

High School Girls with AD/HD  
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(This article is the fourth and last in a series about girls with AD/HD from preschool through high school.

It seems as if nature and society have conspired to pack the high-school years with so many daunting challenges that even the most adept and well-adjusted adolescent feels overloaded. When AD/HD is added to the mix, high school becomes even more challenging, and may even become a destructive experience.

## Diagnosis of AD/HD in teenage girls

The accurate diagnosis and appropriate treatment of girls with AD/HD is acutely important in these challenging years. However, the majority of teenage girls with AD/HD continue to go undiagnosed or misdiagnosed for a number of reasons. For instance, most girls with AD/HD behave very differently than boys, falling into the much harder to diagnose category of "primarily inattentive type." They typically work harder to hide their academic difficulties and to conform to teacher expectations; and they are often misdiagnosed as anxious and/or depressed. Girls who are particularly bright are able to compensate for their AD/HD much longer, and are therefore the most likely candidates for a late diagnosis.

The fact that a girl's AD/HD symptoms may not have been apparent in early years renders her AD/HD no less real when it rears its head in adolescence, a time when the demands for planning, organization, recall and focus intensify. There have been numerous discussions of the need for gender-based diagnostic criteria for AD/HD, but for now, professionals continue to rely on criteria that serve much better to identify boys than girls. Parents who may suspect that their teenage daughter may have AD/HD can refer to the questions at the end of this article. If your daughter answers "yes" to many of these questions, a careful assessment for AD/HD may be called for.

## Troubling challenges faced by teenage girls with AD/HD

First, let's consider some of the most worrisome issues faced by teenage girls with AD/HD. Then, we'll discuss ways that parents can support and protect their daughters as they traverse their turbulent teens.

### Social pressures

Social deficits associated with AD/HD often have their greatest impact during adolescence as girls begin to separate from family and move into the all-important social milieu of high school. The impact of feeling "different" often peaks in adolescence when social life takes on an intensified importance. Family support and acceptance is critical, but can never entirely counteract the damage that can be done to teenagers who feel rejected by their peer group. The very negative self-image that girls with AD/HD may develop during high school can haunt them for years afterwards.

### Self-doubts, low self-esteem

While teenage years are full of self-doubts for most girls, the special challenges of AD/HD greatly intensify those feelings. Looking at some of the pressures and expectations often placed on teenage girls, it is easy to see how they can come into direct conflict with AD/HD traits or tendencies. For example, girls are typically encouraged to be neat, "feminine" (controlled and passive), carefully groomed (in order to be attractive to the opposite sex), sensitive to the feelings of others and compliant with adults. A teenage girl with AD/HD may respond anxiously, even obsessively, to the expectation that she be well groomed and fashionably dressed, but yet be unable to organize her room or her life well enough to have clean, color-coordinated clothing available on a given school morning.

### Emotional reactivity/Hormonal Fluctuations

The typical hyper-reactivity of AD/HD tends to be intensified in adolescence as hormonal fluctuations complicate and escalate reactivity. As a result, the self-doubts and competitiveness so common among teenage girls are often more intense for girls with AD/HD. Their hurt feelings can escalate more rapidly into impulsive remarks or over reactions. Once the drama is over, she may be ready to forgive and forget. The friends and family who are stung by her comments, however, often become intolerant of her outbursts.

### Depression

Social pressures are intense during adolescence, with enormous energy expended on peer analysis: watching, imitating, relating, comparing and conforming. In addition to this exhausting list, girls with AD/HD often feel despair. Depression, so common among women with AD/HD, often begins during the pressures of teen years. Such depression is much easier to recognize, and many girls with AD/HD find themselves treated for depression, while their AD/HD goes unrecognized.

### Growing Pressures to "mature"

Pressures to grow up and become responsible increase during adolescence.

Sometimes parental expectations for their daughters to demonstrate "maturity" can come into direct conflict with the neuro-cognitive patterns associated with AD/HD. This doesn't mean that our daughters can't become "mature," but it does mean that maturity needs to be viewed through an AD/HD lens.

### High school and AD/HD - not a good "fit"

Academic pressures seem to reach a crescendo in high school, as well. High school is designed in a way that seems almost diabolically structured to be AD/HD-unfriendly. The day starts too early and lasts too long, with demands for focus and concentration that far exceed the capacity of most students, even those without AD/HD. In addition, any students with AD/HD are placed in the position of being forced to read and study about subjects that hold little or no interest for them - something they will be strongly advised against doing once they are graduated from high school.

### Sexual risks

Teenage girls with AD/HD may be at greater risk for pregnancy than are other teenage girls (Arnold, 1996). This may be true for a number of reasons. Teenage girls who struggle with low self-esteem, as do many girls with AD/HD, often seek affirmation through the sexual attentions of boys in an effort to compensate for

feelings of inadequacy in other areas of their life. Furthermore, due to difficulties with impulse control, poor planning ability and inconsistency, many of these girls are prone to have unprotected sex, use birth control inconsistently and/or have multiple partners.

#### Risks associated with driving

Studies of teens with AD/HD have shown that, in general, they have a greater likelihood of being involved in traffic accidents. Most studies have only examined the driving behavior of boys with AD/HD, but one study in New Zealand (Nada-Raja et al, 1997) studied both boys and girls and found that girls with attentional difficulties were at high risk for both traffic crashes and driving offenses.

#### Risk for substance abuse and addictive behaviors

The risk for substance abuse and other addictive behaviors (cigarette smoking, eating disorders) typically begins in the middle school years and intensifies during high school. A recent study (Biederman et al., 1999) reports that 14 percent of girls with AD/HD have a substance use disorder, and one in five smoked cigarettes. How Can Parents and Professionals Help Teenage Girls with AD/HD?

#### Managing the emotional roller coaster: Medication and Psychotherapy

It is critical that parents and professionals recognize that the intensity so often seen in teenage girls with AD/HD has a neurological basis, and that reactions tend to become even more extreme during times of stress, fatigue, hunger or PMS. Both the teenage girl and her parents need to recognize the added vulnerability that she has, and begin to identify and manage the potential stresses that can worsen her reactions. Both medication and psychotherapy, used in conjunction, seem to be the most effective treatment program. Medication regimens often need to address a complex set of issues, including anxiety and/or depression, rather than AD/HD alone. Because peer issues and issues of self-worth are so paramount among most teenage girls with AD/HD, psychotherapy needs to be designed to directly address these. Often, group psychotherapy can be tremendously supportive and effective for teenage girls with AD/HD. Such a group might be conducted at school by a school counselor, or might be found in a private clinic setting.

#### Treating Pre-Menstrual Syndrome (PMS)

Tremendous hormonal changes occur, and the hormonal fluctuations of the menstrual cycle intensify and complicate the confusion and unpredictability that are part and parcel of growing up with AD/HD. While Pre-Menstrual Syndrome (PMS) may be an annoying period of irritability, fatigue or cramping for many girls, those with AD/HD may feel such an increase in the intensity of their emotional reactions, irritability and low frustration tolerance, that they require active intervention. Physicians, therapists and others who treat adolescent girls with AD/HD should be aware of this added vulnerability, and take steps to keep up-to-date on research on PMS and new approaches for minimizing its impact. The use of anti-depressant medication to combat the effects of PMS is fairly well-known, but recent research has suggested that there are a number of ways to reduce PMS symptoms in the more vulnerable AD/HD population.

#### Reducing the risk of anxiety and depression

Emotions can tip quickly when environmental stresses suddenly overwhelm the teenage girl's already distressed system. An accidental pregnancy, the breakup of a

relationship, a failed exam, a rejection letter from a college - any of these might be enough to push her into levels of anxiety or depression that may require both medication and psychotherapy. Parents and professionals need to be watchful during the teenage years to assess whether the "normal" emotional roller coaster for girls with AD/HD has careened over the edge into a level of anxiety or depression that requires treatment in tandem with her treatment for AD/HD. Both anxiety and depression are common among teenage girls with AD/HD and can be successfully treated along with the AD/HD. The experienced physician will be aware that stimulant medication for AD/HD may tend to increase anxiety, and should prescribe appropriate anti-anxiety medication accordingly.

#### Reducing Sexual Risks

What can parents and professionals do to help reduce sexual risks for girls with AD/HD? Support groups for girls with AD/HD can help them feel more accepted and less alone without them having to seek male sexual attention. Helping them become involved in structured, constructive activities will give them other outlets to develop self-esteem. Recent studies confirm what common sense tells us: adolescents who are kept busy in extracurricular activities, sports, church groups, and so on are less likely to get in trouble during high school. In addition, an open, supportive relationship with their parents gives them somewhere to turn for advice if they do become sexually active - either to help them make a wise choice of birth control or to help make the best decision if they do accidentally become pregnant.

#### Reducing risks associated between AD/HD and driving

The important message for parents is that their daughters with AD/HD may need more practice in driving so that driving skills become more automatic and require less concentrated effort and attention. Secondly, since attention problems seem to be strongly implicated in traffic accidents, girls (and boys) with AD/HD should take care to drive in less distracting situations during their first years as a driver. They should avoid heavy traffic, social distractions, such as excited, talkative peers, and maintain more conscious awareness of their need to "keep their eyes on the road." Even in adulthood, individuals with AD/HD may find themselves distracted by conversation while driving. For less experienced drivers, such a distraction could be all it takes to trigger a chain reaction leading to an accident. Situations that may lead to impulsive reactions should be discussed in advance and avoided, if possible. Such situations might include driving with peers who have been drinking and who may encourage a teenage girl to take a risk "for fun." Parents who have reason to suspect that their daughter engages in alcohol or drug abuse should carefully consider whether it is safe to allow their daughter to begin driving independently as early as her peers.

#### Developing skills for independent living

Parents can help their daughters gain skills for autonomy and independence by remaining patient and recognizing that the process may take their daughter longer than the average adolescent. Advance practice can be helpful. For example:

If she hopes to go away from home to college, she may benefit greatly by attending a school that offers an extended orientation period in the summer before freshman year for students who have special needs.

It may be very helpful to open a checking account during high school, where she can deposit any cash gifts or money earned from summer jobs. In this fashion, she

has a longer period of time to learn the habit of recording checks and keeping an accurate account balance.

Learning to handle charge cards responsibly is crucial to adult life, but can be very difficult for any teen. Obtaining a card with a very low limit - \$200-\$300 - can provide experience without opening the door to disaster.

Providing her with a clothing allowance during high school also can give her experience in managing money, setting priorities, and making decisions within defined limits.

Learning to use a day planner is one of the most critical skills your daughter needs to master as she leaves home for college or the working world. A day planner is not only for recording appointments, but for recording all crucial information - phone numbers, addresses, shopping lists, directions and so on. By developing the habit of writing all-important information in one place, she will have a skill that is very valuable in managing AD/HD tendencies toward forgetfulness and disorganization.

The simple act of setting an alarm clock and depending upon oneself to get up on time in the morning is often very challenging for girls with AD/HD. This is a skill best practiced at home, where parents can remain a back-up system, rather than waiting until she is away at college or in her first apartment.

All students face increasing, multiple demands as they enter their high school years. Multiple teachers and assignments, extra-curricular activities, part-time jobs, increased responsibilities to help at home, learning to drive, beginning to date, the list is long and daunting. Girls with AD/HD will need help in organizing and managing these multiple demands, and in making AD/HD-friendly choices so that they are not juggling more than they can manage. Working with a coach who specializes in AD/HD can often be very helpful for girls as they learn to organize and prioritize.

## Learning to recognize and to embrace her strengths

Girls who have developed ability or talent in some area seem to be much better inoculated against clouds of self-defeating gloom. One of the most constructive approaches in helping a girl with AD/HD through her high school years is to actively help her develop and recognize areas of competence and talent. The more that girls with AD/HD are in touch with their areas of competence, the less vulnerable they will be to the criticisms and frustrations that so often accompany AD/HD. There are many arenas in which to develop a sense of competence and ability: part-time work after school, volunteer work, helping to build props for the school play, participating in a community beautification project, learning to ride horseback - many such activities can be enormously beneficial in helping her to build a sense of self-confidence.

## Learning assertiveness and self-advocacy

The high-school years are the time in which a girl needs to develop the self-advocacy skills needed for more independent life beyond high school, whether in an educational setting or in the workforce. She will need to be able to express her needs confidently and convincingly to professors or employers who are ill-informed about AD/HD. She

needs validation of her right to express her opinion, and help in learning to express it in a constructive, effective manner.

## The benefits of structure

As with girls of all ages with AD/HD, teenage girls need support, encouragement and structure. Because teenage girls are trying to develop more independence, sometimes it is more helpful when someone other than her parents provides structure. This could be a therapist, coach or school guidance counselor. These are the years when the teenage girl needs to take on the notion that learning to be on time, developing tools to improve her organization, setting priorities rather than staying in a reactive mode, are for her own benefit, not something imposed by parents.

## College placement counseling

As the teenage girl with AD/HD approaches her junior year of high school, the assistance of a specialized college placement counselor can be especially useful to help her and her parents sort through the maze of possibilities. Not only are there a huge variety of educational settings to choose from, but there also is a wide range in the degree of support available for students with AD/HD.

The most critical element in the decision-making process is to accurately assess her level of maturity, her readiness to leave the structure and security of home, her need for academic support, and her preferences regarding the atmosphere, geographic location, and courses of study offered by various schools.

This process should not be left for the teenage girl with AD/HD to address alone, but she should be an active participant, expressing her preferences and desires and taking part in visiting, interviewing and considering her options. Most teens with AD/HD need a high level of support when faced with the formidable task of writing college essays, asking for letters of recommendation and completing application forms. Because tension often runs high between parents and teens around this process, primary support is sometimes best provided by a coach or tutor.

## Conclusion

The high-school years are among the most challenging years of life for an individual with AD/HD, and especially for girls with AD/HD. To bridge the challenges of high school, they need support from peers, parents and schools, combined with appropriate medical treatment, depending on their particular needs and issues. With the right supports and interventions, these girls can make the crucial transition from the chaos and self-doubt of adolescence to a sense of growing strength, efficacy and competence as they enter their young adult years.

This article is based on information contained in the recently published book, *Understanding Girls with AD/HD* by Kathleen Nadeau, Ph.D., Ellen Littman, Ph.D. and Patricia Quinn, M.D., available through Advantage Books.

#### Self-report questionnaire for teenage girls

1. It's very hard for me to keep track of homework assignments and due dates.
2. No matter how hard I try to be on time, I am usually late.
3. I have trouble getting to sleep at night.
4. I have trouble getting up in the morning.
5. I jump from one topic to another in conversation.
6. I interrupt people, even though I try not to.
7. It's very hard for me to listen in class without my mind wandering.
8. I have difficulty concentrating when I read unless it's something I'm really interested in.
9. I usually do assignments at the last minute, or turn assignments in late.
10. My room is very messy.
11. My friends say I'm "hyper."
12. My friends call me "spacey."
13. I forget to do things my parents ask me to do.
14. I always seem to be losing something.
15. My parents and teachers tell me I need to try harder in school.
16. My parents say I'm irresponsible.
17. Bright lights bother me a lot.
18. I am distracted easily by sounds or by things I see.
19. My friends say I overreact sometimes.

20. I feel anxious pretty often.
21. Sometimes I feel moody and depressed, even for no reason.
22. My moods and emotions are much more intense in the week before my period.
23. I am quick to feel frustrated.
24. It's hard for me to be patient.
25. I feel different from most girls my age.
26. I wish my parents understood how hard high school is for me.
27. I feel mentally exhausted when I get home from school.
28. I drink a lot of cokes or coffee to stay alert.
29. I lose control and start yelling or screaming when I'm angry or frustrated.
30. It's so hard for me to stay organized.
31. School feels overwhelming sometimes.
32. I have a great deal of trouble completing papers and projects on time.
33. The only way I can really study for a test is to stay up very late the night before.
34. I sometimes eat to calm myself down.
35. It seems like my parents criticize me a lot.
36. I feel much calmer when I have a physical outlet like dancing, soccer, horseback riding, or other sports.
37. I always seem to do or say the wrong thing when I'm around my classmates.
38. I'm worried about the future.
39. I have no idea what I want to be when I get out of school.

This questionnaire should not be considered a diagnostic tool, but rather as a structured self-inquiry for teenage girls when there is a concern about the

possibility of AD/HD. When a girl answers "yes" to a majority of these questions, a professional evaluation may be advisable.