SPACE TO BREATHE THERAPY

Sensory Overload

Moments that can intensify the experience — understanding the load underneath

Sensory overload can happen when the amount or intensity of sensory input exceeds a person's current capacity to process it. Stress and fatigue can reduce that capacity further.

The key idea: Reduce input early rather than waiting for crisis point: quieter space, softer lighting, comfortable clothing, fewer competing demands, predictable exits and protected recovery time.

The six moments in this resource

1. Several sounds at once

When this happens, the brain may have to hold, shift or regulate more than is visible from the outside.

2. Bright or flickering lights

This can add uncertainty or interrupt the mental thread that was already being managed.

3. Uncomfortable clothing

The effect is often cumulative: what looks small may arrive on top of an already busy nervous system.

4. Crowded, unpredictable spaces

Without an external support or clear next step, the demand can become harder to organise or tolerate.

5. Strong smells or food textures

Stress, fatigue, sensory load and previous experiences can reduce available capacity further.

6. No quiet recovery time

Recovery matters. Repeated demands without enough recovery can make the same situation harder later in the day.

NOTICE THE LOAD Look for the build-up, not only the final trigger.	**PAUSE** Create enough space to think before adding another demand.
REDUCE DEMANDS Simplify, externalise, clarify or postpone what can safely wait.	**RECOVER** Give the brain and body time to settle before expecting full capacity.

Practical ways to lower the load

The aim is not to force the difficulty away. It is to change the environment, timing or amount of information so that the task asks less of the person's executive and nervous-system capacity.

Make the invisible visible

Use written steps, timers, visual cues, labels, checklists or a single capture place rather than relying on memory alone.

Reduce simultaneous demands

One question, one instruction or one decision at a time can be easier to process than several competing demands.

Build transition space

Warnings, finishing points and a short buffer between activities reduce the cost of switching attention.

Protect recovery

Quiet time, food, drink, movement, sensory reduction and fewer social demands may restore capacity.

Use collaborative language

Ask what would make the next step easier. Support works better when it reduces shame rather than adding pressure.

Review patterns, not character

Look for repeatable conditions: time of day, noise, fatigue, ambiguity, interruptions, hunger, urgency or social demand.

For partners, family and supporters

Try not to interpret difficulty as laziness, rudeness or lack of care. Reduce repeated questioning when the person is overloaded, offer information in a usable form, and agree in advance how to signal that a pause is needed. Support can still include boundaries; the difference is that boundaries are clear and calm rather than shaming.

At work or in education

Helpful adjustments may include written instructions, quieter working areas, reduced distraction, predictable deadlines, task chunking, advance warning of changes, extra processing time and agreed ways to protect focused work. Adjustments should be individual rather than assumed.

My Sensory Overload Map

Use this page after an experience, or when you are calm enough to notice patterns. Short answers are enough.

Which senses are overloaded?

What are my early body signs?

What can I reduce now?

Where can I recover?

What helps me return safely?

A message from Maggie

“When something that looks small becomes the last straw, I want you to look underneath it before you judge yourself. Ask what your brain and body were already carrying. The goal is not to become better at pushing through. It is to notice your load earlier, make the next step more workable and give yourself enough recovery to begin again.”

Understanding, support and further reading

This resource is psychoeducation, not a diagnostic checklist. ADHD presentations vary widely, and the terms people use for lived experiences do not always map neatly onto formal diagnostic language. Difficulties can also overlap with autism, anxiety, depression, sleep problems, trauma, pain, medication effects and other health conditions.

Useful professional context

NICE guideline NG87 — Attention deficit hyperactivity disorder: diagnosis and management. NICE recommends a comprehensive approach to ADHD and recognises the importance of environmental modifications and support across everyday settings.

NHS — ADHD in adults. NHS information describes common difficulties with attention, organisation, forgetfulness and impulsivity and points to support and reasonable adjustments.

Book recommendations

- **Taking Charge of Adult ADHD** — Russell A. Barkley
- **How to ADHD** — Jessica McCabe
- **Smart but Stuck** — Thomas E. Brown

When to seek more support

If these difficulties are causing significant distress, affecting safety, work, education, relationships or daily care, consider speaking with a GP or appropriately qualified clinician. If anger, overwhelm or hopelessness creates an immediate risk of harm, seek urgent support rather than relying on a self-help resource.

Sources

National Institute for Health and Care Excellence (NICE), NG87: Attention deficit hyperactivity disorder: diagnosis and management.
NHS: ADHD in adults.
These sources provide professional context; the practical reflection exercises in this guide are original psychoeducational material from Space to Breathe Therapy.