

# Adults with ADHD



# An unspoken challenge

BY LEAH SCHWARTZ





One by one the members of the group enter the dimly lit room and slowly find their seats. Trying to keep to themselves, they occasionally steal a furtive glance here and there but quickly avert their gaze before making eye contact. The instructor finally arrives. The weekly routine can now commence.

“Hi, I’m Michael,” the man to Yaakov’s left begins. “I’ve been an alcoholic for 14 years.”

“Hello, Michael,” the rest of the group responds awkwardly.

The circle proceeds in the opposite direction from Yaakov, leaving him time to come up with something to say. Each person introduces himself and briefly shares his story.

“I enjoy drinking,” says one, “but I have a problem. Once I start, I can’t stop. I keep drinking until the bottle is empty. Then I go out and look for some more.”

“I only have one signal that it’s time to stop drinking,” begins another. “That is when I’m lying on the floor unconscious.”

“Whenever I see a bottle of booze,” shares another, “I feel this insane urge. It’s as if the bottle is calling my name. I’m drawn towards it. It wants me, and I want it.”

It is now Yaakov’s turn, and there is only one thought on his mind: *Why on earth am I here?*

*Sure, I drink, he thinks. I drink more than I should, and it’s gotten me into some really sticky situations. But I’m always in control. I’ve never blacked out or felt an insane urge to reach for a bottle. I drink*

*because...I need a little help slowing down my brain.*

Yaakov had always known he was a little different. In *yeshivah* he’d had a hard time concentrating. He often found himself fidgeting and getting out of his seat. “I was a smart kid and I always did well in Gemara,” he says. “But I had no *zitzfleish*. I couldn’t sit still for a minute.”

Yaakov’s parents had assumed he’d grow out of his childish restlessness, so they never sought professional help. Unfortunately, he continued to struggle when he grew up, jumping from job to job, and was now having problems in his relationship with his wife.

It wasn’t until his marriage nearly collapsed and his life was in shambles that Yaakov realized he needed professional help. He underwent a psychological assessment and was shocked to learn his diagnosis: he had ADHD.

But at this point he had not yet been diagnosed. That is why he had wound up at this AA meeting, which he found to be a particularly traumatizing experience.

“Hi, I’m Yaakov,” he’d begun hesitantly, acutely aware that all eyes were trained on him. “I’m here today on the insistence of my wife. She’s concerned that I’m an alcoholic. But I’m *not!*” He’d quickly caught himself before continuing desperately, “I just have a brain that races. I sometimes need help slowing things down. Alcohol helps me gather my thoughts.”

As one, the members of the group had turned and looked at Yaakov with pity in their eyes. The burly tattooed man to Yaakov’s

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right had reached over and put a soft hand on Yaakov's shoulder. "It's okay," he'd whispered. "This is a safe space. We're all in this together. Don't be afraid to speak the truth."

Alcohol and other types of substance abuse are common but little-known symptoms experienced by adults with ADHD. They turn to alcohol to dull their racing thoughts, giving them a temporary reprieve from their discomfort.

Yaakov is keen to share his experiences. He wants people like him to know that they are not alone and that help is available.

"ADHD in adults is very often misunderstood," he told me in a recent interview. "It's also often mistakenly diagnosed as bipolar disorder (see sidebar). You're all over the place. You can't focus and jump from one thing to another. But these aren't the symptoms of incompetence; they're the result of a serious neurological condition."

### ▲ CRIPPLING ADULT SYNDROME

Attention-deficit hyperactivity disorder is defined in the DSM-5 (*Diagnostic and Statistical Manual of Mental Disorders*) as "a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development." Classic symptoms include difficulty paying attention to detail, forgetfulness, fidgetiness, extreme restlessness and excessive talking. In ADD, hyperactivity is absent. In fact, some people with ADD can be calm and serene, and not in the least hyperactive or disruptive.

Today it is estimated that close to 10 percent of children in the United States suffer from some degree of ADHD, and the numbers are rising steadily. Fortunately, teachers, school counselors and parents are becoming increasingly aware of the condition, and support systems are being put in place.

The phenomenon of ADHD among adults, however, is not so widely discussed.

People often think of ADHD as a childhood syndrome that people grow out of as they mature, but statistics show otherwise. More than 50 percent of children diagnosed

with ADHD see their symptoms persist into adulthood. For some, ADHD doesn't present too great a challenge; swimming champion Michael Phelps, celebrity chef Jamie Oliver and CEO of Virgin Atlantic Richard Branson are all sufferers. But for others, ADHD symptoms can be debilitating.

"For a lot of people, [ADHD] is the difference between failure and making it," says Dr. Jerrold F. Rosenbaum, chief of psychiatry at Massachusetts General Hospital. "You go to work and your boss gets frustrated. You don't get things completed. You don't show up on time. You lose things and let people down. This is especially difficult for people who don't realize they have ADHD. They feel so bad about themselves and spend their whole lives apologizing."

Although symptoms typically begin at a young age, they can often go undetected well into adulthood. A number of reasons have been suggested to explain this phenomenon.

"Children are given other outlets for their symptoms," explains Renee Mill, a clinical psychologist in Sydney, Australia, who counsels many *from* ADHD patients. "Schools encourage children to engage in sports or do other activities, which allows them to work off their extra energy. Others are smart enough to just scrape through the schooling system without their symptoms being noticed."

When adult responsibilities kick in, however, these symptoms quickly become debilitating.

"ADHD patients have difficulty getting basic things done," Mill says. "They can sometimes seem irresponsible. They have difficulty planning or finishing projects they've started, and they spend impulsively. As an adult with responsibilities, these symptoms no longer fall between the cracks."

Until recently, the assumption that it had simply been missed in childhood was the most common explanation for late-onset ADHD. But a new study published in the *Journal of the American Medical Association*

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offers a different suggestion.

A team of UK researchers assessed a group of 2,040 children ages eight to 12 for symptoms of ADHD, and later compared their findings once the same group had turned 18. Surprising statistics emerged: a stunning 5.5 percent of the control group showed symptoms of ADHD in adulthood even though they had not shown any signs as children. The results seemed to suggest the existence of adult-onset ADHD.

An equally surprising discovery was the gender disparity. While ADHD in children is more prevalent among boys than among girls—the ratio of boy-to-girl patients is estimated at three to one—in adults it was almost as common among women.

These findings point to another interesting reason for misdiagnosis.

“Girls with ADHD tend to try harder than their male counterparts to compensate for and cover up symptoms,” suggests an article in *ADDitude*, a magazine dedicated to helping people who suffer from ADHD. “To keep up their grades, girls are often more willing to put in extra hours of studying and to ask their parents for help. In addition, girls are more likely to be ‘people pleasers,’ doing all they can to fit in—even when they know they are ‘different.’”

A girl with ADHD might be characterized as a “daydreamer,” the stereotypical smart, shy teenager with the disorganized locker. Another might be the overly enthusiastic schoolgirl who is always telling stories to her friends. However, it’s not until these girls mature and are faced with real responsibilities that their ADHD can no longer be hidden.

Menucha, a young mother and successful business owner, describes her journey with adult ADHD.

“On the outside, I was leading a very successful life,” she says. “I had a wonderful family and my own business. I always looked

put-together.”

Inside, though, it was a different story.

“I had the hardest time organizing myself. My shop was badly stocked. I would make commitments to clients and not deliver on time. Everything was unpredictable. I constantly missed appointments and closed my store for weeks at a time. My inventory was a mess.”

And it wasn’t only in business that Menucha struggled; her home life suffered as well.

“It was like being on a perpetual roller coaster. I would constantly lose things and was very easily overwhelmed. What should I take care of first, my house or my children? What had I just been in the middle of doing? Where was I just supposed to be? I always felt like I was walking through a thick fog. And the worst part was that I didn’t know how to lift it.”

According to Kathleen Nadeau, director of the ADHD Center of Maryland, those symptoms are common; she describes women with ADHD as living in “a constant state of overwhelm.”

“Society has a certain set of expectations we place on women, and ADHD often makes them harder to accomplish,” Nadeau says, pointing to women’s traditional societal roles. “They are supposed to be the organizers, planners and primary parent at home. Women are expected to remember birthdays and anniversaries, do laundry and keep track of events. That is all very difficult for someone with ADHD.”

For Menucha, it was a long and painful journey, interspersed with bouts of anxiety and depression, until she sought professional help and was finally diagnosed. The discovery itself, she says, made a huge difference in her life. “For the first time, I had a name for my problems. I realized that I wasn’t lazy. I simply could not do what I could not do.”

# FAQs About Adult ADHD

## WHAT CAUSES ADHD?

ADHD results from a blend of a person's genetics and environment. An "ADHD brain" has a deficiency in the chemicals norepinephrine and dopamine, resulting in certain behavioral symptoms. Surprisingly, many studies have confirmed that ADHD is more common among Jews than among non-Jews.

While ADHD is a neurological condition, a person's environment can either temper or exacerbate the symptoms. Stress, overwhelming responsibilities and bad management skills can make it worse.

## WHAT ARE SOME COMMON SYMPTOMS OF ADHD IN ADULTS? ARE THEY DIFFERENT FROM THOSE IN CHILDREN?

While the excessive physical restlessness typically found in children normally wears off in adults, many of the other symptoms remain the same.

## IS ADHD MORE PREVALENT NOWADAYS?

No, but our lifestyle is a lot more fast-paced and demanding. For a person with ADHD, the modern lifestyle is definitely more challenging.

## WHAT IS THE BEST WAY TO TREAT ADHD?

The first step is to see a doctor or mental health professional and have your symptoms diagnosed. Once you have received a diagnosis of ADHD, there are a number of things that can be done.

### Medication

Medication is invaluable in treating ADHD. Patients taking medication see almost immediate changes in their thought processes. They are able to focus, concentrate and climb out of the "fog" they've been experiencing. But medication is only one aspect of treatment.

### Counseling

ADHD patients should consult with a professionally trained ADHD coach or therapist who can work with them to overcome their challenges and improve their executive functioning skills. Therapy works!

### Lifestyle Changes

In addition to medication and counseling, there are certain lifestyle changes that can help manage symptoms. Exercise is extremely important to burn off excess energy and aid in focus and concentration. Equally important is maintaining a healthy diet. ADHD patients may struggle with an eating schedule and regulating their food intake, so it is important to be conscious of what they eat and when. Many people find yoga to be helpful as well.

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# Do I Have ADHD?

*Adapted from the ASRS Screener developed by the World Health Organization (WHO) and the Workgroup on Adult ADHD*

This questionnaire is designed to determine whether you demonstrate symptoms similar to those of people with ADHD, and is intended for adults 18 years old and up. If you answer yes to a significant number of these queries, it is recommended that you consult with a mental health practitioner. An accurate diagnosis can only be made through clinical evaluation by a trained professional.

1. I often have a hard time wrapping up the final details of a project after the interesting parts have been done.
2. I often avoid or delay getting started when I am faced with a task that requires a lot of thought and/or organization at the outset.
3. I am often distracted by activity or noise. When people talk to me, I often drift off or tune out.
4. I often fidget or squirm when I am forced to sit down for a long time.
5. I often make careless mistakes when I have to work on a boring or difficult project.
6. I often have difficulty keeping my attention focused when I do boring or repetitive tasks.
7. I often have a hard time remembering appointments or obligations.
8. I often have difficulty concentrating

on what people say, even when they are speaking to me directly.

9. I often make decisions and act on them impulsively, like spending money, diving into new activities or changing plans.
10. I become so intensely involved in things I love to do that I hardly stop to take a break.
11. I tend to overdo things even when they're not good for me, like compulsive shopping, drinking too much, overworking and overeating.
12. I often misplace or have difficulty finding things at home or at work.
13. I often leave my seat at meetings or in other situations where I am expected to remain seated.
14. I often have a hard time unwinding and relaxing when I have time to myself.
15. I often talk too much in social situations.
16. I often find myself finishing people's sentences instead of waiting for them to finish.
17. I often have a hard time waiting my turn in situations where it is required.
18. I often interrupt others even when they are busy.
19. I often have difficulty getting organized.
20. When given a task, I usually pro-

crastinate rather than doing it right away.

21. I can't seem to reach my goals no matter how much I do or how hard I try.
22. I tend to get frustrated easily and am impatient when things are going too slowly.
23. My self-esteem is not as high as that of others I know.
24. I need a lot of stimulation from things like electronic games, new purchases, being among lively friends, driving fast or taking other risks.
25. I tend to say or do things without thinking, and sometimes that gets me into trouble.
26. I'd rather do things my own way than follow the rules and procedures of others.
27. I often find myself tapping a pencil, swinging my leg, or doing something else to work off nervous energy.
28. I see myself differently from the way others see me, and when someone gets angry with me for doing something that upset him, I'm often very surprised.
29. Even though I worry a lot about dangerous things that are unlikely to happen, I tend to be careless and accident-prone.
30. I have biological relatives who suffer from ADHD, anxiety, bipolar disorder or substance abuse.

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**DAY-TO-DAY TASKS:  
AN IMPOSSIBILITY  
FOR ADHD SUFFERERS**

“There were days when I found myself walking from my kitchen to my room and back to the kitchen without knowing what I was doing or how I was going to do it,” laughs Aviva Segal, a special education itinerant teacher (SEIT) who was only recently diagnosed with ADHD. “I knew there were things I needed to do, but I just couldn’t get them done. I would start one job, leave it halfway finished, and then move on to the next. My life was a constant mess.”

Aviva’s symptoms, easily dismissed as simple disorganization, are typical of adults with ADHD, says Mrs. Faigy Liebermann, an ADHD consultant and life coach based in Manchester, England.

“People with ADHD are easily overwhelmed by what are known in psychological terms as executive functions,” she says. “Things like scheduling their day and cleaning their homes are extremely difficult.”

Mrs. Liebermann began her career as a professional organizer. She would visit homes in her local community where “things were lying everywhere” and help people get their lives in order. She quickly realized, though, that many of her clients—often those in need of the most help—showed strong signs of ADHD.

“I wanted to be able to help them more

than I was,” she says. She therefore underwent training to become a certified life coach specializing in ADHD and other management disorders. Today she runs a successful clinic called Focus with Faigy and helps hundreds of ADHD patients.

Although certain tasks look simple to non-ADHD sufferers, it’s important to understand that the brains of people with ADHD are simply wired differently and need to be trained.

**ADULT ADHD: A RELATIONSHIP  
DESTROYER**

One area that is especially challenging for those with ADHD is relationships.

“Marriage with an undiagnosed ADHD patient can be extremely taxing,” says Renee Mill. “ADHD sufferers are always running late. They have poor management skills and are often lacking in basic social cues. All of these can place a big strain on a marriage.”

For Batya Stern,\* a practicing Brooklyn social worker who was only recently diagnosed with ADHD, her symptoms almost cost her her marriage.

“People with ADHD need constant stimulation,” she says. “We’re very restless and are easily bored. Work is boring. Vacation is boring. And unfortunately, communicating with your husband can also become boring.”

Batya always knew that she had diffi-

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culty concentrating. Throughout her schooling she blamed her teachers and their uninspiring lessons, but when she later found herself about to lose both her job and her husband, she finally had to face the fact that *she* was the problem.

“It was difficult for me to admit, but I needed help. So I began taking medication and my life changed. I am now able to conduct a normal conversation with my husband. I’m more focused on my job, and I find myself connecting better with my patients.”

Another challenge are the often comorbid psychiatric conditions that accompany ADHD like anxiety, depression, substance abuse and anger issues. These things can put an extreme strain on a relationship.

“ADHD patients have a hard time at work,” Mill says. “They don’t get along with their coworkers and flare up at their bosses. But it’s even worse when they bring that anger into the home. In my experience, that’s the main cause of divorce among ADHD patients.”

Interestingly, these comorbid psychiatric conditions (those that exist simultaneously) are often the reason a person’s ADHD goes undiagnosed. The trouble arises, Mill explains, when the other conditions are treated and the ADHD is overlooked. “Many people are seeping through the cracks because they’re being treated for the wrong reasons.”

While for some a misdiagnosis is not particularly dangerous, for others it can have potentially fatal results. The suicide rate among ADHD sufferers is significantly higher than in the rest of the population, and is often the result of misdiagnosis or incorrect treatment.

A case in point is the problem of alcohol and substance abuse.

Many ADHD sufferers turn to alcohol and drugs, hoping for a reprieve. Their families and friends, mistaking them for addicts, encourage them to attend Alcoholics Anonymous meetings.

Yaakov points to a paragraph in the *Big*

*Book*, the AA bible, to illustrate the danger in this:

“Rarely have we seen a person fail who has thoroughly followed our path. Those who do not recover are people who cannot or will not completely give themselves to this simple program, usually men and women who are constitutionally incapable of being honest with themselves. They are not at fault; they seem to have been born that way.”

“Consider the impact such a message has on a non-alcoholic, undiagnosed ADHD patient!” Yaakov says, describing his painful experience. “Many ADHD sufferers are motivated and really want to change. But the AA philosophy doesn’t work for them. Then they’re told that they’re failures and are not being honest with themselves. It’s no surprise that so many undiagnosed sufferers are suicidal.”

For Yaakov, it was his refusal to continue going to AA meetings that led to his divorce. His wife accused him of not trying hard enough to combat his alcohol abuse and refused to stay married to him.

It was an extremely painful period in his life. “I might have lost my marriage,” he says, “but I know I saved my life.”

**MANAGING ADHD: A LIFELONG PROCESS**

Thankfully, adult ADHD is treatable. Patients typically undergo a clinical diagnostic assessment and answer a list of standardized questions. The examiner will also interview a spouse or close family member to ensure he has an accurate picture of the patient’s functioning.

For many, medication is often the first step as it can help regulate the symptoms in a dramatic way.

“Before I started on medication, I could never read anything,” Aviva says. “I would stare at the page and keep reading the same line over and over. I was never able to retain any of the information.”

Aviva had a hard time describing the experience to others until she stumbled upon

## ADHD and Bipolar Disorder: Similar but Different

Several ADHD symptoms have a strong resemblance to those of bipolar mood disorder (BMD). Impulsivity, moodiness, over-activity, talkativeness and impatience are all symptoms that seem to crop up in those who suffer from both conditions. As previously mentioned, many ADHD patients suffer from a comorbid psychiatric condition, which, according to research, is often bipolar disorder.

The two conditions, however, are very dissimilar when it comes to diagnosis and treatment. Dr. William Dodson, director of the Dodson Center for ADHD, lists some of the key differences:

**AGE:** While ADHD typically develops in childhood, the majority of people with BMD are first affected in early adulthood—some at the age of 18, with 26 the average age of diagnosis.

**CONSISTENCY:** ADHD symptoms are constantly present. BMD symptoms come in waves and are interspersed with more or less normal moods.

**TRIGGERS:** ADHD symptoms are triggered by real-life events. People with ADHD react more powerfully to outside stimuli than other people. Happy events result in intensely excited moods, and unhappy events in intensely sad feelings. BMD symptoms, by contrast, come and go indiscriminately, with no connection to real-life events.

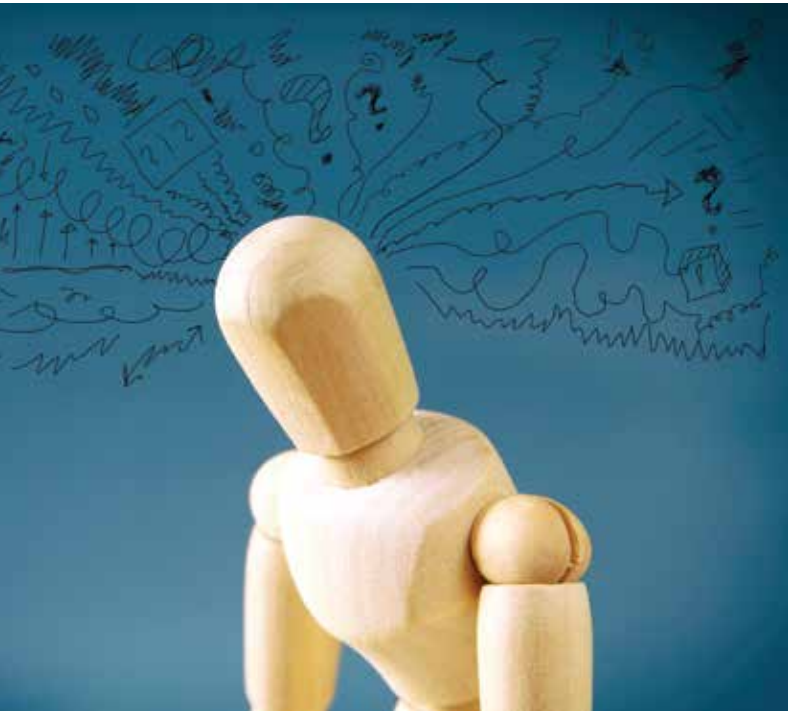
**RAPIDITY OF SHIFT:** ADHD mood shifts are sometimes instantaneous. Because the symptoms are reactions to real-life events, they can change as rapidly as the outside stimuli. BMD mood shifts, because they are disconnected from external events, can take hours or days to occur.

**DURATION:** ADHD moods are short-lived and are typically measured in terms of hours. BMD moods, by DSM-5 definition, must be sustained for at least two weeks. A BMD patient will typically experience a manic or depressive episode that lasts for months; an ADHD sufferer may experience many mood shifts in a day.

**FAMILY HISTORY:** Individuals with ADHD almost always have several family members with a similar condition. Those with BMD are less likely to have genetic connections.

As with any medical condition, a qualified expert should be consulted for formal diagnosis and treatment.





a children's book about ADHD. "There was this picture of a young boy at the beach, playing with the sand. Every time he tried grabbing a handful, it would slide through his fingers and he'd be left with nothing. I was like, 'That's it! That's exactly what reading a book feels like to me.'"

Since she began taking medication, however, "I've become super-focused. I can read without interruption. I even feel like I should go back to school all over again!"

For many people, the thought of taking medication is extremely daunting. "It was one of the biggest decisions I've ever made in my life," says Aviva.

While usually effective, medication is only a small part of the process. ADHD patients require consistent therapy and coaching. "Medication helps many people focus and remain alert, but it has to be taken in addition to learning important life-management skills," Liebermann says. "For that, they need encouragement and counseling."

Mrs. Liebermann guides her patients along a detailed, itemized course, likening the process to learning to drive. "It takes time; it

goes in baby steps. It starts with planning your day, then we move on to planning a week and then a month in advance. Over time, people learn to gain control of their lives."

As with anything new, learning to become organized requires persistent effort and constant repetition. Mill explains the way she helps people who are always losing their keys: "I have them place a big hook by the front door of their homes," she says. "Every time they walk in, they have to place the key on that hook. Over time it becomes habit."

While such exercises may seem trivial, Mill says it's important to understand how challenging they can be for ADHD sufferers. "Things that we take for granted are an everyday struggle," she says. "If you're an organized person, it's impossible to understand what a person with ADHD is going through."

What friends and family can do, she says, is educate themselves about what to look out for in order to help their loved ones get the care they need.

### REMOVING THE STIGMA

"One question I am always asked is 'Do you believe in ADHD?'" Mills says with a laugh. "But it's important for people to know that ADHD is not a matter of faith. It is not a myth created by the psychologists. It's a serious neurological condition, and it can't be treated until it's recognized for what it is."

Of course, there's a strong stigma attached to having any disorder. Society paints people with issues as flawed. "I hear the shame and embarrassment in the voices of my callers," Liebermann says. "People are hesitant to discuss it."

The answer? Education.

"If you recognize yourself in any of the scenarios described in this article, you should consider getting help. Fortunately, help is available, and it will dramatically enhance your life." ■

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