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Young Families Newsletter

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Getting a diagnosis for your child of ADD (Attention Deficit Disorder) or ADHD (Attention Deficit Hyperactivity Disorder) can be confusing and scary.

The term *Attention Deficit* is an oversimplification. It is not an inability to pay attention, but the inability to selectively attend.

It is a neurological physiological disorder that is often inherited. Throughout this newsletter we use the term ADD to represent the more cumbersome ADD/ADHD.

ADD is not behavior that is done on purpose. It is characterized by *distractibility, impulsivity and sometimes hyperactivity.* These three traits vary widely in degree in each individual.

The majority of these individuals are of average or above average intelligence. Though they process information differently, they are capable of learning complex material when it is presented appropriately.

Children with ADD may have a developmental lag of approximately three years compared to their chronological age; i.e., a 13-year-old child may operate on the social and emotional age level of a 10-year-old. It is helpful to know your child's developmental age so you can plan discipline strategies and behavioral expectations accordingly.

Sincerely,

Family Living Agent
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Number of School-Age Children with ADD

There is so much newly emerging research on ADD that estimates vary widely. The estimates range from three to seven percent (from medical research) to 20% (from “alternative therapy” advocates). Boys outnumber girls by a ratio of between 4:1 to 9:1 (according to the U.S. Department of Education). This means that at least one or two children with ADD are in every classroom throughout the United States.

What it is like to have ADD

The following poem was written by a boy with ADD:

Jonathon

By Jonathon Picard

Jumping, bouncing off the wall
Often makes my school grades fall.
Never will I make straight As
As I carry on that way.
To be honest, I'm very smart
Having good grades from the start.
And if I learn to concentrate
Next year I will dominate.

Positive Characteristics Associated with ADD

The positive characteristics associated with ADD are obscured in the media by a focus on problems and negative characteristics. ADD is characterized by many positive qualities such as:

- High energy
- Creativity
- Impulsivity
- Trusting attitude (sometimes too much so)
- Sensitivity
- Flexibility
- Loyalty
- Tenacity
- Good sense of humor
- Warm-heartedness
- Forgiving attitude (sometimes too much so)

- Ability to take risks
- Hardworking, never-say-die approach

Successful People Thought to Have ADD Traits

- Thomas Edison
- Benjamin Franklin
- Leonardo da Vinci
- Winston Churchill
- Charles Schwab
- Eleanor Roosevelt
- Nelson Rockefeller
- Bruce Jenner
- Robin Williams
- Whoopi Goldberg
- Danny Glover

Individuals with ADD are very capable of achieving success. When encouraged to be successful, they are freethinkers who can become visionaries. Their success really isn't surprising when you consider the many positive qualities they possess. They are often intelligent, charismatic, determined, creative, compassionate and enthusiastic people. Area where many ADD adults excel:

- Artists
- Actors
- Comedians
- Computer field
- Entrepreneurs
- Sales and Marketing
- Athletics
- Psychologists
- Public relations
- Authors
- Politicians
- Physicians

Children do not “Outgrow” ADD

Current medical research suggests that ADD symptoms continue into adolescence for 50%-80% of children with ADD and 50%-65% have symptoms continue into adulthood. Symptoms of hyperactivity lessen as children grow into adolescence and adulthood.

Other Disorders that can Co-exist with ADD

Research shows that ADD often exists in combination with other neurological conditions. *As many as 95% of the children diagnosed with ADD may have some learning difference or exhibit possible behaviors of aggression, sadness, worry, or fear.* These behaviors may coexist in some individuals in different combinations and be virtually nonexistent in others. Also, the coexisting conditions may vary greatly from individual to individual. If a child is being treated for ADD but continues to exhibit behaviors that seem to persist beyond the bounds of appropriate childhood or adolescent behaviors, further evaluation by a qualified professional is needed.

Positive Self-Esteem

Positive self-esteem cannot be overemphasized in order to prevent frustration and destructive behavior. Studies show that children with ADD have lower self-esteem than other children. Since good self-esteem is essential for a happy and successful life, it is extremely important that parents find ways to help children feel good about themselves. Some ways that parents can contribute to self-esteem are as follows:

- **Be Positive:** Children with ADD hear nine negative comments to one positive comment daily, so try to find positive things to say to them.
- **Encourage your child:** Say things like, "You can do it."
- **Be specific when giving praise:** Instead of saying, "You're such a good boy," say, "You were very polite to say 'Thank you' to Mrs. Jones."
- **Emphasize gains:** "Look how much you've improved!"
- **Validate feelings.** "I know this seems hard to you."
- **Help your child find a positive interest that he enjoys and can do well:** Many children with ADD can

excel in individual sports more often than in team or group activities.

- **Give them responsibilities at home:** such as Saturday chore lists (e.g., taking out the trash, cleaning their rooms, or caring for pets.)
- **Tell them you love them every day!** They need to know you're there for them.

Develop a Team Approach Between Home and School

The team approach can be very effective in helping your children achieve their potential. Parents, children, doctors, teachers, tutors, counselors, support people, and organizations can work together to be more effective if they utilize good communication with each other.

To encourage responsibility, make the children a part of their behavior and academic planning. For instance, ask them what they can recommend to help with their behavior program. The more involvement or personal investment they have, the more successful your planning will be. Remember your ultimate goal is for them to be able to make their own responsible choices. *Identify and utilize special resources:*

- **School:** Communicate regularly with the school staff, particularly your child's teachers.
- **Local:** There are numerous support groups in most areas.
- **National:** There are numerous national organizations to contact for additional information.
- **Libraries:** Look for information in public or school libraries.



Developing a Treatment Strategy

After the evaluation has been completed and a diagnosis has been made, you should discuss treatment options with your doctor. The successful treatment of ADD requires the cooperation of family, school, and physicians. The following options may be included:

- *Family relationships*
- *Behavior modification*
- *Positive physical outlets*
- *Counseling for self-esteem or secondary emotional concerns*
- *Accommodations or adaptations for school*
- *Medication (not for Learning Differences)*
- *Changing needs of adolescents*

Family Relationships

- **Encourage self-acceptance and self-confidence** by open and supportive relationships.
- **Provide clear guidelines for behavior.** Set consequences for inappropriate behavior. Teach children to take responsibility for their actions. (Try not to use blame.) Children need to begin looking for their own solutions. Involve children in setting guidelines and consequences for their behavior.
- **Try to maintain** a positive and nurturing environment.
- **Set aside time** for family discussions, such as Sunday after dinner.
- **Set aside time for family fun** that can incorporate all members of your family. Ask for suggestions from all members of your family, such as playing a board game, going to a movie, having a picnic, etc.
- **Find your own support system**, including such avenues as friends, support groups, religious organizations and counseling.



Behavior Modification

Structure can be very helpful at home and school. Guidelines are useful; but be careful not to become too rigid:

- **Home:** Weekly checklists for chores, homework and appropriate behavior, work well to encourage positive behavior.
- **School:** Weekly checklists also work well for keeping track of class work.
- **Extra Curricular Activities:** Most individuals with ADD need positive directions for their energy.



Making the Decision about Medication

Medication is an option. It is extremely important as a parent to discuss this option with a qualified physician and read about medication to become informed.

Many books have been written on the subject, such as *Answers to Distraction* and *Medications for Attention Disorders and Related Medical Problems*.

Media accounts have frightened and intimidated many people. However, the medical profession has been treating ADD with medications safely and effectively for over twenty-five years.

Treatment for ADD with medication can be compared to treating diabetics with insulin or

nearsighted people with corrective lenses. If you choose medication as part of your child's treatment, discuss which kind and correct dosage with your doctor. Work with your doctor to update dosages when growth occurs, especially in adolescence. *Remember there is not a magic pill and the most successful treatment plans also include:*

- *Family relationships*
- *Behavior modification*
- *Developing good self-esteem*
- *School support (such as accommodations and*
- *Structure with flexibility adaptations)*
- *Large doses of love and understanding*

Discuss the role of medication with a qualified physician. Choose a physician who specializes in the treatment of children with ADD, such as:

- A pediatric neurologist
- A developmental pediatrician
- A child psychiatrist

How Medication Works in ADD

Medication is often an integral part of a treatment plan for an individual with ADD. Having a general understanding of how these medications work and their possible side effects is extremely important. Clear expectations of what medication will and will not do can help in the overall success of your child's treatment plan. *Medications should be prescribed by a physician specializing in the treatment of ADD.* Thoroughly discuss medication options with your doctor.

Myths of ADD

<i>The Myths</i>	<i>The Facts</i>
ADD will go away when the child enters puberty.	Many adults still experience ADD, though hyperactive symptoms may lessen.
If a child can focus on what he likes for an extended period of time, that child does not have ADD.	Most children with ADD can focus on TV, video games, or other activities of their choice.
Children who can sit still and don't cause behavioral problems do not have ADD.	ADD without hyperactivity may include children who daydream quietly without disrupting others.
Every active child who has difficulty sitting still has ADD.	Hyperactivity symptoms may come from a variety of health or psychological problems. An accurate diagnosis must be obtained before treatment is prescribed.
ADD is only a figment of the imagination – the current pseudonym for a “problem child.” It is strictly a behavioral problem, best treated with strict discipline.	Current research indicates a neurological difference in the brain of people who have ADD.
Medicine can cure the symptoms of ADD.	Current medications for ADD, such as Ritalin, can only alleviate some ADD symptoms. Multifaceted treatment is required for a long-term compensation.
Only parents or teachers who want a quick fix would resort to using medicine for this disorder.	After a complete evaluation, medication has been shown to make a tremendous difference in some children's ability to cope with ADD symptoms. Not all children with ADD need medication, however.
Alternative therapies have a strong body of research to support their use.	Such therapies as biofeedback, herbal remedies, vitamins, etc. have not shown conclusive results with ADD. Consult known experts, such as Dr. Russell Barkley, before spending large amounts of money and time on these therapies.