



CHADD's ADHD Blog

CHADD.org/The-ADHD-Blog

Statement from CHADD Regarding ADHD-Related Claims Published in the Make America Healthy Again Report

As the nation's leading organization dedicated to children and adults with attention deficit hyperactivity disorder (ADHD), CHADD believes it is essential to respond when misleading or inaccurate information is released that may have an impact on public understanding and access to evidence-based ADHD care.

The recently released Make America Healthy Again ([MAHA](#)) report—issued by the MAHA Commission, established under Executive Order 14212—includes several concerning statements about ADHD—its diagnosis, treatment, and the condition itself. While CHADD supports any effort to improve the health of American children, the report's section on ADHD contains significant scientific inaccuracies and omissions that risk reinforcing stigma, fear, and misinformation about a well-established neurodevelopmental condition.

Recommended, evidence-based ADHD [treatment is multimodal](#)—combining behavioral strategies, educational supports, and, when appropriate, medication—to reduce impairment, strengthen coping skills, and improve overall quality of life across all settings (home, school, and community).

Setting the Record Straight

Stimulant medications. The MAHA report inaccurately claims that ADHD medications offer only short-term benefits and contribute to long-term harm. In reality, decades of peer-reviewed research, including longitudinal studies, show that stimulant medications, when properly prescribed and monitored, are safe, effective, and play a critical role in improving focus, emotional regulation, safety, and overall functioning for millions of children and adults living with ADHD.

Dependence and withdrawal. Contrary to the report's suggestion of widespread addiction risk, extensive clinical research consistently finds that stimulant medications prescribed to treat ADHD have a [low potential for misuse](#) when taken as directed, and rarely lead to physical dependence. Importantly, individuals with ADHD—particularly children—are [unlikely to misuse](#) stimulant medication when it is properly prescribed and monitored. In fact, effective ADHD treatment, especially when initiated in childhood, has been associated with a [reduced risk](#) of developing substance use disorders later in life. This finding directly challenges the narrative that these medications cause long-term harm and underscores the importance of access to evidence-based treatment.

Overdiagnosis narrative. The MAHA report promotes the misleading idea that ADHD is broadly over diagnosed and suggests that family structure or diet may play a causal role. In reality, ADHD is a well-established [neurodevelopmental](#) condition with strong biological and genetic foundations. It is diagnosed based on consistent, impairing patterns of behavior assessed using rigorous clinical criteria—not by family dynamics or dietary habits. While the report presents rising diagnosis rates as a serious concern for American children, it conflates adult and child data in a way that overstates the trend in youth. In fact, rates of ADHD diagnosis in children have remained relatively stable in recent years. The overall increase is largely due to improved recognition of ADHD across the lifespan—particularly in adults who were previously undiagnosed—not a surge in inappropriate labeling of children. Framing the increase as overdiagnosis misrepresents the data and distracts from the real need: expanding access to timely, evidence-based care for all individuals with ADHD.

The role of family and lifestyle factors. The MAHA report suggests that ADHD may be caused by parenting style, family structure, or lifestyle choices such as irregular family meals. While positive routines like family meals and supportive environments are beneficial for all children, they are not substitutes for evidence-based care for children and adults with ADHD. ADHD is not caused by parenting style or household structure. Minimizing the seriousness of ADHD by attributing it to family dynamics undermines decades of scientific research, places unfair blame on caregivers, and risks delaying or denying appropriate treatment. Left untreated, ADHD is associated with a [reduction in life expectancy](#) by as much as thirteen years. Families need support, not stigma—and children with ADHD deserve access to care and treatment that reflect the best of what science and compassion can offer.

Our Commitment to Science and Support

CHADD remains committed to advocating for evidence-based approaches to ADHD care and the rights of individuals and families affected by it. We urge policymakers, professionals, and the public to rely on trusted scientific sources—including the American Academy of Pediatrics (AAP), the American Psychiatric Association (APA), the American Psychological Association (APA), the American Academy of Child and Adolescent Psychiatry (AACAP), and the American Professional Society of ADHD and Related Disorders (APSARD), Children and Adults with Attention Deficit Hyperactivity Disorder (CHADD), and the US Centers for Disease Control and Prevention (CDC)—when making determinations about ADHD treatment and policy.

About CHADD

CHADD (Children and Adults with Attention Deficit Hyperactivity Disorder) is the leading nonprofit organization serving individuals with ADHD and those who care for them. Our mission is to empower people affected by ADHD by providing evidence-based information, supporting individuals and professionals, and advocating for equity, inclusion, and universal rights. We believe in a world that recognizes, incorporates, and celebrates the strengths of those with ADHD.

To learn more, find support, or access educational resources, visit [CHADD.org](https://chadd.org).

Online version of this blog: [Statement from CHADD Regarding ADHD-Related Claims Published in the Make America Healthy Again Report](#). June 13, 2025