ADHD Journey: From Shame to Self-Understanding

BY DR.ANKITA DAS

Ankita Das completed her schooling and undergraduate and master's studies at IISER, a prestigious educational institute in India. She then pursued her PhD in molecular genetics at The Ohio State University.

Ankita has lived with ADHD since early childhood, which presented numerous challenges in both her personal and social life.

It was only recently that she was formally diagnosed with ADHD, a discovery that has opened new pathways for her future.

Recognizing that many others face similar struggles, Ankita decided to share her story to help break the stigma surrounding ADHD and related conditions, inspiring new beginnings filled with hope and opportunity.



The meeting began with an introduction by Anil Vartak Sir. He introduced Eklavya Foundation for Mental Health, which was started in 1997. He explained that over the years, the foundation had recognised the need for different initiatives and programmes to support people and their families. He spoke about initiatives such as 'Stories of Phoenix' and 'Bahar', through which people are given a platform to share their stories and recovery journeys. These stories can have an impact on others who may be going through similar experiences.

Anil Vartak Sir then introduced Dr. Ankita Das. Ankita completed her schooling, undergraduate studies and master's studies at IISER. She then pursued her PhD in Molecular Genetics at The Ohio State University. He explained that Ankita had lived with ADHD since early childhood, which presented challenges in her personal and social life. She was formally diagnosed with ADHD only recently. Recognising that many others may be facing similar struggles, she decided to share her story to help break the stigma surrounding ADHD and related conditions and to inspire new beginnings filled with hope and opportunity.

Dr. Ankita Das then began her personal sharing by thanking Eklavya Foundation for providing her with the platform to speak and share her experience.

She described her journey as one that went from shame to learning about ADHD and, more importantly, learning about herself. She spoke about how she often told herself that she was lazy, too sensitive, or unable to do things that everyone else seemed to manage. She explained that people dealing with mental-health issues or internal struggles may also start blaming themselves before trying to understand what is actually happening with them.

Although she had many achievements on paper, Ankita explained that she often felt that she did not deserve them. She found it difficult to recognise her own efforts. During her school days, she experienced difficulties with following rules and maintaining discipline. She often needed external structure and pressure to stay organised, and her parents had to push her constantly. She was sometimes labelled lazy and careless, although she explained that she was not intentionally being lazy or careless and was genuinely finding certain things difficult.

She also struggled with concentration and attention. Even when she knew that something had to be completed, starting or finishing the task was difficult. She described spending many sleepless nights working while feeling that only half of her effort was visible in the final result. These difficulties led to frustration, sleepless nights, low self-confidence and low self-esteem.

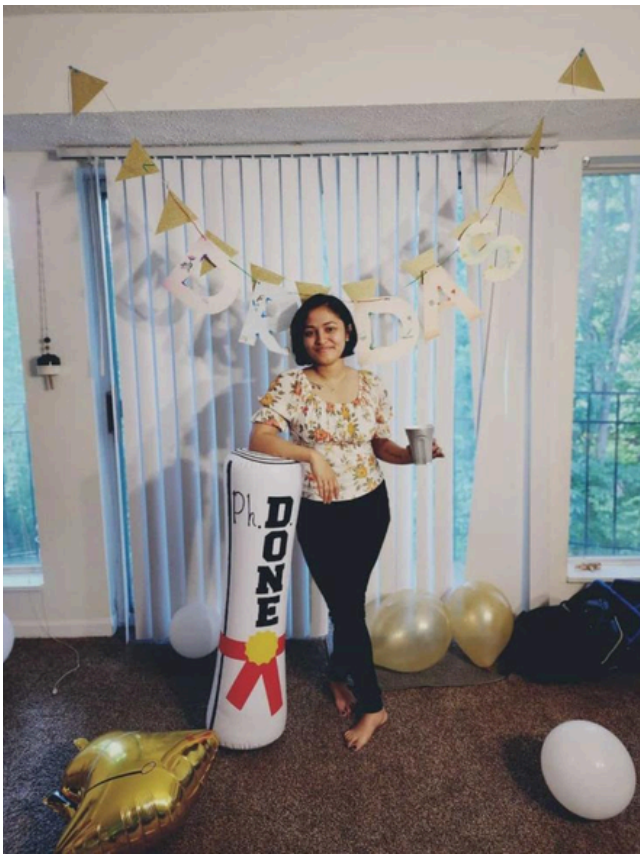
As she continued her education, she moved away from home for her higher studies. She used to do group study but her academic performance remained low. She also struggled with procrastination. Later, when she moved to the USA, she had to adjust to a completely different environment and manage her studies and responsibilities on her own. She found that she could not complete tasks until there was last-minute urgency, which led to chronic stress and frequent burnout. Her supervisor and lab colleagues also noticed these difficulties. She was told that she was not proactive enough, needed to keep up and be on top of things, and was bad at follow-ups until someone pushed her. This resulted in labels such as irresponsible, inconsistent and not suitable for her career. She was eventually asked to leave her PhD in her fifth year because her supervisor had lost trust in her. She explained that she eventually completed her PhD in seven years after giving her 200% to complete the task.

During this period, a friend pointed out that she might have ADHD. This was the first time she had heard the term ADHD. However, she did not know what it meant and was focused on completing her degree. She continued blaming herself and believed that she simply needed to work harder.

After completing her PhD, Ankita moved into the corporate sector. The new environment and novelty kept her motivated for the first two years. However, eventually the same difficulties appeared again.



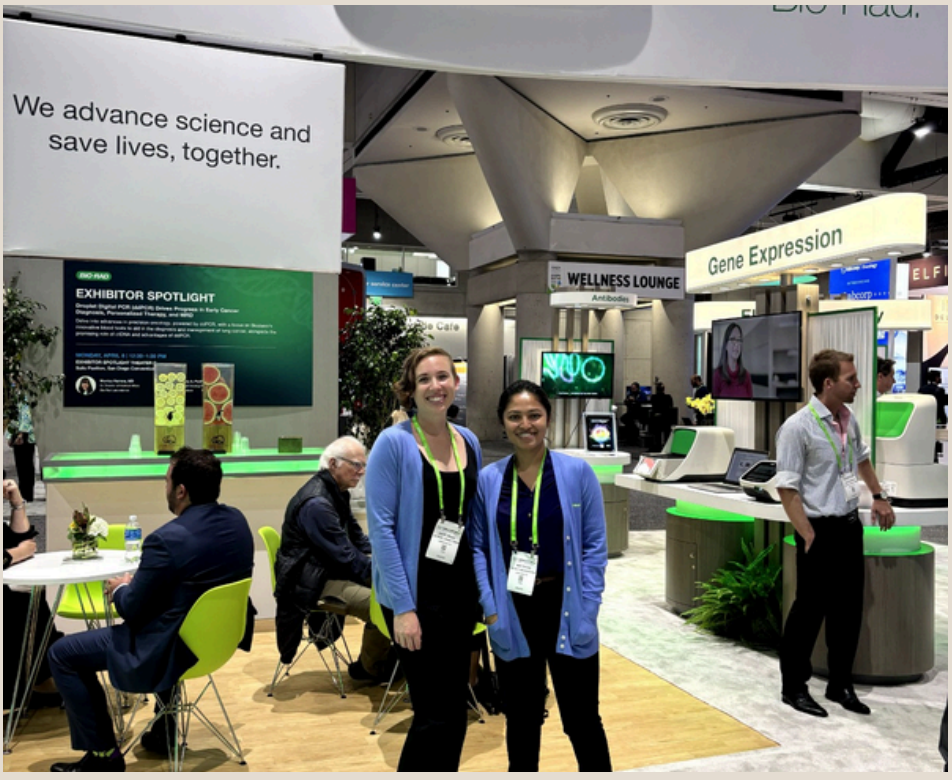
AT OHIO STATE UNIVERSITY



AFTER COMPLETING PHD

She was described as careless, forgetful, not proactive, indisciplined, impulsive and lazy. Her manager questioned why she was not completing assigned tasks. Ankita explained that she was not doing these things intentionally and was trying her best, but she was somehow unable to move herself forward. This again led to anxiety and self-doubt. She then described how she listened to a podcast by Mel Robbins while driving home from work. She felt that someone was describing her life. She became emotional because she finally felt that she had an explanation for the difficulties she had been experiencing. She listened to more podcasts and tried to learn about ADHD. She then went for a formal diagnosis, which clearly indicated that she had the condition. The diagnosis gave her a framework for understanding the patterns that she had been judging herself for.

She realised that difficulties with attention, prioritising, planning and organisation had appeared repeatedly throughout school, college, her PhD and work. Ankita explained that after the diagnosis she began to understand that what people see and what a person is actually experiencing may not be the same. People might see someone as smart but lazy, hardworking but careless, competent but forgetful, or caring but inconsistent. Internally, however, she experienced overwhelm, decision fatigue, self-doubt, emotional dysregulation, exhaustion and burnout from constant internal effort. She explained that she often had to put in twice the amount of effort because she could not pay attention in class and had to read again at home.



AT WORK PLACE

She then discussed the gap between what is seen and what is actually experienced. According to her, this gap can create stigma because people may not understand what is happening and instead label someone as lazy or careless. She also spoke about self-stigma and how she herself had believed that ADHD was not a condition but a personality or character flaw. She felt that if she simply worked harder, she could achieve everything.

Ankita explained different sources of stigma, including what society believes mental health should be, public opinions and the judgments people hear from childhood. She also discussed self-stigma, where people begin to believe negative judgments about themselves. She spoke about institutional stigma and how existing systems may work well for some people but may not provide enough flexibility for people who struggle with planning and organisation. She explained that stigma can result in hiding struggles, shame, embarrassment and delays in seeking help. It can also lead to overcompensation, exhaustion, burnout, self-blame, social isolation and reduced self-esteem. It can affect careers, lead to employment discrimination and result in poorer treatment outcomes.

To address stigma, Ankita emphasised understanding, less judgment and kindness. She encouraged people to treat others with compassion and discuss mental health openly.

She also stressed the importance of avoiding derogatory language, judgmental language, labels and stereotypes. She explained that a diagnosis or a particular behaviour does not define an entire person. Instead, people should try to understand why someone is behaving in a particular way, whether they need help and how they can be supported.

She further spoke about choosing empowerment over shame through encouragement, support and belief in another person's capability to grow. She explained that being diagnosed with ADHD did not mean that she had completely recovered or transformed. Instead, she was learning about her patterns, triggers and needs and trying to understand what worked for her and what did not.

She also spoke about the importance of support. During her PhD days, she received support from friends, and she currently receives support from her spouse. Earlier, she used to hide her difficulties and isolate herself, but after her diagnosis she became more open about her struggles and the accommodations she needed. She explained that her goal was not to become perfect in functioning but to build a more suitable working relationship with herself and a better system suited to her needs.



WITH FRIENDS DURING PHD

Ankita connected this process with the work of Eklavya Foundation for Mental Health. She explained that the foundation's self-help groups educate people and replace myths and misconceptions with facts and information. They normalise conversations about mental health, encourage people to share their experiences, replace judgmental labels with respectful words, connect people with others who share lived experiences and empower people with skills and small steps that they can take towards their own recovery.

She then explained how her approach towards herself had changed after the diagnosis. Earlier, she used to ask herself, “What's wrong with me?” and “Why am I lazy?” Now she asks, “What is actually happening here?” She gave the example of executive dysfunction and explained how she tries to understand what she needs at that moment.

She mentioned using music to help create the momentum needed to complete a task.

Ankita described her journey as one that moved from shame and self-blame towards self-understanding. She explained that her capabilities do not cancel her difficulties and that having difficulties does not mean that she is incapable. She said that a person can be capable and still need support. She described self-understanding through four simple steps. The first is to notice what is happening and develop self-awareness. Instead of panicking and blaming oneself, one should notice what is happening and give it a name. The next step is to understand what might be driving it and then think about what can be done to make the situation easier. She explained that curiosity can interrupt the automatic movement from struggling to believing that there is something wrong with oneself. Changing the language from self-criticism to curiosity and compassion can also help.

She emphasised that healing is not meant to be a solo journey. She received support from friends who listened to her, reflected with her, shared their own stories and guided her towards professional support. She encouraged people who are struggling not to continue alone and mentioned Eklavya Foundation self-help groups as one way to start seeking support.





ANKITA WITH HER FRIENDS

Towards the end of her sharing, Ankita explained that her struggles were real even when they were not visible. She said that the diagnosis gave her language to explain her experiences, but it was not a free pass to continue in the same way. She needed to learn how to deal with and manage the condition. She also explained that understanding her patterns changed the way she responded to them. She stated that seeking support is not weakness.

Earlier, she believed that she was an independent woman who did not need help, but she realised that seeking support was one of the strongest things a person could do. She explained that the goal was not to become somebody else but to learn how she worked and how to work better with herself.

Question-Answer Session

Q. Mugdha: My sister has ADHD, and she has been struggling for many years. How can she start a job despite task paralysis because of ADHD? Is it possible to contact you, Ankita, offline?

Answer – Ankita: I am not a psychologist or a therapist, but I can share some things that I do when I face task paralysis.

I use a small digital timer. With ADHD, I need urgency or a sense of a deadline to get the task done. I set a timer for 30 minutes and work with that time limit. After about 25 minutes, I take a break and then come back after 5–10 minutes.

Music also helps me focus. I personally like EDM and electronic beats and use headphones to reduce distractions. A quiet environment also helps me stay focused.
Movement is another important thing. I started doing yoga in 2020, which helped me immensely. I also give credit to yoga and strength training for helping me get through my PhD.

Different systems might work for different people, so it is important to try different things and find what is suited to the individual. I am also happy to talk offline.

Q. Manjiri: Is there medication for adults with ADHD? Are there medicines and counselling to treat ADHD?

Answer – Ankita: Yes, there are medications. I am not a clinical psychologist, but I received my diagnosis in the US and in India. In the US, I was prescribed medication and took it for a few months. After moving back to India and living with my partner, having someone else present for body doubling made many things easier. My psychologist in India suggested that I try other things and that I did not have to take medication.

It depends on where you are in the spectrum. I can manage with certain tools and the tips and tricks I mentioned, but if the difficulties are too high, with high hyperactivity or impulsivity, I would suggest going to a professional for counselling.

Q. Tanveer: I am a working professional, and a couple of months ago, I was diagnosed with inattentive ADHD.

Answer – Ankita: I have also been an inattentive kind. There are different kinds. Thank you for sharing.

Q. Vishwajeet: My sister has to stay alone. She doesn't like to mix with people.

Answer – Ankita: It is not always possible to live with someone else. A lot of people live alone. Sometimes I can work better if I sit in a cafe or somewhere where there are people around, but that is not possible in the middle of the night.

There are online body doubling sessions and websites where other people work with you on camera, which helps with accountability. One example is FocusMate. I also use YouTube body doubling videos with soothing or focused music and a timer. If I get distracted, looking at the video helps me stay anchored and continue working.

Q. Manjiri: Initially, you said it was a struggle and you are still having that condition, but you are now coping well. How do you feel now? I mean, the internal struggle, like you described everything and looking at your success, nobody will believe that this is going on in your life. But once you understood what was happening, what was your feeling?

Answer – Ankita: The first feeling was relief. I realised that I was not the problem and that there was a reason behind why I was behaving that way.

Then there was a certain level of grief because I had blamed myself for so long. I felt that I could have enjoyed my life more and perhaps the same things would have happened if I had been less stressed.

Now I have more acceptance. Some days I may not be able to do something, and that is fine. I can ask for help or wait for the next day. If I need to get things done, I make sure I have the tools and cues that I need.

I am still practising it and sometimes fall into old habits, but I do not blame myself for them now. There is a lot more acceptance, and I feel like I am more myself.

Q. Meera: It is very difficult here to connect with people who have an understanding of ADHD. How can one help people with ADHD who don't know they have it and who are suffering, especially when the resources are still underdeveloped in this country?

Answer – Ankita: I reached out to Eklavya for exactly this reason, not only with the goal of ADHD but to see where I can contribute for anybody who is struggling.

I think talking more about it can help. In my family also, people do not know what ADHD is. When I explain that I might have a condition, they sometimes say that it is nothing and that I am just overthinking. I do my best to explain.

I also use social media to share stories about ADHD and the struggles people may experience. I share my own experiences and what I am doing to cope with them.

Social media has given me clarity and confidence. Seeing people from the neurodivergent community speaking up has helped me, and it is also one platform through which I can contribute.

Q. Participant: What kind of job are you doing now?

Answer – Ankita: I am not doing any job right now. I am in the process of a job search because I moved back from the US. This has made me question my career choices. Right now, I am exploring different things and trying to see where I can give my best. I am kind of in between right now.

The meeting concluded with Manjiri thanking Ankita for the session. She reflected on how, although the discussion focused on ADHD, the internal struggle described by Ankita could be connected with the experiences of many people, even though their symptoms may be different. She highlighted self-acceptance and self-stigma and how changing these can make a difference. She also appreciated the practical strategies discussed during the session, particularly the use of a timer and body doubling. She thanked Ankita and everyone for their active participation.

Ankita concluded by thanking everyone.



ANKITA AT JPL



WITH OHIO STATE MASCOT BUCKEYE





ANKITA WHILE TRAVELLING

LAXMI BASAVRAJ PATIL
SYBA PSYCHOLOGY STUDENT, ABASAHEB GARWARE COLLEGE
INTERN, EKALAVYA FOUNDATION FOR MENTAL HEALTH