Bart Simpson: A Case Study in ADHD

Eric O’Brien  
Psychopathology  
Professor Colaw  
9/21/25

# Introduction

Attention-Deficit/Hyperactivity Disorder (ADHD) is one of the most common diagnoses in children and young people today. It shows up as patterns of inattention, impulsivity, and hyperactivity that make everyday life harder than it needs to be. When I look at Bart Simpson, a character I grew up watching, I see more than just a cartoon troublemaker. His behaviors—always distracted, always in motion, always breaking rules—fit the clinical picture of ADHD almost too well. In this paper, I’m going to use the DSM-5-TR to explain why Bart meets the criteria for ADHD, look at what else might explain his behaviors, and go over treatments supported by research. I’ll also bring in my own work, the Adversity Catalyst Theory, to show how ADHD can sometimes be more than a disorder—it can be raw potential if handled the right way.

# DSM-5-TR Diagnosis

The DSM-5-TR defines ADHD as a pattern of inattention and/or hyperactivity-impulsivity that gets in the way of development and functioning (American Psychiatric Association, 2022). For the combined type, six or more symptoms of inattention and six or more of hyperactivity/impulsivity have to be present before the age of 12, in more than one setting. Bart checks both boxes.

# Justification of Diagnosis

On the inattention side, Bart is the kid who never turns in homework, forgets instructions the second he hears them, and can’t stay on task. On the hyperactivity/impulsivity side, he’s restless, blurts things out, interrupts, and jumps into stunts without thinking of the outcome. These aren’t one-off jokes—they’re consistent traits that match DSM-5-TR’s combined presentation. Research backs this picture. Drechsler et al. (2020) describe ADHD as a breakdown in attention and impulse control that disrupts school and family life. Eiland and Jen (2024) stress that symptoms need to show up in multiple environments, which we see with Bart both at home and at school.

# Differential Diagnoses

At first glance, Bart might look like he has Oppositional Defiant Disorder because he talks back to authority and breaks rules. But ODD is driven by anger and hostility, and Bart’s behavior comes more from distraction and impulse. Conduct Disorder is another possibility, but Bart doesn’t fit. He pulls pranks, sure, but he’s not out to seriously harm others or break laws in a consistent way. ADHD explains him best.

# Additional Information Needed

In a real clinical setting, you wouldn’t stop at observation. To fully support a diagnosis, I’d want teacher and parent rating scales, developmental history, and maybe standardized assessments. Eiland and Jen (2024) note that multi-informant data is critical, and that would be true for Bart too.

# Contextual Features

Bart’s case doesn’t exist in a vacuum. Gender plays a role—boys are more often diagnosed with ADHD, and Bart fits the stereotype of the rowdy boy. His family environment adds fuel: Homer is neglectful and Marge tries but isn’t consistent. And then there’s the cultural side. Bart as a media figure has shaped how a whole generation thinks about ADHD—sometimes reducing it to a joke. That makes it even more important to look at him seriously in this case study.

# Empirical Literature on Treatment

The best treatments for ADHD are multimodal. Medication—like stimulants—can help with attention and impulse control (Eiland & Jen, 2024). But medication isn’t enough. Behavioral therapy, classroom structure, and parent training are also shown to work (Drechsler et al., 2020). If Bart were a real kid, the ideal approach would be a combination: medical treatment, teacher involvement, and family support to give him structure where he doesn’t have it now.

# Theoretical Perspective

Cognitive Behavioral Therapy (CBT) is one of the strongest therapeutic tools for ADHD, helping kids learn coping skills and strategies. Alongside that, I see Bart through the lens of my own Adversity Catalyst Theory (O’Brien, 2025). ACT argues that adversity can spark growth, resilience, and creativity if it’s channeled right. In Bart’s case, the same energy that gets him into trouble could become the drive that helps him thrive, if he had the right structures and supports. That’s the side of ADHD that often gets missed—there’s potential inside the struggle.

# Conclusion

Bart Simpson meets the DSM-5-TR criteria for ADHD, combined presentation. Other possibilities like ODD and Conduct Disorder don’t fit as well. A proper diagnosis would require fuller assessment, but evidence-based treatments would likely include medication, behavioral interventions, and family training. Beyond that, with the Adversity Catalyst Theory in mind, ADHD doesn’t have to be seen only as a weakness. With structure and support, it can be the spark for creativity and resilience. That’s the bigger picture worth keeping in mind—not just for Bart, but for kids like him in the real world.

# References

American Psychiatric Association. (2022). Diagnostic and statistical manual of mental disorders (5th ed., text rev.; DSM-5-TR). American Psychiatric Publishing.

Drechsler, R., Rizzo, R., Steinhausen, H.-C., & Grabrucker, A. M. (2020). ADHD: Current concepts and treatments in children. Frontiers in Psychiatry, 11, 750. https://doi.org/10.3389/fpsyt.2020.00750

Eiland, L. S., & Jen, M. (2024). Diagnosis and treatment of ADHD in the pediatric population. Pediatric Medicine, 7(4), 35–49. https://doi.org/10.21037/pm-23-76

O’Brien, E. (2025). The Adversity Catalyst Theory. Academia.edu.