BeWell Corp.

Understanding ADHD and the assessment process

Information for clients



What is ADHD?

Attention deficit hyperactivity disorder, or ADHD, is a neurodevelopmental condition, which means it reflects differences in how the brain develops and works, particularly in the systems that manage attention, self-control and the organising of behaviour over time. It is present from childhood and continues across the lifespan, although the way it shows up changes as we grow. For example, in a young child it might look like difficulty staying with one activity or sitting through a lesson, in a teenager like losing track of assignments and running late despite good intentions, and in an adult like a constant inner restlessness and the sense of working twice as hard as everyone else to keep life organised. The underlying differences are the same; it is the demands of each stage of life that change what we notice.

ADHD has three core features: inattention, hyperactivity and impulsivity. Not everyone experiences all three to the same degree. Some people are mainly inattentive, finding it hard to sustain focus, stay organised or finish what they start; some are mainly hyperactive and impulsive, feeling restless, acting before thinking or struggling to wait; and many have a combination of both. These features are a normal part of being human, and all of us have them at times. What distinguishes ADHD is that they are persistent, present across more than one setting, such as home, school or work, and get in the way of everyday life.

It is worth saying clearly that ADHD is not a matter of intelligence, effort or upbringing. Research points to a strong genetic contribution, and it often runs in families. Estimates suggest ADHD affects somewhere around one in twenty children and a few in every hundred adults, many of whom were never identified when they were younger. With the right understanding and support, which may include psychological strategies, coaching and, for some people, medication, the difficulties associated with ADHD can be managed well.

Why people seek an ADHD assessment

People come to us at every stage of life. Some are parents of a primary school-aged child, often after a teacher has noticed that their child struggles to settle, follow instructions or keep up with the class. Some are families with a teenager who coped well enough in earlier years but is finding the demands of secondary school — the independence, the planning, the juggling of subjects and deadlines — much harder than their peers seem to. And many are adults who have managed for years through sheer effort, and who are now asking why some things have always felt harder than they should, sometimes prompted by a change in work or study, or by seeing their own child go through an assessment.

What does a good ADHD assessment look like?

An ADHD assessment is an evidence-based, structured look at how attention, activity levels and impulsivity show up across a person's life, and whether ADHD is the best explanation for them or whether something else fits better. Because there is no single test for ADHD, a good assessment never rests on one questionnaire or

one conversation. Instead, it brings together several sources of information: a detailed clinical interview, a developmental, family and medical history, standardised questionnaires, and, wherever possible, the perspective of someone who knows the person well. For a child, that usually means a parent and a teacher; for a teenager or adult, it might be a parent, a partner or a close friend who can speak to what things were like growing up as well as now. It is carried out by a psychologist, psychiatrist or paediatrician, working to the same diagnostic criteria and clinical guidelines regardless of who conducts it.

Part of what makes the process thorough is that it looks beyond ADHD. Difficulties with attention and self-regulation can also arise from anxiety, low mood, sleep problems, learning difficulties or simply a period of significant stress, and these can occur alongside ADHD as well as instead of it. Taking the time to tease this apart is what makes the outcome meaningful, whether that outcome is a diagnosis of ADHD, a different explanation, or both.

At BeWell, the process usually involves two to three appointments over two to four weeks. We begin with a clinical interview, you complete some questionnaires in your own time, and we then meet again for a feedback session where we talk through the results, what they mean and what the options are from here.

Who can diagnose ADHD in WA?

Psychologists, psychiatrists, paediatricians and some GPs can all assess and diagnose ADHD. Medication is different. Stimulant medicines are tightly regulated in Western Australia and have traditionally been initiated only by a psychiatrist or paediatrician. From 2026, a small number of GPs who have completed specialist ADHD training are also able to diagnose and prescribe for patients aged ten and over, although they remain few in number and work within defined limits. For most people, and for all children under ten, the pathway to medication still runs through a psychiatrist or paediatrician.

Should I see a psychologist or a psychiatrist first?

It depends on what you need. If the main question is whether ADHD is the right explanation, a psychologist's assessment is often a sensible starting point. If you already have a diagnosis and want to discuss medication, or there are other significant mental health concerns, starting with a psychiatrist may suit you better. Not everyone needs both, and we will tell you honestly if we think one is enough. If you are unsure, call us and we will talk it through.

What happens after an ADHD diagnosis?

A diagnosis is a starting point rather than an end in itself. It gives you a clearer understanding of what has been going on, and from there the next steps depend on the outcome of the assessment, your age and stage of life, and what your goals are. For many people, a combination of the following works best:

- **Psychiatry,** if you would like to explore medication. Medication is one of the most well-researched treatments for ADHD and helps a large proportion of people, although it is not right for everyone and is a personal decision. With a GP referral, one of our psychiatrists can assess you, start and review treatment and, once things are stable and it is clinically appropriate, hand ongoing prescribing back to your GP so that care stays close to home. For children, this is with a paediatrician or a psychiatrist who works with children, including ours.
- **Therapy,** either ADHD-focused therapy that helps you develop skills and strategies for managing attention, emotion and motivation, or broader support if anxiety, low mood or years of feeling "not good enough" need attention too. For children and teenagers, this often includes working with parents on strategies that help at home.
- **ADHD coaching,** for the practical side of things: building systems around time, organisation, planning and follow-through that fit the way your brain actually works, rather than the way you have been told it should. For younger children, this is usually delivered through parents.
- **Lifestyle factors,** which research consistently shows have a real bearing on how ADHD is experienced day to day. Sleep is the big one: sleep difficulties are common in ADHD and poor sleep makes attention, mood and impulse control noticeably worse, so getting sleep right is often the first thing we work on. Regular physical activity appears to support attention and emotional regulation, a predictable daily routine reduces the load on planning and organisation, and eating regularly and well helps keep energy and focus steady. None of these replaces treatment, but they make everything else work better, and they are within your control.
- **Self-help,** as long as it is credible and evidence-based. There is a large and growing range of good-quality books, podcasts and online programs on ADHD, alongside a great deal that is not, so it is worth being discerning. Your clinician can point you toward resources that are worth your time.
- **Adjustments at school, university or work,** using the recommendations in your report. These might include extra time, a quieter space, written instructions or flexibility in how tasks are structured, and they can make a real difference to how much effort everyday tasks take.

Frequently asked questions

Do I need a referral for an ADHD assessment?

No. You can book an ADHD assessment with BeWell directly. A referral from your GP or paediatrician is always welcome because it tells us what they would like answered, and you will need a GP referral to see one of our psychiatrists.

What if I do not have my childhood school reports?

That is common, and the assessment can still go ahead. We can draw on your own recollections, a parent's or sibling's input where available, and any other records you have. We will explain how missing information affects the confidence of the conclusions.

What happens if the assessment does not identify ADHD?

The report will explain what the assessment did find and what may better account for your difficulties – for example anxiety, sleep problems or a learning difficulty – along with practical recommendations and suggested next steps.

Is an ADHD assessment the same as getting medication?

No. An assessment answers the diagnostic question. Medication is a separate decision made with a medical practitioner, and many people with ADHD choose coaching, therapy or adjustments instead of, or as well as, medication.

Do you also assess for autism?

Where it is clinically indicated, our psychologists can screen for autism as part of an assessment, because the two conditions often overlap. If screening suggests a formal autism assessment would be useful, we will refer you to one of our psychiatrists for review, and explain the options from there.

How to start

Ask about assessment fees and availability by calling **1300 451 494** or sending an enquiry, or self-refer or ask your GP or paediatrician to refer you through our Make a referral page. We will confirm the cost and the steps before anything is booked.

Sources

- Australasian ADHD Professionals Association (AADPA) – Australian evidence-based clinical practice guideline for ADHD (2022). adhdguideline.aadpa.com.au

This article is general information only and is not a substitute for advice about your own circumstances. If you need support urgently, call 000 or Lifeline on 13 11 14.

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