



U.S. Army Staff Sgt. Austin Cook, assigned to 96th Aviation Troop Command, Washington Army National Guard, flies a 12th man flag during a multi-ship flyover during the pregame ceremonies at Lumen Field, Seattle, Nov. 21, 2021. (U.S. Army photo by Sgt. Adeline Witherspoon)

# Serving with ADHD

*By Staff Sgt. Jarred Woods*

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**Y**ES means *Your Enlistment Stops*, and NO means *New Opportunity*, said my recruiter before my appointment at the Military Entrance Processing Station (MEPS). Although not “official” acronyms nor encouragement to be dishonest during medical screening, there was a hint of truth—saying “Yes” to exhibiting any number of disqualifying medical conditions would likely make a typically long day at MEPS very short. Had I been diagnosed with my disorder during childhood, I would have said YES and I might not be serving in the Army today.

As the title of this article suggests, and the above introduction might confirm (excessive talking [typing] is a typical symptom), I have Attention Deficit Hyperactivity Disorder, or ADHD. According to the Centers for Disease Control and Prevention (CDC),

it is among the most diagnosed neurodevelopmental disorders in children and often persists into adulthood (“What is ADHD,” 2021).

With inattention, hyperactivity, and impulsivity being predominant symptoms, an ADHD diagnosis raises justifiable “red flags” concerning military service as it is a frequent reason applicants are disqualified (National Institute of Mental Health [NIMH], n.d.; Department of Defense, 2018). Nearly half of all waivers submitted for ADHD are denied (Sayers, Hu, & Clark, 2021).

Just as waivers address individuals on a case-by-case basis, leaders must often mentor and develop others on a *Soldier-by-Soldier* basis—some of whom might have ADHD. This article aims to dispel misconceptions and offer insights for NCOs who lead easily distracted Soldiers and their professional development.

## Arguments Anticipated

### ADHD is not a real medical disorder.

ADHD is a legitimate diagnosis recognized by many educational and psychiatric organizations. These include the National Institute of Mental Health (n.d.), U.S. Department of Education (“Identifying and treating attention deficit,” 2003), and American Psychiatric Association (“What is ADHD,” n.d.).

### People with ADHD do not try hard enough.

ADHD is not an issue of being unmotivated or lazy. Those who have it frequently exercise tremendous effort to pay attention—struggling not because of their attitude but because of brain function and development (Morin, 2021).

### People with ADHD cannot focus.

Although people with ADHD have difficulty focusing, if they are interested in a particular task, they may exhibit intense concentration, referred to as *hyper-focus* (Ashinoff & Abu-Akel, 2021). Think of someone being easily distracted in class but not noticing someone walking directly in front of them while playing a video game.

### ADHD medications lead to substance abuse.

This is not the case. Those who seek treatment are at lower risk of abusing drugs and alcohol. ADHD medications treat symptoms such as impulsivity, lessening the chance of engaging in risky behavior (Indiana University, 2017).

### By the numbers

ADHD has traditionally been considered a childhood disease, affecting 4% to 12% of school-age children. Research shows ADHD persisting into adulthood in 10% to 60% of cases translating to about 4.5% of adults (Gentile, Atiq & Gillig, 2006). The rate of ADHD among Department of Defense (DOD) personnel ranged between 1.7% and 3.9% during 2008-2018 (Sayers, Hu, & Clark, 2021).

What does this mean to you? Chances are you’ve either led or served alongside Soldiers with ADHD.

### Indicators & practical application

The following is by no means a complete list of ADHD signs and symptoms; however, specific prevailing symptoms can act as indicators when addressing

Soldiers’ needs. Additionally, symptom severity and degree can fluctuate with time, environment, and circumstances (NIMH, n.d.).

### Difficulty with organization and prioritization

Military service can be stressful at times, especially when multiple tasks/missions need to be accomplished “time now!” Soldiers diagnosed with ADHD can have trouble prioritizing tasks in a way that meets expectations efficiently. A method that works for me is to maintain a written list of tasks in order of importance—taking time each morning to revise the list as necessary.

### Difficulty starting tasks

Starting tasks can be as difficult as prioritization, but having trouble with one can affect the other. For example, last year, I took on the project of replacing a deck, in-

cluding stairs to a second story. I had difficulty starting the project because of distracting/competing thoughts. I kept agonizing over all the various details (building codes, materials, methods, etc.) simultaneously in my mind. I was ultimately victorious—and a list always helps.

### Varying levels of attention to detail

This usually correlates to level of interest and can be compounded with the difficulty to focus. For

instance, Soldiers may keep their work area immaculate yet struggle with barracks room inspections. Or maybe a Soldier was so intensely focused on getting “Expert” at the range he or she shot a 40 out of 40—in the wrong lane.

### Low frustration tolerance

One could argue many things are frustrating in the military (area beautification, grass avoidance, “good idea fairies,” “hurry up and wait,” etc.); however, those with ADHD might exhibit this tendency in overly stressful situations. In my experience, with military bearing and discipline being paramount, intense frustration is not overtly displayed but it is there. Influential leaders should get to know their Soldiers, recognize their needs, and exercise emotional intelligence when dealing with them.

### Impulsiveness

Those with ADHD tend to act on impulse, sometimes without evaluating all factors or possible outcomes.



NCO Journal graphic illustration using a U.S. Army photo by Maj. Gregory J. McElwain.

For example, a Soldier may buy a car without carefully reviewing the loan agreement details.

## Benefits

Those with ADHD often thrive in heavily controlled and structured environments such as the military (Noh, Lee, & Bahn, 2018). The following are just a few possible advantages to Soldiers exhibiting ADHD.

### Creativity/Hyper-focus

People diagnosed with ADHD generally report or describe their mind as always racing or in a state of ceaseless activity. This often leads to different ways of looking at problems and promotes a generation of new ideas and solutions (Sedgwick, Merwood, & Asherson, 2019).

Hyper-focus complements this with total mental absorption, also known as *flow*, which benefits productivity. Prof. Michael Fitzgerald writes that the “focused work rate that hyper-focus produces enables creative genius to flourish” (Fitzgerald, 2010, para. 11).

### Resilience

Those who struggle with ADHD are adept at finding ways to deal with adverse situations due in part to near-constant attention to self-regulation. A study emphasized that self-regulation relating to mindfulness of overstimulation or boredom directly correlates to

self-awareness (an essential attribute of resilience) (Sedgwick, Merwood, & Asherson, 2019).

## The Way Ahead

The symptoms discussed could be viewed as woefully undesirable traits in Soldiers given the demanding and often dangerous nature of military service. However, Soldiers with ADHD should not be viewed with extreme caution, merely awareness and understanding for two main reasons:

- Applicants with an ADHD diagnosis are thoroughly evaluated during medical screening at MEPS, with severe/debilitating cases disqualified.
- Most individuals with ADHD are effectively treated with medication, psychiatric care, or a combination of both (Wigal, 2009)

## Conclusion

A stigma often accompanies Soldiers with ADHD given its controversial nature and potential for behavioral issues. Yet beyond this cursory view lies the prospect for exemplary Soldiers who add value and bolster mission accomplishment.

As the U.S. Army strives to develop leaders who are more self-aware, it should also be aware of its Soldiers’ needs. NCOs who lead Soldiers diagnosed with ADHD should exercise an appropriate level of patience and understanding—the same as anyone under their charge. ■

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