



Autism

Symptoms

- Difficulty with eye contact, social cues or small talk.
- Strong need for routine or repetitive movements (stimming).
- Over or under-sensitive to noise, light or textures.

Age & Gender

- Signs often appear by age 2 or 3, but diagnosis can happen at any age.
- Diagnosed more often in males.
- Females are frequently missed because they are better at masking symptoms.

Misconceptions

- People with autism feel empathy, but may show it differently.
- It's a lifelong condition and not just for children.
- Not everyone is a genius. Abilities vary widely.

Diagnosis

- Diagnosis is based on observing behaviour and developmental history.
- Usually involves paediatricians, psychologists and speech therapists.

Treatment

- Speech and Occupational Therapy help with daily living skills.
- No medication is available.
- Peer support groups are vital for mental health.

Support

- Be direct and literal. Avoid sarcasm or hints.
- Lower lights and noise to reduce sensory overwhelm.
- Allow extra time for them to process information and respond.



ADHD

Symptoms

- Easily distracted, forgetful, or difficulty managing time, focus, and tasks.
- Fidgeting, inability to sit still, or a sense of inner restlessness.
- Interrupting others, difficulty waiting one's turn, or acting without thinking.

Age & Gender

- Symptoms usually appear before age 12, but persist into adulthood.
- Diagnosed more often in males.
- Females are often missed as they tend to have inattentive type ADHD, rather than disruptive type.

Misconceptions

- It's not 'bad behaviour' or lack of willpower.
- It's not just a childhood phase. Many adults live with undiagnosed ADHD.
- It's not caused by bad parenting, too much sugar, or screen time.

Diagnosis

- Requires a referral from a GP to a specialist (usually a psychiatrist).
- The assessment involves interviews, questionnaires, and reviewing childhood history to see if symptoms impact daily life.

Treatment

- Medication can help improve focus and reduce impulsivity.
- Cognitive Behavioural Therapy (CBT) or ADHD coaching helps with organisation and emotional regulation.

Support

- Give clear, written instructions rather than long verbal lists.
- Allow headphones or fidget tools to support those with sensory needs.
- Permit movement breaks, and try to avoid punishing timekeeping errors.



OCD

Symptoms

- Unwanted, intrusive thoughts causing anxiety.
- Anxiety is relieved through repetitive physical or purely mental actions.
- The relief is temporary, then the anxiety cycle returns.

Age & Gender

- Can start in childhood, but normally begins in late teens or early adulthood.
- Affects males and females roughly equally.
- The average diagnosis occurs 9 to 13 years after initial symptoms start.

Misconceptions

- It's a serious condition, not just liking things neat.
- People cannot simply 'snap out of it' or choose to stop.
- Sufferers know fears are irrational but still feel the anxiety.

Diagnosis

- GP refers to a specialist mental health team for a detailed assessment.
- Doctors use medical criteria to identify obsessions and compulsions.
- Diagnosed when symptoms significantly impact daily life.

Treatment

- CBT with exposure therapy helps face fears without rituals.
- Antidepressants (SSRIs) can reduce symptom intensity.
- Peer support groups help reduce isolation.

Support

- Do not criticise or rush them during a ritual.
- Do not join in with their compulsions or offer reassurance.
- Keep a calm atmosphere to help lower general anxiety levels.



Dyslexia

Symptoms

- Difficulty learning reading, spelling, and decoding text.
- Trouble hearing or manipulating sounds in words.
- Challenges with sequencing, directions, and memory.

Age & Gender

- Often identified in primary school when children begin to learn to read and write.
- Historically diagnosed more in males, but current research suggests it affects all genders equally.

Misconceptions

- Dyslexia is a language processing difference, not a visual problem (seeing letters backwards).
- It has absolutely no connection to low intelligence or laziness.

Diagnosis

- Carried out by a specialist assessor or an Educational Psychologist.
- Assessments test memory, speed, and the ability to process word sounds.

Treatment

- Assistive technology like text-to-speech software, screen readers, or coloured overlays.
- Structured, multisensory teaching methods help improve literacy skills.

Support

- Use plain fonts, sans-serif fonts, and pastel backgrounds, not bright white.
- Give verbal cues or diagrams rather than long text.
- Allow extra time for reading and processing.



Dyspraxia

Symptoms

- Poor balance, coordination and general clumsiness.
- Difficulty with fine motor skills like handwriting or tying shoelaces.
- Trouble planning and organising physical movements.

Age & Gender

- Symptoms usually appear in early childhood.
- Diagnosed more often in males.
- Females are often missed as avoiding active play or having better handwriting can mask issues.

Misconceptions

- It's not just being 'clumsy' or lazy.
- Children will not simply grow out of it.
- It doesn't only affect movement, it often impacts organisation and memory too.

Diagnosis

- Assessment by a paediatrician, occupational therapist, or physiotherapist.
- Tests measure motor skills compared to age norms.

Treatment

- Occupational Therapy helps improve daily living skills.
- Physiotherapy helps improve core strength and balance.
- Adaptations like using a laptop can replace handwriting.

Support

- Break complex physical tasks into smaller steps.
- Allow extra time for movements like dressing or eating.
- Avoid criticism for messiness or dropping things.



Dyscalculia

Symptoms

- Difficulty understanding number concepts and arithmetic.
- Trouble telling time, counting change or estimating quantities.
- High anxiety when faced with mathematical tasks.

Age & Gender

- Signs appear early, often when learning to count or recognise numbers.
- Research suggests it affects males and females equally.

Misconceptions

- It's not just being 'bad at maths' or lacking effort.
- It's a neurological difference, not a sign of low intelligence.
- It's not rare, just less frequently diagnosed than dyslexia.

Diagnosis

- Assessment by a specialist teacher or Educational Psychologist.
- Standardised tests measure number sense and calculation ability against age norms.

Treatment

- Multisensory teaching using physical objects like counters.
- Technological aids like calculators or voice-activated apps.
- Focus on practical maths needed for daily life (e.g. money, time).

Support

- Provide reference charts or visual aids for numbers.
- Allow extra time for any task involving data or figures.
- Avoid putting them on the spot with mental maths questions.



Tourette's Syndrome

Symptoms

- Involuntary movements like blinking, shrugging or head jerking (motor tics).
- Involuntary sounds like grunting, throat clearing or words (vocal tics).
- An uncomfortable physical urge or sensation before the tic happens.

Age & Gender

- Symptoms usually appear between ages 5 and 9.
- Males account for 75% to 80% of diagnoses.

Misconceptions

- Most people do not swear (coprolalia affects only about 10% of cases).
- Tics are not done for attention or bad behaviour.
- People cannot simply stop their tics.

Diagnosis

- Diagnosed when a person has multiple motor tics and at least one vocal tic.
- Symptoms must have lasted for more than a year.

Treatment

- Behavioural therapy (CBIT) teaches strategies to manage tic urges.
- Medication may be used if tics cause pain, injury, or severe distress.
- Support groups help reduce stigma and improve self-esteem.

Support

- Ignore the tics completely, do not stare, laugh, or comment.
- Do not tell them to stop or ask them to be quiet.
- Reduce stress or excitement, as strong emotions can increase tics.



Anxiety

Symptoms

- Constant feeling of dread, racing thoughts or being 'on edge'.
- Heart palpitations, sweating, shaking or shortness of breath.
- Avoiding situations or places to escape the worry.

Age & Gender

- Can develop at any age, though frequently starts in adolescence.
- Females are roughly twice as likely to be diagnosed as males.

Misconceptions

- It's a medical condition, not drama or attention-seeking.
- People can't just 'snap out of it' or stop worrying.
- Panic attacks feel life-threatening, they aren't an overreaction.

Diagnosis

- GP or psychiatrist assessment using questionnaires.
- Diagnosed when uncontrollable worry persists for 6 months and impacts daily life.

Treatment

- CBT helps change negative thought patterns.
- Medication can manage physical symptoms.
- Mindfulness and exercise support self-care.

Support

- Listen without judging or saying 'just calm down'.
- Ask what helps them during a panic attack before one happens.
- Understand that plans may change last minute if they feel overwhelmed.



Dysgraphia

Symptoms

- Handwriting is often illegible and poorly spaced.
- Holding a pen causes physical pain or cramping.
- Written work is noticeably weaker than their strong verbal skills.

Age & Gender

- It is usually identified in early childhood when learning to write.
- It affects all genders but is historically diagnosed more in males.

Misconceptions

- It is a neurological disconnect, not just 'messy handwriting' or laziness.
- It does not mean a person has low intelligence.
- They can have excellent physical coordination for everything else.

Diagnosis

- Diagnosed by an Educational Psychologist or Occupational Therapist.
- Assessments test fine motor skills and compare verbal ability to written output.

Treatment

- There is no medication for dysgraphia.
- Occupational therapy improves hand strength and pencil grip.
- Peer support helps individuals share practical technology workarounds.

Support

- Allow the use of typing or speech-to-text software.
- Provide extra time for written tasks or accept verbal submissions.
- Provide pre-printed notes so they do not have to copy notes down.



Sensory Processing Disorder

Symptoms

- Over or under-sensitive to sensory stimuli.
- Difficulty filtering background noise.
- Emotional dysregulation when overwhelmed.

Age & Gender

- Often identified in early childhood.
- Diagnosed more often in males.
- Females are often missed due to masking.

Misconceptions

- It's not bad behaviour, sensory input is genuinely overwhelming.
- Not the same as autism, though they often co-occur.
- Not something people can push through with willpower.

Diagnosis

- There is no standalone DSM-5 diagnosis.
- Often identified by an occupational therapist.
- Frequently co-occurs with other conditions.

Treatment

- Sensory integration therapy with an Occupational Therapist.
- A personalised 'sensory diet' of daily activities.
- Environmental adjustments to reduce stimuli.

Support

- Offer quiet or low-stimulation workspaces.
- Reduce sensory triggers like flickering lights.
- Allow headphones, sunglasses, or fidget tools.



Auditory Processing Disorder

Symptoms

- Difficulty understanding speech in noisy environments.
- Mishearing words, even with normal hearing ability.
- Needing instructions repeated or written down.

Age & Gender

- Often identified in childhood, but can persist into adulthood.
- Diagnosed more often in males.
- Females are often missed due to masking.

Misconceptions

- It's not a hearing problem.
- It's not the same as ADHD, though they often co-occur.
- It's not a sign of low intelligence or inattention.

Diagnosis

- Diagnosed by an audiologist, not a GP.
- Tests measure how the brain processes sound.
- Often identified alongside dyslexia or ADHD.

Treatment

- Auditory training exercises to improve processing.
- Environmental changes to reduce background noise.
- Assistive technology such as live captions or remote microphones.

Support

- Face the person when speaking, and speak clearly and slowly.
- Reduce background noise in meetings where possible.
- Provide written follow-ups to verbal instructions.