

FOUR WOMEN'S PERCEPTIONS OF LIVING A LIFETIME WITH ADHD

by

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ABSTRACT

This project is written as a reflection of how ‘we’ think, ‘we’ being adults with Attention Deficit Hyperactivity Disorder (ADHD). Although the project follows conventional methodology in terms of data collection and research, the presentation of my data does not follow conventional style. This style is in tribute to my main audience, ADHDers themselves and the people who know them well, as ADHDers are far from conventional. ADHD is a genuine disorder, both physiologically and psychologically, that is not biased towards age, gender, or race. The aims of the project were to create an interesting resource that: addresses the reality of female ADHD, provides an empathetic point of view for future students struggling with similar issues, and gives a voice to my participants. Through this project, you are introduced to four adult women living with and learning about ADHD. Candidates participated in an individual retrospective 1-hour interview and a follow-up focus group session. Interview data were then compiled into a series of biographical and autoethnographical stories: their stories and ‘our’ story. In writing these stories, I gained an understanding into the common experience. I found that the four women share common struggles and common landmarks along the path of understanding their own ADHD and finding success with it. Four common themes emerge throughout their stories that lead to a metamorphosis. Starting with diagnosis, they are able to identify strengths and integrate them into their passions. Through this process, a personal definition of success emerges. The integration of self-understanding, innate strengths, and personal passions brings the women onto the road of personally-defined success, the course of which is guided by interests and abilities. Although I am not yet ready to create my own version of success, I now finally have insight as to where to find it as the meaning of success is my definition to make.

ACKNOWLEDGEMENTS

So here lies the beginning of the end. The beginning for you as you glance through this work and the end for me as I write these last few words. Working through this Master's project felt like a very long, lost, and lonely journey. It has definitely given me an appreciation for what the term 'writer's block' might mean and how much time and energy it actually takes to think about things. Spending so much time in one's own head can take a person to the craziest of places!

But, as I step out of my cave and slowly puzzle together the pieces of this experience, I realize that, although it was definitely a long journey, I was never lost nor alone at any step of the way. There are many amazing and incredible people who stuck it through with me the whole way without my even realizing it. These people knew me better than I know myself, understand me better than I understand myself, and forgive me better than I ever forgive myself.

John Freeman is a man who saw my potential before I even walked through McArthur's doors and continued to see my potential as I was ready to leave again and again and again. He always pushed but never so hard that he'd push me away and he'd always encourage but never in a way that was exaggerated, fake, or insincere. I know that every word from John is true so when he tells me I can do something, I find it easier to believe him than to believe myself. Larry O'Farrell, although never having met me, also sees this potential that I'm only now only starting to consider myself for maybe the first time.

Ben Seewald: I don't think that I can justly and adequately express my gratitude to you. I can undoubtedly say that I would not have completed this project without your unwavering support and persistent faith. I still don't see and probably never will see the world the way you do. It amazes and inspires me, as you do so with all the people you encounter. You have an incredible gift and capacity for bringing out the best in people. This is truly your strength. I could write endless thank-yous and that still it would not be enough. Know that you are AWESOME!

Graduate colleagues and loving friends & family ... I can't believe you people have and continue to stick by me through both my brightest days and my darkest hours. It is these times in particular that reveal and reinforce who the people are that care about you the most. Thank you for your continued friendship.

And finally, I would like to acknowledge my participants for, without their trust, and honesty this project would not have been possible. It is, after all, their words.

For the people who love me anyways.
And for those who believe in me even when I do not.

You give me more than I can ever give back.

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PROLOGUE: MEET ANNABELLE

Who is Annabelle? Annabelle is the result of years of not knowing who you are and what you're about and figuring out how to cope. She is a character created based on the stories of four fantastic women speaking to their lived experience of a lifetime with, until lately, unidentified Attention Deficit Hyperactivity Disorder (ADHD). It is the core story they share. Despite adversity, however, these women have all exhibited remarkable resilience and the drive to move forward and become, by all social standards, quite successful. The core story presented here is one of great success despite challenges, one of personal acceptance despite continued struggle, and one of great hope to continue growing, learning, and succeeding.

We've all experienced blunders and frustrations at key points in our lives. We've all had ups and all had downs. In essence, we have all experienced our own Annabelle, chronically or not. It is these 'Annabelle moments' that I ask you to recall and relate to.

What You See Isn't Always What You Get

At school Annabelle can be that quiet little girl in the corner we have all encountered and some of us even have known. To some she's almost too quiet and shy. She's the dreamer who is always looking out the window. Or she can be staring straight at you but her eyes tell another story of her being somewhere else. She's one who lives in her own little world. To others, however, Annabelle is more than just this quiet spaced-out kid. She can be an incessant chatterbox with a reputation of talking too much and saying things that are inappropriate to the context. Her body can move as quickly as her mouth, be it shifting, tapping, or writing quickly (and often illegibly). Despite these two presentations the story is the same; she never really caused a lot of trouble and did relatively okay in school.

Regardless of being quiet or rambunctious, these students are very similar. They learn differently. Everyone learns differently but the issue is that these students ideally learn in a way not typically engendered by the school system. She's what many call a 'big

picture' thinker, a very visual thinker, who needs to see the whole thing to understand it. She is typically very hands-on and experiential in her process. Desks, unfortunately, do not lead to a lot of novel experiences.

At work she's that scatter-brained employee who always runs late to meetings. Her desk is either pristine, almost obsessive, or pandemic, almost explosive. She forgets the time, the dates, and the deadline. She loses files and reports when you need them and finds the ones that you needed before. Annabelle farts around the office unproductively for three days and then has to work 72 hours straight to make up for it. She pulls it off, she gets the job done, but to the expense of everyone's stress and her own health.

When she's interested in what she's doing, Annabelle's a tyrant. But she's otherwise slow to start and never quite finishes. We see her as lazy. What we don't recognize is that, cognitively, she needs to be interested in what she's doing if she's ever going to learn and to succeed. This is where she gets into a lot of trouble because of the resulting inconsistent performance. We all need to do things we don't like, so why should Annabelle be the exception? She's told that she's spoiled, stubborn, or defiant and, you know what, she believes it.

What we see externally is obvious, annoying, easy to catch, and also easy to dismiss. There are so many other students who chronically procrastinate. There are so many other students with appalling work habits. Their work is messy, their lockers are messy, and their desk is messy. Like them, Annabelle is always losing and forgetting things. She's disorganized but that's her fault. Annabelle is super sensitive, but that's shrugged off as a girl thing, at that time of the month. We all have our challenges; she just needs to buck up and get her act together. No sympathy. Often blame.

What we don't see is the part that's most damaged; it's the self, her own core beliefs. The damage results from this consistent blame, both external and internal. Blame for being messy. Blame for being late, again. Blame for forgetting that thing. Blame for missing that instruction, again. With every reoccurring experience, with every registered fault, a message gets more deeply etched into her psyche: you are lazy, you are crazy, you are stupid.

I ask you for a brief moment to set your judgment aside and remember a time that you've felt the same way. You messed up that thing, you disappointed others, and you got mad at yourself. Now imagine: that feeling or experience never goes away. It's chronic, a whispered reminder that comes with everything that you do, often the wrong things that you do. That's Annabelle talking.

Towards a New Identity and Self-Understanding

For Annabelle, life is a series of hiccups, as she bumbles along from one experience to the next. Within these experiences, there are some great adventures and some serious blunders. There are many different jobs, many relationships, many different homes, and many different journeys.

Annabelle is wild, is fun, is crazy, and is unreliable. To people who know her she's just this person who does kooky things but seems to be reasonably functional. Fun to be around, less fun to be with. To herself, those kooky things are normal for her, but not normal to anyone else. She gets the sense that she's different from most and does whatever she can to keep up. In the school context, the coping strategies seem to work just fine - be it burning the midnight oil, seeking help, or making lucky guesses - as she makes her way along.

She got into college, successfully scraped her way through, and somehow got out on the other side with diploma in hand. The challenge here is choice. School is generally a very structured place with clear expectations and a well-defined path. The choices, compared to 'real-life', are fairly minimal. While you have to choose your courses and you have to pick your major, once that commitment is made, the rest of the choices are made for you. Although college presents its own set of challenges and is far less structured than high school, the experience is still fairly central with your circle of influence small. Your primary role in life is student. But, as Annabelle grows up, so does the level of responsibility that she has to take on.

Leaving the well-structured institutional walls, Annabelle is a successfully educated woman and contributing member of the workforce. By all conventional terms,

she's a success. Annabelle plays a number of roles in her life as both her circle of influence and level of responsibility increase. She's no longer just a daughter, a sister, or a student. Now she takes on the roles of a wife, a mother, a friend, an employee, a taxpayer, a home owner, a voter, a volunteer, and an emergency contact. The game of life has changed drastically, and those early coping strategies that worked through school only now start falling apart through life.

Life changes from a series of hiccups to a series of repeated frustrations. Those things that are cute as a child and forgivable as a student become unacceptable as an adult. Annabelle lives in a world of dissonance between thought and action; the intentions are great but never the outcomes. The person she wants to be and knows she can be is not what is coming out on the outside. The eyes she sees the world with are looking through the lens of disappointment and failure, and a lifetime worth of patterned reactions that become part of her own character.

A life filled with disappointment is not a life worth living. How would you react to a painted history of hiccups, disappointments, failures, and frustrations? Depression, depressive tendencies, anxiety, negative self-concept, and low self-esteem are legitimate internalizations that result. So, in this story, Annabelle hits a wall. She bumbles along in life from one experience to the next until she finds that she's come to a stop and doesn't know which way to go. But, this is not supposed to be a sad story. In this story, Annabelle is very lucky because she's not alone. Annabelle is lucky because she finds help and learns to look at life through a different lens altogether.

The turning point for Annabelle was the diagnosis. Through the processes of internalization and acceptance, she was gradually able to shift her perspective from one of shame and blame to one of understanding and empowerment. Annabelle was lucky to find the right path to self-discovery. Female ADHD is still a very new and misunderstood concept both clinically and publicly. Despite being a well-researched area, ADHD, along with other cognitive differences, is still in infantile stages of understanding. Lucky for Annabelle, there is access to knowledge that can take her down the path to self-understanding, self-forgiveness, and self-healing. Through the diagnosis she has learned that she is not a bad person and can slowly work on changing that belief. She has

inherent weaknesses and fabulous strengths just like everyone else. The diagnosis has simply allowed her to accept her limitations so that she can start to recognize and promote her strengths.

Annabelle has come to learn that she indeed has an amazing mind and an amazing talent. Her life experiences, including her life blunders, have nurtured and matured the creative part of her mind. Many success stories speak of a learned resourcefulness and resilience as a result of unique life experiences. They also speak of possessing a gift of creativity, a different kind of genius, and often attribute this hidden talent to their own successes. Despite the label, the ADHD mind can be focused at times; the trick to grasping its attention is to find its passion.

The core message of these stories seems to hone in on one thing: follow your bliss. Is this conclusion not obvious? We are raised and live in a world where the end goal is to conquer. We are encouraged to keep fighting and keep working on conquering the challenge. We learn to focus on and remediate deficits. During that process, however, we often forget to acknowledge and nurture innate gifts and talents. We forget that these qualities also need to be nurtured to turn them into strengths. These women have been lucky to find and to focus on their strengths and interests. Happiness comes when you can figure out how to make that your life. The key to success is seeing the ADHD mind as a gift and harnessing it. It's the tool that will get you where you want to be.

INTRODUCTION

I wrote this project as a reflection of how I think: in pieces, scattered, lots of changes, plenty of interruptions, and with a big picture in mind but lacking the fine details. This is how I think, this is how *we* think. Who are we? We are successful adult women discovering our Attention Deficit Hyperactivity Disorder (ADHD).

ADHD is a disorder that is frequently misdiagnosed or missed altogether among females, largely due to false societal beliefs and biases (Biederman et al., 2002; Derks, Hudziak, & Boomsma, 2007; Gershon, 2002). ADHD is a genuine disorder, both physiologically and psychologically, that is not biased towards age, gender, or race (Levy, Hay, & Bennett, 2006; Nadeau, Littman, & Quinn, 1999). There remains, however, a societal belief that ADHD is predominantly a male disorder, potentially leaving a rather large population of missed or misdiagnosed individuals. In the Diagnostic and Statistical Manual for Mental Disorders, fourth edition (DSM-IV), ADHD is categorized with three subtypes: hyperactive/impulsive, inattention, and combined (American Psychiatric Association [APA], 1994). Although more recent papers address the idea of looking at ADHD as existing on a spectrum of severity (Thorell & Rydell, 2008), current diagnostic procedures still tend to diagnose ADHD through behavioural checklists with definitive criteria that tend to lean towards the young male presentation of the disorder (Arnold, 1996; Nadeau et al., 1999; Wasserstein, 2005). Current diagnostic tools do not cater to the nuances of gender differences, age, exceptionalities, or comorbid issues. Missed diagnosis and misdiagnosis run the risk of long-term effects leading to a critical need for early diagnosis (Arnold, 1996).

This project introduces the stories of four adult women living with and learning about ADHD. It starts with Annabelle's story, which is a culmination of all our stories. In creating this resource, I solicited the voluntary participation of four adult females who have been diagnosed formally with ADHD. Parameters that my participants were limited to include: being female, receiving a formal ADHD diagnosis after high school, and completion of post-secondary education. Participants were enlisted using a snowball sampling strategy (Patton, 2002), primarily through friends and acquaintances. All

candidates were contacted after prior permission was given to these friends and acquaintances who then passed the candidate's contact information to me. Alternatively, they simply contacted me directly. This type of sampling was an appropriate method of enlistment for this project as a fair amount of trust is required between researcher and participant in collecting purposeful in-depth qualitative data from a specific pool of individuals (Patton, 2002).

The four recruited candidates were the first four women who adhered to the above parameters and who were willing to participate in both an individual interview and follow-up focus group. Both sessions were approximately 1 hour in length and were retrospective in nature. Participants were asked open-ended questions geared towards their experiences of transition and change in their careers and passion towards their careers (see Appendices A and B). Questions pertaining to life experiences and successes were developed in the context of positive psychology (Seligman & Csikszentmihalyi, 2000), as I am interested in highlighting the positive experiences that contributed to coping and success for these women. Interviews and focus groups were audio-recorded and transcribed verbatim, using a critical friend who attended the focus group along with her notes to verify interpretations of chosen words, postures, and gestures. Session transcripts were also presented to the participants to verify what was recorded and to allow the opportunity to remove any information they did not want to include.

Interview data were coded using an inductive analytical approach, because it allows the observer to become immersed in a group (Patton, 2002). Focus groups, interviews, and an intensive review of literature provided a three-tiered approach to data collection and analysis. Trustworthiness was ensured through consultation between the primary researcher and other friends, faculty, and staff members at Queen's University. Individuals with limited interest in ADHD or other cognitive differences provided a broader perspective on the issue.

The formality stops here, with the data analysis. As people with ADHD are very unconventional, I chose to write this project in a very unconventional manner. I wrote this project as a series of stories: their stories and our story. This approach to research is known as an autoethnography (Patton, 2002). Using interview data, the stories of my

participants were written using their words with very little modification. Their words and their individual stories are presented in *Bradley Hand ITC* font. Also using the collection of their words along with my own personal experience, I wrote about their encounter with Annabelle presented in *italics*, their ‘encounter’ being the process of their discovery through understanding and self-reflection.

I would like to clarify here that the story of Annabelle is *not* necessarily a perfect reflection of what an experience with ADHD is like for all women in this category. ADHD is not prescriptive, which is what makes the diagnosis so difficult. It is a series of behaviors that we exhibit with different permutations and different dominances. Annabelle is constructed out of a combination of stories, but she is not an embodiment of what ADHD is. ADHD is personal and complex with every woman having a unique story of her own. Thus Annabelle is a personification of what life *can* be like with ADHD. The story of Annabelle herself, found in the prologue, is composed as the core story we, the writer and the interviewees, share.

In this project, you meet four unique women who share one common story¹. First you encounter Em: a writer and a storyteller, who is still trying on her diagnosis. If you asked her who she was, ADHD would not immediately come to mind. Em can identify more with depression than with ADHD because that is always what she thought was the issue. It’s very hard to understand ADHD unless you live it. The chaos that one lives with on a daily basis is stressful. And to live in a state of constant stress, constant panic, and the feeling that “this time, I just won’t make it” can be depressing! In learning about ADHD, Em is slowly learning to distinguish between things that are ADHD and those that are her own character flaws. Have you ever felt like you were a BAD person? Em’s biggest lesson is that of balance, an internal balance that is a way of living away from the extremes. That is what the diagnosis has done for her. Not so much the achieving of balance but of being mindful of where she needs to get to. Mindfulness has been a gift.

Faith’s journey is another story of uncertainty and new discovery. She is young, vibrant, and intelligent. She has a strong passion for writing, and writing is where she feels the most comfortable. She is still in the phase of discovering herself, her interests,

¹ All names used in this project are pseudonyms to protect the identity of the participants.

and what direction she would like to go in terms of career but feels she is on a positive path with many underlying interests and opportunities. It's DECIDING which avenue to take that causes the biggest problem with her ADHD! She is a thoughtful and well-spoken young woman with a very strong Christian background. Her value in community comes out clearly as she talks about her involvement with her church and her honesty with friends, family, and co-workers. Faith advocates for this idea of 'faith'. Not only that one needs God to have faith, but faith in your community and faith in one's self. Faith relates many stories in her history that highlight what life with ADHD is like and how it becomes more prevalent and obvious later in a woman's life. Her main message to people struggling with ADHD is to not go it alone. She emphasizes the importance of embracing your own strengths and interests and asking for help in the things you need help. There is a community out there willing to help you but you have to be willing to go find this community and ask. Although she recognizes and acknowledges that a stigma exists around people with ADHD and other learning differences, Faith recognizes that these diagnoses are not a 'death sentence' by any stretch, and she does not allow ADHD to stop her as she considers future options in work and school. Success will find you as long as you cling to your strengths and find your passions.

Elle has made it part of her mission to bring forward the education of adult ADHD. She also speaks to the importance of community support but emphasizes more her own interest in being the one to create and foster an environment of support, which largely drives her work. Elle speaks a lot of the positives of her ADHD and enthusiastically about the process. She compares the discovery to peeling an onion: slowly layers are removed until you get to the core. Through her own journey, she has arrived to her current destination with enthusiasm and excitement, attributing it all to her being ADHD.

Kay, like Elle, is on a mission. She is one amazing lady who is not interested in getting pigeonholed, named, labelled, or generalized in any sort of way. This uniqueness was immediately apparent within the first few minutes when she introduced herself as someone who is defined by her career. Despite staying away from labels, she embraces ADHD in all forms as fully integrated into her own character. She identifies with the many gifts as well as challenges that ADHD poses in her life: for every up there is a

down. Kay is open about her ADHD in her personal life as well as in the workplace. At school, she sees it as her duty to be an advocate. In her personal life, her sharing acts as a means of coping. And what is her message? Just because you might have a ‘neurobiological disorder’ doesn’t mean that life is over. She views her ADHD as a GIFT. There is always a way, and Kay lives this lesson daily while empowering her students to do the same and to find their own voice. Giving to others really is the key to her success. She is able to understand some of the struggles her students go through cognitively because she experienced them as well. Her ability to empathize is what makes her good at her job. ADHD has allowed Kay to succeed despite struggles.

These women share a story, Annabelle’s story. It’s a story that starts with frustration, disappointment, and self-loathing. It highlights the struggles that women with ADHD experience as they move from a safe structured adolescence to a scary independent adulthood. But this story is not meant to be sad. Like all good tales, it turns into a story of help, hope, and empowerment. The turning point is diagnosis. Although the paths to personal healing differ, the platform remains the same. The difference a diagnosis made in these women was life changing, core to the whole story, and a key finding of this project.

This project, however, is not meant to end up in journals or to transform academia; this project is for the women I interviewed, the women who share the same struggles, and for the empathetic others, teachers, parents, and community members, who interact daily with those of us struggling, openly or not, with ADHD. The purpose of this project is to understand the experiences of adult females with the late diagnosis of Attention Deficit Hyperactivity Disorder (ADHD). I simply provide portraits of these four phenomenal females, but it is they who tell the story. These women were diagnosed late with ADHD. The significance of presenting their stories is four-fold: 1) to provide some insight into issues and challenges of female ADHD, 2) to generate awareness of the reality of female ADHD, 3) to encourage and give confidence to young females entering higher education in managing and finding success with their own ADHD, and 4) to give a voice and share the stories of four unique women.

Now pull up a chair, relax, and let the adventure unfold. Thank you for listening.

EM: A DOUBLE-EDGED SWORD

How does one answer the question 'Tell me a bit about yourself?' You ask me and I've got nothing to say ... that's not true, I've got LOTS to say but where do I start? Ideas fly like ping-pong balls faster than I can capture them most of the time.

*It might be easier if I first tell you about Annabelle. I didn't like her when I didn't know her. Now she's the yin and the yang in my life. She's the double-edged sword that's both a great blessing and a painful curse at times. When observing her as an outsider, without really getting to know her, I'd describe her as spontaneous and **impulsive**². Now, you might think these words mean the same thing but I would say the social connotations of them are entirely different, where one is positive (i.e., care-free), and the other is negative (i.e., reactive). That characteristic of hers has been the single greatest door-opener to opportunities, and it has also been the most destructive, painful, and very negative quality that she endures. Anyways, that's Annabelle, a two-sided coin. She's either on or she's off. She's high or she's low. She can be pretty tough to deal with, externally or internally. That's Annabelle in a nutshell.*

² **im·pul·sive** [im-puhl-siv]

Impulsivity is one characteristic found in the DSM-IV and can generally be found in two areas: behavioural (the things that you do) and cognitive (the way that you think and make choices) impulsivity (APA, 1994). Examples of impulsivity given in the DSM-IV include: blurting out answers, difficulty waiting one's turn, and interrupts or intrudes. In the most basic terms, impulsivity is (re)acting without thinking, which can be positive or negative, leading to both challenges and triumphs. Impulsive children seem unable to control their immediate reactions. They do not appear to think before they act. Even as adults, they may choose to do things that have a more immediate reward but small payoff rather than engage in activities that may take more effort and provide much greater, but delayed, rewards (Antrop et al., 2006).

So now me, where do I start? Call me EM. I'm in my early 40s and I work, primarily, as a writer whether it's hard reports, speeches, lobbying, or advocacy around Inuit issues. I guess you could say I'm a strategic thinker, applying science to writing but I'm not a scientist. I just use those skills to write about concrete issues. I have a Bachelor of Science in the Integrated Sciences: it is a combination of biology and journalism. My career started with a fascination of going North. At the end of my Bachelors, I came across this research grant, the Northern Science Training Grant. I was raised on these slide shows of my parents living up North and always wanted to go so when I saw this grant, I latched onto an issue going on in the North and ended up cooking up a project. And so I went, just like that.

*Annabelle is impulsive. She can also change topics or change her mind at the drop of a hat. She has a reputation for talking too much and blurting things out with no sense of control or understanding of social interaction. She can be very interruptive and very domineering. In school, Annabelle could also look quiet and diligent. Other than talking, she never caused a lot of trouble and she always did well in school. I knew her habits were appalling; if they knew, they would have seen the **risk**³. But nobody else noticed and that didn't matter to anyone as long as the grades were good.*

³ **at-risk** [*uh t-risk*]

Although not necessarily disruptive, girls can still experience significant struggles that are often overlooked because symptoms bear little resemblance to those of boys (Crawford, 2003). Historical research has focused exclusively on hyperactive little boys, but hyperactivity is usually missing or internalized in girls who are more commonly found to be inattentive (Biederman, 2002). For girls, hyperactivity tends to be more of a hyperactive mind than a hyperactive body. Some girls will be hyper-verbal, fidgeting and daydreaming. These reactions are hardly as disruptive as the bounding young male and will often be overlooked in the classroom. As a result, undiagnosed girls will most likely carry their problems into adulthood. In an attempt to capture the other half of the population, the current DSM-IV focuses on distinguishing inattention from hyperactivity/impulsivity. Thorell and Rydell (2008) and Maniadaki, Sonuga-Barke, and Kakouros (2006) argue that ADHD should best be seen as existing on a spectrum of severity as opposed to a concrete blanket diagnosis. Alternatively, Barkley (1997) and Brown (2007) question whether or not subtypes should be classified as separate disorders altogether.

When I came back from up North I was really really worried because I realized I was totally ignorant and ill-equipped to actually write this project that I had proposed. I ended up writing a letter to the grant people in Indian Affairs saying "I can't actually write this up, I'm really sorry." A friend told the president of the national Inuit organization what I did and she offered me a position. Their reasoning being: it's unusual to meet a [white person] who doesn't think they can speak on behalf of others. I ended up living in Ottawa for 4 or 5 years and I travelled probably half of the year all across the Canadian North. But, I felt like I was an imposter so one day I just decided it's time to move North. A partner at the time suggested Rankin so, again, I went and we lived in the North for eight years where I worked for a variety of different Inuit organizations in Nunavut in the areas of health and environment.

*Nobody would notice the problem but if you asked her what she actually thought about, she'd relay these sword-wielding fantasies and a thousand different worlds. She was actually a very vivid daydreamer and very inattentive student. It's like trying to juggle a flurry of ping pong balls of different ideas and thoughts. Ultimately you just need to blindly grab at one and go with it. But then it just ends up being so hard to stick to things as another ping pong ball flies by and knocks the previous one out of your hand. **She would often be seen as lazy**⁴. There was always this building frustration.*

⁴ **bi:as** [bahy-uh s]

Derks et al. (2007) support the notion that there is a distorted view of sex differences in the population. In their study, they investigated parent versus teacher ratings of aggressive children. Where mothers reported similar levels of aggression and attention problems in clinically-referred boys and girls; teachers consistently rated boys as having higher scores on reports of attention problems and aggression than girls. Overall, ADHD boys are generally viewed as more deviant than ADHD girls and show more disruptive behaviours at school (Derks et al., 2007). Hinckley and Alden (2005) further explain that a gender stratification exists due to the unrecognized nature of gender differences in manifestation. Diagnostic procedures identify ADHD through behavioural checklists with definitive criteria that tend to lean towards male presentation of the disorder (Arnold, 1996). This belief is leaving a rather large population of missed diagnosis or misdiagnosed individuals.

It's the writer theme that has really informed where I've ended up. I've always been a bit of a risk taker which, I guess, is better described as being impulsive. I don't seem to connect my actions to consequences well. A lack of that feeling of consequences has been hugely beneficial to me because I'm not wired up the same way to be worried about the things that I should be worried about. They also lead you to say: "Okay, I'm first time out of the gate and I have an idea for a documentary. I'll start calling people I know and, ya, I can do it!" And because I don't get that I might not be able to do it, people believe I can do it. Others might be hindered by a much stronger executive secretary whereas I'm like: "I can do this, let me do it!" I get a lot of funny stories that way to share with friends.

*I've started to really get to know Annabelle in the past two years or so. We've only recently actually connected and I need to really get to know all the good and the bad. Getting to know her has been a confusing issue for me because I lived my whole life thinking that that's just the way she was and she's not normal. She's not a bad person, but it's still very hard for me to distinguish between what I think are character flaws and not. She can get really judgmental and really critical. You've got to understand that I've seen her all my life, as does everyone who knows her, as **one big character flaw**⁵, so that's a bit of a tough perception to get over.*

⁵ **self-concept [self-kon-sept]**

According to Davidson (2008), low self-concept and low self-esteem are common secondary characteristics of adults with this disorder, often resulting from problematic educational experiences and interpersonal difficulties. Self-esteem is generally defined as the evaluative dimension of the self-concept. It is viewed as a psychological state of self-evaluation (Hewitt, 2002). Success and failure generate positive and negative affect with people and experience and produce changes in expectations for future affect (Hewitt, 2002). Many times these adults live with a chronic sense of underachievement and frustration, leading to strong feelings of incompetence, insecurity, and ineffectiveness. Thoughts and perceptions of the self and of the world are all affected by past experiences. How one internalizes present experiences depends on how one internalized previous experiences. This connection can have some negative consequences leading to negative self-perceptions; at the same time, these experiences can lead to a particularly resilient and persistent individual (Johnson, 2003).

I always meant to get into documentary film making after finishing school. It was sort of the one thing I really wanted to do. After another exploding relationship, and personal sort of blow up, I moved back South. That was in 2004, another move where I threw it all up in the air. The thought was: "if I don't go make documentaries now I never will." So, I started a film company and have since done a couple of documentaries. So there's another example of the joys of impulsivity. I'm just tying up the ends of this big documentary film project now.

It's been a long slow process really trying to get to know and understand Annabelle. Before her, I hit a major wall⁶. All I knew how to do was to get frustrated with myself. There's a whole lifetime worth of legitimate, patterned reactions that are now part of my own characteristics or behaviour. They kind of get incorporated into your character but they are not. I was so unconscious of some of my own reactions to her, I think. By identifying, acknowledging, and confronting her I've really just started to learn how to cope with her in my life. What's nice is that I see things are slowly improving. The person I'm being, the things I'm learning, and the skills I've acquired, the books I've read, and the advice and counselling I get, I can see that they help! It's not a magic pill, but that's it: the doors are open.

⁶ **de·pres·sion [dih-presh-uh n]**

If you "hit the wall," you reach a situation where you stop making progress. It is a typical story for adult women to seek help later in life due to external factors including issues with depression, anxiety, difficulty in relationships, etc. In one study, 74.5% of women in the sample also had depression, anxiety, and/or self-esteem issues (Rucklidge & Kaplan, 1997). In a more recent study by Biederman et al. (2008), diagnosed girls were 5.1 times more likely to develop major depressive (MD) disorder compared to control females. The diagnosed girls were also found to have earlier onset of MD, with greater duration and more severe associated impairments, supporting the contention that diagnosed girls are at significant risk of MD at a young age. Children being repetitively told that they are lazy, crazy, and stupid in a number of different contexts has been shown to have severe consequences on their self-esteem. These comments and experiences get integrated into one's self-perception. Negative self-thoughts often lead to anxiety, depression, and learned helplessness. MD can be severe and disabling; it increases the risks of anxiety disorders, substance use disorders, and other high-risk behaviours.

Ya, I've had issues with going into funks, black spaces and that sort of thing. Something like depression, that's what I always thought. My dad has it and I thought I was like him. By the time I reached adulthood I felt that life started getting messy, things got really bad in my home life in particular. My relationship was just in havoc. I realize I've developed this intense fear of failure, which, I think, is connected to me being a procrastinator. When you have a lifetime of messes, from these near misses all the time you develop this really intense fear of failure and it's a vicious cycle. I'll get an incredible anxiety attached to doing things. It's a learned response from my experiences. I've also become really judgmental and critical of myself.

*Annabelle can work incredibly hard or be a really big procrastinator. Actually, she works incredibly hard partly because she's a procrastinator. When she does focus, it's intense, which can be very useful from a work point of view. She's explained it as **being unable**⁷ to see the train coming when you're tied on the tracks. You just don't hear warning bells or you don't hear the little voice inside your head that tells you to get going. That's Annabelle stuff. She's either on or she's off. She'll always pull it off in the end but she's not organizing or not making those simple decisions internally.*

⁷ **help-less-ness [help-lis-nes]**

Women with ADHD have a heightened difficulty with time management as well as with managing day-to-day tasks and have more depressive episodes and lower self-esteem. Kelly and Ramundo (2007) found that 20-30% of these women took on a learned helplessness orientation in response to coping with repeated failure and internalizing comorbid disorders. Oftentimes, there is an experienced pattern of failures, mishaps, and criticism in the history of these individuals. One study by Barron, Evans, Baranik, Serpell, and Buvinger (2006) demonstrated that these students tend to more frequently exhibit a performance-avoidance, where tasks are put off to avoid failure. These students more frequently orient towards this approach as a maladaptive helplessness response when faced with challenging situations. They also tend to experience higher levels of frustration upon failure tasks (Harris, Milich, & McAninch, 1998). A learned helplessness response is often developed as a result of repeated failures despite effort. Typically, persons with ADHD will attribute failure to internal uncontrollable character flaws. As a result, these students tend to quit working when encountering challenges more often than control students.

I'm a survivor. I have real issues with procrastination and lateness. I'll always pull it off in the end but it's always amidst enormous anxiety and terrible stress. I always have that sense of: "Shit, if I'd actually just done this properly it could have been better." But I'm also very stubborn. My whole family is stubborn so I come by it honestly.

*I've come to learn that Annabelle is not a bad person. She's the way she is because of brain wiring. She doesn't even notice when she gets hyper-focused. She'll work in spurts. I want to say that there's nothing wrong with that but this tendency creates an incredible imbalance. This response pattern is difficult to manage in a relationship point. It definitely doesn't work if you're trying to manage a family. It creates a huge concentration issue where she'll sort of flip flop from one thing to the next. She's got a very poor judgment of time so she tends to be late. And, because she's always rushing, she tends to get very quickly disoriented and **disorganized**⁸. It's the mindlessness that's the most frustrating.*

⁸ **gen·der roles [jen·der rohlz]**

According to Painter, Prevatt, and Welles (2008), typical adult presentation of ADHD includes chronic disorganization and problems with attention. Starting careers and full-time jobs require more independence, organization, time management, and responsibility than being in school. As Brown (2007) describes it, the conductor responsible for organizing, activating, focusing, integrating, and directing musicians of the mind, is missing. Crawford (2003) highlights difficulties women typically present with: tremendous time management challenges, chronic disorganization, longstanding feelings of stress and being overwhelmed, difficulties with management, and a history of anxiety and depression. Frustration is a word that dominates the world of the female with ADHD. Solden (1995) argues this experience is even more intense for female ADHDers than their male counterparts and largely attributes this intensity to gender roles. There still exists even today an unwritten job description for women both at home and at work of the "culturally-ideal woman" (p. 81); from teenage years to adulthood, independent organizational demands continue to increase. Solden highlights that disorganization collides with the role expectations for women in our culture, resulting in a great deal of inner conflict and stress. Without even realizing it, the woman with ADHD often deeply internalizes culturally transmitted images of behaviour and performance that match the culturally-ideal woman, which results in a daily diet of stress, frustration, and failure, eroding a basic sense of competence and self-worth.

I do astonishingly stupid things sometimes that even I'm like, "Far out!" The people in my life would just shake their heads at times and say: "How could you ... ? Because you seem like a smart person and yet you are so stupid in these ways." My sense of it was that it was little boys and it was connected to Ritalin; they were hyperactive and got kicked out of school. This was my popular knowledge sense of the situation. My two big stigma questions were: a) that this just sounds like a bit of a bullshit excuse for a kid that's a bit of a brat, an undisciplined brat; and b) it's probably something but it equates to doing badly in school and it equates to being a screw-up or a failure.

*We went to school in the 70s and there was a **tendency to look at males**⁹. I think she was ignored because she did well in school. There were no issues with that hyperactivity stuff, and nobody could see her daydreaming. She was an energetic child, for sure, but in school she was perfectly composed. So, what led me to suspect Annabelle in the end? Those dark spaces, those funks that I mentioned earlier and a bit of sheer luck. Now we had a chance to solve the actual problem instead of focusing on the symptoms. Because you can't solve the symptom. By getting identified and getting to know her I've come to a lot of ways to cope whereas before I didn't have any coping mechanisms.*

⁹ **prev·a·lence** [prev-uh-luh ntz]

In a study by Parker and Boutelle (2009), 58% of college students with learning differences who registered with their university were not diagnosed until they got to college. Problems continued into adulthood for 50-65% of these students. Medical and psychological literature has pinpointed ADHD as a brain-based phenomenon, with controversy continuing over time: brain structures implicated are the underdeveloped frontal lobes, neuro-chemical theories claim a dopamine issue, and genetically, the gene DRD.4 has been the most recent suspect. Despite contention in exact details, ADHD is seen to be rooted in structural neurological differences (Levy, Hay, & Bennett, 2006). The ratio of males to females ranges from 2:1 to 9:1 in terms of diagnosis (Biederman et al., 1994; Nadeau et al., 1999), as found in recent ADHD literature. School-age studies show prevalence of 4:1 to 9:1 male-to-female ratios. More recent adult studies, however, show prevalence closer to 2:1. It appears that more and more females are being diagnosed later in life, typically due to the onset of secondary problems (Groenewald, Emond, & Sayal, 2009). This is compelling evidence that it is not a gender-specific condition. However, due to misinformation, females remain mis- or undiagnosed and end up suffering the consequences. Biederman et al. (2008), as a closing statement, express the importance of early recognition as a public health concern.

It's about conscious externalizing organization. And, it's about practicing that because when you externalize and just write it all down it frees the mind. You have to force yourself to think about organizing and all that all the time ... it's actually hard work. You need to be mindful, being mindful is a huge gift. It's tiring actually because it's real work all the time to be guarding and mindful and watching your behaviour. It's absolutely tiring. But, with practice, I'm hopeful it gets easier. Now, I fall off the wagon all the time and sometimes it's too late until after the fact. But seeing it at all, boy, it's nice.

*So, how does one cope with Annabelle? Well, for one, I read bunches of books. That really helped explain her behaviour. I no longer looked at her as a bad person. In the end it comes down to actually accepting limitations and accepting the negative effects and just being really honest with yourself so you deal with them. We found a coach in the area who could help. We discovered basic organizational skills like day timers, making lists, and writing stuff down. It's all about stop and look and think because that's one thing that Annabelle does not do well. Ask the executive secretary: "Am I on the right track? Am I doing the right thing?" And then, try to listen to yourself. Medication? Ya, I guess that made a big difference but it certainly doesn't work on its own. Medicine is not a cure; it's only a support. Because you can't change your behaviour unless you **change your behaviour**¹⁰.*

¹⁰ **mind·ful·ness** [mahynd-fuh l-nes]

Mindfulness enhances attention and awareness of current experience (Brown & Ryan, 2003). Being absorbed into past events or living through fantasies and anxieties about the future can pull one away from the present. Mindfulness involves receptive attention to psychological states and may facilitate well-being through self-regulated activity (Brown & Ryan, 2003), fulfilling basic psychological needs. Mindfulness practice trains the brain to alter its thought patterns from obsessive or negative tendencies to being mindfully present. Recently, it has been found that the human brain is extremely malleable (Doidge, 2007) and continues to be malleable far beyond infancy. In contrast, classical neuroscience considered the adult brain to be hardwired from late infancy, leading to the common belief that you can't easily mold the brain. Evidence of neuroplasticity is changing this world view and the treatment paradigm for many neurological disorders. Cognitive behavior therapy (CBT) operates on this new premise (Davidson, 2008).

You asked me about how I would define success in the context of my own life. I'd have to say that success is balance. It's really being able to recognize your own strengths and feel proud of them. And also recognize your weaknesses and your challenges and find a way to cope with them in some way. It gets back to that mindfulness. And to just keep trying, again. So, ya, balance. Balance in life but ultimately an internal balance. That's the challenge but that's also the gift in the end.

FAITH: RESILIENCY AND STRENGTH

Faith is a fitting name for me as I identify myself, primarily, as a strong Christian. I'm Protestant, as well as a daughter, a sister, a friend, a student, and a worker. I'm 28 years old, currently working as an employment support worker where I help people job search. I started having problems when I started my Master's. But, reflecting back, I could see issues started back in Kindergarten. I lived in Senegal and then I moved to Canada. In Grade 1, I was doing French immersion and the teachers thought I just didn't understand French even though I was from Senegal. My parents decided to take me out of French immersion and put me into a church school.

*Annabelle was very quiet, almost too quiet and shy sometimes. She'd often withdraw into her own little world and was quite **inattentive**¹¹. People thought that was weird. She could never get her work finished in class and would never really be following the teacher. It looked like she listened but, if you asked her a question, she wouldn't necessarily learn or absorb everything right away. She'd just tune out. I think she daydreamed a lot; she just looked out the window in class all the time. Then we'd go home and she'd have to study it by herself at home or during recess.*

¹¹ **in·at·ten·tion** [**in-uh-ten-shuh n**]

Frequent distractions lead to the exhibition of another trait known as inattentiveness. Examples in the DSM-IV for inattention include careless mistakes, difficulty sustaining attention, does not seem to listen, has difficulty organizing, often loses things, and forgetful in daily activities (APA, 1994). Although these are things with which most people have difficulty with from time to time, ADHDers have a chronic difficulty. Losing and forgetting things on a regular basis will lead to increased frustration and secondary problems. Traits of the inattentive type are not typically disruptive or destructive. Teachers and parents make assumptions about these behaviours and may provide these students with frequent negative feedback (Carlson, Booth, Shin, & Canu, 2002). Early coping strategies are often adopted but, when responsibilities mount and environments become less structured, that's when some individuals really start to experience debilitating problems for the first time.

It was a very small school that had four grades in one classroom. Going to the church school ended up turning me around because my teacher would force me to stay and finish my work. If I didn't get done when I was supposed to, I'd stay in and sometimes she'd even put one of those little gym mats around my desk so I wouldn't get distracted. That should have been a sign right there.

*She didn't pick up as much as the other kids did while sitting in class most of the time so she compensated by re-learning the whole day in the evening at home. It was known that she worked very hard and was intelligent but she always couldn't quite meet with classroom expectations. It's like people are saying that who she is needs changing because it's wrong. But that's just what comes out externally rather than her core personality. People don't always see her for who she really is because her **intention**¹² does not always align with her actions. This mismatch is both frustrating for her and frustrating for people who know her, because she's bright ... if only she would just try harder.*

¹² **in·ten·tion** [in-ten-shuh n]

There is often a mismatch between stated intention and action. What is the expressed plan is rarely the given outcome. Having dysynchronous short-term expectations with long-term outcomes tends to be a source of emotional stress (i.e., having poor work ethic but wanting to do well). Adding to the stress is an inability to articulate to teachers the discrepancy between expectations and performance (Zentall, Moon, Hall, & Grskovic, 2001). Wood and Benton (2005) explain that this discrepancy is often due to action control problems that result in, for example, inhibiting a previously learned stimulus-response association or difficulty in resisting distractions. These tendencies rarely go unnoticed and are largely misunderstood, often resulting in criticism or negative feedback. These individuals are seen as irresponsible and unreliable, demonstrating a moral failing. As a result, they live with a chronic sense of underachievement and frustration (Davidson, 2008). Stresses come from the resulting difficulty of discerning one's core personality from one's symptoms and resultant feedback. Then there is an integration between what one is told and core beliefs, where people often view themselves as 'bad' or 'wrong', feeling they are incompetent and ineffective in whatever they do. To remediate these difficulties, Nadeau (2005) suggests a strategy using "implementation intentions" (i.e., creating if-then plans). These practiced intentions are an example of mindfulness exercises (Brown, 2003) that train the brain to create new patterns of behaviour.

From then on I was generally a good student except for Grade 6 and Grade 11. When I was in Grade 6 my teacher thought I had something. We had to bring in a current event every day and I kept forgetting. On one assignment she gave me a C even though I did a lot of work because I didn't do what she asked. She did have me tested for hearing because I wasn't really responding the way she would like. But now I think it was just that I wasn't really focused on her a lot of the time. She also noticed my early talent in writing. She was the first person to really point out that writing was something I was really good at. From that point on I focused on that strength and it soon became a passion.

*When Annabelle has to sit down and listen for a long time, like in a lecture or a sermon, she can't focus unless she's really excited about what's going on. In a lecture, for example, once you start missing some key points then you lose meaning. Once you lose meaning, however, it's really hard to get excited about something you don't understand so the cycle continues. It can be really easy to lose her somewhere along the way. Her brain needed to be constantly engaged to stay **activated**¹³; otherwise she'd just zone out.*

¹³ **ac·ti·va·tion** [ak-tə-'vā-shən]

ADHD causes problems with the regulation of attention and the normal production of good feelings (Brim & Whitaker, 2000). Some children and adults will figure out ways to create pleasurable feelings, some of which are viewed as positive while others viewed as negative. The negative behaviors are generally what constitute ADHD as a disorder based on a “deficiency model,” which operates on the assumption that students lack ability rather than drive (Farrell, 2003). Brim and Whitaker (2000) implicate the frontal area of the brain. An asymmetry in the frontal regions affects high-order skills, such as reasoning ability, perception, judgment, the regulation of attention, and the normal production of good feelings. Genetics is partly to blame. DNA tests have identified more than one dopaminergic gene as the cause of this developmental anomaly. More recent studies (Waite, 2010) pinpoint gene marker DRD.4 as the primary suspect. A study by Loo et al. (2009) also implicates the frontal area of the brain and concludes that the adult subjects tested may have different neural organization in frontal regions of the brain that result in the need for continually high levels of cortical activation to maintain sustained attention. As a result of this anomaly, remaining engaged and excited is neurologically challenging as the chronically under-stimulated brain is always seeking additional stimulation.

In Grade 11 I was taking like a lot of sciences and didn't do as well that year. But Grade 12 I kind of recovered and I finished well enough to go to university in the States where I majored in English writing and French studies and graduated with honours. After school I went over to Taiwan to teach English. I was their writing specialist. Living in Taiwan was the first time I really started to recognize that I had issues. I had a tough time with classroom management, all the papers and files and everything. I was much better in classes with fewer students.

*Living with Annabelle can be pretty frustrating at times. She's messy, and she struggles a lot with keeping things clean. She's always disorganized. That's probably why she's always **forgetful**¹⁴ and losing things. We used to live in a dorm and she would always be forgetting her backpack and her books all over the place. We'd have to remind her about things like: "Oh, make sure Annabelle has her ticket because she's distracted." She gets offended by that statement. No one thought much of it; people just kind of got used to her and her tendencies. We just saw her as being a scatterbrain. Sometimes we'd be talking to her, and she'd just zone out and leave the room before we were finished talking. She always did academically well but issues sure popped up in funny ways.*

¹⁴ **for·get·ful·ness** [fer-get-fuh l-nes]

Losing and forgetting things on a regular basis will lead to increased frustration and secondary problems. Working memory, or short-term memory, refers to the ability to recall past events and manipulate them internally to be able to make predictions about the future (Csikszentmihalyi, 1988). The process of recall is one function out of the whole attentional process. As Nakamura and Csikszentmihalyi (2005) outline, three main processes are involved: attention, awareness, and memory. Attention can be considered the driving force that prioritizes simultaneous events. Awareness is the filing system of attended information that either files or discards. Finally, the memory system stores and retrieves information. If an item does not make it past the awareness stage, then it will never be stored in the memory, leading to forgetfulness. Practicing mindfulness, conscious awareness, can be helpful (Brown, 2003).

After the two years I came back to Canada to do teachers' college, and I continued to have a lot more of the same issues as I did in Taiwan. I thought I was experiencing reverse culture shock or something or that maybe I was just getting stupider. My last placement was in a Grade 7/8 class. I had really hoped they would be able to organize themselves but instead I had try to organize myself AND the students and it was very stressful for me. I struggled with things like marking assignments and losing students' papers. Ultimately, I didn't enjoy teachers' college, it hadn't even occurred to me that I didn't want to be a teacher.

Annabelle can stay focused when she has certain tasks that she knows she has to finish; then she's pretty good at staying on track. Time is always an issue for her. When there's a deadline, she's good, but if there's a lot of time then she seems to get lost in what to do next and is a champion procrastinator¹⁵.

¹⁵ **pro·cras·ti·nate** [proh-kras-tuh-neyt]

Procrastinators continuously put off tasks and ignore encroaching deadlines. Historically, the term "deadline" originates from the American civil war where a line was drawn 17 feet inside a perimeter fence. Fence guards were authorized to shoot anyone who crossed the line (Stober & Joormann, 2001). Today, the term deadline refers to a scheduled completion date of some task. Deadlines provide a necessary structure and the thrill of an encroaching deadline provides just enough stimulation and motivation that a person may need to get the job done on time. Chronic inner conflict and stress often lead to the tendency to keep putting off projects until the very last minute and then procrastinators need to rush to finish. Psychological causes of procrastination generally surround issues of anxiety and low self-esteem (Stober & Joormann, 2001). Physiological roots for procrastination lie in the prefrontal cortex region. Psychologists interpret the behaviour as a mechanism for coping with the anxiety associated with starting or completing tasks or in having to make decisions. As a result, procrastinators tend to have difficulty formulating realistic goals around obligations and their own potential (Stober & Joormann, 2001). For some people, procrastination can be persistent and tremendously disruptive to everyday life. Chronic procrastination is an experience all too familiar to the ADHDer.

It's funny, I can organize events: I organized three Christmas concerts and they went well. But it's just so hard for me to organize at school or to organize myself in a regular way. For some reason it's harder when it's life because for the events you have a certain goal and you can see clearly when you've reached your goal. Life, however, is not always so clear-cut. You just can't see where you're heading most of the time.

*It's hard for Annabelle to stay focused when she doesn't know what to focus on, be it daydreams or what's going right in front of her. She has issues with what I've heard called **self-regulation**¹⁶ and is not very good at keeping track of what to do. You need a vision, a mission, to move forward.*

¹⁶ **self-reg-u-la-tion** [self-reg-yuh-ley-shuh n]

Self-regulation is important because a major function of education is the development of lifelong learning skills. Zimmerman (2002) emphasizes the importance of teaching self-regulatory processes but believes that few teachers effectively prepare students to learn on their own. Zimmermann highlights the relationship of self-resilience to success and warns of the adverse effects of a rigid curriculum in teaching important life lessons. Life lessons should include self-management and goal-setting practices to maintain long-term motivation and continued success. There is a misconception and a misnomer that one is not able to attend at all. The problem is more of doing what one knows rather than knowing what to do. Barkley (1997) reconceptualizes the issue as a disorder of self-regulation. He argues that individuals do not lack skills and knowledge, but rather, self-regulation that can prevent them from applying knowledge and skills at the necessary times. This is a deficit in performance. Parker, Majeski, and Collin (2003) define self-regulation as the "ability to persist at goal directed behaviour across time in the face of negative emotions" (p. 204) and state self-regulation is a factor highly correlated to academic success in college. For those with self-regulation issues, setting goals and perceiving time can be problematic. Nadeau (2005) strongly stresses the importance of goal-setting strategies as a necessary intervention in career development. She has found that the adults with whom she typically works are poor at judging how much they can take on at one time and will often create unrealistic expectations that are doomed to failure. The first challenge of reaching a goal is learning to set realistic objectives, with short-term goals as intermediate objectives towards achieving a long-term goal. Setting short-term goals, in alignment with a final objective, that are relevant, achievable, and concrete are skills that these adults lack, resulting in years of frustration and a sense of failure. Nadeau used visualization interventions that promote goal-directed behavior: establish a goal that can be pictured and use the internal image of that goal to shape, guide, and direct one's actions.

Not wanting to be a teacher but also not knowing what to do, I stayed at school and started my Master's. This is where I really started to have some problems academically for the first time. Right from the beginning I was having some problems keeping myself focused and coping with the class work. The first summer was really difficult and is the course that I got my lowest mark in. I was really happy, regardless, with the outcome because it had been such a tremendous challenge for me.

*After all my years of living with her, Annabelle got the best of me. She was screaming at me all this time and I never took notice. Now she kept popping up, in articles and in shows. Before reading those I think I shared many myths and **misconceptions**¹⁷. But, I confronted her, finally, after starting my Master's, because I knew I might not make it if I kept ignoring her.*

¹⁷ **mis-con-cep-tion** [mis-kuh n-sep-shuh n]

Popular culture knowledge, despite new research, is still largely outdated. There are a number of myths and misconceptions that exist publicly, placing blame on the origins of this disorder including: the consumptions of food additives and a poor diet, the results of bad parenting, that only children exhibit these characteristics, that only young males can exhibit characteristics or that they are predominantly affected, that one cannot perform well in school, it is simply a lack of will-power, or that it is caused by overexposure to television and video games. Hallowell and Ratey (1994), in their best-selling book, address the idea of pseudo-symptoms where “the fast pace of everyday life, the search for the sound bite, the love of fast food and instant gratification, the proliferation of fax machines, cellular telephones, computer networks, bulletin boards, and E-mail systems, our appetite for violence and action and adventure, our rush to get to the bottom line, our widespread impatience, the boom in gambling, our love of extremes and danger – all these very American traits are also very ADD-like” (p. 27). Their meaning is many people can behave this way but are not necessarily born that way; rather, the structure of our society made them the way they are. How does one differentiate social/cultural behaviour and the authentic disorder?

It took me 3 years really of feeling like I had it before I went for diagnosis. I read a lot of articles before then and my mom had watched a show on Oprah; she's a nurse. At first when I asked her what she thought about the whole idea she said: "No, I don't think you do because, you know, you are a good student." Finally, after the Oprah show, she said to me: "You know what, I think you might have this," and she bought me two books. I read them and it just really resonated with me. I even cried at some parts. I was 24 I guess at that time.

*When we went for **diagnosis**¹⁸ there were interviews and self-assessments, there was even one for our mom, and we took a 10-hour test over two days. There was a fear going in because it meant that Annabelle isn't something we could just ignore. But getting to know her has been more of a relief than anything else. First, she realized she wasn't just getting dumber every year and there was a reason for all these issues so that made her feel better, in a way. Being able to put a name for what the problem was constituted a huge help. Now we know that Annabelle is there and how she can affect different parts of my life.*

¹⁸ **di·ag·no·sis** [dahy-uh g-noh-sis]

According to Rosenfield, Ramsay, and Rostain (2008), there are three main diagnostic challenges for adults: adults tend to be less hyperactive and more disorganized, there is difficulty in obtaining valid retrospective reports, and informant data can be inconsistent. Typical retrospective reports, such as old school reports and parental retrospective surveys, often include repetitive negative comments and statements of underachievement (Carlson et al., 2002; Wood & Benton, 2005). This pattern can be evident even for students with higher academic achievement. The assessment process itself is also quite extensive. The procedure is similar to diagnosing children, and it is quite common for adults to be diagnosed after their children (Hallowell & Ratey, 1994; Nadeau et al., 1999). Finding a physician to do a proper assessment with an adult adds another barrier. At this time, throughout most of Canada, there is a severe shortage of physicians who are qualified to diagnose adults. Psychologists are often not covered by provincial medical plans, and testing is time-intensive, emotionally draining, and costly for most people.

A major struggle was finishing the thesis. It was kind of a disaster in terms of time management. I feel like there's somewhat of a stigma, a negative stigma unfortunately, around people that need support and services. It's like people don't believe that it's true or think you just lack will-power. But I found the school and the services to be very supportive. They gave me access to a number of resources in the resource room and funded a coach who helped me for a whole semester with scheduling. It was really difficult just to organize myself and get down to work without that help. There are a lot of supportive people in my life: my mother, my grandmother, my supervisor, and my boss. My best friend took a little time to come around, but she's turned out to be a pretty good support as well.

*Having **supportive**¹⁹ people has been a big help. It's been an important lesson that Annabelle taught me: it's that you don't have to try to do it by yourself all the time. You can always find people around you who are understanding and can help you in the areas where you are weak. And it's okay to have areas where you are weak.*

¹⁹ **support** [suh-pawrt, -pohrt]

Mate (1999) goes back to the child-rearing environments that many of these children experience as an explanation to the childhood roots of ADHD tendencies. Today's society is demanding on time and resources; as a result, many parents are overworked physically and emotionally. The time spent with their children is often half-present, and children develop an early emotional neurocognitive insecurity. ADHDers are seen as not yet fully developed emotionally because early neurological connections are never made, leading to both functional and behavioural deficits related to these anatomical variances. A strong external support system is integral to the development of a resilient individual. Favourable outcomes of struggling individuals are often dependent on a supportive home and school environment (Karande, 2005). Many success stories (Corman & Hallowell, 2007) speak to the importance of family structures, teachers, and friendships. The individual particularly at risk is the one in a compromised situation where those supports do not exist. In a study conducted by Carroll and Ponterotto (1998), family-environmental risk factors identified were maternal psychopathology, paternal criminality, low socio-economic status, large family size, and family conflict. These factors show the odds of symptom-related difficulty were 7.4 times greater when one indicator was present, 9.5 times more likely when two were present, and 34.6 and 41.6 times greater when three and four indicators were present, respectively (p. 83).

I've been at my workplace for two and a half years now and it was good for a time. My boss has been really supportive and helpful. Together we get through some of my lateness and forgetfulness. It just goes to show that just because you struggle, this doesn't mean that you can't be successful. Everyone struggles, but it's recognizing it and asking for support that will get you through. It came down to accepting help, being really focused and minimizing distractions. I'd unplug the internet when I was at home. Also, I didn't leave my apartment except to go to church because that was what I had to do. It took a long time to get into a rhythm of what I was supposed to do. But I learned how to prioritize better that way.

Annabelle gets a lot of criticism. It's her quirks, I think, that make her really resourceful and resilient²⁰ as well. She never tries to be someone that she's not; it's just part of her personality. Resilience develops to make it through the struggles. Getting through struggles can also nurture a very creative spirit. It's your experiences, and how you deal with them, that shape your characteristics. It's also the help you can get along the way.

²⁰ **re·sil·ience** [ri-zil-ee-uh ns]

In a very simple definition, resiliency means having the ability to “roll with the punches” or to recover from or adjust easily to misfortune or change. Resiliency research (Johnson, 2003) highlights that, the more resilient a person is, the more likely she or he will be successful. Many adults, without the benefit of intervention, have managed to reach high levels of achievement and have been found to have certain resilience factors in common (Nadeau, 2005). These factors include both internal (personal) factors and external (environmental) factors. In her study, Dweck (2000) shows that students who see intelligence and talent as fixed are more likely to give up when they encounter challenges, but students who believe that ‘hard work pays off’ are more likely to achieve their goals. Dweck affirms that attitude is a more important indicator of resilience and subsequent success than other measurable factors like IQ. Rhee, Furlong, Turner, and Harari (2001) define resiliency as a constructive reaction to disadvantage that is developed through a process of individual and environmental interactions throughout a lifetime. Resilient individuals view the world optimistically, feel special and appreciated, and believe in their own abilities. Resiliency is an important quality of success. Parker and Boutelle (2009) additionally support that resiliency is a factor highly correlated to academic success in college of ADHD students.

For me success is, well not just finishing your education, but meeting all of your goals. So far I'm pretty successful academically and I'm successful in the sense that I'm independent. That's something I find is really good considering. I have a lot of varying interests but I love to write, it is something I'm very passionate about. It's important to focus on the things that you're really good at. And focus on, I guess, the creativity and resilience that come with your experiences. I'm lucky that I found my passions early on and I'm lucky that those passions happen to be very academic. If I'm writing or editing, those are the areas that I'm really strong in and that's when I feel like I'm really focused. I also really want to make a difference in the world so I'm kind of driven toward that. You can't just go to your job 9-5 and that's it. You really have to have a mission, I guess. So that sense of mission is what drives you the most and I think with that you can do any career and be successful. As long as you have a passion for it, that's the most important thing in my opinion. I've been in my job for two and a half years now but I'm ready to move on to something else. I'm finding it hard to narrow down what I really want to do, but that's no surprise. I'm only 28!

ELLE: LOVE WHAT YOU DO

My name is Elle, and my story begins at the age of 48. The diagnosis really helped to explain why I do what I do and how I do what I do. It still gets to me every morning but, looking back on things, quite frankly, she's got me to where I am. I'm currently self-employed with my own virtual assistance practice. I work my own hours in my own office. Mostly I do a lot of web content and newsletter type things. I also do some work with Totally ADD as they get themselves established. It's something I stumbled along and happened to be a really good fit for them for this period of time. My other roles include that of wife and a mother. I've been married for 26 years and I have three kids, a boy and twin girls. Overall, I've had a pretty varied education and pretty varied career.

*Annabelle's report cards had those typical sort of comments. Teachers were saying things like: "Annabelle is not living up to her potential," and "She could do so much better." They could sort of see that there was this intelligence, yet the output was something less than they were expecting. This disconnect was also very frustrating for Annabelle because she knew and understood but never seemed to quite perform as she'd like to. Using a **metaphor**²¹, imagine needing glasses while you struggle through reading but never realizing that you needed them because all you ever knew was the blurry sort of world in front of you.*

²¹ **met-a-phors** [met-uh-fawr-z]

How would one describe what the experience is internally? Flying ping pong balls (Em), driving in the rain without windshield wipers (Hallowell & Ratey, 1994), reading without glasses (Elle), looking through an opaque curtain (Litner, 2003), or a problem with the conductor of the symphony of the brain (Brown, 2007). These images all paint a picture of the hectic surrounding environment and an internal sense of chaos. Although one unified theory does not exist, there is a growing literature that indicates a chronic impairment of the brain's chemistry, specifically with the release and update of dopamine, affecting people's executive functions.

I finished with a Bachelor of Science in psychology and got my first job as an accountant. While I was working, I was taking accounting courses toward a certificate in what is now called a certified management accountant, but I didn't finish it. While taking courses, I kind of thundered along getting Cs, maybe a B+ here and there and I flunked economics. At no point did I ever ask myself: "Should you be doing this?" That's the way I was earning my living but it bored me to tears. I thought: "I'm employed, I'm employable, and people want this kind of skill." I didn't really realize that I hated it or that I didn't really do it all that well. I just had this accumulating frustration and I didn't know why.

Something I've noticed about Annabelle even before I really got to know her is that she wasn't very consistent when doing things. Once it got to the last 20% to getting something finished, she'd already be starting the next thing most of the time. When it was something that she liked to do then she could do it for hours. On the other hand, if it was something that she didn't like to do, I think she'd spend more time trying to figure out how not to do it or how to do it differently. People would call her lazy, defiant, or out of control²². For her, tasks can take an exhausting amount of effort. It's like being a lightweight entered in a heavyweight competition.

²² **control** [kuh n-trohl]

Tasks that are boring or repetitive demand the ADHD brain to do the equivalent of strenuous exercise for long periods of time without a break. According to Baumeister and Exline (2000), self-control operates like strength: "it is weaker after an exertion, replenishes with rest, and slowly becomes stronger with repeated exercise" (p. 40). Psychological strength is socially understood as an innate moral capacity to exert control over the self by the self. Baumeister and Exline (2000) address four areas under the concept of control: impulse control, control over thoughts, affect regulation, and persistence. A strong muscle has an available strength that is gradually dissipated upon continued exertion. After some rest, the muscle recovers its strength, and regular exercise will make the muscle more resistant to fatigue for longer over time. Like a muscle, using self-control depletes the resource used for self-control and so subsequent efforts will be less and less successful. Exercise can strengthen self-control to be better able to resist subsequent fatiguing efforts. Individuals who are diagnosed early can have interventions in place that support success.

I continued to work in the area of accounting and finance but I didn't stay long at a lot of places. Usually I got bored and moved on. There's one job I remember that I really enjoyed. I still worked as their financial administrator but it was such a different experience because it was during a time of growth for that particular place so I got to do a lot of different things. Another great help was that I had an assistant who looked after all of the little details so that I could focus on the big picture things. That is when I truly discovered that me and book keeping were not well suited for each other. I like the general field; it wasn't so much about the number crunching.

*Multiplication tables, we just hated them and never really understood them. Annabelle thought they were the most boring thing in the world, and back then we learned them by rote memorization. I think she had trouble not because she couldn't understand it but because it was something she wasn't very interested in. If a teacher just tells her something, then it doesn't sink in. You've got to show her, let her try it, and talk her through a little bit as she's doing it. Once there's a foundation, then you might be able to tell her. Otherwise she has no way to relate what you've told her to anything tangible. She's very experiential; that's her **learning style**²³.*

²³ **learn·ing style [lur·ning stahyl]**

Every kind of mind has a unique and particular learning style. People can, and do, use all of their senses for learning, but often favour one sense, or a combination of senses, over the others. Optimizing learning environments means presenting information in a number of ways to access a variety of informational pathways. This strategy is of particular importance for these students as they often experience disruptions in the intake and storage of information. An analogy given by Kelley and Ramundo (2006) provides the following explanation: "It is like having electrical short circuits in the brain. Some of the information is stored. Some is not. Some of the files are damaged in the process because of the neurological short-circuiting" (p. 17). Using more than one teaching strategy ensures information is getting into the brain via more than one way, thereby increasing the likelihood that all the information is being captured. Current literature on teaching exceptional students (Mooney & Cole, 2000; Prashnig, 2008) advocates for the identification of and working with strengths to support and compensate for deficits and igniting passion to maintain student engagement.

I never created a lot of trouble in school. Certainly I wasn't the one in the classroom that was bouncing off the walls. I'd be paying attention as well as I could and answer when I was paying attention. There was a lot of daydreaming but it looked like I was participating. I remember in grade 3 I had the sharpest pencils in the class. I would get up there about 25 times or something because it was the only thing you were allowed to get up and do without asking for permission. I swear it's because I couldn't sit still. But I wasn't bugging anybody so it wasn't really a problem.

*Annabelle looked like she was just this quiet spaced-out kid that did okay. Back then these kinds of issues were considered a personal problem; unless she was the squeaky wheel teachers were not going to try to fix it. But she really did love to learn; she just was not a typical learner. She didn't learn in the way people are typically taught in the school system. She was, and is, very hands-on. She needed to be interested, she could read voraciously if she was interested. If she was not interested, she appeared very impatient. Her mind would wander and then suddenly she'd come up with a thought and "wants it NOW!" The most novel thing would grab her attention. It's an inability to **inhibit**²⁴ one's responses.*

²⁴ **in·hi·bi·tion** [in-i-bish-uh n, in-hi-]

Wodka et al. (2007) present one theory of neurological deficit: response inhibition. Their study shows a deficit in inhibiting skeleto-motor response suggesting that premotor and prefrontal systems may not function as efficiently. Brain images revealed decreased volumes in these areas. Crone, Jennings, and van der Molen (2003), however, tested the concept of inhibition against delay aversion and argue against the theory of a weak behavioural inhibitions system due to differences found in each of the subtypes. A follow-up study by Antrop et al. (2006) also supports the theory of delay aversion, defined as "to escape or avoid delay" (p. 1152), as the primary deficit. In their study, there was a preference for small immediate over large delayed rewards as well as greater sensitivity to delay. Antrop et al. (2006) argue that what appears as impulsive is actually delay aversive. Persons with ADHD will try to compensate for delays by attending to, or even creating, additional "non temporal" stimulation in a way that will alter the experience of delay and speed up the perceived passage of time. This executive theory nicely explains why attentional deficits are most evident in tasks that are considered boring, repetitive, and uninteresting.

Life changed when I had twins. I retired from working to stay home with the kids and that was kind of neat because it allowed me to finally work in a way that I work best, which was to respond. I could react to whatever was going on that day and it was okay. We could go outside if it was nice or we could do crafts if it was not. Although getting them to school on time during Kindergarten was a bit of a challenge. Looking back on it, trying to get the two kids out the door when it's all you can do to get your own self out the door, I'm kind of amazed that they got to school before noon!

*Life with Annabelle was getting to a point where it wasn't easy for me and it wasn't easy for my family, although they still don't like to talk about or admit it. They saw life as being reasonably functional and, for the most part, it was. It was only **later in life**²⁵ that there really seemed to be a problem. Annabelle would do kooky things, but it was just part of her personality. What I'd like to say was these behaviours weren't so much her personality as they were just what was bubbling up to the surface. On the inside there was a whole other person that just wasn't being seen. That's the person she knew she could be, but didn't know how to bring to the surface. She was living in a world of dissonance between thought and action as if she was the driver but someone else hijacked her bus, taking her along for the ride.*

²⁵ **late onset [leyt awn-set]**

The idea of late-onset symptoms is gaining some ground in literature and the medical community. Currently, the DSM-IV states that symptoms need to be present before the age of 7. This age-of-onset criterion was included in the DSM-IV based on early findings that most children first exhibited symptoms in early childhood. It was assumed symptoms that appeared after age 7 were due to school failure or stress. There is, however, a growing body of evidence that many do not experience difficulties until later in life. Several researchers (e.g., Barkley, 1997; Biederman et al., 1994) have questioned the validity of this assumption and suggested that the age 7 cut-off is arbitrary and not based in science. There is expressed concern that this cut-off age may actually deny diagnoses and services to many who suffer difficulties. Girls in particular might not display any visible external symptoms until they reach their teens and hormonal interactions influence behaviour (Nadeau et al., 1999). The same is true for the high-functioning adults, whose manifestations become most evident in the workplace environment (Carroll & Ponterotto, 1998).

When the kids were still very young but heading to school full-time, I had a lot more manageable free time so I decided to start a business. At 34 I started a floral craft business where I taught crafts at various art shows, conventions, and other venues. It wasn't a 'sit down for eight hours' sort of gig. This was something I was both very interested in and good at doing and I discovered that those were the kind of things that I felt a lot happier doing. And for the first time I could really feel what being content with your working life could feel like.

*When Annabelle finds something that she is very interested in or very good at, she can be driven. She can read voraciously if she's interested, but she needs to be interested in it. Most would think she's just not motivated, but to motivate her requires understanding what is happening in there. She's quite creative and really likes coming up with and starting on new ideas. She's someone who can and needs to see the big picture because she's so visual. She has to see the whole thing to understand it and know where to start. She says that if she's going to think through a problem, she has to really kind of see it and to walk through it physically or mentally. In that way she is also very hands-on, **experiential**²⁶, and can be quite engrossed and engaged when she's actively doing something compared to passively listening and learning.*

²⁶ **ex·pe·ri·en·tial** [ik-speer-ee-en-shuh l]

Learning can be a challenge in a traditional school environment due to lack of focus and difficulty controlling impulses. Children need to be able to move around with recent studies showing that regular activity is essential for enhanced learning (Mulrine, Prater, & Jenkins, 2008). Humans are built to learn while they are moving and participating (Mulrine et al., 2008). Kinesthetic lessons involve learning with the body rather than just through seeing or hearing the lessons. By moving the body during class, children with ADHD have an easier time learning a new lesson (Mulrine et al., 2008). Visual-spatial learners think in pictures rather than in words. They learn better visually than auditorally. They learn material all-at-once so there is typically an instance when the "light bulb goes on" and learning is solidified. Not all students learn effectively from repetition and drill; rather, they need to see the big picture first before they deal with the details. Being 'big picture thinkers' is a very typical hallmark of the ADHD kind of mind (Kelley & Ramundo, 2006).

until it becomes a major problem for someone, I don't think that they will ever think to seek out help. Well, it was becoming a problem for me. I was hitting a major wall. What started as one thing ended up being a series of things as I went through sort of a process treating one thing, getting that under control, treating another thing, etc. I was working through a number of issues but there still ended up being something kind of underlying all of those things. I was left with this one missing piece to the puzzle. It took me almost two years to get through eliminating all the other factors that they could have also been. I think I could have bounced through a lot of doctors but I was lucky that this one happened to be knowledgeable in the area.

*Annabelle was found to be largely inattentive, a **symptom**²⁷ where she tends to get hyperfocused at times and doesn't know how to attend to things at other times. This difficulty in itself doesn't seem like such a big deal, but it is related to the disconnect between what the world sees and what you know resides on the inside.*

²⁷ **symp·toms** [simp-tuh m-z]

In the Diagnostic and Statistical Manual for Mental Disorders, fourth edition (DSM-IV), ADHD is categorized with three subtypes: hyperactive/impulsive, inattention, and combined (APA, 1994). These three categories are based upon the clustering of the three core symptoms. The “combined subtype” refers to those who exhibit behaviours in both clusters which, to date, is the most common subtype of the three. It has only recently been clinically acknowledged that women with ADHD can have the same diagnosis but present with a different subset of symptoms than men. Current DSM-IV criteria are seen as not being developmentally sensitive, either in gender or age. Thorell and Rydell (2008) claim that, children who display symptoms without meeting the full diagnostic criteria are often equally impaired in terms of psychosocial functioning and that these individuals are often females. Later in life, symptoms such as procrastination, overreacting to frustration, poor motivation, insomnia, and time-management difficulties are common complaints of adults but are not included in the DSM-IV (Thorell & Rydell, 2008). These symptoms will likely affect more domains in adult life than in childhood and need to be clinically recognized. Based on these identified challenges with diagnosis, it is being proposed that the age of onset when symptoms must be present for diagnosis be shifted to the age of 16 years rather than before the age of 7 years (Rosenfield et al., 2008). Thorell and Rydell (2008) conclude their paper by adding that diagnosis should be more of a norm-referenced rather than criterion-referenced procedure.

I think it's much like a grieving process. It takes a while to internalize particularly if you are older. There's this feeling of wondering why it took so long to figure out and a grief of what it could have been if you had only known sooner. But you have to get past that so you can get into the: "Well now what am I going to do about it?" stage. The struggle has made me a strong person and I think it has also brought empathy so that I can now start to forgive and to be more aware. I can start recognizing when I'm going to be in trouble and start putting some other things into place. Developing strategies for both myself and for others and seeing them work has kind of brought me to where I am. It's like you have to figure a new language to bring it out.

*Annabelle is an incessant talker; there was a lot of chitter chatter going on inside that gets tough to block out. She found that medication really helps to **manage**²⁸ the noise. The first one didn't really do anything but the second medication was just night and day. It made such a huge difference both mentally and physically. We can't stress how important it was to have that happen. All of a sudden it was like the whole world just came into focus and Annabelle's chitter chatter settled down. Before ideas would just keep dropping into consciousness and we'd react to them. But with the medication, she went from bouncing around to whatever took her fancy, to picking a goal and working toward making sure that it happened. She could focus and get things done.*

²⁸ **man·age·ment** [man-ij-muh nt]

There are several options for medication, the most common being methylamphetamines or tricyclic antidepressants, which are effective at relieving symptoms but do not cure them (Brown, 2007). They are like training wheels on a bicycle; they can get you going but ultimately a lifestyle change is required for long-term management. Along with medications, a variety of psychotherapeutic and behavioural approaches are employed by psychologists and psychiatrists, such as cognitive behavior therapy (CBT) and working memory therapy (Rosenfield, Ramsay, & Rostain, 2005). Specialists can also exist as well who provide services and strategies to improve functioning, like time management or organizational suggestions. Davidson (2008) and Dodson (2006) urge that combined treatment is optimal. Both studies indicate that a combination of treatments had the most profound impact. Davidson (2008) specifically examined cognitive behaviour therapy combined with medication and found that patients had lower symptoms related to primary and secondary problems than those who took medication alone.

I now start to recognize when I know I'm going to be in trouble. In the past I always felt like "Yes, I should be able to do that." But now I'll ask myself: "Now, is this something I really want to do or really could do?" "Does it really appeal to me?" or "Why am I even sort of considering this?" I can predict a lot better when I don't think I am going to be able to do something and I'll seek a mentor. Asking for help with things I'm not interested in or good at is starting to come a little more easily. I've started to recognize the things that I do do well and to start doing more of them. I found creative jobs and I made my own jobs. I let go of the accounting and found jobs that I enjoyed far more that were more social, involved more problem solving, and were less detail-oriented sort of stuff. It's a pretty liberating feeling.

*I don't think that people realize that these issues can persist into adulthood. I've seen that it's more likely that women suffer through life not knowing and only get to figure themselves out really late, when Annabelle starts to come out in different **contexts**²⁹. The disadvantage is that it's no longer one simple issue at this point; rather it's become a far more complex problem and there are so many more people who are involved. When with Annabelle, I've noticed that some people just don't want to associate with somebody with that disability. Not that I think Annabelle has a disability. However, she does still carry that stigma.*

²⁹ **con·text** [kon-tekst]

The nature of the environment and how it impacts is largely neglected in treatment plans. Although medication and therapy can address the internal environment including personal beliefs, it does not address the external environment that might reinforce beliefs. There is an understanding of success in the context of high production, efficiency, and high returns (Meijers, 1998). There is a need to reframe the idea of success in the context of personal achievement and personal satisfaction. Finding a place where one can thrive should be part of every guidance counsellor's regime. As a society, we need to step away from what people 'should' be doing to allow them to be who they were really born to be (Prashnig, 2008). A study by Johnson (2003) observed that a social construction of gender, including behavioural norms associated with being female or male, made a major impact on parental and teacher perceptions of female ADHDers. There was often a mismatch between expectation versus the child's preferences and strengths. This is one example of the impact of sociocultural influences on self-perception of strengths and abilities.

I started to understand what it was that I really do well and what it is that I don't do so well at and decided to build my life around those things that I do do well. I found two main environmental things that I need to work are: quiet within my own space, this gives me time to think and piece together my thoughts, and then I need social interaction to bring those thoughts out and sort.

*Because there are so many kinds of things that hang different people up. They're not all of the same things ... no two people have the same combination of problems. And so the answer isn't going to be the same. ADHD isn't actually such a big problem. You don't have to let it hold you down. You can overcome it and when you do, you're going to attract the kind of people that you want to be hanging around, and you are going to attract the kind of life that you want. My biggest lesson in all this experience was to not to keep fighting with yourself and working on something that you think you should be doing better. Instead, look at the stuff that's really easy, things that are part of your true **identity**³⁰ and figure out how to make that your life. Delegate the other stuff out or don't do it but don't beat yourself up about it either.*

³⁰ **i·den·ti·ty** [ahy-den-ti-tee]

Each set of symptoms is unique, which is partially why diagnosis is so complex. However, along with each set of symptoms come a unique set of strengths. Forster (2008) argues for the need for developing a strengths-focused identity as a path toward success and happiness. A strengths-focused identity is how a person would describe herself or himself in terms of personal strengths. A personal strength, in turn, is defined as the positive perspective on a personal construct. Hodges (2006) outlines three stages of developing a strengths-based identity: identification of talent, integration of that talent into how one views oneself, and resultant behavioural changes. Strengths development interventions have a positive impact on psychological and behavioural constructs across several domains including education, health care, and the workplace (Hodges, 2006). It is well documented that a positive perspective on life and high job satisfaction result in healthy outcomes. Dorn (2001) asserts that we fail to appreciate the interdependent relationship that exists between career identity and personal identity. Vocational dissatisfaction manifests into elevated levels of anxiety or depression leading Dorn (2001) to believe that careers play a more integral role in the overall identity of people than previously thought.

I think that being a female was a huge disadvantage. Because as one gets older they're into relationships and jobs, so your circle of influence is increasing and you are influencing so much less positively than you could be. It's tougher in the case of young women because the expectations are still so ... lopsided. I'm pretty lucky that way in that I'm able to do what I like to do. I've learned and would like you to learn that you can be a success, your own success. I feel like I'm more of a success in terms of doing more of what I really do well and what I really like to do and that's given me a really deep satisfaction. The kind of thing right to your gut, that's success. You get up in the morning and you love what you are doing and you love the people you are doing it with. I've gotten away from the "you should," you know, the: "I should be doing this and it should feel like this is really exciting [laugh] but shoot me now." When you stop having people dictate what you should and shouldn't do, you kind of allow yourself to do the things you can do and really like to do: that's a really nice feeling. It may or not be a lot of money, but there's a satisfaction there, and that's just so worth it!

KAY: ONE AND THE SAME

I am defined by what I do and that is defined by who I am. I generally introduce myself as Kay or Kay Dee depending on the circumstance. Kay Dee is my public persona that does stand-up and lectures. I'm currently 44, but I'd rather say that I was 7 because that's my favourite age. I guess you could say that I basically talk for a living.

*I met Annabelle officially just about 10 years ago, when I was 33. Annabelle is **eternally 7 years old**³¹. That's probably how I got to like her so much. Annabelle and I are one and the same. We're fun; we make each other laugh just as much as we make each other cry. We are also very loyal and very loving. We care about people, deeply and it influences what we do daily.*

³¹ **de-vel-op-ment-al de-lay [dih-vel-uh p-muh nt-ahl dih-ley]**

To explain ADHD in terms of development, a 'delayed maturation' has been proposed (Brim & Whitaker, 2000) where one of the many symptoms of the disorder is a hypersensitivity, particularly to negative feedback (Mate, 1999). Traumatic and environmental etiologies (Volkow et al., 2009) are found to cause disproportionate brain development to occur affecting, in some capacity, the executive functions: activation, focus, effort, emotion, memory, action (Brown, 2007). Maturation of these areas of the brain occurs relatively late in development. Early trauma appears to cause developmental delays due to inadequate pruning or stunting that results from excess dopamine production and release (Madras, Miller, & Fischman, 2002) as manifested by asymmetrical frontal lobe development, as shown by brain scans, and delayed growth as shown by height studies due to a chronic impairment in the chemistry of the management system of the brain (Martel, Lucia, & Nigg, 2007): specifically the release and reloading of dopamine and norepinephrine. Dopamine and norepinephrine are the core chemicals of our emotions and their excess creates a sensitive, curious, creative, stimulation-seeking individual who is constantly seeking acceptance. At whatever age, these elements of the ADHD brain create an underdeveloped self (Mate, 1999). These individuals are typically behind their same-aged peers. Maturation of these areas of the brain occurs relatively late in development resulting in underdeveloped emotional intelligence.

So, what do I do exactly? I teach kids how to find their own voice. Specifically, I am a drama teacher and I LOVE it! I'm in an ideal position, working with youth with promise or at-risk youth, because I get why they don't get it and I truly understand their struggles. It's been an interesting journey considering my own educational struggles. I suffer from dyspraxia and from being dysphasic.

*The formal **school system**³², unfortunately, did not support the way Annabelle learned. School was experienced as one extreme or the other, interesting or not, and she'd either 100% get it or she wouldn't have a flying clue what was going on. As a result, her marks would be nothing to 100. If she was interested she would give it her all. If she wasn't interested in the task, it wasn't going to happen. So, academically she was either really right in there or she wasn't in there at all.*

³² **learn·ing dif·fer·ence** [lur·ning dif·er·ruhns]

Although learning disabilities are identified in the school system, ADHD cannot be diagnosed there. ADHD is a medical condition, and the diagnosis can only be made by medical professionals. Identifying associated problems is not uncommon, as 15-20% of children have an associated learning disability (Karande, 2005). A comorbid learning disability makes early diagnosis more likely for young females due to teacher referral (Nadeau et al., 1999). Young girls with LD are often sent for testing for LD and, during that process, ADHD also gets discovered. A more typical story, however, due to behavioural differences, is that three ADHD populations are often overlooked: gifted students, female students, and students under high stress (Brown, 2007). A common misconception is that the disorder is a learning disability because it can still affect learning and so many also have a learning disability. However, there is a difference. A student with a learning disability has a deficit in one or two areas while performing at or above average in other areas. In contrast, ADHD affects learning globally and compromises all cognitive functions, rather than just one or two specific areas of function.

Only when I got a chance to go to university did I realize that I had a really interesting learning style. I found out that I love school and I love learning. I'm very verbal and so by trend I gravitated toward courses where speaking, communicating, and being creative were more the norm. I was lucky to be able to capture that strength early on. I also took my time. I did the whole 6-7 year thing. At the end of my academic journey, however, I hit a crossroads. It seemed that my only options were to join the army, because that's what my dad did and it's got lots of structure; or go and do this sort of creative stand-up acting thing and end up on drugs and dead in six years. At school I was starting to talk and do little guest lecture things. All the while, I kept hearing this voice in the back of my head taking me back to a conversation I had in high school.

*Despite emotional and academic challenges, for the most part, school was okay. We like being in a learning environment and have never really left it. First of all, there are bells and announcements that can be very awesome or very distracting. The bells are very helpful; the **structure is helpful**³³. We know what we're supposed to do, when we're supposed to do it. We love that there's two bells: there's one that says it's over and one that says it's starting. There's time given for going from one thing to the next, and we like that. It really helps Annabelle with transitions as they are one of her biggest challenges.*

³³ **struc·ture** [struhk-cher]

Structure can be very beneficial. The internal clock does not count the passage of time very well (Kelley & Ramundo, 2006) so having an external clock, an external calendar, and other reminder devices is a huge coping tool. Structured environments are helpful because they give a clearer idea of what to expect. Carrol and Ponterotto (1998) found that a dominant factor to vocational success was the extent to which the individuals took control of their lives. A number of the success stories out there are those of entrepreneurs or people who managed to create their own job within a structured environment (Corman & Hallowell, 2007). Creating your own job can result in working in an environment that is specifically suited to your own skills and interests. Garber (1990) outlines some careers that are a 'good fit'; teaching ranked high on the list.

I was often othered through the system, and never imagined I'd go back. But my life and my career can all go back to one simple comment made during the most amazing conversation ever. I was talking with my principal at the time just before it was getting time to graduate and he asked me: "What do you want to do when you grow up?" "Grow up! Ew, I'll never do that!" At which point he looked me square in the eye and said: "Well, you deserve to be a teacher. You DESERVE it. And if you ever are, come see me." I never even thought about it again until 7 years later, when I finally hit my crossroads. So, again, I applied to teachers' college and I got in! It was both the worst and the best 6 months of my life.

*In dealing with challenges, I think what got Annabelle through is being driven. Annabelle is entirely **extrinsically motivated**³⁴. If she likes you she'll do anything for you and if not then she can make your life hell. There's no internal reward system there so she relies on the feedback of others to know how she is doing. She cannot and will not be perceived as a failure.*

³⁴ **mo-ti-va-tion [moh-tuh-vey-shuh n]**

Students with ADHD appear to lack the internal mechanism to get going and maintain drive. As a result they tend to quit working more often. One theory is that there is a reward deficiency in the brain so there ends up being a need for constant external validation (Brim & Whitaker, 2000). These students actively seek ways to create pleasurable feelings. When students find an area that produces positive feedback, these are the areas in which individuals can become very interested and quite hyperfocused. Motivation comes from the Latin root, motives, which means 'a moving cause' so motivation questions what creates human action (Ahl, 2006). For some people there are lower levels of intrinsic motivation based on brain structure so extrinsic reinforcement is necessary as supplemental (Gable & Strachman, 2008). A study by Kohls, Herpertz-Dahlmann, and Konrad (2009) observed heightened activity in the frontal lobes for some people when thinking about the future. In others, the brain that deals with time and the future is underactive with the same imagined stimulus. It appears immediate external motivators, such as rewards and punishments, activate the mental state to increase these individuals' motivation. Overall, there is a greater reliance on external validation (Barron et al., 2006). Ahl (2006) believes that structural and environmental impediments can aggravate motivational issues.

When I came back to my hometown with papers and a portfolio, and totally lacking employment, I was challenged by one of my friends. "Go see the principal!" And so, with only four days before the start of school, I went over to the school I graduated from, tail between my legs, along with my stupid little package. The reaction was not anything like anyone would anticipate. Rather than a rigorous interview I got nothing but a booming welcome: "No way! What?!? Are you kidding me!?! You start Tuesday." Can you believe that he hired me on the spot?!?! Right on the spot, and he walked me around the school, we didn't even sit. That was 17 years ago and I'm still here. And I'm darn good at it.

*Annabelle has an amazing mind and an amazing talent. Her emotional state can be very easily influenced; it tends to spray paint and get all over the people around her, which can be view as negative but is a huge benefit to being a Drama teacher. She can also access information in her own head very quickly. She's one that can outwit, out-think, out-google anyone or anything. As an educator, this ability is largely beneficial because, when a kid has a question, she's got answers. Annabelle finds peace, comfort, and joy in **creativity**³⁵. Our greatest joys come from painting, teaching, doing stand-up, and performing. This is where Annabelle becomes a gift and a tool and a positive thing. But, in knowing Annabelle, with every positive moment, there is also a challenge. It flips quickly and is so connected.*

³⁵ **cre·a·tiv·i·ty** [kree-ey-tiv-i-tee]

Often, success stories mention a learned creativity that comes with this particular kind of mind (Corman & Hallowell, 2007). Hornos-Webb (2005) share a list of all the strengths and gifts associated with ADHD. These gifts may be due to a lack of inhibition, an ability to process multiple things at once, or a need to adapt to continuous blunders, yet "somewhere among the chaos is an enormous benefit to thinking 'outside of the box'" (Hornos-Webb, 2005, p. 7). Zentall et al. (2001), in looking at gifted students, note that our proficiency in expressing creativity gradually drops off as we learn to accept popular opinions, evaluations, and beliefs. Hornos-Webb (2005) indicates that profound creativity includes some of the following characteristics: inattention, daydreaming, hypersensitivity, sensation seeking, enthusiasm, and playfulness. These creative characteristics are often cited as symptoms of ADHD.

In my life, personal relationships have always been challenging for me as well as for my partners. I experience great distress in my personal life. Generally, I tend to have amazing relationships that just don't sustain. I think it's because intimacy is the hardest part of life to structure. I've been told: "You're just too impossible to be with." It's just too technical, I think, for some people. My emotional state can fluctuate dramatically. All joy is all joy and all depression is all depression; it is difficult discerning one emotion from the next. It's my personal relationships that really forced me to seek help. A partner of mine once said: "Look, there's something not right with you!" Three months later I was diagnosed.

Annabelle experiences emotions so vividly and so loudly that it splashes on the people around her. It can dictate the first to the last part of her day, particularly if she hasn't slept well. If she's tired, then she gets clumsy and frustrated very easily. Frustration often turns into anger. Once this transition happens, it's very challenging for her to get back on task. Strong emotions are so intense that they can be difficult to handle at times. It's like a cognitive flood of chemicals; that is how she experiences emotions. "I'm here because I've hit the wall in terms of my personal success and I can't seem to get past these certain walls. I just feel like I'm going in circles. What's wrong?" I didn't want to have it and fought the diagnosis for the next three years. In some ways she justifies my behaviour³⁶.

³⁶ **ac·cept·ance [ak-sep-tuhns]**

Diagnostically, another criterion is that it negatively impacts two or more aspects of your life. Dunn's (1988) research in perceptual strengths or preferences reminds us that there is a difference between "able" and "best" channels. Schools fail to differentiate these two items and often neglect teaching students using an optimal learning style. Dunn (1998) defines a learning style as: "student reactions to elements that affect how people concentrate on, process, absorb, and retain information" (p. 306) where these elements include environment, physical well-being, emotional state, and cognitive differences. Forster (2008) argues for the need for developing a strengths-focused identity as a path toward success and happiness. Solden (1995) re-defines success for the ADHD woman as a commitment to self-love, self-respect, and self-acceptance.

Now how the hell, honestly, does one get through an entire school system, through a university, through teachers' college, and have a good 7 or 8 years through a teaching career before I figured out I was the very duck I was teaching? Now, how do you miss that? In the 70s, problem children like that just weren't being looked at academically, and there was certainly no individual education plan for that. Even when I went through teachers' college in the early nineties the idea of special education was really just boys who couldn't read or boys who couldn't sit still. There wasn't a lot about looking at women. It's like heart disease or cancer, women get that too?

When dealing with Annabelle not knowing that she's the one causing you all these problems you get all these strategies. You get through and you just think I'm different and she's different. Our parents knew we were different but there was this fear of being labelled. So they lived in a condominium overlooking denial. They must have been trying to protect her or they were pretty weird so, maybe she just fit right into their spectrum of what was normal. Besides, she didn't act like all the other boys who had labels and needed help. Symptoms are very different in women, I think, than in men. I also think, as an aside, that gender and orientation are connected in some way. Living out of the box is a way of life³⁷.

³⁷ **success** [suh k-ses]

Brown (1994) defines success from the perspective of academia as graduation from an institution leading to employment in a career that provides for a satisfactory level of quality of life. Carroll and Ponterotto (1998) use social cognitive career theory (SCCT) as a framework for the successful individual. SCCT proposes that career choice is influenced by the beliefs an individual develops throughout a lifetime including past accomplishments, social persuasion, and learned reactions. Therefore, self-concept and self-esteem may play a substantial role in the career one will pursue. Their study found that a dominant factor to vocational success was the extent to which the individuals took control of their lives. A number of the ADHD success stories out there are those of entrepreneurs or people who manage to create their own job within a structured environment. Characteristics like: hyperfocus, quick thinking, multiple projects, high energy, stimulation seeking, taking risks, and creativity have been some of the characteristics that many entrepreneurs attribute to their success. Successful adults with ADHD avoid careers that place demands on their weaknesses, and show a goodness-of-fit for strengths and interests.

It just wasn't the time for women. But I can't help and think if I found out 20 years earlier, I think I might have been successful faster. Because, boy, has my life ever changed in the past 10 years. Since then I have tried to achieve as much as I can academically. I started taking extra courses and still continue to do that. It's been the driving force since 10 years ago when I sort of realized that knowledge was power. I call it my quest for knowledge and understanding. Being in education I've taken on the duty of role model and advocate. That's what I do; I let it be known that people with a 'neurobiological disorder' can do whatever they want and they've got a chance, they've got choice, they've got access to success and they can BE. They might be outside of the box but why is that such a bad thing?

*Knowing Annabelle has given me the courage to really be outside the box. We were never in the same room as the box in the first place so why bother trying? The Annabelle that I know, despite her challenges, was lucky to find something she was good at early on and had the chance to focus on that throughout school and all the way to university. Through her past experiences, she's gained some valuable insight and additional skills and coping mechanisms along the way. She's also found her **strengths**³⁸. I think it's the reason she's been successful in getting through school.*

³⁸ **strengths [strengkths]**

In Hallowell's practice (Hallowell & Ratey, 2005), diagnosis includes the identification and implementation of a five-step plan that promotes talents and strengths. This program includes self-education, changes in lifestyle, self-imposed structure, and counselling along with a focus on successes, sticking to what you are good at, and finding what you love. Successful adult patients learn to find a goodness-of-fit for strengths and interests, and avoid careers and situations that place demands on their weaknesses. Strengths-based instruction (Cantwell, 2005) approaches learning and achieving in a way that focuses on the students; it is a student-centred approach. The goal of strengths-based instruction is to empower students to learn independently by helping them become aware of their strengths and talents. Such strength-based instruction results in significant differences between 'traditional' and 'strength' groups in engagement, quality, and average exam scores. Helping student learn how to apply their strengths and talents in learning tasks improved their academic performance. These lessons, in turn, are valuable throughout life to promote future successes.

Being outside of the box can be challenging. My colleagues perceive me as not trustworthy, difficult to get along with, and stubborn. Well, I am stubborn, it's true. But they also have no idea what it's like. I think they have an expectation that I should be just like them. It's been difficult to seek leadership positions because I'm often seen as a monkey or an entertainer and not someone that is reliable or that can handle serious situations. I would like to point out, however, that they are wrong because I HAVE done it.

*I've heard things said about Annabelle like: "She's gifted," "she's an idiot," and "she's just different." There were lots of labels that went with her, and we were often marginalized through the system and were never a **good fit**³⁹ anywhere. How did she ever manage to cope through a school system that really didn't work well for her? Well, for one, she was charming as hell so she managed to make friends with students much older than her. Through them she cheated, she copied, she would get help, or she would overdo it. On the other hand, if she thought it was stupid, she just wouldn't do it at all. There was no way I could get her to do anything she didn't want to do.*

³⁹ **the work-place [th uh wurk-pleys]**

When adults assume full-time jobs that require independence, the deficits in attention, impulse control, self-regulation, and organizational abilities often become problematic (Painter et al., 2008). Occupational underachievement and job dissatisfaction are commonly reported in studies of diagnosed adults. Resilience is not inherent; it can be learned through intervention. Environment can play a significant role in the path to success and happiness. Nadeau (2005) investigates ADHD adults who have reached high levels of achievement without the benefits of intervention. She reports that the external resilience factor of 'goodness-of-fit' with the academic/working environment is one key intervention in career development. In personal communication with Eaton (2009), she defined dysfunction as: "dysfunction equals mismatch." Garber (1990) outlines some career characteristics that might be a better fit for individuals with an ADHD kind of mind: careers that reward creativity and spontaneity, and a frequent change of tasks, and having other support staff responsible for organizational tasks.

I know I'm lucky to be academically able. I think that my privilege helps me cope in ways that other people would not have access to. I have to advocate for myself because I know that I need things that are different from everyone else. Being in education is a great place to be a different duck, so being lucky to work in a system that works to support is awesome. My boss has a legal obligation to accommodate me and I have access to an abundance of resources including adaptive software and this and that. I've learned to adapt my life in a number of ways. I use lists a lot; checklists and 'to do' lists. I always reward myself first. I've learned that, if I walk or exercise, I sleep. If I drink too much red wine, I won't sleep. If I eat certain foods, I'm not functional. I've also learned that it's important for everyone to have someone in your life who loves you just the way you are. And to find an environment that works with and promotes your gifts because we all have gifts.

Therapy⁴⁰ has been tremendously helpful in getting to know Annabelle. Both for when things go wrong and when things go right because sometimes the change is so slow, it's hard to see it. Therapy allows you to accept Annabelle for who she is in all of her strengths and all of her weaknesses. Naming and owning Annabelle has been very helpful. If you ask Annabelle what environments she thrives in most she'll give you the following list: structured, social, verbal, creative, task-oriented, short bursts, flexible, challenging. These are spaces that allow her to really think and learn differently.

⁴⁰ **ther·a·py** [ther-uh-pee]

Karande (2006) promotes combined treatment with a strong focus in therapy since therapy promotes understanding of the self and can help prevent the development of future psychiatric disorders. Cognitive behavior therapy (CBT) was a technique originally developed as a treatment for depression but has recently expanded to other areas. The focus of CBT is on modifying problematic thoughts and beliefs to create changes in emotions and behaviours (Davidson, 2008). The aim of CBT is to empower the patient and to focus on the positive elements of everyone's personality, which can armour the individual with psychological coping tools to deal with negative thought patterns that are often coupled with frustration. Self-understanding leads to self-acceptance. Self-acceptance leads to learning tools and strategies to cope that are appropriate to the individual. Such treatments are not a 'one-size-fits-all' approach to healing but encourage an individual and personal approach to healing.

School's the perfect place for me and my career; it's in four month chunks, with lots of interruptions, lots of change, and really strict rules. I structure my classroom to suit my own and my students' needs. In my classroom I have no expectation where people will sit while they learn. You can see games here and couches over there. I find if you let them putz around a bit at first they are far better at getting down to business afterwards. Now I truly get it, I understand their struggles and I can get why they don't get it at times. At the same time, I'm not easy on them. I don't believe in can't, I only believe in won't. And that's just something I can't help or fix is that attitude. I provide a space, an environment, and an opportunity for all my learners to excel.

In our class there's NOTHING wrong with thinking and learning differently. Knowledge is power. Knowing myself and knowing Annabelle has really allowed me to have sympathy for my students. We all have something that makes us unique. It's really cool; we call it a gift⁴¹.

⁴¹ pas·sion [pash-uh n]

What this story shows is that what truly matters is not so much the content of your discipline, but rather your passion for it. When you love what you do, it is magic and your excitement is contagious. It is not what you know, but why you chose to pursue what you do and focusing all your gifts and talents towards that pursuit. The gift is what you make of it. Literature on strengths (Clifton & Nelson, 1995) differentiates talents from strengths. Everyone possesses innate talents, but only identifying these and nurturing these talents can they be formed into strengths. The recipe includes: a focus on successes, sticking to what you are good at, and finding what you love. Success literature under a number of different frameworks (Kiewra & Creswell, 2010) shares one key message: "Follow your bliss."

I'm good because I'm very passionate about what I do, as well as very creative. Having a creative mind is a really positive thing as a teacher because you have to be able to fly on your feet and fly by the seat of your pants. I have an abundant amount of energy and I can think fast - I can deal with crises and questions quickly. That's the way I live and the way I can stay passionate. I would call myself a success. I have healthy relationships. I'm a really good teacher and well-respected by my students and colleagues. I get validated constantly. The idea is that the master holds the pebble; the young learner is supposed to be fast enough to take the pebble from the master. To me success is that the kids can take the pebble from my hand. Well, I have definitely had my pebbles removed many times this semester and I think it's fantastic. He was right, I did deserve it. And I LOVE it!

I've found a way to move the focus of my life on my strengths, my talents and my abilities, to increase my choices and options ... It means that I've learned to separate out my strengths from my weaknesses and to embrace both of those as part of myself, even though it's a long stretch. I've come to accept the fact that I do have deficits out of proportion with the rest of my abilities, and that these do severely impact my life. I've learned to separate out the shame, embarrassment and guilt surrounding these difficulties from my core sense of self. ... What I've learned is that to be successful with ADD, you must eventually restructure your life. You move through shame and guilt and must ultimately redefine your sense of what it means to be a mature, confident, competent, woman ... I have learned to value myself as a creative woman who will never match some culturally sanctioned image I may have internalized a long time ago about what a woman should be or be able to do.

(Solden, 1995, p. 40)

CONCLUSION

This project is written for women who struggle with adult ADHD, known or unknown, and for the people in their lives who work with and support them. My goal throughout this work has been to provide an understanding of their experiences. Traditional approaches cannot work in the true telling of this story. I therefore let the words of my participants tell their stories directly. All four women share a common struggle: the search for self-understanding, self-acceptance, and personal growth. Although each experience is unique and each participant is at her own stage of her journey, each journey has some common landmarks along the way.

What I've learned from My Participants

Getting the Diagnosis

For these women, the diagnosis was the primary landmark to finding the path towards self-defined success. It ultimately provided a great sense of relief and started them on a new road towards personal understanding. “By identifying, acknowledging and confronting it I’ve really just started to learn how to cope” (Em). Elle also experienced this perceptual shift, quite vividly and dramatically: “It was just like night and day. All of a sudden it was like the whole world just came into focus ... and I could just, kind of, focus and get things done. I just couldn’t believe how much I accomplished ... It was quite an interesting revelation.” Faith, a very reflective and insightful woman, also admits relief from diagnosis. She claims that the experience itself was rather anti-climactic for her since it provided a confirmation more than anything. She affirms that being diagnosed should not be feared; rather the fear lies in *not* knowing what is going on: “I think I was just afraid to get final testing because then it meant I wouldn’t just grow out of the symptoms. But, once I found out about it, it was sort of a relief more than anything else.” She was relieved to know that she was not getting dumber every year but, rather, she was facing the adjustment challenges that many adult ADHDers face later in life.

For Kay, processing the diagnosis was a bit more difficult than highlighted by the others. “It was like: ‘Nice!’ And then I cried my eyes out and fought the diagnosis for the next 3 years. I didn’t want to have it. Because that meant that there really was something wrong with me.” According to Solden (1995), the important step to get through in the ‘grieving’ process of diagnosis is getting past anger and sadness to move into acceptance. Letting go of negative associations allows for you to approach life with renewed enthusiasm and excitement. This renewal is precisely what Kay experienced, a life-changing event: “If you even remotely suspect that you are struggling in any way whatsoever seek professional help ASAP, it will change your life.”

Diagnosis is the start of treatment because, as Hallowell and Ratey (2005, p. 178) outline, “treatment begins with hope.” When this diagnosis is made, there is a perceptual shift from personal blame to that of forgiveness and understanding. It is the beginning of a reflective process in learning about what ADHD is and what it isn’t and about both personal and ADHD strengths. Diagnosis is key to finding personal success because you cannot even begin to take advantage of the strengths of ADHD if you don't know that you have it.

Identifying your Strengths

“Once the diagnosis is made, the next step is to find and develop your talents.” (Hallowell & Ratey, 2005, p. 178). If one lives a life filled with negative feedback, either internally or externally, this negativity is often expressed as anxiety, depression, and low self-esteem in adulthood. Individuals with ADHD often suffer from low self-esteem. Participants recall being told that they were lazy or messy, and that they should try harder, or should pay better attention. Kay claims that she was often “othered through the system,” while Faith believed she was getting progressively dumber. In Em’s experience: “If you have a lifetime of messes ... I’ve never not pulled something off but it’s always amidst enormous anxiety and terrible stress ... [you] develop a really intense fear of failure.” Elle can still struggle from time to time: “Why are you doing this to yourself again? Because, you know, you’re never going to know that as well as you want to know it. Just let it go ... go do something you’re really good at.” Elle’s statement reveals that

she is progressively learning to identify in advance when it is best to let things go and move on to tasks that exploit her strengths.

The identification of strengths shifts peoples' ways of viewing themselves negatively into a more positive light. We all have weaknesses; developing a strength-based identity merely trains one to focus on one's numerous strengths over focusing on one's weaknesses. For Em, her impulsive risk-taking nature has been hugely beneficial to the development of her career. She is a strong writer and has harnessed this strength, along with a strong understanding in the sciences, to acquire a degree and directly apply her skills to her career. Kay is a talented performer and has found the ideal fit for her using this talent: "My greatest joys come from ... performing ... ADHD become[s] a gift and a tool ... I'm known to be funny and that brings a lot of depth to my work, my friendships, and my personal life." Faith, also a very talented writer, exploits this strength in her academic career, successfully attaining a double-major as well as a Master's degree. Elle, however, had a more challenging path in her post-graduate academic pursuits where she took a number of accounting courses in an effort to attain a certified management accountant certificate. "I didn't finish the course ... [I] discovered ... that accounting was not really suited to me ... I didn't stay long at a lot of places. I just kind of got bored and moved on." Only after she left accounting did her strengths start to shine: "I retired from working to stay home with the kids and that was kind of neat because it allowed me to work the way I work best, which was to respond to whatever was going on." In discovering her strengths, Elle started to pursue areas that were more suited to her skills and interests.

These women show us that an imperative tool to coping with and succeeding with ADHD is to build on strengths. You must build your life and your identity on your talents and strengths, what is right and good about you, and not on your weaknesses since these will always exist and, although they can be coped with, they can never be corrected. Faith suggests that it is always possible to "find people around you who can help you in the areas that you are weak and just focus on the other things that you're really good at. And focus on ... the creativity and resilience that come with ADD." This is the freedom that a diagnosis of ADHD can bring, the permission to understand, to let go of your weaknesses, and to focus on your talents to turn them into strengths.

Articulating your Passions

In initially reviewing these interviews, I felt that these women were using the word strength and passion interchangeably. I interpreted that ‘finding your strength’ and ‘finding your passion’ meant the same thing. Strength and passion, however, are not the same thing. Strengths identify what you are inherently able to do, naturally and with minimal effort. According to Clifton and Nelson (1995), a strength is the ability to provide consistent, near-perfect performance in a given activity. Building on talents leads to developing strengths, while continuously building upon talents can optimize strengths. Passions, on the other hand, indicate interest. According to Vallerand (2007), a passionate activity is enjoyable and important and has some resonance with how we see ourselves.

All of these women are passionate. While Em is passionate about her work in Inuit advocacy, Elle and Kay consider it their duty to act as advocates and role models to the ADHD community. “I come out the same way I come out with my orientation because I think it needs to be known, particularly in education. I’m a role model, I have a duty. That’s what I do” (Kay). Faith, on the other hand, is passionate about her church and her community as well as her writing. In this case, Faith’s strength in writing is also her passion. Her passions are reflected in her current choice of work as an employment support worker. Although she is not certain this career is where she will stay, she successfully applies both her strengths and passion for helping her community to her work: “You can do any career and be successful ... you really have to have a mission ... that thing that drives you ... as long as you have a passion for it. And, that’s the most important thing.”

While strengths identification builds self-esteem, passions spark interest and maintain drive. In reframing ADHD as a deficit in maintaining momentum, nurturing passions becomes an equally important strategy in managing and succeeding with ADHD. Recall that ADHD is not a deficit in ability as much as a lack of drive to get going. As Brown (2007, p. 25) states: “It is a problem with the conductor of the symphony of the brain,” suggesting that the ADHD brain is able to make beautiful music through each individual musician; however, it lacks the conductor to co-ordinate and motivate each player to stay on task and remain in rhythm.

Defining Success

Being in rhythm is what life is all about. We all need a task or goal to strive for, be it becoming a corporate executive or blissfully living from moment to moment. Success is personal. The only person who can define success is the person striving for or experiencing success. Each of these women, in her own self-discovery, managed to find and define what she was personally striving for.

- “[If] you’re doing something that you get up in the morning and you love what you are doing ... there’s a satisfaction there that’s ... right to your gut. That’s success.” (Elle)
- “Balance. Balance somehow between ... just balance.” (Em)
- “Success is, well, not just finishing your education, but meeting all of your goals [in life].” (Faith)
- “Success to me is being able to be surpassed by my learners ... that the kids can take the pebble from my hand. That’s pretty spectacular.” (Kay)

Elle loves getting up each day and lives day by day, moment to moment. Em strives to balance her personal life with her career and remains mindful of her decisions to achieve this goal. Faith looks to find satisfaction beyond simply her career. Kay empowers her students daily. These women have defined their personal mandate, their reason for being if you will.

Defining your own life, how liberating! Yet we are bombarded with daily messages from our parents, our teachers, our friends, our society ... of what success should be. Solden (1995) stresses the anxiety-inducing effects posed by society with the picture of the ‘culturally ideal woman’. In searching for their own identity, all these women have managed to move beyond that disempowering view of success. They’ve removed the ‘should’ from their vocabulary to see that they ‘could’. No one fed them this view of success; they discovered it through life experience and self-reflection. They’ve created their own definition and achieved continued success on their own terms.

Integration

The above four findings - understanding of self, identification of strengths, finding one's passion, and defining personal success - are milestones along the path to living successfully with ADHD, the first marker being the diagnosis itself. Diagnosis allowed these women to redefine their view of themselves while providing insight into personal strengths. The reflective process that follows the diagnosis encourages one to identify personal interests, passions, as these are what keep the ADHD mind focused and engaged. These women, upon diagnosis, managed to understand where their strengths lay and integrated these into their passions. Finally, through this integration, these women create their personal definition of success that they work towards and maintain, liberating themselves from societal definitions and expectations.

Kay, the drama teacher, uses the understanding of her own life experiences, the tools of humour and performance, and her passion for those with learning differences to empower at-risk students or "youth with promise." She achieves success when she challenges them to surpass their own expectations. Elle, the entrepreneur, uses her career challenges as a learning lesson into her gifts of creativity and 'big-picture' thinking to create her own virtual assistant business. In this work, she aids entrepreneurial females in kick-starting their own businesses, thereby fueling her passion and empathetic understanding for struggling women. She achieves success daily in loving what she does and the people with whom she works. Faith's natural strength in and passion for writing have allowed her to achieve academically. Her love of community has her gravitating toward working with people. She currently uses her gifts in writing as a career support worker to assist individuals in finding their own careers. These strengths and passions will continue to follow her as she explores her own future avenues in school, work, family, and life to fulfill her personal meaning of success. As a freelance writer and filmmaker, Em dives into new endeavours and risks continuously using this strength, along with innate creativity, to successfully thunder along in her career. Achieving balance, personally and socially, is a daily mandate defined by her passion for human potential. This passion draws her into the work of Inuit advocacy, an area where she successfully culminates her self-understanding, her strengths, and her passions.

Taken together, these four common themes describe a metamorphosis. Diagnosis leads to an exploration into the self. Through this exploration, one is able to identify strengths and passions. The trick is to find a way to integrate innate strengths into individual passions. This marriage of strengths with passions leads to an all-encompassing yet very personal definition of success, a definition that helps one navigate through choices in one's life. The integration of self-understanding, innate strengths, and personal passions brings these women onto the road of personally-defined success, leading them continuously forward in their journey.

What I've Learned about Myself

I always struggle with conclusions because there is a finality for which I am never ready. They are generally rushed, incomplete thoughts and precisely the opposite to what a conclusion should be. Thus, as I continue to write these final few paragraphs, the learning still continues and so the cycle is not yet complete. What I write about what I've learned now will not reflect what I will learn a year from now once I become removed and separated from the process. One would think that writing about my own learning throughout this process would be the easiest part of writing a project but I find myself stumped more than ever how to properly articulate what this experience has been like for me. In stealing words from Kay: "My emotional state can spray paint. So, even though I'm experiencing something, it's so vivid and it's so loud it gets on other people that are around me." The words 'emotional rollercoaster' immediately come to mind but even these words do not do the experience adequate justice. I think that anyone who has gone through the Master's process can begin to empathize, and anyone doing a Master's with ADHD can more accurately relate. But the experience itself is very internal and very personal. It has, in all its good and all its bad, contributed to my growth as a decision maker, a writer, and an adult woman trying to accept her own ADHD.

Growth as a Decision Maker

I can't say that I've become a better decision maker. The most trying task throughout this whole process for me was selecting and sticking to a final topic. Even now, still, as I prepare for final submission, I question whether or not this was *the* topic I was meant to explore, whether or not there is something still to be said, and whether or not what I say now will still reflect what I think a month, a year, or a decade from now. My fear is that these words, printed and bound, will permanently define me as a person. They will keep me frozen in this moment in time. What I'm coming to realize, however, is that these thoughts, as they come in passing and end up on my computer screen, are just the beginning. Although they might end this project as well as this chapter of my life, they also begin the next. As experiences occur, perceptions will change, and so when I read this document a month, a year, or a decade from now, my thoughts will have absolutely changed. I will have new experiences to draw from, new insights formed and new information accessed. What I need to accept is that I am working with what I have for now, the experiences and the information. The decisions made now could always later be analyzed as wrong, but they are the best decisions that can be made at this point in time. You do the best you can with the resources you've got. All I can do is to continue to learn from the experience and not analyze it to death. There will always be more to say; there will always be more to explore. It's time to lay the past and the present to rest and move on.

Growth as a Writer

Can I say that I've become a better writer throughout this process? Sometimes improvement is so incremental, it's like watching your own hair grow. In reflecting on this process, I realize that I have grown both as a writer and a storyteller. I've exploited the creativity, empathy, and authenticity that come with an ADHD kind of mind in the writing and in the telling of these stories. In using my creativity I've presented my research in a way that appeals to an ADHD audience. I've also presented my research in a way that demonstrates how an ADHD kind of mind works and thinks; floating from topic to topic and blurting out bits of information as they come into mind. I was not rigid in the presentation of my ideas because the very structure of this work helped me to fully understand the purpose of this project. In using my empathy I drew upon my own experiences along with the

experiences of countless other women that I've both encountered and that I read about to create the story of Annabelle. Annabelle is the core story that we all share; she is the personification of female ADHD. She is a character created to stir empathy in others since she is someone whom we can all, in some capacity, understand. In using my authenticity, the stories of my participants were written using their own words from transcribed interviews with little modification. Through this very process of selecting, writing, and reflecting upon the words of my participants, my own ideas and understandings emerged as they would in a natural conversation in response to what the women were revealing about themselves. I learned that, for me, ideas flow like conversations as does my writing. I learned that my strength in writing comes in stepping away from the conventional, and in using my gifts of creativity, empathy, and authenticity. My writing and my storytelling have improved not because they have become more 'academic' but because they have become more 'me'.

Growth as a Woman with ADHD

Just as I struggled in my writing and in finding my own voice, I struggle with my identity in finding my own rhythm. I think what I've learned most about myself is that I have not yet stepped foot on the road that my participants have found, and that I am, actually, miles away from it. While they have moved from self-understanding to identifying strengths and passions and defining their own success, I am still working on internalizing my own diagnosis. I have always sensed that there was something not quite right about me. Sometimes I would describe it as feeling that I was broken. In meeting like-minded individuals it has been comforting to realize that I am not unique in that experience, and that I am not alone. A community exists; a community that I can, if I'm brave enough, choose to embrace and become a part of. I continue, however, to struggle with what is *me*, what is *ADHD*, and what is me as a result of ADHD. I've learned that, although critics exist all around us, that I am, like these women, by far my biggest critic and my worst enemy. At the same time, I've learned where I need to move next to jump onto my own path towards success. I need to acknowledge and embrace my strengths, find supports for my weaknesses, and follow my passions. I need to ignore what I think I *should* do to see what I *could* do. It all starts with diagnosis, and now that I've got that, it's only a hop, skip, and a jump away to the next milestone.

This project is written for women who struggle with adult ADHD, known or unknown, and for the people in their lives who work with and support them. My goal throughout this work has been to provide an understanding of their experiences. All five of us women share a common struggle: the search for self-understanding, self-acceptance, and personal growth. Although our experiences are unique and we are all at different milestones along this journey, each journey shares some common landmarks along the way. The path we choose to follow begins with diagnosis, a chance for insight and understanding of the self. Upon forgiving our weaknesses, we can identify our strengths and integrate them into our passions. We maintain course by defining success on our own terms, as guided by interests and abilities. Although I am not yet ready to create my own version of success, I now finally have insight as to where to find it as the meaning of success is my definition to make.

“Analyzing ‘what is’ does not tell us ‘what could be’.”

(Prashnig, 2008, p. 5)

EPILOGUE: A LETTER TO MY TEACHERS

I was bored. I couldn't handle what we were doing. Not because I'm not able so don't tell me: "Don't worry about it. Girls don't know how to do physics." If I'm not inspired the brain just turns off. My mind was constantly somewhere else while doodling or fidgeting. Sometimes I'm nice and quiet and polite. I might have good marks. I can even be at the top of the class. Nobody ever recognized that there was a problem going on. I was a total flake.

The expectation was to behave like a normal adult, wait my turn, not talk so loud, and be quiet. I was always in trouble for being a mess. My desk was completely crammed with crap! You told me that I was messy, that I was sloppy, and that I was lazy. Report cards said: "If only you could apply yourself." Or, "I know you're really smart you're just not showing me." And then you said: "You didn't come across as one of those kids. Sure, you were a little disorganized and you were different but you were very smart. When I asked you questions you came up with great answers, you were a really bright kid. You were just really different from anyone else."

At school we get evaluated based on academic performance. Starting in university I could never make it to class but the expectation was: "You're an adult. You should make it on time." Once you leave the ivory tower you get judged on how well you can perform tasks. And if you can't perform those tasks then you start to fail.

It causes such a barrier to try and do your job. It's a kind of an invisible disability that can be so disabling in so many ways. It's not even a case of: "You need something that's accessible to you in your work station." It's a case of: "Okay, I'm overloaded, there's too much information going through. How do I sort through it?" Overwhelm is a big word in my life.

I wish I had had a mentor. I wish there had been somebody to let me know what to expect and how to cope better. But it was 30 pounds and my life crashing around me that made me think: "Why all of a sudden?" That one doctor said: "Well it's because you're like a hard drive and you've added one too many programs and crashed it."

I was not relieved at all by the diagnosis at first. I thought it was a threat to my identity. But as I learned, I realized that as much as we ADHDers have these things in common, we are still very much individuals. It's not as all-encompassing as it seems.

Accepting the diagnosis means I can put mechanisms in place to cope with it; the resulting improvement has been really remarkable. Just the awareness of knowing what's going on is, to me, the most valuable part. It's that ability to be able to know: "This isn't going to go on forever. I have a way out of this. I have a way of dealing with it." Or, being able to turn to someone and say: "I need help." Most of my life I was afraid to ask for help because I did not want to be seen as a complete failure; most of us have that. I think the hardest thing when looking back to negative experiences pre-diagnosis is learning to forgive myself. And I'm still working my way through that one.

The self-management tools are the most important part of coping for ADHDers, that and my own self-awareness. I don't know if a lot of change needs to happen in schools, other than an understanding. But for me having my teachers know about female ADHD could have made a huge difference because I wouldn't feel that they were judging me. I had two good teachers in my lifetime. They took the time to give a damn. And, when I think about the teachers who really made a difference for me it was ... it's not like they got it right. It's not like they said you have ADHD. They completely had it wrong as well. But what made the difference was that they cared and they believed in me.

You asked me: "What do you like to do? What's EASY for you to do?" You talked to me to get a sense where my strengths lay. You played up those strengths and allowed me to express my intelligence. Classes with a variety of options were the classes where I did really well. So they just came up with different ways. And they offered those things to everybody. Those classes were alive and would constantly keep my brain going.

Also, these good teachers gave me steps that I needed to complete my tasks. If you give me 7 instructions and I'll remember maybe 3 of them so please have them written down. Regular evaluation periods also worked well for me, like weekly quizzes. I think breaking things down into little pieces really helps. And at the same time that type of feedback will help me adjust quicker. If I am doing something wrong, the feedback can get me back on track.

Another big thing is relationships. I think if I had been better equipped to deal with social situations I think that would have been the greatest area for potential change. Although I was pretty good at getting the work done, it was the social part of it for me that was just impossible.

I am an individual with ADHD. It is part of who I am but it does not define me. The key is not to be judged based on somebody else's yard stick. Don't compare and think: "Why can't I do it because so and so can do it." We need to stop thinking that way because 'so and so' does not have ADHD.

I'm just wired differently. My thought process is different. It doesn't make me unable to do things. It just means I do things differently. I really just needed someone to have faith and confidence in me because I didn't have it in myself.

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APPENDIX A: INDIVIDUAL INTERVIEW QUESTIONS

I want this to be an opportunity for you to share your incredible story of life with ADHD. There are 3 interests I will be looking to address through your experiences: 1) Success factors to achievement, 2) Identify environments in which you thrive the most, and 3) Gender-related issues with ADHD. I will address different areas of your life at different times, looking at school and/or occupational history, diagnostic history, and current experiences. I will end with a chance for you to add final thoughts. Are we ready to get started?

Demographic/Contextual Questions

1. Tell me a bit about yourself (e.g., how would you introduce yourself at a party).
 - a. Probes: age, occupation, degree level/designation
2. How would you (and/or others) positively describe your personal character?
 - a. My friends would describe me as a person who is _____.
 - b. I view myself as a person who is _____.

Questions addressing Diagnosis

3. Could you tell me a bit about your ADHD?
 - a. Probes: How does your ADHD present? How is it unique? (e.g., more “female” traits)
4. When did you first suspect you had ADHD and why?
 - a. Probes: Age or date? What brought this to your attention (yourself, friend, other)?
5. When did you get properly diagnosed? (i.e., in relation to initial suspicions)
 - a. Probes: Was the process difficult? Why the lag? Accessibility issues?
 - b. Probes: *Why the late diagnosis?* External influence? Did *being female* have an effect?
6. Are you open about your ADHD with others; why or why not? Have you always been open?
 - a. Addresses personal and societal perceptions of ADHD

Questions addressing Management

(Looking at *academic*, *occupational*, and *personal* contexts for each)

7. Trace your academic and occupational history. (*Can draw a timeline if helpful.)
 - a. Probe: Why did you leave the other occupations (if applicable)?
 - b. Probe: What is your current (or last) occupation (motherhood included as an occupation)? How long have you been in your current (or last) occupation?
8. You mentioned you were diagnosed around _____ in your history (mark an X). How did you manage your ADHD prior to diagnosis?
 - a. At school, at work, at home ...
 - b. Probes: What support did you seek at this time (in school, outside of school, and after graduation)?
9. What changed to better manage your ADHD immediately after diagnosis? At present?
 - a. At school, at work, at home ...
 - b. Probes: What support did you seek immediately? What supports do you seek at present?
 - c. Probe: Consider both *external* and *internal* factors of success (e.g., family/friend, counselling/coaching, medications).

Questions about Success

10. At present, name the roles that you fill in your everyday life (as many as possible). Of these, where do you *thrive* most (i.e., work hardest, find peace, find flow)? (*Make a list.*)
 - a. Probes: Societal roles such as mother, wife, doctor, etc.
11. How did the challenges of your ADHD influence you in each of these contexts?
 - a. Probes: Both *positively* and negatively
12. In my study, my 'success' criterion is the completion of postsecondary education. What is your personal definition of success as it currently relates to your own life?
13. On a scale of 1 to 5, one being not satisfied and five being very satisfied, rate your level of overall satisfaction with your successes (or achievements) *at present*? How does this rating compare to before diagnosis?
 - a. Probe: Are you currently satisfied with your achievements? Refer to above definition.

- b. Probe: Is there a specific moment in your life where you could say you've achieved success?
14. How do your personal characteristics contribute to your current level of achievement?
- a. Probe: Do characteristics of your ADHD contribute to your achievements?
 - b. Probe: Advantages/disadvantages of *being female*.

Final Thoughts

15. Are there any other comments you would like to make for young women going through similar experiences as you have described?

APPENDIX B: FOCUS GROUP QUESTIONS

1. Please briefly introduce yourself.
 - Name, age, degree(s), job(s), roles (?).
 - What's one thing you really LOVE to do?
2. Briefly: How long have you known you have ADHD? When did you get diagnosed? How does your ADHD present? What made you decide to finally get diagnosed?
3. How did you feel upon diagnosis or realization? How did it change your life?
4. Why do you think you were missed for diagnosis as a child or adolescent?
5. How do you think getting diagnosed earlier would have benefited you?
 - When do you think would have been the crucial time for diagnosis? Why?
6. What were your school experiences like?
 - What was expected of you? As a student, as a girl?
7. How could your school experiences have been better/more positive?
 - What would have helped you thrive?
8. If you could tell your teachers one thing, what would it be?
9. To what extent does your ADHD define who you are?
 - i.e., What is YOU, what is ADHD?
10. How has your experience with ADHD positively contributed to your growth as a person?
11. What is one thing you want everyone to know from your experience?
 - Why is sharing your story important to you?
12. In summary, name your top three tips that will put you on the path of achieving success and life satisfaction.