant populism. (...)
Anthropologists are not trained to be eloquent. Unlike the historians, anthropologists are not taught, or even encouraged, to write well. On the whole, non-initiates confronted with typical anthropological writing are likely to agree with Pratt (...) who wonders, "how... could such interesting people doing so much interesting things produce such dull books?" Now, they are sometimes able to escape from dullness. Many anthropologists are in fact excellent writers, but it is almost as if they try to conceal it in order to conform to the standards of style set by their peers. (...) In Malinowski's time, the anthropologist was expected to be an omniscient observer offering not only ethnographic detail but also a general overview to his motley*

readership. (...). It is now paramount that the anthropologist keeps her ears near the ground, and far from being absent or making cameo appearances in the text, she can often be a character, a positioned agent, herself; indeed, contemporary ethnographic authority relies to a great extent on subjective “I-witnessing”. (...)

(Eriksen, 2006: 117-118)

This project has involved long commutes and long hours of reading, making plans and messing up, laughter and tears, endless cups of coffee and endless fidgeting. Perhaps most important of all: it has involved vulnerability. All I ask for is for you to take my work as seriously as I do. I will not tell you where the empiricism starts or dedicate a separate part of the thesis to list off what I did and why, because it’s infused into the entire project. It has already started. Lean into the analogies, learn as you go, let yourself be provoked to puzzle upon things and believe in a little magic, and we will hopefully end up a bit wiser than we were at the start. Did I catch your attention?

“Only insofar as you are willing to view them from the perspective of an anthropologist who has come to know others by knowing herself and who has come to know herself by knowing others. You should know that my one major vulnerability, my Achilles’ heel, which I always thought was a problem in my becoming an anthropologist, is that I can’t read a map. I’m the sort of person who gets lost just going around the corner. (...) If you don’t mind going places without a map, follow me.”

(Behar, 1996: 33)

Paradoxes and wizards.

There is an irony in the name *attention deficit hyperactivity disorder*, as there certainly is not a lack of attention here, but an immense surplus of it. Whether the attention is ideally directed and adjusted is a different question entirely. Attention is a tricky creature. Attention can leap restlessly from one thing to another, as though it has burning coals under its feet, or remain completely immovable, as though it has been glued to the floor. It can flicker randomly past you like a shooting star on the night sky, or it can overcome your senses as though you are staring directly into the sun. Attention is a reliable friend and an unpredictable stranger, like riding your bike on a sunny summer 's day one moment and realizing you are heading into a wild storm the very next.

There is also ambiguity in the name *attention deficit hyperactivity disorder*, as hyperactivity is such a shapeshifter. It can reveal itself to you with such undisguised magnificence that it would be impossible to miss, but also hide in plain sight or covert with such distinction that you might begin to wonder whether you have mistaken it for a different creature. It can make it impossible to finish a book or make it impossible to sleep. It can drag the impressions of the world entirely too close for comfort or push them all too far away. It can make your bones itch, or your brain burn. It can tie you down or set you free.

When we are children, we read stories about wizardry and magic (some people still enjoy these stories as adults, which is completely fine too). It is okay to believe in magic as children, but as we grow up there comes a time where we stop believing in wizards and witches. Wands, flying brooms and wizardry are all items of fiction, and there will always come a day where we realize that the tales are not a part of reality, as thus surely no adults can believe it is real. In some ways, ADHD is like magic, except ADHD is not a story of fiction, but a very real set of powers only you can tame and learn how to control. There is a knowledge that some children will be the Chosen Ones, and their calling will be to learn how to use their powers of Attention-Hyperactivity, but there is an expectation that the powers vanish as these children learn how to wield them. Indeed, as with any good fantasy story, the beasts will be defeated and the struggles overcome, or at least that was the belief, until we came to realize that mastering your powers does not mean that they go away or stay manageable forever.

Another long-lived belief about magic was that only boys and men would be chosen for faiths as wizards. Following a series of strange occurrences surrounding them, some would receive a letter that would tell them clearly: “(...), yer a wizard.” (Rowling, 1997: 42). However, in more recent times, it turned out to not be true that only men could wield magic, and, seemingly out of thin air, women started to reveal themselves as fully fledged witches. How had these tumultuous battles persisted imperceptibly for so long? Had they not called out for help? Like in the fable of ‘The Boy who cried wolf’, they might have called out many times (Waite, 2010: 182), but never been able to do a spell and provide proof when it was expected of them, and therefore never been believed (Reid & Brough, 2022: 4). Perhaps they were unaware that they were indeed dealing with magic? After all, how could you be certain if you never received a letter?

Revealing oneself as a witch

In the fall of 2018, a couple of months into my first year of university, I met with a mental health counselor at the University of Bergen. The man that met with me had kind eyes, offered me a cup of coffee, and chitchatted with me for a bit before asking: “*So, why are you here today?*”. It took me a little while before I answered. “*I think I’m losing my mind*”. He looked surprised, almost as though he waited to see if I was making a joke. “*That’s very strong wording. Why do you think you’re losing your mind?*”. I talked him through my life situation. I was living alone for the first time in a new city, but I wasn’t stressing about that. However, I’d always been a great student, but now I felt as though I could never even get started on my workload and constantly lagged behind. I was struggling to feed myself properly, and I barely ever slept anymore. I explained to him that I’d been struggling to sleep my entire life, but that this was different. “*I can stay up for days at a time, and I keep rearranging my apartment in the middle of the night.*” He thought about it for a while, before pointing out that however distressed I was, I didn’t seem depressed, to which I answered that I honestly wasn’t. “*No, I’m not sad about it or hopeless or anything, but I’m just so confused and exhausted.*” He looked at me for a moment, turned his chair around, and turned back around with a form. “*I’d like for us to go through an evaluation. Would you mind telling me about how you were as a child?*”

When I was in elementary school, my teachers didn’t know what to do with me. I would always get into trouble with other kids and fight in the school yard. I had a short fuse, which resulted in quite frequent and explosive anger meltdowns. I was the target for a lot of

bullies, and I was often taken aside by teachers that told me that if I just stopped flaring up into a rage, my problems would be solved. On the other hand, despite my social challenges, my academic achievements were solid. Except in math and gym. Otherwise, I was an outstanding student, who always had my hand up in class or blurted out the answers to every question so often that I remember being told: *“Now that’s great, but leave some room for the rest of the class to participate.”* When I was not talking, I would fold things out of paper scraps, draw in my books or on the desk, and read. Every parent-teacher conference could be summed up into different versions of *“You are so smart; you just need to work harder in math. You have to work on being more respectful and learn how to calm down.”* At the time I had a small handful of friends. One of these friends, let’s call him Phoenix (because why do fake names have to be so plain?) had ADHD. Everyone knew this. Teachers didn’t always know what to do with him either. Phoenix would always get into trouble with other kids and fight in the school yard. He had a very short fuse, which resulted in quite frequent anger outbursts. Even so, he had quite a lot of other friends, though he would often be taken aside by teachers, who would tell him to think twice about how he interacted with the other kids. Phoenix was not a sterling student, always tilting his chair back and forth and throwing bits of eraser across the room, but he was great in gym, woodworking and anything computer related. In those classes, he would always excel. Phoenix was the archetypical ADHD boy: hyperactive, disruptive, impulsive, disorganized, and not a perfect student, but very good at certain things he found interesting. I was confusing. Where it was so clear where his symptoms manifested, my presentation wasn’t necessarily as clear cut, especially if you never attempted to see it through the guise of ADHD.

The counselor guided me through the form and asked me to answer on a scale from *strongly agree* to *strongly disagree* when he presented me with statements about how I was like as a child and how I was now. After crossing off my final answer, he flipped through the pages and looked up at me. A smile crept across his face. *“Now, this form is not an official diagnostic form, but a mapping indicating ADHD. It’s called DIVA (Kooij & Francken, 2010). I don’t think we went through a single question without you explaining why you answered what you answered or asking me to read it again. Not that it’s an issue, but this form rarely takes this long. Many times, you forgot what you were saying as you were saying it, you’ve been moving around in your chair, and I don’t think your leg stopped bouncing even once. Looking through your answers, it seems very likely that you have ADHD. Has anyone ever suggested this to you before?”* I had been giggling several times throughout the

questioning, and I was giggling as he summed it up for me, because I had felt as though his questions had been almost too familiar. It had never been suggested to me before, but it made a lot of sense. He started giggling with me. *“I am writing you a referral to a psychiatrist.”* The following year, I moved to Tromsø and was, after some time, given a treatment team. I received my formal diagnosis in 2020, the year I was turning 22. Finally, I had my letter, some answers, and many questions. I was a witch.

A day in the mind of a witch.

I will attempt to paint you a picture of how an average day inside my head might go. ADHD can be experienced so differently in everyone with the disorder (Mueller, Fuermaier, Koerts & Tucha, 2012: 111), so how it's experienced and what it looks like for me might not look or feel the same for someone else. To compose this hypothetical day inside my mind, I will implement every point of diagnostic criteria from the DSM-5 (APA, 2013: 59-60) that applies to my experience of ADHD. All the parts of my experience that qualifies as diagnostic criteria will be underlined.

07:00:

I wake up exhausted, because I stayed up for too long last night playing video games with my partner and did not realize how much time had passed. I go into the bathroom to get ready for the day. As I'm about to close the door, my partner tells me that he woke up early and has brewed a fresh pot of coffee. I decide to brush my teeth after I've had my coffee, instead of after I've had my vitamins. I get dressed quickly and have coffee with my partner.

08:45:

I don't realize how much time I've spent drinking coffee and end up having to scurry together all my things and run for the bus. As I veered away from my morning routine, I forgot to take my vitamins, my medication and I forgot my wallet. I usually have a round I do before I leave the house, but had no time for it today.

09:15:

I got to class just in time. I sit down and pull up my notebook and pen. I listen to the professor and take notes. What the professor says makes me think about something. I don't know how much time has passed, but I blink, and the professor is talking about something completely different. I try to catch up. As I focus, my friend puts a hand on my knee. *"Would you mind not bouncing your leg so much? You're shaking the desk."* Further into the lecture, we start talking about something I know, so I don't feel the need to take notes. I'm very interested in the topic, so I want to participate a lot. I end up always trying to say something once someone else tries to say something. I doodle in the margins of my notebook instead.

12:00:

After class, I am teaching a class of bachelor's students. As I explain, I walk back and forth and put my entire body into my explanations. Halfway through the class I am almost out of breath. "I should let you talk more!" I sit down and give my students some tasks to solve. As the room goes quiet, my stomach growls embarrassingly. I haven't eaten yet today. In between two two-hour seminar groups, I run to the cafeteria and grab a cup of coffee and something to eat. Back in the classroom, I take my medication.

16:15:

As I sit down at my desk and open my laptop to study, I don't know where to start. I have a draft due that I have to send to my supervisor by the end of the day, and it's not quite finished. The campus ventilation system seems to be whirring louder than normal. As I try to figure out how to get properly started on my task, my phone buzzes. I check it.

16:32:

I could swear I was on my phone for barely a minute. 22 minutes? I try get started on my draft again. I put my phone on 'Do not disturb'.

18:45:

My draft is finally finished. I open my email and write a short message to my supervisor, then click 'send'. Satisfied, I pack up and head home.

18:53:

As I walk home from campus, my phone gives me an email notification. It's from my supervisor. "Hi. It seems as though you forgot to attach your draft to your last email."

19:05:

When I arrive at home, my partner is in the kitchen unloading the dishwasher. I kick off my shoes and leap across the kitchen floor. "Those glasses don't go there!". He gives me the glass and I put it away where it usually goes. Without really thinking about it, I unload the rest. There are more of those glasses, so I might as well put them away. As I unload the dishwasher, I tell my partner about something I read about on my phone earlier. He listens, smiling, but stops me after a while. "Honey, I've had a very long day, and I want to, but I simply cannot keep up with you when you talk so loudly on every in- and exhale! I am

trying!” He’s not mad, just tired. I try to apologize for blabbering, but am interrupted by a message on my phone. It’s a message from my telephone provider. My bill is overdue by a week. I quickly fix the bill on my phone.

This could very likely be a regular day in my life, and it might be easy to say: “*Well, that seems normal. Everyone can have days like that.*” That is true. Many of the things that people with ADHD experience are very normal. It’s very normal to experience instances like the ones I’ve described sometimes, but when it happens every day, often several times a day, it can become very disruptive and inhibiting. It can add up and create little messes in our lives that can become quite difficult if they’re not dealt with. The differences between what “everyone” experience and what people with ADHD experience are *severity* and *frequency*, and there are physical and chemical explanations to why.

Podcasts, bands and chasing the dopamine.

Inside everyone's head, there's a brain (and if you can read this, you're in the clear). And inside everyone's brain, there's a tiny band. Of course, not a real band. A brain scan would never reveal an actual image of a tiny band with tiny note sheets, but, for the sake of argument, as I am not a neuroscientist, imagine a little band. Dr. Andrew Huberman, who is an actual neuroscientist at Stanford, was the one from whom I heard this analogy; in a podcast episode, through a pair of earbuds, as I was laying in bed unable to sleep, as I often am. Again, imagine a little band. Let's say it has a guitar, a bass guitar, and a set of drums. Of course, feel free to imagine it differently. In a *neurotypical* brain, or a "normal" non-ADHD brain, the band is conducted perfectly. The guitar plays the melody, the bass plays the bass line, and the drums provide the foundation and help keep the rhythm. It sounds great or, at least, like it should. Now, in a *neurodivergent* brain, like an ADHD brain, it's hard to say what the conductor does. Perhaps his back is turned. Perhaps he's too short to be seen behind the note stand. Perhaps he didn't show up. All the instruments are still playing together, but instead of playing their parts, they're all playing the melody or even different songs. It sounds horrible or, at best, very strange. The band represents different areas and networks in the brain, and the conductor represents the hormone *dopamine*. In a neurotypical brain, that has sufficient dopamine, the networks work in an antagonistic way, opposite each other, whereas they in the neurodivergent brain work in a synchronized way, due to the lack of dopamine (Huberman, 2021). Personally, I find the analogy of the band amusing, as any attempt my participants and I made at explaining how ADHD could feel like felt futile. We flailed our arms at each other, made faces and noises. Describing it as "noisy" or "messy", or as "chaos", didn't quite cover it. I remember Britta explaining attempting to explain ADHD to someone without ADHD like this: "*How many sound effects do you need?*"

It's not rocket surgery.

First, get all your ducks on the same page.

*After all, you can't make an omelette
without breaking a stride.*

*Be sure to watch what you write
with a fine-tuned comb.*

Check and re-check until the cows turn blue.

It's as easy as falling off a piece of cake.

*Don't worry about opening up
a whole hill of beans;
you can burn that bridge when you come to it,
if you follow where I'm coming from.*

*Concentrate! Keep your doors closed
and your enemies closer.
Finally, don't take that moral high-horse;
If the metaphor fits, walk a mile in it.*

(Bilston, 2019)

The poem above can help illustrate how it feels when someone tries to explain something “simple” to you when you’re having a particularly bad ADHD day. Those exist. On bad ADHD days, your symptoms might worsen, paying attention or sitting still or making a choice might feel impossible. The brain is making breaking into horrible chaos in what feels like the worst possible moments.

When the little band in an ADHDers mind is provided with dopamine, the sound changes. What would before sound like three musicians trying to outdo each other, now sounds like a song. Dopamine drives the antagonistic patterns between the brain networks and helps the brain function “like it should”, more like a neurotypical brain, but in neurodivergent brains these systems are disrupted (Volkow et al, 2009: 1084). If dopamine is too low, it leads to unnecessary firing of neurons in the brain unrelated to the task you are trying to do: The band starts playing notes when they shouldn't be playing. This is connected to many ADHD elements, such as inattention, hyperactivity, and impulsivity (Volkow et al, 2009: 1088-1090), and to the characteristic restless behavior that can be found in descriptions as far back as the 18th and 19th century (Barkley & Peters, 2012; Tjora & Levang, 2016: 11) During its history ADHD has been theoretically linked to deviance, immorality, brain damage and even intellectual shortage (Mayes & Rafalovich, 2007: 435-438; Tjora & Levang, 2016: 11-12) - all of which have been disproven – and it wasn't until as recently as the 1990's and 2010's that the three subtypes were introduced; predominantly inattentive, predominantly hyperactive-impulsive, and combined type; and criteria relating to adult ADHD was

implemented (Nielsen, 2020: 21-22). Luckily, there are great, reliable sources and amounts of research supporting its validity today, such as Stephen V. Faraone and his colleagues' "*The World Federation of ADHD International Consensus Statement: 208 Evidence-based conclusions about the disorder*" (2021), that is approved by 80 qualified authors from 27 different countries across 6 continents and "*allow for firm statements about the nature, course, outcome causes, and treatments for disorders that are useful for reducing misconceptions and stigma*" (Faraone et al, 2021: 789).

Though the opinion within the professional sphere has slowly changed over time, there's still a long way to go regarding the ideas of the disorder within the broader society, due to solidified *stigma* and *stereotypes* surrounding ADHD. The term *stigma* can be described as a set of defining elements that are attributed to a certain identity or group: preconceptions and expectations about attitudes and behavior that negatively set them apart from society's norms (Goffman, 1963: 11-15). Along with a stigma comes *typification*, in the form of *stereotypes*: homogenized convictions of how "all" individuals belonging to a certain group are like. These images often amplify the presence of the supposed negative attributes in the associated stigma and is frequently misrepresentative of individuals within a group, as found in my own experience, through conversations with my participants and described in Nielsen's book (Nielsen, 2020: 74-75). Regardless of this, it accentuates a divide between the "socially desirable" and "acceptable" and the stigmatized group, and any behavior carried out by these individuals perceived to be in line with the expectations may confirm these biases – further solidifying the stereotype and stigma attributed to the group (Passer & Smith, 2009: 315) and resulting in internalization of the stigma and shame in the ones being stigmatized (Kleinman, 1988: 160).

One likely reason for why ideas about ADHD have not changed in line with the professional opinion has to do with how the phenomenon is presented to the wider public. As the behavior, regardless of label and time, usually has been seen as something disruptive, abnormal and negative in relation to the Western ideal, especially in institutional settings such as schools (like my friend Phoenix and I), I would theorize that it trickles into society from these sources, thus reproducing the negative image of the disorder. Another way the public's idea about the disorder can be shaped is through media (Tjora & Levang, 2019: 108-109) Direct examples of this can be found in chronicles published by Norsk Rikskringkasting (NRK), the Norwegian Broadcasting Corporation, in 2022. Here we can find several threads

of chronicles with contesting views and approaches to ADHD (Dyrdahl, 2022; Gjelsvik, 2022; Larsen, 2022; Lunde, 2022), often representing ADHD as something that is either a “superpower” (Larsen, 2022) or a disability (which I would love to call a “super-un-power” instead) (Lunde, 2022). Very ‘either or’. Very ‘up or down’. Very ‘all or nothing’. If I have to be completely honest with you, I don’t particularly enjoy the analogies of ADHD as a rollercoaster or a superpower. This is a personal opinion of course, but I feel that it simplifies it too much. These analogies play into, and amplify, the stereotypes of ADHD that keep many of us from being taken seriously, while at the same time being potential fodder for people to discredit our experiences, because they will argue that “*everyone feels that way sometimes*”. Though these portrayals may reflect how ADHD can be experienced sometimes, I feel that what is lacking is the explicit representation, or more frequent emphasis, on an ‘*in-between*’ in addition to these opposites. The voices of the ones who are *not* living and breathing clones of the extremes, of what in reality is a spectrum of ADHD experiences, are often drowned out (Nielsen, 2020: 7).

Anecdotally, what many people with ADHD end up experiencing is *dopamine seeking behavior*. In smaller ways, this can be looking for stimulus through background music, fidgeting, talking or other smaller impulsive behaviors, or getting distracted with other things. Statistics also show, without us going too sociologically into this, that people with ADHD are far more likely to use recreational drugs and stimulants, such as coffee and nicotine, or even cocaine and amphetamines (Bjørnshagen, 2022: 9; Leon, 2000: 44-45). A second reason why ADHD carries with it this persistent stigma can be related to the use of *medication* as a part of management and treatment. Already back in the 1930’s, drugs were tested out on children with ADHD-like symptoms, specifically *amphetamines*, and showed to have positive effects on symptoms, especially inattentive behavior (Nielsen, 2020: 20-22). Amphetamines are categorized as hard drugs in our medical system and carry with them their own stigma and stereotypes related to amphetamine addicts in particular, which are being categorized as part of an *outcast subculture* (Helman, 2007: 205). Interestingly enough, stimulant medications, such as Adderall and Ritalin, are used – in controlled doses – to treat ADHD symptoms (Nielsen, 2020: 20). Statistically, people with ADHD also indulge more frequently in things such as food, gambling or extreme sports and have greater potential for addiction (Pallanti & Salerno, 2020: 3; 220-223; 272-275). The reason for this is because these substances or behaviors incite reward and increases levels of dopamine in the brain, in the regions that regulate attention, hyperactivity and impulsivity. This explains why, for example, children

with ADHD can sit still and focus for hours at a time when doing something they like: As a child I loved learning, so I would always pay attention in the subjects I liked. My friend Phoenix loved sports, woodworking and computers. Finding something that creates a surge of dopamine can create intense focus, sometimes obsession, over shorter or longer periods of time. This is what we describe as *hyperfocus* (Pallanti & Salerno, 2020: 34-39), and is probably what made this project happen in the first place.

From a podcast in an Oslo coffee shop to a coffee in Oslo.

On a gloomy November morning in 2021, as I was making my way to the university campus, I was looking for a podcast I could listen to on my walk, as I enjoy my walks the most when not walking in silence (I do love myself a good podcast). I wish I could tell you that this project was very well-planned from the start, but reality is (and perhaps better), as with many a good story and with great inventions, that it was brought forward by a coincidence that led to a spur-of-the-moment decision (Ingold, 2020: 1). Originally, I had something completely different in mind, something I had been contemplating for little over a year, but what that was is not important anymore. What is important is that I, about two days or so before starting to draft a project proposal, came across this specific podcast episode that would make me drop my other idea quicker than a bolt of lightning flashing across the sky.

As I browsed, I came across an episode from the podcast series “*Espen uten filter*” (“Espen without filter”). Guesting this episode was the Norwegian anthropologist Thomas Hylland Eriksen, and in the episode Eriksen and the host were discussing the topic of *Attention Deficit Hyperactivity Disorder* (ADHD Norge, 2021). The episode started off with Eriksen explaining rapidly and jumping energetically from point to point, while going into almost unnecessary detail about all the functions this Oslo establishment had had before ending up as the very coffee shop where they were now meeting in. Eriksen shared with the host that many had expressed to him that if the diagnosis had been recognized during the time when Eriksen was growing up, he would most probably have been diagnosed and medicated accordingly. Some of the most recognizable symptoms of ADHD were familiar to him, such as restlessness, high energy levels, speeding thoughts and difficulty concentrating (APA, 2013: 61). Eriksen and the host discussed how these symptoms were increasingly visible in today’s society, and a great challenge for many, but then moved into a discussion about how ADHD, or the components of ADHD, could also be beneficial – as people with ADHD might be more observant, curious and quick to pick up new skills and information...

I don’t remember how the rest of the episode went. I was no longer paying attention, as I had just been consumed by an idea. I was flipping through my mental rolodex, or whatever analogy would be the most fitting in that very moment. Whatever mental gymnastics I was doing was at a breakneck speed. Had I ever come across anthropological work regarding the topic of ADHD? I was convinced that I hadn’t. Not that I’d ever looked

for it. Anyhow, I was sold. I felt enlightened. Thus, my meticulously planned initial project fell through in an instant. I had to change my project right away, and it *had* to be about this topic. Suddenly, it seemed to me that this new idea was the only thing that existed. At least for the next fifteen minutes, which were fifteen incredibly productive minutes. As I was walking, I started Googling “ADHD in Norway”, and found the national organization ADHD Norge. One of the first Google results was their Instagram page, and a brief moment later I had typed out and sent them a message along the lines of “*Hello, I want to do a master’s project on ADHD. Would you be interested?*”, and just mere moments later they replied. The message was short and kind and encouraged me to contact their educational manager via email. I can’t actually recall walking to campus after starting the podcast, but by the time I reentered the outside world from inside my own mind the email was sent, my earbuds had gone silent, and I had arrived just in time for that morning’s lecture.

A couple of weeks after the gloomy podcast morning, I was sitting in a classroom at campus, surrounded by my fellow students and our professors. It was project proposal day, and it was my turn. As I took my place in the middle of the room, surrounded by a horseshoe of desks, I had no notes prepared. “*So, I want to do a project about ADHD, and I might have done something I shouldn’t have. A couple of weeks ago I got an idea for a project and started contacting people, and yesterday I had a meeting with Nina, the educational manager of the national organization. She’s very keen on helping me and has already suggested I come down to Oslo for a conference in the spring. I know we’re supposed to have our projects approved before we talk to people, but I wanted to make sure that someone was interested first.*” As I stopped talking and looked around, I wasn’t sure how to interpret the room. A professor cleared his throat and asked: “*Okay, you might have moved a bit too quickly. What is ADHD? And why are you interested in researching this?*” I explained ADHD in short: that it is a neurodevelopmental disorder that was believed to only be found in boys, and that it was most commonly recognized as this restless-boy stereotype, but that there are countless ways ADHD can manifest and, in turn, affect a person, which can make it both hard to understand and hard to manage. “*I was diagnosed only last year because I never fit into that stereotype as a child, but when I was diagnosed it became clear that I’ve had it all my life. I actually got the idea for this project from a podcast, because I keep seeking out information about ADHD. Being diagnosed so recently, I still have so much to learn about my own diagnosis.*” As I ended my sentence, I realized how incredibly honest I’d been. I had just told my entire class and the staff about my own mental health. I hadn’t necessarily thought about exactly why I’d

wanted to do this project until that moment, but part of the answer was right there: I was looking for answers to my own questions, not for my own gratification and validation, but because I struggled to find the answers elsewhere. I was thanked for my honesty and asked whether I knew about any anthropological work regarding ADHD. By that time, I'd had some time to look around, but I hadn't found much yet, with the exception of one book: *"Experiences and Explanations of ADHD: An Ethnography of Adults Living with a Diagnosis"* (2020) by Mikka Nielsen. "You seem to be quite far along already, but this is quite a broad topic. Have you thought about what you would like to look at specifically? What are your research questions?" I felt a bit silly as I stood there, but I answered honestly. "I don't know. I haven't thought that far. I just know that I want to do something about ADHD... and I completely forgot about making research questions."

A couple of months passed, a new year began, and the seasons started to change, which in Tromsø terms meant that the little arctic city would be bathed in sunlight a bit more every day, after a winter of polar night, while the landscape remained hidden under a heavy blanket of snow. ADHD Norge's educational manager, Nina, that I'd contacted via email in November 2021, and I had kept in touch, and she introduced me to the secretariat of ADHD Norge in March 2022, over video call. From their headquarters in Oslo, I was greeted by an energetic group of women. As I was still unsure about how to narrow down my project at that point, there were put forward several suggestions regarding how I could engage with potential participants through the organization. One of these suggestions was what Nina had already suggested back in November: a conference for "*brukermedvirkere*", or what could be translated as *user contributors* (ADHD Norge, 2022: 10-11), that would take place just outside Oslo in late April. This conference's head organizer was a woman named Monika, the professional adviser of ADHD Norge. It was quickly decided that this conference could be a good place for me to start meeting people and moving forward. Monika became one of my key contacts in ADHD Norge, alongside Nina. As the conference moved closer, Nina, Monika and I had to come to an agreement. As a master's project of visual anthropology, I had made clear that the end product of this project would be a written thesis and a film. Though my presence at the conference would be no problem at all, the presence of the camera was a cause for concern. One issue was whether the camera would make the participants uncomfortable. Another issue was whether the presence of the camera, even if people were comfortable, could become a distraction for a number of the participants. They had never organized a conference quite like this one before and they wanted it to be as useful and rewarding as

possible. The concern was whether the camera could perhaps counteract this. I was willing to be flexible and we quickly ended up with a compromise where I would be able to attend the whole conference if I would agree to not film it. This arrangement did, however, not rule out filming entirely, but I was asked to restrict it to outside of any arranged activities or seminars. I was happy simply to have this opportunity to get comfortable in the field setting, to learn more about the organization, and be able to network, and was therefore not too anxious about not being able to film right away.

Outside my airplane window snowy peaks and lavish clouds were replaced with green fields and clear, blue skies, as an almost eighteen hundred kilometers' difference revealed April to be quite a different experience in the South than the North. As I arrived in the bustling Norwegian capital a day before the conference, I realized that I should've packed for summer, not spring, and I spent an afternoon and a night catching up with my friends in their apartment, with all the windows wide open. My friends, who had so kindly opened their couch up to me, asked me curiously about my project. I had approached the initial phase of my project with intense vigor and idealism, but I knew it would be beneficial for me to define and narrow down my topic (Madden, 2017: 38). *"I just think I need to get to know people first. Maybe something will jump out at me, and I'll be like: 'Yes! That's interesting!'. It seems to have worked out okay so far. I just don't want to plan it too much, because I'm afraid I'll start to overlook things"* (Madden, 2017: 69). If I was able to clearly define any objectives and tangible ideas in this phase, I would also possibly facilitate for a lower potential overwhelm when entering the field – though it would soon dawn on me that exhaustion and overwhelm in the field took place regardless of this consideration. And a topic most definitely jumped out at me over the course of the conference weekend, but only because I was fortunately unfortunate.

Riding a bike is not like riding a bike, but it's a bit like anthropology.

Sometimes I see the way I learned to do anthropological research as a direct parallel to the way I learned how to ride a bike. In reality, I learned how to ride a bike when I was about six years old. For my sixth birthday, I was given a beautiful, shiny, new bicycle in a deep pink color. It was a beautiful summer's day, and was riding around on it in no time, with my training wheels securely attached. I didn't really need them; that was clear to anyone that glanced at my hind wheel; as they were clearly not in contact with the hot asphalt as I pedaled back and forth up my childhood street (my father had attached them to sit higher, that sneaky bastard). Still, I was convinced that I didn't know how to ride a bike without training wheels.

However embarrassing it is to admit, I did not learn how to ride a bike without training wheels attached until I was nine years old. I was having dinner at my best friend's house after school, and I let it slip to her parents that I did not know how to ride a bike. Her father looked as though I'd just revealed that I was secretly a shapeshifter from Mars and loudly proclaimed that I would not be going home that afternoon until I knew how to ride a bike. Immediately after dinner, my training started on one of my friend's old bikes: a shiny silver frame with red handlebars. I was propped up on the bike and my friend biked up alongside me as her father held the back of my bike. I started pedaling and a moment later my friend started to laugh. "*You're doing it!*" I could hear her father clapping behind me. "*You lied! You do know how to ride a bike!*". I was so confused. I was indeed riding a bike! Then I smashed into their mailbox. It looked like a green, crumpled piece of paper. I had attempted to break, but my own bike had a back-pedal break, and the bike I'd borrowed had handlebar breaks. This showed me that I did, in fact, know how to ride a bike, but it was still my responsibility to learn how to control it properly. You can be a theoretical expert in how to ride a bike, but every bike can be different, and "*break*" doesn't necessarily mean the same thing on a pink, glittery bike as on a silver bike with red handlebars. I studied anthropology for three years and conducted my first fieldwork digitally. For me, that was fieldwork with training wheels. Technically, I knew how to do *a fieldwork*, but I was in many ways still wholly oblivious about *how to do fieldwork*. Perhaps one can never be entirely prepared for fieldwork, but perhaps that can be a good thing sometimes.

Riding a bike in practice

The first day of the conference I arrived painfully early, as I always do, and settled into a beautiful hotel room Monika and the organization had provided for me for the weekend. I was close to bursting with excitement and nerves, eager for the conference to start and to meet all the participants, but I felt uncertain about how I should approach people. A couple of weeks prior, Monika had sent me a short list of names and contact information for people that might be interested in participating in my project. One of them was Britta, whom I had briefly exchanged some nice emails with before her replies stopped abruptly, and I had not heard anything from her for a couple of days. The other two had not responded at all, and with that looming in the back of my mind, I kept wondering whether I had done or said anything wrong. As I donned a blazer and combed my hair one last time, checking in the mirror to see whether I looked professional, or presentable, or approachable - I was not quite sure what I was looking for – my phone gave me a cheery ‘ding’: an email from Britta! She was on her way to the hotel and would love for us to have a “hot-cup-of-something”-meeting with me before the conference started in the afternoon. When Britta arrived, it was clear that she was a well-known face for many, and she was very upbeat and energetic as she greeted everyone before she finally got around to me. As I had already warmed up socially, knew how nice she had been through email, and saw how she had interacted with the others, I found it easy to talk to her right from the beginning and we met up in the hotel foyer shortly after, for our “hot-cup-of-something”. It was pleasant talking to Britta, almost as though we already knew each other, and as we talked new people would approach and greet Britta or stop for a small chat, which also presented me with a great opportunity to meet even more new people before the conference officially started.

A couple of hours had passed when it was time for the first meeting of the conference. I had returned to my room for a bit of rest before the meeting, as meeting with all these new people had drained my energy levels significantly already. Though the setting and mood had been very casual and friendly, I was very aware that I was now officially in the field and surrounded by impressions, potential material, and potential participants at all times. This expanded mental presence was incredibly tiring, and though I felt that I was being genuine and relaxed when I met people, returning to my room made me realize that I, not surprisingly, also made quite the effort in standing, talking, listening, looking- every possible element of interaction was something I tweaked and thought about. In the conference room I sat myself down close to some of the people I had chatted with earlier, instead of hanging on to Monika

or Britta. There was mix of men and women attending from all over Norway, the energy of the room was light and bubbly and there was chattering everywhere. When the room finally fell somewhat quiet, after several requests from the speakers, I saw several works of knitwear being picked up by a significant number of the female attendees. The meeting started and quickly moved into an introductory round, where a microphone was passed around the room. Monika and I had initially planned that I would present myself to the attendees when the meeting started, and as the microphone was handed to me, I looked towards Monika, that made an expression along the lines of “*I forgot too!*”, but nodded encouragingly towards the microphone. Everyone else had been sitting down during their introduction, but Monika gestured for me to stand up. Standing up from my position in the room, I could see everyone. It had been noticeable before, but it now dawned on me that I was very likely the youngest person in the room. The fact that I was the only person to stand up caught the attention of the people that had perhaps been looking down or picking at other things, and everyone were now looking at me. Funnily enough, this was the quietest moment in this room thus far. I introduced myself to the room and told them that I was a very new member, not enrolled in any branch, but that I “*can be a stand-in for the Tromsø branch, as I have caught on to the fact that they missed their flight here*”. The room chuckled. I went on to explain that I wanted to do a master’s project on ADHD, as I had noticed it was very unexplored within the social sciences and wanted to see a change in this. I rounded off saying that I hoped they would be okay with me snooping around and learning from them. I looked around again to see a lot of smiling faces looking back at me and I received an applause as I sat back down. Several people looked over and gave me nods of approval. The meeting was short, and the rest of the afternoon and night was put aside for a long dinner. I noticed myself get increasingly exhausted as the light outside the monstrous glass windows of the dining hall dimmed, but I stayed put to talk to people for as long as I could.

“(...) In the end, our table was the last one left, and I sat myself down next to Britta for a little. She is a very warm and fun person to be around. (...) When I sat down next to her after dessert, she was fairly quick to ask me whether I was tired and I answered honestly that I was. She put a hand on my back and told me that “people like us, as well as other people, but us in particular, need to take our own needs into consideration” and that it was okay to go retire and rest, instead of holding on simply to not feel rude. I felt like she could see right through me. (...) It feels like she’s taking me under her wing, and though it felt conflicting once I thought about it back in my

room, being taken care of by one of the people potentially being a main part of the project is nice. This is my first time doing practical fieldwork and it is overwhelming. And this setting is overwhelming, not only as a student and researcher, but as a person with ADHD and as me. It feels nice that I can participate, but also feel like I don't have to play this "adult role" or this "normal role" in the same way I usually do."

(Field notes)

The second day of the conference was a very long day packed with information and impressions, discussions, group exercises and presentations. Though I initially was not going to participate in the activities, I was asked whether I could join in on group exercises and was encouraged to raise my hand if I felt I had anything to add. I ended up being so busy observing, participating, and talking to all the attendees that I barely had time to take notes. As this day came to an end, I was so exhausted that I noticed myself blanking out mid-conversation during dinner and decided to take Britta's advice from the day before. I went to bed early, planned for the next morning and set three separate wake-up-alarms before I fell into a deep and much needed sleep. The following day would turn out to be the most educational and important day that weekend, even if it started off a bit unlucky – which, ironically, was lucky.

Sunday morning, on the last day of the conference, I woke up feeling rested and refreshed. Compared to the last week and the days leading up to this day, where I had slept terribly - probably due to anticipation for the weekend - I felt ready to take on the last day of the conference. I had a list of things to do this morning, which I had put off time for, and it would set me up for a great day... until I realized that I had not been awakened by my alarms. I had opened my eyes, well-rested, and the room seemed eerily quiet all of a sudden. With my pulse suddenly drumming in my ears, I turned around to grasp for my phone and gasped in horror as I realized that my alarms – which were set for 6 am, 6:05 am and 6:15 am – had never gone off. My phone had gone through a forced software update during the night and cancelled my alarms. The time on my phone display glared mockingly at me: *9:45 am*. I threw myself out of bed. The conference started at 9:30. I was already late! A whirlwind of emotions went through my head as I pounced around the room to get dressed. My hair was greasy, all my clothes felt wrong, I couldn't find anything, even though I had kept my room organized and tidy this whole time. Nothing made sense to me. *I am never late! I am never late to anything!* I am always too early, always planning ahead, so that a hiccup will never

make me late, yet here I was: fifteen minutes late, getting dressed, looking like a mess, on the brink of tears. The conference room was on the other end of the hotel – and the hotel was big. When I was finally dressed, I grabbed my things, locked the door, and took off sprinting down the hallway.

I appeared in the hallway outside the conference room just in time for the first break of the day, and attendees poured out of the room to stretch their legs and grab a beverage or a snack just as I was about to enter. I was slightly panting still, as I greeted everyone good morning and attempted to look less horrified. Monika was sitting just inside the door, and I quickly turned to her and started apologizing profusely. I told her that I felt terrible, that my alarms had not gone off, that it was in no way a habit for me to be late, that she probably thought it was disrespectful or ungrateful to their time that I was late- She stopped me. She told me that everything was fine. She was talking very calmly, with a smile on her face. It was more than fine, and I had no reason to feel bad. *“You are aware what organization this is, right? We expect that people will be late all the time – it really isn’t anything new. Besides, you haven’t missed much.”* I looked at her. She really meant it. She looked happy. I didn’t know how to respond properly, but I thanked her. *“But I really am never late!”*. She gave me a firm but warm look. *“Again, really, it’s fine.”* After talking to Monika, I turned and headed towards a chair in the back of the room, where I had found my permanent seat the day before, and put my things down on the chair. I turned around to see Britta looking at me.

“Overslept?” I nodded. She examined me with her eyes. *“Are you alright? I arrived late this morning too, you know.”* I nodded again, but my stomach was turning. *“It’s really nothing to feel bad about. It happens all the time.”* I hadn’t realized until now, but I was teary-eyed.

Britta took a step closer and put her hand on my shoulder. *“It really is nothing to feel bad about.”* I quietly broke into tears. Britta embraced me in a hug and turned me slightly away from the room. I was incredibly overwhelmed and felt very vulnerable right then. Britta stayed quiet. I didn’t cry for long, and when I was back to breathing somewhat normally, I took a step back while drying my eyes with the back of my hand. *“Thank you. I’m sorry.”* She shook her head. *“No need to be sorry. Take your medicine – I think you need it. And there’s still five minutes left of the break, so after you’ve taken your medication, you go out into the hall and fetch yourself a nice cup of tea. No coffee! I know that’s what you want, but you’ll go all jittery. You need to eat first.”* I was nearly speechless. *“You really see right through me, don’t you?”*. She smirked. *“Perhaps.”*

Another session went by before we moved into the second break of the day. People poured out into the hall once again and the doorway got obstructed by people conversing as I tried to get out for some air. I turned around to catch someone's glance from the first row. She had long, blonde hair and looked younger than the rest – closer to my age. “*So, you overslept this morning?*” She didn't say it mockingly. I hadn't properly talked to this person all weekend, but she talked to me in a friendly manner. I turned to her and screwed up my face. “*Unfortunately, yes.*” I smiled at her. She smiled back. “*Let me guess: you've put off your phone's software update for so long that it decided to do it itself?*” My mouth fell open for a moment before I burst into laughter. “*Exactly that!*” She giggled. “*Oh, we've all been there!*” The woman beside her looked up from her knitting, turned her head to me and nodded affirmatively. “*Indeed, we have all been there!*” We quickly struck up a conversation, and I quickly forgot that I wanted to leave the room. Instead, I spent the entire break with who I quickly got to know as Guro and Monica.

In one of the last sessions of the day, a woman named Anne-Lene captured my attention with something she said. Many things had been discussed over the course of the weekend, and one of these topics was how to better support the organization's members and community. A theme that came forward was the fact that the idea of the ADHD experience was still very much homogenized and stereotyped, resulting in the creation of narratives of ADHD that were polarizing, either focused on it being a superpower or a severe obstacle, in the media (Tjora & Levang, 2019: 108-109) or even within the community discourse (Dyrdaahl, 2022; Gjelsvik, 2022; Larsen, 2022; Lunde, 2022). Anne-Lene came forward with a very powerful experience of the in-between: she had been told that she wasn't desirable to chair a talk for a committee because “*she was doing too well*”. They had implied that her experience of ADHD was “*not relatable enough*”. Contrary to many other people with ADHD, struggling with her symptoms had never brought her to unemployment, serious financial troubles, substance abuse or failing academically, and thus she was considered as too well-functioning to be a representative and talk to people about the potential detriments of ADHD. She had, in a way, been deemed “*not ADHD enough*”. This really resonated with me. In the last break of the conference, I eagerly went up to talk to her about it. Anne-Lene came across as incredibly independent and steady, but she was also energetic and approachable. I quickly found her very interesting to talk to, and I felt that the time went entirely too fast when we were told to return to our seats. I had a million questions.

The conference eventually came to an end, and as the room steadily emptied and people went their separate ways, to catch planes, trains, and busses, I knew who I wanted to ask to participate in my project. I went up to Anne-Lene first, as she looked as though she was ready to leave and I told her that I had enjoyed talking to her and really wanted to hear more, if she would be interested. I felt my heart jump joyously when she told me that she was interested. She gave me her name and told me to add her on Facebook, as that was probably the easiest way to reach each other and bid me farewell. I quickly moved over to Monica and Guro and asked them the same thing. They were very positive, and we chatted excitedly while I added them both on Facebook. In the end, there was only Britta left to ask, and she replied with an “Of course. I thought I’d already made that clear?”, to which I replied: “Well, it’s nice to know it officially.”

Over the course of the conference weekend, I got to learn a lot about working with ADHD challenges, both from the perspective of the organization and from people living with ADHD themselves. This trip also taught me a lot about who I am in the field, or rather how I could just forget about trying to fit into a role. It revealed a lot of things I had never thought about before. I got to connect with several of the user contributors, which is where I met all four of the women that ended up participating in this project: Anne-Lene, Britta, Guro and Monica. I decided to ask these women to participate based on the conversations I’d had with them over the conference weekend, as well as the things they had discussed during the conference’s events. Perhaps even most importantly: I asked these particular women to participate because I felt that we were compatible and got along well, which, after the weekend, was incredibly important to me (perhaps I felt I had to keep them close, as I felt they knew too much about me already). From the very beginning of the project until the very end, I felt that this compatibility enabled a profound openness from both sides and allowed us to teach each other, perhaps them me more than me them (Rabinow, 1977: 32).

Planes, trains and organizational pains.

When I returned to Tromsø, the basis for the project looked a lot different to me. I had successfully acquired a group of participants and the composition of the group turned out unintentionally homogenous. The participants involved in the project were all cisgendered women between the ages of 28 and 48 years old. They were all white, Norwegian women, born and living in Southeastern Norway (which is culturally described as Eastern Norway). They were all involved with the organization ADHD Norge, as user contributors. The four participants ranged from temporarily unemployed to independent business owners, were all in committed relationships with cisgendered Norwegian men, owned their own homes, and three out of the four women had children close to my own age (late teens to early 20's). I had no clear target group in mind when choosing my participants. I had hypothesized that I perhaps should lean towards participants around my own age (early 20s to early 30s), as it would perhaps aid in relatability and communication, but the most important thing for me when attempting to find participants was whether we had good chemistry and got along well. The gender aspect was an element I hadn't decided on beforehand, and it was only a coincidence that my group ended up as homogenous as it did. This did however support an important aspect in my interest for the project, as part of my curiosity had a basis in wanting to learn more about the female experience of ADHD, as a woman with ADHD myself, so I decided to focus on this aspect moving forward.

After returning from the conference outside Oslo in April, I contacted each one of my participants through Facebook (as we had accepted each other as friends there to keep in touch) and scheduled a videochat with each one of them. As my plan was to return South on a later date, I wanted to get to know my participants properly, and for them to get to know me. I also needed to discuss the project in a more detailed way. I chose video chats in addition to keeping in touch via messages because I saw it as a lot more beneficial in order to get to know each other, as body language and tone of voice is essential and written messages have a tendency to die down after a while. Seeing and hearing each other would feel a lot more personal. I had no prepared structure for these meetings, as I was still trying to situate myself and the framework of the project, so the conversations were very informal. I told each one of them, very frankly, that I had nothing prepared and that I simply wanted us to get better acquainted, which I believe established a very comfortable atmosphere, also moving into the

fieldwork phase itself. It also facilitated for very interesting conversations, as no topic would derail us, and no topic was off-limits.

Already February 14th, I started a document where I could record my project development. I named it *'The Great, Big Kladdokument'* and updated it frequently, mostly as a sort of stream-of-consciousness diary, so that I would be able to look back on my project and what I thought about it or reflected on. I also used it as a place for idea dumping whenever I felt I had a good idea or thought of something that might be useful og important. Important elements from conversations with my participants was of course still a very significant part of these notes. I rarely, if ever, took field notes when meeting with my participants, as I felt that could make the situation feel a lot more formal, which is something I tried to avoid to the best of my ability. I worked with the idea that the project would benefit from our conversations being more as “coffee with a friend” rather than very obviously a project setting. I already felt that the camera might be a barrier to attain this sense, and I wanted to not add to this by taking notes and looking down. In the case they said something I thought was particularly important to write down (even though the camera might be recording), that perhaps gave me an idea or made something make sense, I wrote it down in my phone notes, as it was quicker (I write slowly by hand) and more informal, in my opinion. Otherwise, I had hours to write every single day due to my housing situation.

As a not-very-financially-stable student without a driver's license, that also had a regular job in Tromsø, my options were limited when it came to where I could stay over the span of the fieldwork, between April and June 2022, as I had to funnel all my money into plane tickets and public transport. The fieldwork had to be conducted during three separate trips, commuting between Tromsø in Northern Norway and the Oslo and Viken county areas in South-Eastern Norway (Oslo, Østfold and Buskerud). Luckily for me, I was able to stay for free for the entirety of my fieldwork, spending a couple of nights on my friends Gry and Laurent's couch in Oslo, a short weekend at an airport hotel for the ADHD Norge conference, and the remainder of my time at my aunt Merete and uncle Rune's place in Svelvik, a township within Drammen municipality. Staying with my family did however pose a certain challenge: I had to get everywhere by public transport. Though it was easy getting places once I had gotten from Svelvik to Drammen by bus, commuting took a lot of time. Some days, I would spend as much as five to six hours on public transport alone, which ate away at either 1) my time with my participants, or 2) the time I had to cover my own basic needs, such as

sleep, eating properly, showering, and resting. Another challenge was my participants' schedules. I didn't see it as an option to live with my participants, as I wanted to give them space and privacy due to the very personal nature of the project, and because of this, as well as the distances (and by extension availability of transport), we had to schedule time to meet in advance, since I would be unable to stop by if they would happen to have a couple of hours free on any given day. All the different challenges combined resulted in fewer meetings than what might've been desired. Cancellations further ate away at the time I was able to spend with my participants, but looking back through all the hours of footage and all my notes I've come to see the quality of all our conversations and come to appreciate and learn from them even more.

Stupid camera.

It was a beautiful and very warm day in May, and the first time I visited any of my participants. I had been in Guro's apartment for a couple of hours already, and I felt that we were both very comfortable and enjoying each other's company. We had ordered pizza and the conversation seemed to flow effortlessly. *"I guess I should set up the camera and start filming at some point! If you don't mind?"* Guro didn't mind, because she knew that the filming was part of it. Anyways, my enormous camera bag, that made me look like a turtle when I was wearing it, had been hard to miss. *"What do you want to film?"*, Guro asked me, as I adjusted the camera settings. I pondered on it. *"I don't know where to start. Maybe a tour of the apartment? You could explain to me about the systems you've put into place to manage your everyday life better?"*. We agreed that it sounded like a nice place to start.

We started our tour in the kitchen. I was filming with a handheld camera, and as I hit record, I realized that the ceiling lights were flickering intensely. Guro and I pointed it out at the same time. It was awfully uncomfortable. I tried to say something, but it came out all wrong and didn't make sense. *"You know, feel free to just turn off the light!"* I stopped recording, turned off the lights and turned the camera back towards Guro. As I did, I realized I had to readjust the camera settings for lower lighting. *"Damn! I'm so sorry!"* I fiddled with the camera for a bit, before turning it back to Guro and pressing record. *"Okay, we were distracted by the lamp, but we're back!"* As I tried to keep talking, I stumbled over my words. With the camera between us, I was struggling to get into the comfortable flow we'd been in just a few minutes ago. Guro was very patient and laughed with me when I stumbled over my words. When the laughing died down, she looked at me and asked: *"Are we ready?"* I nodded.

Guro gave me a thorough tour of her apartment, which she shared with her husband. She told me that an important part of managing ADHD was to make tasks as easy as possible and create systems that worked for you. First, in the kitchen, she showed me her coffee corner. As the first thing she wanted every morning when she woke up was a cup of coffee, she had placed her box of medication right in front of her coffee maker. The coffee maker was positioned right next to the sink, and the drawer directly underneath the coffee maker revealed mugs, glasses, tea and coffee. Next to the drawer was the dishwasher. *"This way, when I wake up, I go for the coffee, but I will remember my ADHD medication, and I won't forget it"*

because I won't have to go somewhere else to get a glass. The glasses also will not pile up, because the dishwasher is right here." I told her that I did something similar at home, but that I kept a glass in my bathroom vanity, right next to my medication, that was right over my sink. *"Yeah, exactly, and that system works for you!"* As we moved into the hallway, Guro directed my attention to a row of hooks on the wall directly opposite of the front door. *"Now, my husband also has ADHD. I personally do not have that big of an issue with taking off my jacket and putting it on one of the hangers",* she said, and pointed to a little alcove with a built-in clothing rack, right next to the hangers, *"but it's a lot more challenging for my husband, so he would usually always get home from work and just drop this work clothes down right here!"* She gestured to a spot on the floor right in front of the row of hooks. *"It was obvious that my system didn't work for him, even though we both have ADHD, so I had to work this out with him. I asked if it would help fix the problem if he instead of having to first take off the jacket, then take out a hanger, then hang that on the rack, then take off his work pants, then take out another hanger- you get it, it's a lot of steps, right – if it would be easier for him to just walk in the door and sort of drop it off on the hooks instead. And that worked! Now, he always hangs up his workwear, and I don't get overstimulated and stressed out by a pile of his clothes being in the way of the bathroom door."* Right behind her was the bathroom door, and she looked at me, as to say, *"Should we move on?"* I nodded. We moved on.

We toured the rest of the apartment thoroughly, as Guro explained the clothing sorting system they had made in the bathroom, the designated "drop off" station for mail, keys and reusable bags on the opposite wall from the alcove in the hallway, and the way she had organized their living room and gone about choosing furniture and storage solutions to avoid misplacing things or making a mess, before we eventually ended up in their bedroom. The bedroom had extra laundry baskets, so that laundry would not pile up in a corner. As she mentioned it, I looked up from the camera monitor and towards their bed, which had a pile of clothes on it, then to Guro. *"Would it be okay if I filmed your bed?"* Guro snickered. *"Yes, of course! It's very hard to ignore",* she laughed, *"and it's currently a mess, but it's also a part of my system! You see the TV opposite the bed? I usually carry the dirty laundry into the bathroom, where our washer and dryer are, then return with a clean load and dump it on the bed. Then I turn on a TV series and fold laundry. Otherwise, I'd probably get bored and give up. And if I end up not doing it right away, it's in our way when we want to go to sleep, so we'd end up doing it anyways."* I'd been almost completely silent since the kitchen, only nodding and "mhm"-ing occasionally from behind the camera. Guro looked at me. *"Good?"* I

stopped the recording. *“Yeah, it was very good. Thank you... But um... I realized that I struggled to talk to you as we walked around. Would you mind if we filmed something more interview style?”* Guro was up for it.

Back in her spot on the couch, where we’d had pizza, Guro was waiting patiently as I mounted the camera on a tripod and adjusted the settings yet again. I was sitting behind the camera, on a chair, directly opposite Guro. I pressed record. I started asking her about some topics we had already discussed earlier, as we had both agreed they would be important to capture for the project, but I found myself unable to pay attention to Guro. Sitting behind the camera, I kept looking into the monitor, looking at the composition of the frame, the light and the colors, wondering what to say next. I saw her lips moving, and I wanted to pay attention, but I kept blanking out. After asking a couple of questions, I stopped the recording. *“I am so sorry. I have to be honest with you. I am trying my very best to focus on you and have a conversation with you, but I keep focusing on this stupid camera! I feel like I’m being all weird and silent!”* Guro considered me for a moment. *“Would it be better if you just left the camera running and sat down on the couch to talk?”* I nodded. *“We can give it a try.”*

I only made one more recording that day, but it was very long. The camera only captured Guro as we talked, and I was sat opposite of her on the L-shaped couch, off- screen. In a moment, the conversation was flowing effortlessly again. After a while, the conversation turned to the project. Guro asked me about my ideas. She asked me how I felt about it. She asked me whether I was nervous about it. I had been honest up until this point, but now I really opened up to her. I told her how I really felt about the camera. That I was afraid that I wasn’t skillful enough, and that I was afraid jumping into the project so wildly unprepared from the start would result in a bad project. *“What if this whole project is just a hyperfocus, and I wake up, half a year from now, without motivation?”* She understood what I meant. A phenomenon we were both familiar with was the ADHD tendency to become obsessed with things, like a book, a topic, a game, a hobby, or a food item. *Hyperfocus*. Suddenly, you are overcome with an unwavering interest and attention. You could stay up for days doing the thing, or do it every day for weeks, months or even a year, before just as suddenly losing interest in it. Left as a memory of it would be what you made, materials, tools, gear, or something rotting in the back of your fridge. I knew I had boxes and shelves of past hyperfocuses back in my apartment in Tromsø. Guro had her fair share of past hyperfocuses stashed away in hers. She understood my worry. *“But I really don’t want this project to waste*

any of your time. I've asked the four of you to participate because I believe in the project, and I can't let it fall apart because I'm afraid it might be a hyperfocus. I guess I'll just have to go for it, and then... yeah. It'll just have to be like that- We'll adjust it." Guro straightened up on the couch. *"But that's completely fine! That- We'll modify it, and then we'll make it work somehow, in the end."* I nodded. *"We'll just have to trust in that."* She nodded back and we were quiet for a split moment before it burst from Guro: *"Oh- Oh my God, that's the most perfect example of how ADHDers handle life!"* We both burst into laughter.

My eyes were opened after my day with Guro, and moving forward with the project I only used a static camera. I ended up explaining why I did this to each one of my participants, and that I felt a bit ashamed about *"being a film student unable to film and study at the same time"*, as I wrote it down in my field notes. This honesty opened up for many great conversations. I also believe the static camera ended up being very great for this project. As the topics were so personal and sometimes painful for all of us, it was nice to only have to engage in conversation and spend the (few) quiet moments mulling things over and putting pieces of information together in my mind. I also personally loved looking through the footage. Though it was initially commented to me several times, after I had returned from fieldwork, that making a film with only static frames of my participants that I'd talked to separately could end up unengaging, I saw so much importance in this footage once I got the time to sit down with it in peace. I spent a lot of time almost apologizing for my lack of other footage, but there was a very important reason why it ended up that way. Looking through the footage I also realized how much was really captured. All the gestures and sounds, shifting in chairs, fidgeting (or knitting), their thinking faces, or their expressions when they got surprised, exasperated, or realized something, got happy or sad... it was all there. I got to rewind and really examine what they said and how they said it. To me, there was something so important and extraordinary about the "ordinary". The stupid camera ended up as a great tool for an overactive and forgetful ADHD mind. *"Corporeal images are not just the images of other bodies; they are also images of the body behind the camera and its relations with the world"* (MacDougall, 2006: 3)

How can I explain to you what I am trying to explain to you?

Perhaps one of the most memorable moments from this project was when a professor managed to tell me, after a screening of some of my filmic material from the field, that ADHD wasn't actually a real diagnosis, in the same breath as *"I know people who actually struggle with ADHD, not like the women in your project."* It was an excellent two-birds-with-one-stone-moment, and it really hurt, but it also empowered me. It made me truly aware of the fact that sometimes the very things that provoke the greatest emotion reveal which topics we need to discuss and research more, and it made me more secure in how important this project could be. What he said wasn't necessarily meant to be hurtful, but merely rooted in the resilient stereotypes about ADHD. Something many people with ADHD have to deal with tirelessly are statements such as *"Everyone is a little ADHD"*, or comments about how one's appearance or behavior in a certain place does not align with how ADHD *"really is"*. Especially girls and women.

"Yes, it is ADHD, right? Yes, it is a challenge. No, it isn't so that "everyone feels that way to some degree", as you would often hear people say... and it's bizarre, because when I had breast cancer no one ever once said: "But you don't have that. You can't have it.""

(Anne-Lene)

"My daughter always said she wished she had an arm missing instead, because it would have made it so clear to everyone else that she was "missing", or struggling, with something. If you're born missing an arm, that arm wouldn't just appear, all of a sudden. And we're born with ADHD, and it wouldn't just appear- Just like it's a part of your personality, being born missing an arm or a leg, it's a part of our personality that we're born with ADHD."

(Britta)

"Overall, ADHD is one of the best-researched disorders in medicine, and the overall data on its validity are far more compelling than for many medical conditions" (Goldman, Genel, Bezman & Slanetz, 1998: 1102). The quote you just read is an excerpt from a council report from the American Medical Association (AMA), that was published in my birthyear, 1998; 25 years ago. ADHD is one of the best-researched disorders in medicine – but not when

it comes to women. Research has historically focused on little boys up until very recently and diagnostic criteria have been more appropriate to the male experience, resulting in the female experience of the diagnosis remaining hidden and neglected (Pallanti & Salerno, L, 2020: 36), and a lacking knowledge and recognition of ADHD in women. *“Girls with undiagnosed ADHD will most likely carry their problems into adulthood, and left untreated, their lives often fall apart”* (Crawford, 2003: 28).

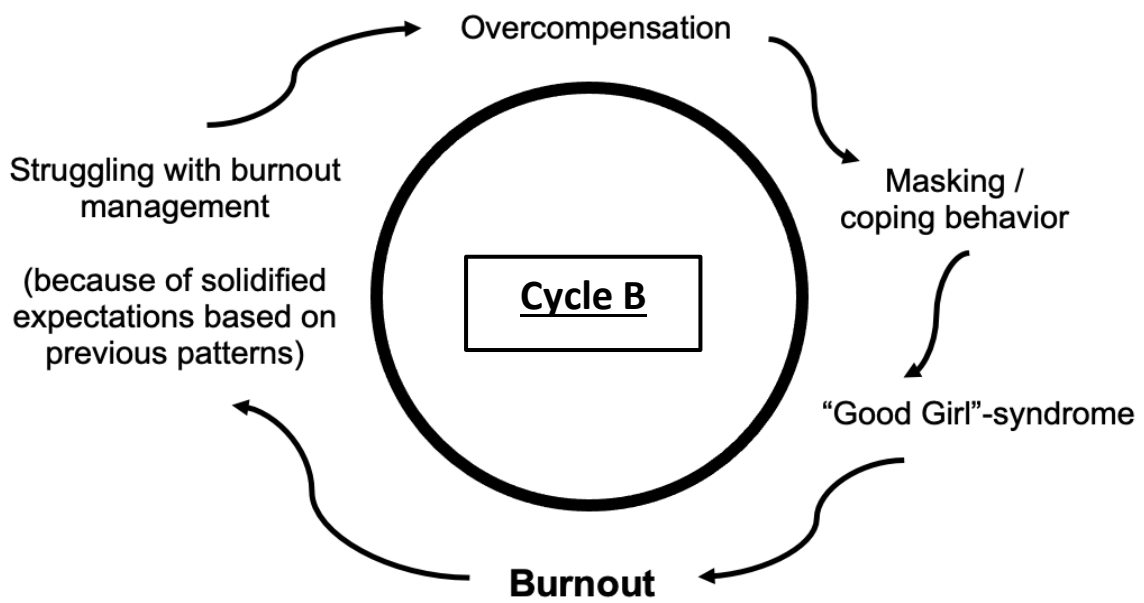
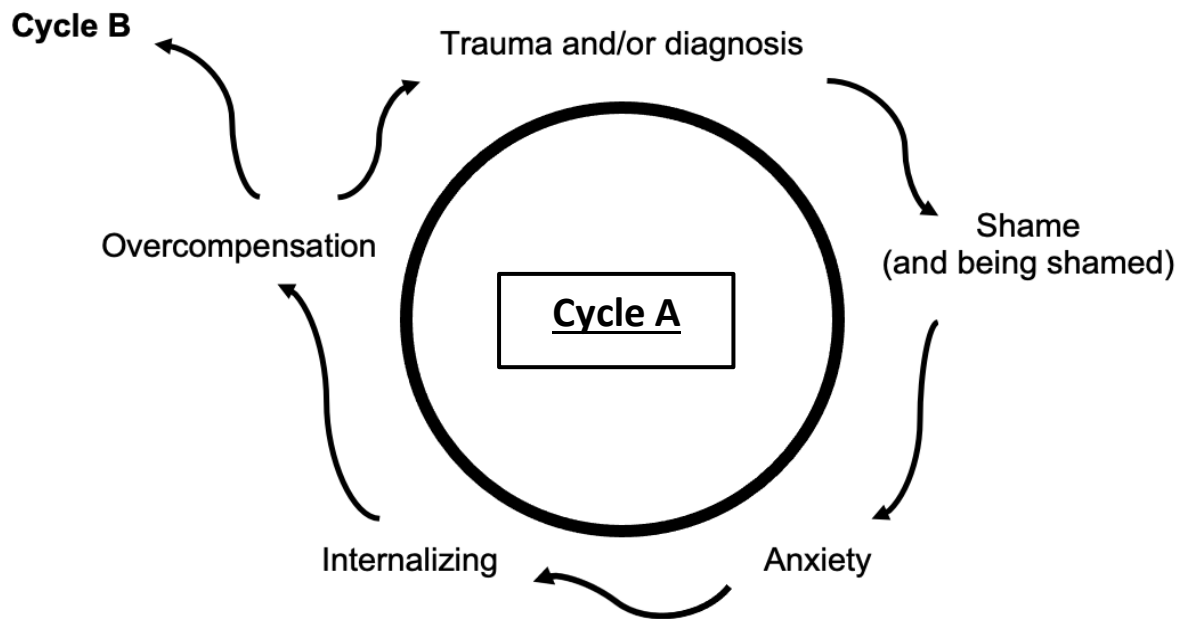
Already during my first meeting with the field, during the conference, I got acquainted with one of the Norwegian ADHD community’s many catchphrases and slogans: *“Har du møtt én med ADHD, har du kun møtt én med ADHD”*, or *“Have you met someone with ADHD, you’ve only met **one** with ADHD.”* This phrase kept coming back, even being a bit annoying at times, as I believe all my participants at some point, when the phrase was mentioned, expressed an ambivalent attitude towards it. They – or we – were already very aware of that fact, but due to the lack of nuance in other non-initiates, we had to collectively push this phrase as a figurative banner – constantly making space for the in-between and the idea of ADHD as a spectrum. The community is aware, but the discourse is not reflecting that. Anne-Lene expressed at one point that it was very understandable that the discourse, even within the community, could become very polarized:

“Many people with ADHD, due to the way we are put together, have very strong emotions, and we are often led forward by these. In meetings, the most impulsive of us are usually also those with the strongest emotions – and the most hyperactive traits – and so their voices are heard the most. Many of us feel things in extremes, so it is easy for the conversations to follow suit and become very either-or, though it doesn’t represent the entire community all the time. But it’s also hard, you know? The community, especially through the organization and its branches, wants to stand together to fight for collective causes, and with such a diverse community, where it’s not a guarantee that everyone feels the same, I’d say it can be quite impossible to have this collected front where everything is represented equally. Not that we shouldn’t try.”

The reason why Anne-Lene piqued my interest initially, as I mentioned earlier, was because her experience and her outward expression was quite different from the stereotypes and statistics of people with ADHD. This also became clearer when I compared her

experience to the ones of the other participants. Even so, after a while, a pattern began to emerge in my mind. I kept linking the women's stories together, seeing some overlaps, as well as having several instances where I felt that they were speaking very personal thoughts and experiences of my own right back at me. One day, in the middle of my fieldwork, on a bumpy bus ride, as I was writing out my notes on my laptop after an afternoon with Monica, on my way to see Anne-Lene, something big seemed to crash down into my head. I could barely type fast enough to keep up with my thoughts. I saw a greater pattern that seemed to be present in all our lives, but affected us to varying degrees. I later discussed these patterns with my participants, as I wanted to hear whether this was something that resonated with them or something that only made sense to me. This became the most important discovery and discussions of this entire project, and I later developed it into two models.

The intention of the models is to illustrate very prominent patterns found in women with ADHD, that relates to how ADHD, especially when undiagnosed and untreated, can manifest in cycles of behavior that result in burnout and other challenges later in their lives. These cycles can probably be applied to many people with ADHD, but as I worked with women, and am a woman myself, these models were developed with a basis in the female experience. These cycles can both be applied to interpret behavior in all stages of life. However, I would like to exemplify these patterns of behavior with a special consideration of experiences in adolescence, particularly in Cycle A, because they may become ingrained in an individual's conduct, which can amplify these patterns of behavior later in life.



Cycle A: Small picture

Cycle A is most applicable when looking at isolated sequences connected to one behavior within a smaller social sphere and a shorter time frame. The first step, “Trauma and/or diagnosis”, is related to expressions of ADHD behavior. This can often be related to behavior that from the outside can be interpreted as, for example, “lazy”, but in reality is a part of the phenomenon *executive dysfunction*, that often can impair cognitive processes that allow people with ADHD to organize themselves, control their emotions and their impulsivity and reach their goals (Pallanti & Salerno, L, 2020: 69). Where behavior in boys more often would be according to the stereotypes, in girls and women it can look a lot different. There can be several reasons for this, as it’s hard to know why it might look so different, but a very likely factor is the element of enforced gender differences from society (Crawford, 2003: 28). Girls behaving in a typical ADHD-way might still not get diagnosed, as it’s still thought about as a disorder in boys, but also because girls have different societal expectations than their masculine counterparts. Growing up in the 2020’s might be slightly different, as we are now more knowledgeable about the disorder than ever, but the gender binary and social norms for what was appropriate for girls and for boys were prominent when I grew up, let’s say twenty years ago, and even stronger when my participants grew up – respectively thirty to forty years ago. Thus, girls might provoke stronger reactions in adults when behaving in these more “undesirable” ways than boys might, as it is expected of them to act different and be more in control and well-mannered.

“I was unable to go straight from secondary school, finish high school, get my qualifications, study, become a master's student [like you]- I was not able to follow in that direction. I had to go my own way. I had to work, and then instead stumble my way into an education later in life, when I felt ready for it, but I've had to endure people's opinions about that a lot. I've constantly been asked: "Why aren't you getting an education?", "Why can't you just do this-", "Just do that-", "Just-", "just-" It's the worst word in the entire world: "Can't you just-" It isn't "just". There are genuine hindrances for us, in this society, that prevents us from functioning "normally", like everyone else. We just want to be accepted, but we aren't, and when we are unable to adhere to these rules... We're constantly picked at, we're getting so many scoldings, and we get so much criticism for the way we are, and often it's so unnecessary as well. It's so unnecessary. Just because I want to do something a certain way, (...) that

contradicts how others, "neurotypicals", would do it, which apparently means I'm open to receive criticism."

(Guro)

As a result of veering from expectations, that be gender norms or just general expectations of "acceptable behavior", a girl will most likely be met more frequently with negative sanctions for the same behaviors as boys. This may be directly negative criticism, or it can bring forth feelings of shame in the child. When this happens frequently, as children with ADHD already are more likely to experience this than their neurotypical peers (Beaton, Sirois & Milne, 2022: 16), this can lead to feelings of anxiety. This anxiety can lead to avoidance, from people or places, but most likely an avoidance of that certain behavior they now interpret as negative and undesirable, which in turn can lead to changes in expressed symptoms and result in patterns of overcompensation. My participants' experiences relating to negative reactions to their behavior in their childhood could be quite different from each other. Without me mentioning anything, Monica and Anne-Lene both mentioned each other and their differences relating to growing up with what they later recognized as "ADHD behavior".

"I've read heaps of stuff, about certain topics, and the thing about childhood trauma... parental neglect... things like that... often imitate the symptoms of ADHD. So, whether there's a combination of those, or whether it's had an enhancing effect on my ADHD, or- I have no idea. I have no clue. I told Anne-Lene: "Why don't you and I make a project together? 'Anne-Lene attempts to understand Monica', or 'figures out Monica', or something like that. She has a bachelor's in child welfare and is quite different from me, so that could really be interesting."

(Monica)

"I know Monica pretty well, and I've come to think that we've had quite different upbringings, which I believe has made me more... equipped, because I haven't had the burdens she's had, I haven't had to "save the world", I've had an incredibly protected life. I've lived the station-wagon-nuclear-family-life, with safety and boundaries, a big family, and everything has always been safe and sound. I think that can make a huge difference... confidence- right? The fact that you get a good sense of self-worth, and see oneself as important in the world, not that you feel like you have to "save the

world", but rather "People appreciate that I exist", and I've always known this. So, I think that is something that can have an impact, and this is one of the things that make these "diagnosis things" so challenging. We're all so different to begin with."

(Anne-Lene)

Overcompensation are efforts, conscious or subconscious, to change one's conduct and demeanor (Goffman, 1956: 489) and creates a heightened awareness of situations and one's role in it. This awareness is in order to adapt more appropriately to the situation in question. This reaction-shame-anxiety sequence also heavily relates to an element that is still very under-researched and not yet a part of ADHD diagnostic criteria: *Rejection Sensitive Dysphoria* (RSD). This phenomenon suggests that because people with ADHD deal with issues relating to emotional dysregulation, and also report heightened intensity of emotions, can end up reacting in more extreme ways when receiving negative feedback, criticism and rejection (Beaton, Sirois & Milne, 2022: 16; Dodson, 2016).

"Everything that's being said [by you] will be used against you, and that's the way it is, so you're always on standby, and I didn't understand that until I started getting the sense that something was off. In what ways are you always on standby? You always walk around in expectance of the next comment, the next stab- for the next thing to be wrong..."

(Monica)

Monica had a significantly more negative prejudice related to her own behavior and how she might be perceived by others than Anne-Lene. This was based on the differences between their childhood home environments, where Anne-Lene's behavior had been attributed to her personality rather than to bad behavior just because it was different, like with Monica.

Cycle B: Big picture

Though Cycle A can repeat itself, and also be experienced several times at once when connected to several elements of behavior, it can also branch off into Cycle B. In Cycle B, many singular behaviors that have already gone through Cycle A are often combined, thus being more applicable to explain longer sequences of combined behavior across multiple

social spheres and during a longer time frame. Following the overcompensation from Cycle A, along with RSD, a person with ADHD may develop coping mechanisms in order to modify their behavior or manage their emotions and symptoms. When coping is done to such an extent that a person's behavior and demeanor is completely different from their authentic self it can be described as *masking*.

"I mask a lot, because it's programmed in me that showing my thoughts and emotions create such strong reactions in certain adults that it's better to just leave it. But... I have two autistic children, and they haven't been connected to their own emotional registers, but they understand their emotions, because I've taught them how to, right? And that's so... but my own? I have no chance... and that's a little weird to me... I'll gladly help you with your emotions, but I have no way of understanding my own. (...) Someone in group therapy yesterday said - we had a sharing round, and I was talking about a picture I showed: "So, you're very engaged, but also not very assertive at all?" I said: "Yes... very much...". "That sounds really exhausting." And I said: "Yeah, it does, in fact, sound really exhausting... I hadn't thought of that.""

(Monica)

"A therapist at the child psychiatry center told me, many years ago [that] I always portrayed such balance, especially when we had meetings, unless someone started prodding around in things about the kids that I thought was painful, (...) She said: "You always protect yourself", and I said: "Yes, I do." "I think you have to dismantle that wall you've built around you." It was a solid block of cement. "Make a hole in it". Well, yeah, I guess I could take out a few bricks, so that I can look outside." I think my son told me this, actually: (...) "When that wall is so solid, because you don't want anyone to hurt you, then the good things can't get through either. It goes both ways, you know." You build a wall, attempting to be something other than who you are, not let all the feelings in and not be vulnerable, not exist in such a way where anyone could find anything to blame you for... but then I'm not myself. And then I was like: "Shit, I will never be able to achieve what I want or reach my goals unless I tear down this wall."

(Britta)

Compensatory strategies and masking efforts often result in people with ADHD becoming “*people pleasers*”. Their fear of negative reactions and their heightened awareness causes them to examine the people they interact with and mold themselves according to how they’d assume this certain person would consider them most likable or acceptable (Dodson, 2016: 11). In women, this is often called “good girl syndrome”, as they also mold their lives according to what would be observed as most successful or accomplished from the outside. This behavior often encompasses always striving to be the very best student, employee, friend, parent, family member and so on, and often keep these individuals to very high standards of academic and professional achievements, physical fitness, organization, and attendance, among other things. This constant attending to other people’s opinions and needs will often start to come at the expense of one’s own needs and wishes.

“The shame becomes so extremely integrated into you that I don't understand... How will you be able to distinguish between what it is that you want and what your shame wants for you? At what point do you get the thought: "This isn't me... it's just something I do to compensate, or to avoid getting publicly shamed"? "I'd rather do this-", like, where is that sense of 'self'? It's so impossible to keep track of who you are as a person, because you have so many things pulling you in so many different directions... There's anxiety and shame pulling you in one direction, then there's ADHD pulling you in another, and you're left there wondering: "But who am I really? What is it that I really want?", because I'm incapable of eliminating options, so, in reality, I want to do everything and nothing.”

(Guro)

The constant compensatory behavior can, or will, at some point become very hard to keep up with, as elements of ADHD itself can become hindrances to uphold these very high standards, such as executive dysfunction and emotional dysregulation. Life changes can hugely impact one’s ability to stay on top of this behavior. Hormonal imbalances can also impact this in women (Crawford, 2003: 28). The systems that previously worked may not have the same effect. Eventually, many, if not most, people with ADHD caught up in this compensatory cycle will experience burnout, which in many ways is similar to depression. Because of all the internalized stigma and negative reactions to their own authentic functioning, many people with ADHD struggle with a lot of negative self-talk and poor self-image, especially if they mask very significantly.

“Words are also thoughts, and we program and reprogram ourselves through the words that we use, and I believe that’s a very important aspect in relation to ADHD, because we possess an insane amount of words, both... not all at the tip of their tongue, though many do, but especially inside our heads. So, if all that self-talk takes a negative form, and is based in shame, guilt, and grief, it becomes a negative spiral that’s very hard to get out of.”

(Britta)

Reaching a point of burnout can be a very disruptive and chaotic thing to manage, as “pushing through” as normal is suddenly not an option. Many people with ADHD will often try to overwrite this “failing at normal” (McCabe, 2017) by further compensatory behavior, only to see themselves fail to live up to their standards. As they would usually be such high achievers, these individuals might start to receive negative or confused reactions from their surroundings, as they are no longer functioning in the way they are now expected to. This might make recovering from burnout an even more difficult and lengthy process, but it can also create such distress that this is what gets them back to their regular level of functioning. This might only work for a shorter amount of time, and many people with ADHD will at some point have to seek professional help and counseling, go on sick leave, change careers or majorly restructure their lives.

“I did hit a wall, and it happened fairly early in my career... (...) I realize that it really shaped the rest of- like, the twenty following years of my career, because I experienced really hitting a wall- really just running myself empty- I was so empty that I was incapable of making plans to have a cup of coffee with someone the next day, I was incapable of dealing with other people, (...) I didn't catch on until my doctor asks me: "Hey, how's everything at work?" (...) "There's nothing suggesting that you have the flu, there's nothing wrong... physically... but how are you really?" And then it dawned on me (...) "Holy damn, this is the worst exhaustion I've ever experienced." And the feeling of being completely powerless in it... that might've been the worst part of it. What could I have done differently? What should I have done? I went back to work, and then almost exactly ten months passed... and then I felt myself standing at the very edge of that cliff again, and that was, if possible, even worse... because then I realized what was about to happen. But I had no tools. I had no life raft, I had nothing to hold

on to... so it's kind of like standing at edge of the tallest diving board, with your hands tied behind your back... “

I have chosen to create the term *destructive productivity* to describe the pattern of these cycles. While Anne-Lene later have been able to recognize her own signals and have equipped herself with systems and tools to avoid ending up burnt out, Britta has come to accept burning out as something that will keep on happening. The reason for this specific difference is because Anne-Lene and Britta are affected by ADHD differently and with different severity. Anne-Lene herself acknowledged that she is not as affected by struggles with emotional dysregulation like many other people with ADHD are, as her internal hyperactivity is her most significant symptom. Britta struggles a lot more with emotional dysregulation.

“I am incapable of regulating my energy appropriately throughout the year, right? So, I work super hard in certain periods, I say 'yes' to everything- like now- I've worked so hard- I've probably worked more this past half year than I've done in the previous three... and that leaves me absolutely beat. And then I get frustrated. I'm not able to get on top of all my work, I don't finish my work, stuff don't get sent... And then I get depressed because... "Fuck, you're completely useless..." Or we start something new, like a house renovation, and I'm gullible and happy and content, I say 'yes' to everything, I put my trust in people... and then things go to shit... and I get miserable, because I blundered once again, trusted that people would be true to their word and do what they promised, thinking that everyone will be considerate, thinking that everyone puts every ounce of their pride into their work, like I do; they don't. I get immensely disappointed, sad, and pissed off at myself, because I could be so stupid as to make that mistake again... How many times can a person do that? The answer is 'infinitely'.”

(Britta)

Sometimes, becoming aware that one is experiencing these seemingly never-ending cycles of hyperproductivity followed by depression and inability to do simple tasks are the very reason why women end up seeking help and receiving an ADHD diagnosis.

“But then again... There are many things about it that I don't understand myself, and that's why I've asked for help, because... Thoughts and feelings that appear and get overwhelming... I don't know what they're called, I don't know how they affect me, I don't know where they stem from... I don't understand them because I've always just pushed them away. “

(Monica)

“I have stopped talking, and it's first when I fall silent that I notice Monica's eyes shimmering tearfully at me, though her calm smile has not fallen. I'm instantly worried that I might have said something to upset her. She has stopped knitting. We lock eyes. “Do you see what happened now?”, she says, with a slight giggle, putting down her needles and lifting her hands to her face to wipe her eyes. She's not upset, I realize - she's touched. “That was incredibly well put... Really. Things rarely get to me like this, but...” I take a deep breath and feel a small lump forming in my throat. Monica audibly exhales, the tone implying a feeling of release, before the glimmer returns to her eyes. “Where do you need me to sign off on this?” We both burst into a giggle, our tones so similar that it feels as though we're feeling the exact same thing. It is one thing to know how something feels, but it is something else when you have the words to describe it. It's powerful. “

(Field notes)

Where we end... for now.

“It was unbelievable to me that I could have an intellectual understanding of my illness and still find it so difficult to physically carry out the tasks I set for myself. I was astonished at how difficult it was for me to get into a car again. I would become so breathless I had to roll down the car windows all the way in the height of winter to feel I had enough air. Weeks passed before I could get behind the wheel. Finally, I did it, and from then I forced myself to be the one to drive wherever David, Gabriel, and I needed to go. Driving by myself was a harder struggle, but that too would eventually become possible.”

(Behar, 1996: 124-125)

So, how did we end up here; by a desk, in an office at a university campus, in a somewhat insignificant city, a week before the final deadline; crying? In the excerpt above, Ruth Behar shares her thoughts surrounding her struggles with anxiety and agoraphobia. When a friend of mine made me aware of this part of the book, it struck a chord in me. There is one simple, but difficult, truth I have not been able to sidestep when working on this project: *ADHD cannot be fixed*. This knowledge is not what makes me cry. I have had to accept that this badly conducted brain is mine for life, and it has its charms. No, it is not that. It is the fact that even when you’ve accepted it, learned about it, tried, failed, adjusted for it, treated it, and many other things; it still cannot be fixed. ADHD will always, somehow, at some point, throw me for a loop. ADHD will get in my way. My systems won’t always work. I could probably know all there is to know about it and then some, but life will keep on going, things will keep on happening – and I cannot plan for everything. Gloomy winter will turn into spring, then summer, then fall, and the winter will always return. So, when I find myself searching the internet for answers, like *“How to get out of ADHD paralysis?”*, even when surrounded by all the books I’ve used for this project, I must remember that this is part of it. Sometimes having ADHD, at least for some of us, makes it hard to *“talk the talk”* and *“walk the walk”*. I have learned so many things from my wonderful participants that enables me to hopefully spread knowledge and awareness, and to create a sincere portrait of another reality of living with ADHD. What I have also learned is that this process takes time - so much time and patience (which might be hard if you’re already impatient). It’s one thing to know what you should do, but a completely different thing to actually do it. It isn’t “just”. Sometimes, it’s just “isn’t”.

I should have seen this moment coming from a mile away, because I've never been able to regulate my workloads or my input, kind of like someone else I know. I've always felt as though not getting the highest grade every time automatically meant failure – to me. I was always such a good student as a child because I loved learning, so I got good grades, but I also learnt to equate my value to my achievements. Thus, I only know how to give it my all or give nothing, and I've given this project my all for a long time. My interest in it didn't die out, like I was afraid of in May of last year. In fact, my passion for this project, and what it has to offer, has grown stronger over time. I wanted to tell you absolutely everything I knew, but it became too overwhelming, and fifty pages ended up seeming like too little and too much all at once. Instead, I biked too fast. I thought all my powers were under control. I'm a witch on a deep pink bicycle and I know how to ride it wherever I need to go... only to realize that I don't know how to break once I'm inches away from my goal. I've burned myself out. I've hit the wall. I've been here before, and right now it's hard to get back up on the bike. What is different now is that I have the wisdom of four wonderful women to lean on: *“Indeed, we've all been there!”*

“Documentarians are supposed to be objective, to avoid having any effect on the story. Yet, we have more effect than anyone, because we decide to tell it. And we decide how it ends. Will your story be yet another sad one of yet another man who just wanted to be happy? Or will your story acknowledge the very nature of stories and embrace the fact that sharing the sad ones can sometimes make them happy?”

(Harmon, Ganz & Russo, 2011)

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