

Your Name
Teacher Name
Name of Assignment
Date

Working Title: Generation Rx

I. Introduction

A. Hook: Monica's Story (*Krueger*)

1. Mood Swings
2. Short Attention Span
3. Teacher's Concern
4. Story Is Not Unique

B. Context

1. ADD and ADHD are Real Brain Disorders
 - a. Neurotransmitter Deficiency (*Chen*)
 - b. 6.1 Million U.S. Children Diagnosed Aged 2-5yrs (www.cdc.org)
2. ADHD Increase in Diagnosis (www.cdc.org)
 - a. Cases Reported: Age 4-17 6.1% in 1998 to 10.2% in 2016
 - b. Children's Mental Health Crisis
 - c. Explosion of Research
 - i. Causes
 - ii. Risk Factors
 - iii. Best Treatments

C. Current Practices and Trends Unethical

D. Research Question: How can children ADHD/ADD be

E. Thesis: ADD and ADHD are being treated with quick chemical fixes, which is causing the rates of misdiagnosis and overmedication to climb to astronomical heights. Parents need to pressure the FDA and the medical community to reevaluate ADD and ADHD drugs and diagnosis procedures.

II. Body Paragraph 1 Main Point/Sub-claim: Overmedication

A. Side Effects of Drugs

1. Malfunctions Caused by Anti-ADD Medications (Thompson, Mandy, Zilewski)
 - a. Mood Swings
 - b. Anxiety
 - c. Sleep Problems
 - i. Sleep Disruption
 - ii. Insomnia
 - d. Loss of Appetite
 - e. Seizures
 2. Anatomical Differences in Medicated Children (*Byrd*)
 - a. Brain Sizes 3% Smaller
 - b. Other Brain Abnormalities
- ### B. Substance Abuse (*Chen and www.healthychildren.org*)
- a. Genetic link Between ADHD and Substance Use Disorder
 - b. Sell and Share Meds

III. Body Paragraph 2: Counterargument

A. Opposition's Point-of-View (*Washington*)

1. Drugs FDA Approved and Success Rate
2. Improved School Performance & Behavior
3. Trust Research and Doctors

B. Rebuttal to the Opposition

1. Lack of Comprehensive Research (*Ackers*)
2. Harmful Quick Chemical Fix
3. Personality Changes: Zombie-like State, Irritable, or Emotional (*Finestein*)
4. Long Term Effects of Drugs Unknown (*Byrd*)
 - a. Inadequacy of Brief Drug Trials
 - b. Food and Drug Administration Failed Demands
5. Benefits Do Not Outweigh the Risk

IV. Body Paragraph 3 Main Point/Sub-claim: Delayed Diagnosis

A. Medical Community Wait-and-see Approach (*Dal*)

1. Physical and Mental Health Suffer
 - a. Monica's Story (*Krueger*)
 - i. Behavior Out of Control
 - ii. Weight Gain
 - iii. Loss of Relationships
 - b. Prone to Secondary Mental Illness (*Dal*)
 - i. Depression
 - ii. Anxiety

2. Education Impacted (*Finestein*)

- a. Grades
- b. Discipline and Suspensions

B. No Standard Test like Vision and Hearing

C. Educators are Unaware of Symptoms (*Krueger*)

V. Body Paragraph 4 Main Point/Sub-claim: The Wrong People Evaluating and Prescribing

A. Teacher Concerns (*Finestein*)

1. Involved and Confusing Evaluation Forms
2. Lack of Confidence
3. Lack of Insight

B. Drugs Prescribed by any Doctor, Not Specialists (*Ackers*)

1. Inexperienced with Field of Psychology and/or Disorders
2. Not Informed of Patient's Medical History

VI. Solution

A. Better Approach to Treatment

1. Nonmedicinal Approaches With and Without Meds (*Harper and Zhang*)
 - a. Exercise and Yoga
 - b. Meditation and Guided Imagery
2. Increase Positions for Qualified Employees in Schools
 - a. Social Workers and Special Education Teachers
 - b. IEP and Education Supports (*Chalmers*)
3. Specialists Only Prescribe
4. Parents Create Change (*Chalmers*)
 - a. Advocate for Child
 - b. Second Opinions
 - c. Tracking Symptoms
 - d. Be Open to Nontraditional Treatments

VII. Conclusion

A. Restated Thesis

B. Limitations of Solution

1. Requires More Work with different Therapies
2. Adjustment Period
3. Nontraditional Approaches Can Be Expensive

B. Circle Back to Monica's Story (*Krueger*)

1. Six Years of Drug Trials and Struggle
2. Denied Proper Childhood
3. Her Uncertain Future
4. She Deserves Better