

GIRL ON FIRE

Hope is a Strategy

by Jeremy Didier, ACC, PCAC

Sophie Didier

I'M GOING TO BRAG ON MY DAUGHTER FOR A BIT. I'm entitled, so bear with me. We've recently had the honor of presenting together at several incredible ADHD conferences (the 2017 Annual International Conference on ADHD in Atlanta, a University of Alabama conference, and another here at home in Kansas City, Missouri) on the exciting topic of "The Underdiagnosis of Girls and Women with ADHD." As you might expect, we're uniquely qualified; we were both misdiagnosed with depression initially and diagnosed with ADHD a bit later in life. I was thirty-six when my then-four-year-old son and I were diagnosed; eight years later, my beautiful daughter Sophie was diagnosed at age fifteen.

She's seventeen now, and if you're doing the math, you may have noticed that even though Sophie's mother, two of her four brothers, and both an uncle and an aunt had been diagnosed with ADHD, Sophie herself wasn't diagnosed until two years ago (eight years after my diagnosis).

Why? The simple answer is *we missed it*. Like many, many girls with ADHD, Sophie figured out early on how to mimic what normal looked like. She obsessively organized things so she could find them easily. She is an excellent athlete, crazy-smart, and one of the older girls in her grade. She had lots of friends. When she struggled with low self-esteem it came out as anger, or it looked like age-appropriate hormone fluctuations. Not once did I think she might have ADHD. And in fairness, no one else did either.

Like so many girls with ADHD, it wasn't until the demands of her life exceeded her ability to make it all work that the wheels came off. When they did, let's just say it was an impressive few months. None of my kids do anything in a small way.

We're going to skip over the part where I beat myself up for missing my own daughter's ADHD and get to the bragging part, because Sophie has had a particularly rough time of it. In the past two years, following the ADHD diagnosis, she's also been diagnosed with bipolar disorder and Tourette syndrome. It's unusual but not unheard of for a sixteen-year-old to develop a previously undiagnosed tic (hers is eye blinking). And while it's not fun at any age to have a distracting tic, when you're a model and a varsity lacrosse player, your life changes in ways you've never even considered.

That the changes might involve traveling the nation, sharing her story, bravely meeting young girls with multiple diagnoses as well as also something that never occurred to me. But that's what she's doing. And before I get all mushy on you about how she inspires me every day, how she continues to persevere in the face of many, many South Park jokes, let's move on to why stories like Sophie's are critical to our girls' futures. Not the part about the



The Didier family

misdiagnosis. The part that came after.

You probably know that our story is not unique; girls and women with ADHD have been misdiagnosed or underdiagnosed for years. You probably also know that this is changing dramatically. Girls and women with ADHD are among the fastest-growing group of individuals to receive an ADHD diagnosis and to begin taking stimulant medication for symptom management. In January 2018, the CDC reported a 344% percent jump in women filling stimulant medication prescriptions over the past twelve years. The most dramatic increase was among women ages 25-29, a 700 percent jump in prescriptions. And I'm celebrating! To this I say *Bravo! It's about damn time.*

And here's why.

An inspiring mother and daughter: Sophie and Jeremy Didier



It's terrifying for parents to learn the risk factors and outcome predictions for girls with undiagnosed and untreated ADHD. They flat-out give me nightmares. Please don't misunderstand me. I am not saying we should stop talking about what could happen. Undiagnosed and untreated ADHD can and does destroy lives. We absolutely must continue to educate, spread awareness, and diagnose and treat everyone with ADHD. But we've also got to give people hope.

Every time Sophie and I give our presentation, we cover these "hairy-scary" stats. I tend to speed through these slides because I don't like hearing what could have happened to my daughter. In all honesty, I don't like for

her to hear those statistics either. You may be unaware of the "hairy scarys," so I'm going to list them here in teeny tiny print so we don't give them too much power:

unplanned pregnancy, self-harm, suicidal ideation, suicide attempts, substance abuse, eating disorders, poor work performance, chronic sense of shame and inadequacy, crippling low self-esteem, legal trouble, poor relationship skills, likely to be in abusive relationships, likely to be divorced, high school/college dropout, underachieving or underperforming in essentially every area of life.

Unfortunately, even with an accurate ADHD diagnosis, the risk remains significant. The most recent research following girls diagnosed with ADHD as children into adulthood shows that in some cases even with treatment, persistent ADHD can still wreak havoc on our young ladies' lives. (See the research by Stephen Hinshaw at UCSF for more detail on this.) You read that correctly, folks. Even with a diagnosis, even with treatment, our girls with ADHD may not make it. And that's not okay.

So, here's where the bragging on my daughter and my excitement about the increase in diagnoses all come together.

My daughter is not a statistic, a risk factor or an adverse outcome—and neither is yours. Sophie Didier is a success story. Your daughter is a success story in the making as well.

On paper, a teenage girl diagnosed with ADHD, bipolar disorder and Tourette syndrome would have an incredibly challenging life. And while Sophie's road may not be easy, she's already shown us that with treatment, education, and support, her trajectory looks pretty damn good.

The more we know, the better we do.

The more women and girls accurately diagnosed with ADHD and treated, the more success stories in the research. And more success stories means just one slide in my presentation with only a few hairy-scary stats. In regular font size.

So, for now, we treat ADHD with medication, therapy, skill development and management, social skills, emotional intelligence, exercise, protein, mindfulness, and whatever else helps our daughters to be their best selves.

The future is not set in stone. Our daughters are not statistics. If you're interested in sharing your daughter's diagnosis story and her successes, contact me at jeremy@impactadhd.com. 📧

Jeremy Didier, ACC, PCAC, is the founder and group director of ADHDKC, Kansas City's award-winning CHADD chapter. She's also a parent coach and the outreach coordinator for ImpactADHD. Jeremy is an adult with ADHD, a military wife, proud mom to five fabulous kids, and a lover of all things Star Wars and Star Trek.