

## ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

### INFORMATION FOR PARENTS

#### Common descriptions by parents of their children who have ADD/ADHD

*"I always worry when I go to pick up Ben from school as it seems that everyday some problem has arisen. I always feel that people think I am just a bad parent. I just wish I could go to the school and for them to comment on how good he has been".*

*"To try and get Jane to remember to do her homework and then to hand it in in a presentable form can take all night. We often receive comments from the school on how messy her hand writing is and if she could just take her time with her work, how much better it would be, but she does try so hard".*

*"John is so unpredictable at times, one minute he will be in a good mood and the next he will be shouting at his sister. When we have other children round of a similar age to John, he will often act very silly and will then proceed to boss them around. I am never relaxed when we have people over and I am reluctant to invite people round any more".*

You may be concerned or have been told that your child has Attention Deficit (Hyperactivity) Disorder. If so, you may be wondering what you can do to help. It can be a difficult situation for your child, your family and everyone involved with your child. However, there are a number of approaches that can help a child with ADHD.

First, it is important that all those dealing with a child with ADHD have an understanding of the problem. ADHD is an explanation of why your child shows the difficulties he/she does. The next step is to use behavioural approaches to help manage your child's behaviour at home and at school. It is important to remain positive and optimistic - the situation can improve.

Finally, medication may sometimes be part of the package. Your child's doctor will advise you about this.

#### So what is Attention Deficit Disorder?

Attention Deficit Disorder refers to a group of behaviours that can make children perform below their optimum level at school and at home. Problems generally arise for children in the first few years of school although parents will often notice behaviour problems in their children prior to this.

The disorder can occur with hyperactivity (ADHD) or without (ADD). As the majority of children who will be seen in this clinic are ADHD, we will use the term ADHD throughout this booklet.

#### What causes ADHD?

There is no single cause, as many factors contribute to ADHD. It has been established that a child with ADHD is four times more likely to have other family members with the same difficulties, this suggests a genetic link. However, a child's behaviour cannot be predicted from family history alone because some parents who are not hyperactive can have a hyperactive child. This suggests that environmental factors also play a part. Other conditions such as epilepsy and early prematurity can also be associated with ADHD.

What we do know is that ADHD results from a chemical imbalance in the attention centre of the brain which prevents the child from concentrating, planning and controlling their activity levels and their emotions.

Brain scans used in research show that there is a difference in fine tuning of the chemicals called neurotransmitters in the brain of children and adults with and without ADHD. This difference can be reversed by using medication such as Ritalin.

## How common is ADHD?

The incidence of ADHD varies depending on how the child is assessed. However, estimates have suggested between 1% and 7% of school-aged children suffer from ADD/ADHD with boys being more affected than girls. ADHD is not a new disorder it has been recognised since the last century.

## Will my child ever grow out of ADHD?

The symptoms in most children will improve over time although some of the symptoms may continue into adulthood. It is estimated that 60% of the children will continue to have symptoms as adults. Although ADHD cannot be cured, it can be effectively managed if parents help the child when he/she is young to learn the skills and strategies to help themselves.

## Treatment of ADHD

A multi professional approach is the most effective. Help with behavioural management and organisational skills - both at home and at school - is always necessary and some children can be helped further with medication. The medication alters the brain chemistry which makes the brain function in a more orderly way as medication improves the child's concentration and lessens the impulsivity, life is more purposeful and satisfying for the child. However, with or without medication, behavioural management is essential.

## THE BEHAVIOURS

It is important to realize that the problem behaviour in children with ADHD are more likely to happen because they are unable rather than unwilling to do the right thing.

**Inattention:** The child is easily distracted, forgets instructions, flits from task to task, is best with one-to-one supervision and has a poor short-term memory. Some are distant, dreamy and "spaced-out".

**Impulsiveness:** The child speaks and acts without thinking and has a short fuse.

**Over-activity:** The child is restless, fidgety, fiddles and touches things inappropriately.

**Insatiability:** The child is never satisfied, goes on and on, interrogates, intrudes and generates great tension.

**Social clumsiness:** The child is "out of tune" socially, acts silly in a crowd, misreads social cues, overpowers and bosses, loses friends.

**Poor co-ordination:** The child may be clumsy, has an awkward flow of movement, has difficulty doing two actions at the same time, produces messy written work.

**Disorganisation:** The child is unaware of mess, has problems structuring school work, cannot get started on homework or projects.

**Variability:** The child suffers from mood swings, has unexplained good and bad days, can be volatile.

**Problems with learning:** Examples are dyslexia, language problems, difficulties with handwriting and mathematics. Most children with ADHD have problems with written work. Often there is discrepancy between ability and achievement in school.

**Defiance and non-compliance:** Children with ADHD are at risk of this additional behavioural problem and it is sometimes difficult to distinguish ADHD from defiant behaviour.

## When is this normal and when is it ADHD?

There is no black and white line that separates children with ADHD and others with lesser problems and ADHD temperament. A joint approach between clinical and educational professionals is important. Unfortunately, diagnosis sometimes remains a matter of trial and error and watching for response to treatment.

## HOW CAN YOU HELP YOUR CHILD?

Help your child structure and organise their life.

Help your child define the problem areas and then come up with specific solutions for each problem. A five step problem solving method might be helpful, which can be done in this way:

### 1. Identify the problem and set a goal

- Define the problem clearly
- Say what you want the outcome to be

### 2. Generate alternative solutions: brainstorm

- Think of as many ideas as you can
- Do not criticise any ideas at this stage
- Borrow other people's ideas and build on them

### 3. Consider the consequences

- Choose an idea that you think will work

### 4. Make an action plan

- Write down a step by step plan
- Practice each step

### 5. Implement the plan

- Put each step into action

### 6. Evaluate

- Ask yourself "did it work?"
- If not - why not?

Your child may feel "over" controlled and by using problem solving approach together, the child may be more cooperative. A strategy for finding solutions can be:

Make use of concrete reminders like lists, schedules, alarm clocks. Provide your child with any device he or she finds helpful, if possible - a timer to help break homework into chunks, headphones for music or a word processor if this helps writing.

Routine is essential.

Plan family life in a positive way.

Ignore all but the important irritations.

Use incentives. Do not think of them as bribes. Rewards should be small, frequent and constantly repeated.

Give frequent feedback. Children with ADHD often are not aware of the consequences of what they are doing when they are doing it. For example, "Do you know what you just did?" or "How do you think you could do that differently?" or "Why do you think Sally looked sad when you said what you said to her?" Give responsibility whenever possible. If your child is old enough to wake up on his/her own, let them do so. If they are late, let he/she experience the consequences.

Help your child to experience successes by discovering activities, subjects or sports they are good at (swimming, judo, cooking, art, pottery, etc.) Competence breeds confidence and ADHD children often feel they can do nothing right or well.

## **Behaviour management**

The best way to effectively manage your child is to encourage the behaviour you want. Children will repeat behaviours which are rewarded, so if you reward wanted behaviour, it is more likely to occur again. Parental attention is a powerful reward to most children. Unfortunately, when you are scolding, arguing with, shouting or even smacking, you are giving a great deal of attention, thus increasing the frequency of those very behaviours you want them to stop. Children with ADHD can be difficult to manage and so often get much more of this negative type of attention. As a result your child shows more of the behaviours you do not want, rather than the ones you do!

Notice whenever your child is being good and reward him. Do not take good behaviour for granted. Praise your child when he is being good. Give praise immediately without qualifiers or sarcasm. Tell him clearly WHY you are pleased with him. Praise with eye contact, enthusiasm and smiles. Give cuddles and hugs as well as verbal praise. Give praise every time the behaviour you want occurs to increase occurrences.

Ignore behaviour which may be irritating but is not dangerous like whining, arguing, swearing and tantrums. Although these behaviours may get worse before they get better, if you persevere, they will decrease. Avoid eye contact and discussion. Physically move away from the child but stay in the room if possible.

As soon as the behaviour STOPS give the child positive attention. Choose a limited number of behaviours to ignore and ignore them constantly.

Children need limits and parents need to set limits. Although all children will test their parents' rules, the child with ADHD refuses to do what his parents ask most of the time and is engaged in a battle for control. Your aim is to be the one in control!

Decide on the rules and ensure that ALL adults in the house agree with them.

Give one instruction at a time, clearly and consistently. Do not use "Stop" instructions (e.g. do not say "Stop shouting", say "Please speak more quietly"). Do not give too many commands and be polite when you are asking your child to do something. Praise your child when he does as he is asked, do not make threats you are unable/unwilling to carry out or that could frighten him. Do not give way because your child protests.

For difficult uncooperative behaviour, you could use "time out" which can be very affective if used properly.

### **HOW TO USE "TIME OUT"**

Time out means time out from positive reinforcement. Time out can be in a chair, on the steps, in the hall, outside the room. For younger children time out for 1-2 minutes should be enough, for the older child the maximum time out is 5 minutes. Child's room may not be suitable as it can actually be rewarding for him/her to play with toys or watch TV in his/her room. Boring but safe place is ideal.

Make a request of your child. Be sure the request is short and clear and tell the child exactly what you want him to do. Do not ask a question, make a suggestion or plead.

Give a warning. If the child does not follow through with the request, give a warning which is an "if - then" statement. If you do not (request), then you will have to sit in the chair/go to your room for time out.

Time out. If after 5-10 seconds the child does not comply, then immediately put the child in the designated time out place. The child is required to sit quietly for a set period of time (you can set a time). If the child does not comply, give a warning that the time will be set back until he/she sits in the designated place quietly.

Expect your child to badger you, attempt to intimidate you, threaten you, play the martyr, try to be overly nice, or resort to physical means! Continue to be calm.

If the child does not sit in the designated place, you may have to use a consequence e.g. taking away TV time or sending to bed 30 minutes earlier than usual. If the child is able to sit quietly, then set the timer again for the designated time period.

After time out, ask the child to comply with the request. If the child is still non-compliant, repeat the above steps.

If you know a potentially stressful event is approaching, it is possible to use problem solving strategies to find an alternative way of managing the situation.

### **What the school needs to know regarding ADHD**

- It is important that everyone who comes into contact with your child in school knows that he/she has ADHD and this means that he/she is not being deliberately difficult but requires understanding and appropriate management strategies. It is important that you get as much information about ADHD as possible.

Generally, children with ADHD will be helped by:

- A firm but encouraging teacher who knows when it is best to back down
- Seating near the front away from distracting children
- Stepwise instructions, good structure and constant feedback
- Understanding and accepting when this is not naughtiness and the child cannot help it
- Ensuring that unexplained discrepancy or failure in performance is not due to undiagnosed learning difficulty.

- Establishing “circle of friends” to improve social skills difficulty

Schools may ask for the help of the Educational Psychologist or specialist teachers who have a range of special approaches to help both learning and behavioural difficulties. Some children whose educational needs are *very much* greater than usual may be eligible for a Statement of Special Educational Needs, which can bring extra support in the classroom. If this is needed, the Educational Psychology Service will provide advice to the Local Education Authority in conjunction with doctors, teachers, parents and therapists.

The overall approach to helping children with special educational needs is set out in the Code of Practice relating to the 1996 Education Act. Each school has a special educational needs policy, an allocation within their budget to provide special educational need support, and a designated teacher who is the Special Needs Co-ordinator (SENCO). If school feels a child may have a special educational need, the class teacher in consultation with parents should note this at the special need's School Action stage. A plan of support and monitoring is drawn by the SENCO, known as the Individual Education Plan (IEP). The SENCO has a responsibility to advise staff on approaches in the classroom for such children or recommend further classroom support. After a period of observation, further help may be requested from the Educational Psychologist, or advice from paediatricians. At school Action Plus stage, the LEA takes responsibility for further assessment for special educational needs and, if indicated, provision of a Statement of Special Educational Needs.

### **Other therapies and advice:**

- Reducing intake of food with colouring and preservatives may sometimes help.
- Occupational therapy if child has coordination problems can also help.
- Family therapy or parent training can be useful. If you are suffering from depression and stress, seek help in your own right.
- You may be eligible for certain benefits, such as DLA if the child has severe problems.
- Social Services can also help by supporting parents or children. Respite Care and Home Care can be offered.
- Most importantly, take care of your child, your family and yourself. Find an enjoyable activity to engage with your child regularly and often. If your relationship with your child is strained, take extra time to balance the scales and maintain a positive relationship.

### **BOOK LIST**

Selikowitz M. (2009)  
ADHD: The Facts  
*Amazon.com*

Green C. and Chee K. (2001)  
Understanding ADHD  
*Ballantine Books*

Greene R. (2006)  
Treating Explosive Kids: The Collaborative problem solving approach  
*The Guildford Press*

Fintan O'Regan (2002)  
How to teach and manage children with ADHD  
*LDA*

### **SUPPORT GROUPS**

#### **ADHD SUPPORT GROUP (Telephone/e-mail support)**

Contact: Jenny Missen  
Telephone: 0208 384 0936  
E-Mail: [missenj@aol.com](mailto:missenj@aol.com)

#### **Spelthorne ADHD/ADD Support Group**

Community Link Office (Rear of Council Offices)  
Knowle Green, Staines, Middx  
For more details, contact Care and Support Worker 01784 444233

#### **ADDISS – UK parent organisation**

P O Box 340, Edgware  
Middx HA8 9HL  
Tel: 0208 906 9068  
Fax: 0208 959 0727  
[www.addiss.co.uk](http://www.addiss.co.uk)

#### **Contact a Family**

170 Tottenham Court Road  
London W1P 0HA  
Tel: 020-7383-3555  
Fax: 020-7383-0259  
[info@cafamily.org.uk](mailto:info@cafamily.org.uk)

#### **American Parent Organization**

[www.chadd.org](http://www.chadd.org)

## **Web-based information**

ADHD has a high profile in the media and there is an enormous amount of information about it on the Internet. While much of this is helpful, users should be aware that its accuracy and authenticity cannot be guaranteed, and some information may be out of date.

Useful web sites include:

- NHS Direct ([www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)) includes downloadable information about ADHD and a short list of support groups.
- [www.adders.org](http://www.adders.org) This offers a broad range of information about ADHD and includes addresses for local support groups and chat room facilities for adults and children.
- The web sites of medical organisations may also offer information for parents/carers that can be downloaded; one example is the Royal College of Psychiatrists at [www.rcpsych.ac.uk](http://www.rcpsych.ac.uk) .
- The web site of the National Institute for Clinical Excellence has a public domain; this includes a summary of its guidance on the treatment of ADHD with methylphenidate and very comprehensive document on diagnosis and treatment of ADHD ([www.nice.org.uk](http://www.nice.org.uk)).
- [www.adhdorset.btik.com](http://www.adhdorset.btik.com)
- [www.additudemag.com](http://www.additudemag.com) – Web based parent information on ADHD. Includes link to ADDITUDE magazine.
- [www.addvance.com](http://www.addvance.com) – web information for girls with ADHD

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