

ADHD

Understanding ADHD in our children

What is Attention Deficit/ Hyperactivity Disorder?

Attention Deficit/ Hyperactivity Disorder

ADHD is a neurodevelopmental disorder that is characterized by developmentally inappropriate levels of inattention, impulsivity, and hyperactivity.

- Occurs in 11% of school-age children- *diagnosis in school-age children present 6 or more symptoms.*
- More than 75% of cases continue into adulthood- *diagnosis in adults present 5 or more symptoms.*
- **THREE TYPES:**
 - Predominantly Inattentive
 - Predominantly Hyperactive
 - Combined

Predominantly Inattentive

- Failure to give close attention to details OR makes careless mistakes
- Difficulty sustaining attention
- Does not appear to listen
- Struggles to follow through with instructions
- Difficulties with organization
- Avoids/ Dislikes tasks requiring sustained mental effort
- Loses things
- Easily distracted
- Forgetful in daily activities

Predominantly Hyperactive

- Fidgets with hands or feet OR squirms in chair
- Difficulty remaining seated
- Acts as if driven by a motor
- Talks excessively
- Blurts out answers before questions have been completed
- Difficulty waiting or taking turns
- Interrupts or intrudes upon others

Combined

- An individual with ADHD combined meets the criteria for both inattentive and hyperactive ADHD presentations

ADHD Symptoms & Challenges in Schools

- Short attention span with non-preferred tasks
- Hyperactivity
- Impulsivity, which manifests as recklessness
- Fidgeting or restlessness
- Disorganization
- Poor time management
- Mood swings AND/ OR emotional dysregulation
- Forgetfulness
- Trouble Multitasking
- Inability to control anger or frustration
- Trouble completing tasks
- Difficulty waiting turns

Diagnosis

A comprehensive evaluation is necessary to establish a diagnosis, which requires time, effort, careful history and clinical assessment of individual's academic, social, and emotional functioning and developmental level

Who can diagnose? *Clinical Psychologists, Clinical Social Worker, Nurse Practitioners, Neurologists, Psychiatrist, and Pediatrician.*

Parents & Caregivers

Parenting a child
with ADHD

Effectively managing your child's symptoms can affect both the severity of the disorder and development of more serious problems over time.

Early intervention holds the key to positive outcomes for your child.

Although life with your child with ADHD may at times seem challenging, you can help create home and school environments that improve your child's chances for success.



How to get started...

- **Don't waste your time limited to emotional energy on self-blame**– *it is NOT caused by poor parenting or a chaotic home environment.*
- **Learn all you can about ADHD**– *be a good consumer and learn to distinguish the accurate information from the inaccurate.*
- **Make sure your child has a comprehensive assessment**– *to complete the diagnostic process, make sure their comprehensive assessment includes medical, education, and psychological evaluations, including input from your child's teacher.*

How to help your child succeed in school...

- **Become an effective case manager**– *keep a record of all information regarding your child with ADHD*
- **Form a team that understands ADHD and be the team captain**– *meetings at your child's school should be attended by the principal's designee, as well as a special education teacher and the classroom teacher that know your child.*
- **Learn all you can about ADHD and your child's educational rights**– *Understand IDEA and Section 504 of the Rehabilitation Act*
- **Become your child's best advocate**
- **Communicate regularly**

How to make home life easier...

- **Join a support group**
- **Seek professional help**
- **Work together**- *all adults around your child should agree on how to handle behaviors*
- **Learn the tools of successful behavior management**

ADHD:

Executive Function & Getting Kids to Listen

MOST IMPORTANT STEP...

Every child with ADHD has a story and their own beliefs that may interfere with functional communication when a relationship is not established.

Reflective Listening

1. **Repeat Back**- *repeat the child's statement back to them*
2. **Confirm**- *make sure you accurately captured their feelings*
3. **Clarify**- *ask questions to confirm their statement*
4. **Accept & Validate**
5. **Express Empathy**
6. **Word Choice**- *use "you" and "I"*

Reflective listening helps build executive function of METACOGNITION.

Building Conversations

- Emphasize the problem being faced and how to solve the problem, rather than the behavior.
- The problem-solving process must be collaborative.
- Problem-solving should be **PROACTIVE** not **REACTIVE!**
- REMEMBER: If your child could do well, they would do well

Strategies for Behavior Interventions

Strategies to Use in General

- 1. Understand Positive Reinforcement-** *THIS IS THE ONLY STRATEGY THAT WORKS!*
 - a. Help create self-awareness
 - b. Help a child identify what they should have done differently
- 2. Clarity, Consistency, & Honesty**
 - a. Your child with ADHD has no internal structure, so maintain clear and concise explanation of things
- 3. Effective Organization**
 - a. “Everything has a home”
 - b. Use visuals and color-coding
 - c. Break any task into smaller, measurable steps

Basic Behaviorism

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Reinforcers and Consequences— *How we shape our children's behavior to work within our boundaries*

- BASIC TOOL for behavior change
- MUST BE IMMEDIATE

Consequences— *used to decrease unwanted behaviors*

- POSITIVE CONSEQUENCE— add(+) something, like an extra worksheet or making an apology to someone
- NEGATIVE CONSEQUENCE— remove(-) something, such as screen time

Reinforcement— *used to increase wanted behaviors*

- POSITIVE REINFORCEMENT— add(+) something, such as positive praise or a reward
- NEGATIVE REINFORCEMENT— remove (-) something, such as taking away a chore or a worksheet

Key Ideas to Remember

- Traditional Consequences don't work because impulsivity means "It's always now!"
 - Past behaviors evaporate from awareness
 - Future rewards/ consequences are not consciously present
 - Children can be overly emotional when consequences are implemented because they "forgot" what they did
- Reinforcement needs to be at the point of presentation!
 - Connect a present sense of accomplishment before moving on, to foster internal motivation
 - Be creative with reinforcements

Impulsivity

The tendency to act
without thinking

- Can create safety issues, as well as behavioral and emotional consequences
- In the moment, the individual **DOES NOT** have access to things they “should know”
- Impulsivity blocks higher-level thinking
- Interest drives attention



Physical Impulsivity

- Often coexists with hyperactivity, however, manifest differently.
- Physical Impulsivity means the child or adult uses their body inappropriately.
 - Hitting, kicking, biting- aggression
 - Rough play

Verbal Impulsivity

- Blurting out in class
- Saying inappropriate things
- Talking back

Emotional Impulsivity

- Overreacting
- Shutdowns
- Meltdowns
- Tantrums
- Often seen as “oppositional” behaviors but are triggered by anxiety

Addressing Impulsivity

MODIFY THE CHILD:

1. **Medication**- *IF YOU SO CHOOSE TO*
2. **Sleep**- *many children with ADHD have difficulty sleeping due to their hyper-stimulated system*
 - a. Create a sleep-hygiene routine to help wind-down the day!
3. **Nutrition**- *many theories that nutrition can influence behaviors- FIND WHAT WORKS!*
 - a. Proper caloric intake
 - b. Balanced diet
 - c. Limited refined sugars
 - d. Complex carbs
 - e. Protein
4. **Habits & Routines**- *consistent and persistent*
 - a. Habits take 4-6 weeks
 - b. Routines are habits strung together
 - c. Scaffolding to assist a child with developing strategies

MODIFY THE SITUATION:

1. **School Success**
 - a. Determine best seating placement
 - b. Easy access for teacher interaction
 - c. Dyads
 - d. Varied seating throughout the day
2. **Home Success**
 - a. Determine when your child needs more scaffolding
 - b. Create ways to help- *timers, breaks, check-lists, check-ins...*
 - c. Being present for assistance when needed
3. **Modify Time Allotment**- *ADHD has a different internal timing; short segments are important!*
 - a. Allow frequent breaks
 - b. Shorter attention spans- more frequent positive reinforcement
 - c. Be realistic
4. **Breaks**
 - a. When they lose interest, a break is needed
 - b. Timed-limited and physical
 - c. Redirection to a different activity if a movement break is not helpful
 - d. Make time visible

Strategies for Fighting Impulses

There are countless strategies that can help reduce impulsivity, however, we need to teach these strategies PRIOR to impulsive behaviors occur

- Circle palm
- Count backwards
- Personal Mantras
- Put on the “impulse control glasses”
- Talk to self (non-disruptive)
- Incorporate movement and talking into all activities
- Sensory tools- bracelets, toys, weighted plushies/ blankets
- Redirection:
 - Eye contact, visual cues, verbal cues
 - Switch tasks, take a break, move