Cycling & AuDHD

Balance, Freedom, Your Way

AuDHD describes the experience of being both autistic and ADHD. Those two neurotypes can create needs that appear to pull in different directions: novelty and predictability, movement and recovery, stimulation and sensory protection, spontaneity and careful preparation. Cycling can sometimes offer a useful meeting point - but only when the ride is shaped around the individual.

You do not have to choose between your autistic needs and your ADHD needs. The aim is to build a way of cycling that makes room for both.

This guide includes: stimulation and sensory needs, routines and novelty, executive function, transitions, emotional regulation, hyperfocus, interoception, overload, burnout, accessible cycling, a practical AuDHD ride planner, safety, sources and an individual message from Maggie.

Two sets of needs can exist at the same time

An ADHD brain may seek stimulation, immediacy, interest and movement. An autistic brain may value predictability, clarity, sensory control and recovery. These are broad patterns rather than rules, and the same person can experience both simultaneously.

Novelty and sameness

You may crave a new route and then feel anxious when the route is unfamiliar. One solution is controlled novelty: keep the starting point, equipment and general structure familiar while changing only one part of the route. Another is to have a dependable route for low-capacity days and an exploration route for days when novelty feels exciting rather than destabilising.

Movement and sensory load

Pedalling may help with restlessness and provide organising movement, while wind, traffic, vibration or clothing may create overload. Do not assume that because movement helps, more sensory input will help too. Separate the movement from the environment and change the part that is causing difficulty.

Executive function and predictability

ADHD can make starting, sequencing and remembering equipment difficult; autism can make unexpected changes particularly demanding. Keep cycling items together, use a short visual checklist and decide on a default plan in advance. Fewer decisions at the point of starting can protect both executive capacity and predictability.

Interest can unlock action

A special interest, favourite route, bike technology, maps, nature, photography or collecting route data may make cycling meaningful. Interests are legitimate sources of motivation. The important question is whether the activity remains supportive rather than becoming rigid or physically costly.

There is no contradiction in needing excitement and routine, company and solitude, or movement and rest.

Regulation: focus, emotion, sensory input and body signals

Cycling can give attention a concrete task and the body repeated movement. Some people find that this reduces mental clutter or gives intense emotion somewhere safe to move. Others become more activated. Regulation is individual, so judge the effect by what happens during and after the ride.

Emotional intensity

AuDHD can involve emotions arriving quickly, especially after frustration, rejection, uncertainty or overload. A familiar ride may create space before responding, but exercise should not be used to punish yourself or force an emotion away. If you are too distressed to ride safely, use an indoor option, seated pedals or rest.

Interoception

Hunger, thirst, pain, temperature, fatigue and exertion may be noticed late, inconsistently or very intensely. External reminders can help: drink at a planned point, check temperature before leaving, use a turnaround time and pause to notice hands, shoulders, breathing and energy.

Hyperfocus and time blindness

An interesting ride can make time disappear. Set an external stopping cue before starting - a timer, route marker or agreed return time. Carry what you need for hydration and food. A ride that feels brilliant in the moment can still leave too little capacity for the rest of the day.

Sensory planning

Consider sound, light, wind, touch, temperature, smells, crowds and visual movement. Quieter times, familiar paths, comfortable clothing and well-fitted equipment may help. Any sensory adaptation outdoors must preserve safe awareness of traffic and hazards.

Recovery is part of the ride

Plan what happens afterwards. Quiet, familiar food, reduced conversation, comfortable clothing or time alone may be as important as the cycling itself. A successful ride is not only one you complete; it is one you can recover from.

When starting, changing plans or stopping is difficult

The hardest part may happen before the pedals move. Preparation can contain dozens of small tasks: find clothes, check weather, locate equipment, choose a route, fill a bottle, judge energy and leave the house. Make the sequence visible and repeatable.

A low-demand starting sequence

1. Choose from only two options: default outdoor route or indoor/adapted option.
2. Use the same equipment location.
3. Decide the minimum: perhaps five or ten minutes.
4. Set the stopping cue before beginning.
5. Give yourself permission to change the plan after the minimum.

Unexpected change

Weather, punctures, roadworks or another person's plans can disrupt a carefully anticipated ride. Keep a backup that preserves something important about the original plan: the same time slot with an indoor bike, chair pedals, another familiar movement activity or a rescheduled ride written down immediately.

Stopping can be harder than starting

ADHD momentum and autistic completion needs can combine into 'I have to finish'. Decide before the ride what conditions mean stop: pain, significant sensory overload, unsafe weather, exhaustion or reaching the planned turnaround. Stopping according to the plan is completion, not failure.

Communication

If cycling with someone else, agree clear signals for slower, stop, quiet, home and help. A riding partner should not interpret reduced speech or withdrawal as agreement to continue. During overload, fewer words and fewer decisions may be more supportive.

Burnout and low-capacity days

Autistic burnout, ADHD exhaustion, poor sleep, chronic illness and cumulative demands can dramatically reduce capacity. On those days, a shorter or adapted ride may work; sometimes rest is the correct choice. Movement is not automatically healthier than recovery.

Accessible cycling and your AuDHD ride plan

Cycling can mean a two-wheel bicycle, e-bike, tricycle, recumbent cycle, handcycle, indoor bike or chair/seated pedal exerciser. Access may also depend on cost, storage, transport, route availability, needing another person present, pain, balance or fatigue. Adaptation is not a lesser version of participation.

Build your own pattern

Question	My answer
My easiest cycling option	_____
My predictable/default route	_____
Novelty that feels enjoyable	_____
Sensory input I seek	_____
Sensory input I need to reduce	_____
What makes starting difficult?	_____
My minimum ride	_____
My stopping cue	_____
Signs I am becoming overloaded	_____
My backup if plans change	_____
What I need afterwards	_____

Quick before-and-after check

Before: energy ____/10 | sensory load ____/10 | emotional intensity ____/10 | need for movement ____/10
After: energy ____/10 | sensory load ____/10 | emotional intensity ____/10 | focus/clarity ____/10
What helped? _____ **What needs changing?** _____

The purpose is to learn your pattern, not to make every number improve.

Safety, evidence and a message from me

Outdoor cycling requires safe equipment, awareness of the environment and routes appropriate to skill and capacity. If a health condition, seizures, fainting, significant pain, coordination difficulty or medication effect may affect exercise or cycling safety, seek individual professional advice. Never change prescribed medication to fit exercise without speaking to the relevant clinician.

Sources and further information

NICE. ADHD: diagnosis and management (NG87), and autism guidance for children, young people and adults.
NHS. ADHD, autism and physical activity information.
World Health Organization. Physical activity and sedentary behaviour guidance.
National Autistic Society. Sensory processing, communication and autistic experience.
Sustrans / British Cycling. Practical cycling, participation and safety guidance.

A message from me

When you are both autistic and ADHD, it can sometimes feel as though your own needs are arguing with each other. Part of you may desperately want movement, stimulation and something new, while another part needs the familiar route, the known plan and enough quiet to feel safe.

I don't think the answer is to decide which part of you is right.

Cycling can be one of those places where both can have a voice. You can keep the same route but change one small part. You can use movement without forcing yourself into a noisy environment. You can enjoy the excitement of a bike and still plan exactly where you will stop. You can want to go and still need recovery afterwards.

And on the days when getting everything together feels impossible, make the ride smaller. Five minutes indoors counts. Chair pedals count. An e-bike, trike, handcycle or adapted cycle counts. Changing your mind counts too.

You are not failing because your needs change from one day to the next.

I want you to find the version of cycling where you do not have to mask, push through or prove anything - a version where movement gives you something rather than taking the last of your energy.

Two ways of thinking can belong in one amazing you. Your route can make room for both.

Maggie Learoyd
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