

The Parent's Guide

NEURODIVERGENCE

Your child and AuDHD

A warm, plain guide for a parent whose child needs sameness yet craves newness, seeks noise yet is flooded by it, and the steady everyday moves that help both sides at once.

Who this is for: parents of a child who may show both ADHD and autistic patterns, whether a doctor has said so or not.

Cited: NICE, a UK expert consensus on ADHD with autism, and peer-reviewed research.

Languages: English, Hindi, Marathi, and Kannada.

Read it free at weave.clinic/family

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IS THIS YOUR CHILD

A child pulled two ways

IN SHORT

If your child seems to need sameness and newness at the same time, you are not imagining it. You are not doing anything wrong either. Two real patterns can live in one child, and understanding both of them helps.

Your child wants the same breakfast, the same cup, the same road to school. Yet any new game bores them within minutes. They cover their ears at a wedding band, then bang a spoon on every plate at home. Some mornings you do not know which child will wake up.

Some children show two patterns at once. One is the restless, distractible, act-first pattern of a busy attention system. The other is a child who needs routine, finds noise and touch too strong, and relates to people in their own way. The two often travel together.

The clinical names you may hear are ADHD and autism. When both are present, some people call it AuDHD. Only a doctor can say whether either applies to your child. This booklet will not put a label on your child. It will help you see both patterns clearly and respond in a way that helps.

more than 1 in 4

people on the autistic side also have the attention side

That was the finding of one large review. Your child is not a puzzle nobody has seen before, and many families live with this same mix.



Ananya, home at last after a long day of holding it together.

Rekha's daughter, Ananya, is nine. She can talk about birds for an hour and knows every call by heart. At school her teacher calls her quiet and good, a little dreamy. At home, the smallest thing sets off a storm: a changed plan, a scratchy uniform, a sister who is too loud. Rekha's mother-in-law says the girl is spoiled. Rekha has started to wonder, quietly, if she is the problem.

She is not. Ananya spends the school day working hard to look fine. She sits still, copies the other girls, and swallows the noise and the confusion. Some girls hide their struggles this way, so they can be missed. By the time Ananya gets home, she may have nothing left. The storm at home is not a sign of bad parenting. For Ananya, it may be the cost of a long day of holding on.

TRY THIS

For a few days, just watch, without correcting. Notice when your child is calm and content, and when things tip over. Notice what came just before. You are not fixing anything yet. You are learning both of their patterns.

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WHAT IT REALLY IS

Two wirings, one child

IN SHORT

These are differences in how your child develops, usually there from early in life. They are not your fault, and your child is not being difficult on purpose.

Here is the key idea. Your child has two kinds of wiring, and they often pull in opposite directions.

One side craves novelty and movement, while the other needs routine and calm. One side seeks noise and stimulation, while the other is flooded by it. So much of what looks like misbehaviour is really a cannot, not a will not.

It is also not your fault. Both patterns run in families, and the two often cluster in the same family. Genes, and how they interact with a child's surroundings, are thought to be the main causes of both.

Being offered a parenting programme does not mean you have parented badly. Guidelines for the attention side say so plainly: the aim is to build extra skills for a child with extra needs. For the autistic side, one large study of children in five countries found it was mostly explained by inherited genes. It found no support for a separate effect from the mother.

I kept trying to fix one side of her and making the other side worse. When I saw she was wired both ways, I stopped blaming her, and I stopped blaming myself.

Rekha, mother of Ananya, 9

This is why advice can feel so confusing. A new game wakes up one side and rattles the other. A strict timetable soothes one side and bores the other. When both patterns are present, the difficulties tend to be greater than with either one alone. That is the load your family carries, and it is not a measure of your love.

In many of our homes the verdict comes fast: spoiled, too soft, log kya kahenge. That verdict is heavy, and it misses what is really going on. Your child is a different kind of mind that needs a different kind of support.

More, if you want it

None of this means there are no rules. A child wired both ways still needs structure, just with more warmth, more warning, and some room to move. The aim is not to pick a winner between the two sides. It is to give each side a little of what it needs. The next sections show you how.

TRY THIS

Catch yourself the next time you think "my child is doing this on purpose". Swap it for "two needs are pulling at once right now". Notice whether your own body softens. A calmer parent is already part of the help.

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WHAT HELPS MOST

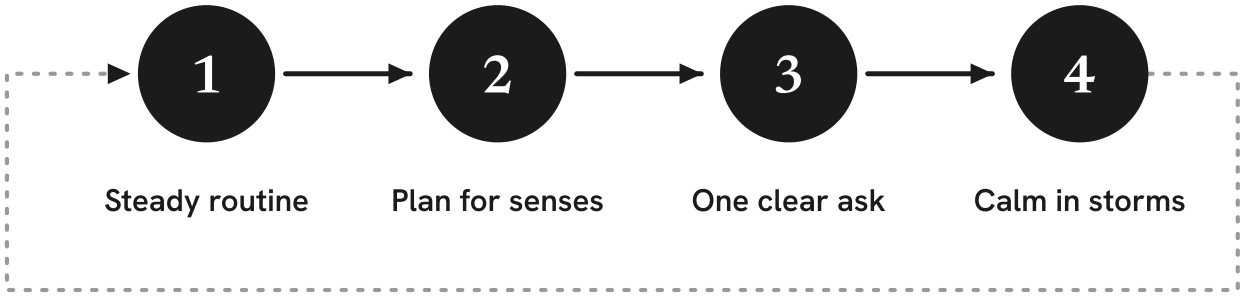
Structure, with room to move

IN SHORT

Help at home is less about lectures or punishment. It is more about a few everyday moves that steady the day and still leave a little space for something new.

For the attention side in children under 5, guidelines put a group parenting programme first. For children aged 5 and over, they offer parents support that includes advice on parenting strategies. For hard behaviour on the autistic side, they first look for causes such as pain or noise. Then they advise a planned approach that parents and professionals agree on.

For a child wired both ways, experts suggest this help also covers routines, the senses and hard behaviour. Keep each goal small and realistic, because small gains are better than no gains.



Four everyday moves. Used calmly and often, they steady both sides of your child.

Keep a steady routine, with planned room for something new.

Plan for the senses: less noise, a calm corner, time to move.

Give one short, clear ask, and praise the step the moment it happens.

In a storm, lower the noise, stay close and calm, and talk later.

Start with structure that bends. Keep a few fixed anchors each day, like meals, homework and bedtime. A picture timetable on the wall shows what comes next. Inside those anchors, offer small choices: which book first, which road to the park. The routine soothes one side, and the choice feeds the other.

Then plan for the senses. Notice what floods your child, like a pressure cooker whistle or a tight collar. Notice what they seek too, like spinning or jumping. Build both into the day: headphones for the loud wedding, and ten minutes of running before homework.

Hard moments can look different. Some come fast, when waiting or stopping a fun task feels too hard. Some look more like overload spilling over. Either way, moving to a calmer place can help ease the distress. Keep your words few, and stay close and steady.

More, if you want it

After a storm, become a quiet detective. Write down what happened just before, what the storm looked like, and what happened after. Clinicians use this kind of record to look for triggers. Over time, you may spot patterns, like hunger, a sudden change or one particular sound. Once you know a trigger, you can sometimes plan around it.

REMEMBER

Try to talk about a meltdown after it has passed, not in the middle of it. In the storm, words are hard to take in. For now, a calm face and a steady voice are enough.

TRY THIS

Pick the hardest time of your child's day. Plan one small change for it this week: a two-minute warning, a quiet corner, or a choice between two options. Do it for one week before you judge whether it works.

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WORKING WITH SCHOOL

Getting the school on your side

IN SHORT

Your child spends much of the day in a classroom, so the teacher is a key teammate. Experts suggest that small, fair changes at school can lower stress and help your child learn.

You do not need the school to be experts. You need them to be partners. Helpful changes are often simple: a seat away from noise, short movement breaks, and a quiet place at break and lunch. It is also worth asking for a steady routine and a warning before changes.

Go in as an ally, not an accuser. Explain that this is a difference in how your child is wired, not naughtiness, and not a sign that you have failed at home. Experts advise teachers not to label these children naughty, as the label can mark a child out at school.



Rekha and Ananya's teacher, building a plan together.

When Rekha met Ananya's teacher, the teacher was surprised. "She is no trouble at all," she said. Rekha explained that Ananya held everything in at school and fell apart at home. They agreed on a seat away from the door, a warning before any change, and a quiet corner at lunch. Over the next few weeks, the storms at home grew a little smaller.

Girls like Ananya can be missed. Research suggests girls may often be under-recognised for both patterns. Some learn to copy others and hide their struggles, so a quiet, dreamy girl may never seem a problem in class. Quieter signs, like drifting off or daydreaming, still count. If your child is "fine at school but not at home", tell the teacher. Both pictures can be true.

More, if you want it

Ask for one short conversation, not a long formal meeting, and bring one or two specific requests. Share what calms your child at home, and ask what works in class. Plan big changes early, like a new class or a new school. A shared note, even one line a day, keeps you both in touch.

TRY THIS

Write down the three things your child finds hardest at school. Pick the one small change that would help most, and ask the teacher for just that one first. One win builds the partnership for the next.

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LOOKING AFTER YOU

You are not failing

IN SHORT

Raising a child wired both ways is genuinely demanding, and the exhaustion you carry is real. Looking after yourself is not selfish; it is part of helping your child.

Families of children with both patterns can carry enormous strain. That is not weakness. It is a normal response to a hard and often lonely job. Supporting the parent is part of helping the child, not a luxury added on top.

Hold on to three plain truths. You did not cause this. You cannot cure it, and your child does not need curing. You can help, a great deal, and you already are.

Remember too that both patterns run in families. Some adults first seek an assessment for themselves after someone in their family is diagnosed. If you recognise your own childhood on these pages, that is not a fault. It can be the start of understanding your child, and yourself, more kindly.

In a joint family the pressure multiplies. Relatives may blame your parenting, compare your child to cousins, or worry about what people will say. You do not have to win every argument. A short, steady line helps: "The doctor is guiding us, and we are following a plan."

More, if you want it

Find one person who is on your side: your partner, a sister, a friend, another parent who gets it. A parent support group can help too. It gives you a place to share with others in the same position, and to cope with stress, isolation and stigma. You do not have to carry this in silence.

IN YOUR CORNER

On the hard evenings, when you have run out of patience and then felt terrible about it, hear this clearly: a parent who reads a whole booklet to understand her child is not failing. She is fighting for her child. That is you.

TRY THIS

Tonight, name one thing you did well as a parent today, however small. You stayed calm through one storm. You noticed one thing your child loved. Say it to yourself before you sleep, and do it for a week.

6

GETTING HELP

What a doctor and others can offer

IN SHORT

You do not have to figure this out alone. A doctor can assess your child properly, look for both patterns, and help you build a plan.

A good assessment looks at both patterns, not just the louder one. It also looks at your child's strengths, and with consent, the findings can be shared with the school. Help may come from a small team. Speech and occupational therapists, for example, can assess language and movement and help plan school support.

Asking for help early is not an admission of failure. It is the opposite.

What about medicine? No medicine is recommended for the core features of the autistic side. For the attention side, a psychiatrist may suggest medicine for a child aged 5 or over. This is usually after changes at home and school have been tried, if problems still get in the way of school or friendships. For a child under 5, guidelines advise a second specialist opinion before any medicine. Any such decision is made with your family and reviewed over time.

REMEMBER

A good clinician does not hand you a label and leave. They look at the whole child: attention, senses, sleep, school, friendships, the family, and your child's real strengths. The plan gets adjusted over time, and you stay part of the decisions.

If your child ever talks about wanting to die or to hurt themselves, take it seriously and get help the same day. If they are in immediate danger, call 112. Tele-MANAS, 14416, is a free government mental-health helpline, open at any hour, and the crisis card linked at the end of this booklet lists it too. It is okay to ask your child gently and directly about such thoughts. In studies of teenagers and adults, being asked about suicidal thoughts did not increase them.

More, if you want it

You do not need every answer before the first visit. Bring what you have seen: what overwhelms your child, what soothes them, what they love, and when the hard moments come. Bring your storm notes too. They help a clinician a great deal, and they turn a scary appointment into a working partnership.



The child who is pulled two ways today can grow into someone who does remarkable things, once both sides of them are understood.

TRY THIS

Write down the two or three things about your child that worry you most, and two or three things you love most about them. Add one storm and what came just before it. Keep the list on your phone, and take it to the first appointment.

WHERE THIS COMES FROM

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Dazzi T. Does asking about suicide and related behaviours induce suicidal ideation? What is the evidence?. Psychol Med, 2014. doi.org/10.1017/S0033291714001299

FURTHER READING

- National Autistic Society: advice and guidance
- ADHD Foundation: support and resources

This guide helps you recognise and understand. It is not a diagnosis. For that, see a professional.

- Feeling like it is all too much? **Read the crisis card.** Help is one page away.
- Tele-MANAS, the free national helpline: **14416**. Any time, day or night. From the Government of India.
- Wondering whether to talk to someone? **Read how an assessment works.** No rush, and no pressure.