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**Annotated Bibliography**

**“Attention Deficit Disorder.” Harvard Mental Health Letter Aug. 2000: 1-4.**

**MasterFILE Premier. UNC Undergraduate Lib., Chapel Hill, NC.**

**22 March 2004 <<http://web6.epnet.com/>>.**

This article was published by the Harvard Mental Health Letter. It looks at various aspects of ADD focusing on symptoms, ADD in childhood, the causes of ADD, diagnosing ADD, and the role of stimulants with the disorder. The article gives a brief overall summary of each category, and helps to provide a general understanding of the disability.

**Booth, Rebecca. “Attention Deficit Disorders.” ADDA Organization. 1998.**

**22 March 2004 <<http://add.org/content/abc/basic.htm>>.**

This organization is dedicated to the topic of ADD. On the site you can link to many issues involved with ADD. This particular part of the website also (like the previous source) gives an overview of main concerns involving the disability. It also addresses the importance of getting a thorough evaluation, what a thorough evaluation includes, treatment for ADD, other habits of teenagers with the disability, and addresses the issue that people do not outgrow ADD. This site helps to answer questions that are a little out of the ordinary.

**Brynes, Glenn and Watkins, Carol. “Adult Attention Deficit Disorder: Diagnosis,**

**Coping and Mastery.” Northern County Psychiatric Associates. 2001.**

**22 March 2004 <<http://www.ncpamd.com/adultadd.htm>>.**

The primary focus of this article is ADD in adults. It looks at the consequences of ADD not being diagnosed in child hood. It also reviews the symptoms of adults with ADD. The article offers advice for treatment. It is beneficial because it can be used to compare and contrast adult ADD and child hood ADD. It offers a different perspective of the disability.

**Jaksa, Peter. “Fact Sheet on Attention Deficit Hyperactivity Disorder.”**

**ADDA Organization. 1998. 22 March 2004**

**<<http://add.org/content/abc/factsheet.htm>>.**

This fact sheet is from the same website as the previous source. It provides facts about ADD which cover topics such as the difference between ADD and ADHD, a basic definition of ADD, what ADD is not a result of effective treatment for ADD. This source cleared up uncertainties about technical factors, such as making clear that there is no difference between ADD and ADHD.

**Fumento, Michael. “Trick Question.” New Republic Feb. 2003: 18-22.**

**Academic Search Elite. UNC Undergraduate Lib., Chapel Hill,**

**NC. 22 March 2004 <<http://web6.epnet.com>>.**

The author of this article, Michael Fumento, looks at the belief that ADD is not really a disorder. He makes his argument that the disability is in fact a disorder. He argues against other myths dealing with the idea that school systems are just trying to sedate uncooperative children; that parents are “doping” up their kids;

that Ritalin in the children's version of cocaine, etc. This article dismisses the random rumors one might hear on the street about ADD. It is helpful for discerning what is true, and what is not.

**Hallowell, Edward. Attention Deficit Disorder. London: Fourth Estate, 1996.**

This book is fully dedicated to Attention Deficit Disorder. Since it is a book, and not a website or an article, it is very helpful for explanation. It goes into detail about items that were not expanded upon in the articles or websites. Another very helpful aspect of this book is that it has an index, so the reader can choose which category he or she wants to learn about.

**Jenkinson, Michael and McGovern, Celeste. "Attention Deficit Made Me Do It."**

**Alberta Report/Newsmagazine April 1996: 32-34. Academic Search Elite.  
UNC Undergraduate Lib., Chapel Hill, NC. 22 March 2004  
<<http://web6.epnet.com>>.**

This article looks at how people often blame their actions on ADD. The article acknowledges the fact that critics do not think the disability exists, and they also think it gives individuals an excuse for their misbehavior. The rest of the article does not deny that ADD exists, but it does question the validity of it. This article is helpful because it plays the role of "Devil's Advocate." It gives an opposing viewpoint in the argument for ADD.

**Mate, Gabor. Scattered. England: Penguin Group, 1999.**

This is another book that focuses on Attention Deficit Disorder. However, this book does not just go in depth about the general issues involved with ADD, it looks at other less popular characteristics of ADD. It discusses a wide range of topics and gives more insight to the possible causes and results of ADD. This book provides interesting information, but it is very in depth, so the information may be too overwhelming for a short project

**Watkins, Carol. "Women and ADD." Northern County Psychiatric Associates.**

**1998. March 22, 2004 <[http://www.ncpamd.com/Women\\_with\\_ADD.htm](http://www.ncpamd.com/Women_with_ADD.htm)>.**

This article specifically discusses women who have Attention Deficit Disorder. It discusses the gender differences with the disability, and difficulties encountered specifically by women. The role of the woman as a mother and wife is mentioned, and the problems that may arise with these roles because of ADD. The article reviews possible treatments. Once again, this article gives a different perspective of the disability that is helpful when evaluating ADD as a whole.

**Wodrich, David. Attention-Deficit/Hyperactivity Disorder. Phoenix: Brookes Publishing Co, 2000.**

This book also focuses on ADD, but with a focal point on children. It emphasizes the different options for treatment in children. It talks about classroom techniques for children, special school services, school placement, and more general information. This book is helpful for parents who are seeking advice, and others who are curious about the different options for children. It also provides more general information about ADD.

### A Closer Look at Attention Deficit Disorder

Attention Deficit Disorder, which is more commonly known as ADD, is one of the most recognized disabilities. In a sense it has a bad reputation. The reasons for this vary, but one main belief is that ADD is used as an excuse. Critics say, “The reason the diagnosis is so widely embraced...is that it lets people blame their genetic makeup rather than their moral failings for their weaknesses and setbacks” (Jenkinson). There are other reasons why ADD is so popular; part of it has to do with the drugs that are used to treat the disorder. Three of the most common drugs used are Ritalin, Dexedrine, and Adderall. It has become a common fad among college students who do not have ADD to use these drugs as stimulants, or to use them to gain increased abilities for school work. Many people claim that ADD is over diagnosed, and that society is using too many drugs for problems that may not even exist. That is precisely the reason why Attention Deficit Disorder is a matter of interest. The disability is a topic of common debate, and it is an issue that is easily stereotyped. A greater knowledge and understanding of ADD will help to suppress the controversy that it causes.

This disability has two separate titles that are commonly misconstrued. The titles are ADD and ADHD. ADD, as previously mentioned, stands for Attention Deficit Disorder. ADHD stands for Attention Deficit Hyperactivity Disorder. Many people think that there is a difference between the two, but there is not. ADHD is a clinical term that is broken down into separate categories, and ADD is a term that is generally used to describe all types of the disorder. Both titles refer to the same disability (Jaksa).

The causes of ADD have been a topic of debate. In the past the disability was blamed on things such as sugar, lead, allergies, etc. However, it is currently believed that ADD is a product of brain malfunction. Genetics are also responsible. There is a 50% chance that a child will have ADD if one of their parents has it. There are other disorders that are also common in the biological family of a child with ADD. Those include alcoholism, antisocial personality, and mood disorders (“Attention”). There are many common myths about the causes of Attention Deficit Disorder. Those myths are part of the reason that the disability has such a bad reputation. A few common assumptions are that ADD is the result of family problems, bad teachers or schools, or too much TV. However, none of these assumptions have proven to be accurate (Jaksa). ADD is not brought on by one’s surroundings, but the surroundings of an individual can influence the extent of the problems experienced by an individual with the disorder. For example: If an individual with ADD is placed in a quiet room to do their work it may be beneficial to them, but if they are placed in a noisy environment to do their work it could be detrimental. Proper accommodations are crucial to the well being of an individual with ADD.

ADD is a difficult disability to diagnose because it has a wide range of different characteristics. The disability varies from person to person. That is part of the reason that some people claim it does not exist. One article that describes the disability says, “Everybody has some of the symptoms some of the time. However, individuals with ADD have more of these symptoms more of the time and to the point that it interferes with their ability to function normally in academic, work and social settings, and to their

potential”(Jaksa). That raises the question: What are the most common characteristics of an individual with ADD? Three very common traits of an individual with ADD are distractibility, impulsivity, and hyperactivity (Jaksa). However, just because an individual possesses all of those traits does not mean that he or she has ADD. There are other criteria that must be met, “The behaviors must appear before the age 7, and continue for at least 6 months...the behaviors must create a real handicap in at least two areas of a person’s life, such as school, home, work, or social settings”(Booth). If the characteristics are only present short term, or in a certain setting, then the problem could very possibly be something other than ADD. It is not uncommon for other disorders to be misdiagnosed as ADD, just as ADD can be perceived as other disorders. In order to properly diagnose the problem there are several different procedures that can be done. There is no set routine for diagnoses. It is often the patient’s decision about just how far they want to go with the testing. One source says, “Ideally, diagnosis should require a medical and psychiatric history and examination, tests of vision, hearing, and speech, ratings of the child’s behavior, and, most important, careful clinical interviews with parents, teachers, and the children themselves”(“Attention”). Many resources provide self evaluations. They are a good starting point in determining if the individual is a likely candidate for the disorder. The diagnosis of ADD is crucial for the well being of the individual. Once he or she understands the disorder, they will be able to take the proper steps to deal with it effectively.

Medications are commonly used to treat people with ADD. They can often produce life changing results. The two main categories of medications used to treat the

disorder is antidepressants and stimulants. It is challenging to find the right type of medication along with the accurate dosage for each person, so a time period of trial and error must be allotted (Hallowell, 235-7). Medication can produce a number of beneficial results, “it can help the individual to focus better, sustain effort over a longer period of time, reduce anxiety and frustration, reduce irritability and mood swings, increase efficiency by enhancing concentration as well as reducing time lost in distraction, and increase impulse control” (Hallowell, 237). However, medication can fall into the wrong hands. If overused, it can become addictive. Also, since the medication acts as a stimulant, it is very popular. It is in high demand among many who do not have ADD, and it is often used for purposes that it is not intended for. The distribution of drugs used to treat ADD is carefully regulated to try to prevent abuse.

Gender plays a role in Attention Deficit Disorder. There are societal expectations that are difficult for women who have the disability to live up to. From an early age girls may feel different from the rest of their peers. That feeling of “not fitting in” can be emotionally damaging (Watkins). The article, “Women and ADD” elaborates on this matter. It says, “Women are more likely to internalize: to blame themselves and become depressed...Feelings of guilt and shame can layer themselves in to a young woman’s personality as she grows up” (Watkins). As girls mature into women they often take on the role of mothers and caretakers, which involves the need for organization and structure. Those traits may seem overwhelming and extremely frustrating to a woman with ADD. Although, an understanding of the reasons underlying the distraught emotions will enable the woman cope with her difficulties. ADD does not have to be a

bad quality. The highly energetic traits of a woman with ADD can add a lot to a household if they are focused in a positive direction (Watkins). If women properly understand their disorder then they have the ability to use their personality traits in a positive way instead of resenting them.

After looking at many of the different aspects of ADD it is interesting to revert back to the belief held by those who claim that ADD does not really exist. Critics will argue that ADD is not a true disability because it does not have a set way in which it is identified. On the other hand, those who oppose that belief claim that the fact ADD responds so well to treatment is enough to prove its existence. What they are essentially saying is...Treatment would not be effective unless there were a problem in the first place (Fumento). It seems like people who do not understand the disorder would easily be able to write it off. However, for those who have the disability, it is a huge obstacle to overcome.

The target audience for this topic would be people who have ADD, and people who do not have a lot of knowledge about the topic. It would be useful to people who have ADD because it would enable them to have a better understanding of their disability. It could also provide them with ideas for further investigation. The issue would be helpful for those who do not have a great knowledge of the topic because it could help them to get a general idea of some of the issues that are involved with Attention Deficit Disorder. It could also help them to weed out general stereotypes involved with the disorder. Overall, this sight should be beneficial to any viewer because it provides informative material.

Works Cited

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### **Assessment**

In order to assess the effectiveness of this project I would do a few different things. I would start by trying to determine if this project had any influence on the audience. Maybe this could be arranged by distributing a before and after survey. I would especially want to know if it changed the beliefs of the skeptics of ADD, and if it was informative to those who actually have the disability. I would want to know if this project made questions arise for the audience. If so, I would want to determine if the questions were something I should have taken into consideration when writing the paper. I think that feedback from those who view my project would be the best assessment of effectiveness.