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Attention Deficit Hyperactivity Disorder: A Parent's Guide to ADHD

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This guide describes Attention Deficit Hyperactivity Disorder (ADHD), lists common myths about the disorder and provides background on how it is identified and managed. It offers suggestions on how parents can help their child and includes additional resources.

Attention Deficit Hyperactivity Disorder (ADHD) is one of the most misunderstood, misdiagnosed and incorrectly managed disorders. It is also one of the most commonly diagnosed child psychiatric disorders. According to the Centers for Disease Control's new National Resource Center for ADHD, it affects 4-6 percent of school-age children, and between 2-4 percent of adults. It is diagnosed more frequently in boys as in girls, perhaps because girls may have less of a tendency to be hyperactive. ADHD can affect relationships and school performance, thereby leading to self esteem problems. It may contribute to learning, social and emotional difficulties as well as career problems.

What is ADHD?

According to the 2000 American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders-IV, ADHD is a disruptive behavior disorder characterized by on-going inattention and/or hyperactivity-impulsivity occurring in several settings and more frequently and severely than is typical for individuals in the same stage of development.

Symptoms begin before age 7 years and can cause serious difficulties in home, school or work life. ADHD can be managed through behavioral or medical interventions or a combination of the two. It is most

commonly diagnosed when children reach school age.

Causes of ADHD

The cause of ADHD is not known. Many working theories assume that brain chemistry is out of balance. There seems to be a genetic component to ADHD. Children who have ADHD often have at least one relative who also has it.

Similarly, little is known about whether ADHD is related to diet. Foods sometimes linked to ADHD, such as chocolate, sugar and food additives do not cause ADHD; though they might make symptoms worse in people who have the disorder.

Factors that are not causes of ADHD include:

- Poor parenting
- Family problems
- Bad teachers / ineffective schools
- Too much television
- Refined sugar
- Food allergies
- Diet

ADHD myths

There is much discussion about ADHD, and little of it is confirmed by scientific research. There is even disagreement among experts. Be aware that many statements you hear about ADHD may not be founded in fact. Following are some common misconceptions about ADHD.

Myth 1: Children have to be hyperactive to have ADHD.

Reality: Although highly active kids are the ones parents may notice first, many children with attention problems do not show signs of hyperactivity.

Myth 2: Kids will outgrow the disorder.

Reality: Children may learn to manage their ADHD, but the CDC's National Resource Center on ADHD web site says the disorder often persists into adulthood.

Myth 3: Kids with ADHD are being difficult on purpose.

Reality: These children may be trying desperately to sit still or follow the rules. In spite of their best efforts, they may appear disobedient. They may need breaks to move so that they can pay better attention.

Myth 4: Kids with ADHD can never pay attention.

Reality: They may have trouble focusing on dull, repetitive tasks, but they may be quite alert when it comes to an activity they enjoy.

Myth 5: Medication is the answer.

Reality: Medication, such as Ritalin, may help children to focus and act less hyperactive; however, medication must be part of a larger treatment plan that may include parenting strategies and

behavior-modification treatment. Ritalin is an amphetamine. It must be used in moderation and not be taken at higher than prescribed levels.

Myth 6: You'll never amount to anything if you have ADHD.

Reality: Many famous artists, scientists, business owners, politicians and other successful individuals have ADHD.

Identifying the disorder

ADHD does not look the same in every individual

No two people are alike. Individuals may show varying degrees of symptoms of hyperactivity, impulsiveness and distractibility.

Some people are very distractible, but not very hyperactive or impulsive. They may have no hyperactive signs. They are often described as “day-dreamers” or “spacey.”

Other people are very hyperactive and impulsive, but not inattentive. In fact, they may have no inattentive signs. Still others are very distractible, hyperactive and impulsive.

How is ADHD determined?

A reliable diagnosis of ADHD must be made by a team of qualified professionals. A psychologist, medical doctor or psychiatrist should make the diagnosis because ADHD can be mistaken for other psychological problems, learning disabilities or physical problems (vision, hearing).

If the child is in a public school, the school can refer the child for an evaluation. A doctor making a diagnosis should ask for input from the child, parents, teachers and other health care providers. The doctor should also collect information about medical, developmental, school, psychosocial and family histories and the history of the symptoms. He or she should consider causes other than ADHD for the problem and review other conditions that could be present.

There is no single test or person to diagnose ADHD. One way professionals confirm ADHD diagnosis is that a child's

symptoms are present all day long, in a variety of environments and situations.

Managing ADHD

Why is it important to treat ADHD?

It is often difficult for children with ADHD to function in school. This can lead to low self esteem and an inability to succeed at a very young age. Children with ADHD often have trouble making friends. In adults, untreated ADHD can continue to promote difficulties with relationships, marriage, and function in work and academic settings. Family conflict can increase due to stress and frustration associated with the disorder.

How is ADHD managed?

The management of ADHD in children requires the coordinated efforts of a team of healthcare professionals, doctors, educators and parents. A management program may include:

- Parent training in behavior management and social skills development
- An appropriate childhood education program/plan
- Individual and family counseling when needed
- Medication when required
- Regulation of diet and exercise

Finding help and resources

You may want to contact:

Your local health provider. Begin with your own health provider, though he or she may refer you to another provider. Feel free to ask for referrals to other doctors.

A local support group. Parents in support groups are a good source of information about professionals in your area.

Your insurance company. It is important to find out what services your insurance will cover. Your insurance company may also have a list of doctors who specialize in ADHD.

Hospitals or referral centers. They have lists of healthcare professionals who specialize in different fields within the hospital or referral center. They can match health professionals to your needs.

School officials. Public schools may refer you to a professional for an evaluation. Check to see if they have lists of qualified professionals to diagnose and treat ADHD.

What can I do to help my child?

Respect your child. Treat your child at home as you would in front of others. Accept your child for who he or she is. Be realistic in your expectations and demands.

Organize a schedule at home. Set up a specific schedule for waking, eating, playing, homework, chores and bedtime. Post it where your child can see it. Explain any changes in routine in advance.

Use consistent discipline. Avoid repeating directions and requests. If your child breaks a rule, only give one warning. Let the child know what the consequence will be and follow through with the consequence if the rule is broken.

Speak softly and get down on the child's level when you talk to him or her. Avoid yelling at your child; he or she may not be able to “hear” what you are saying when you are yelling.

Use positive language. Tell your child what you want rather than what you don't want. (Don't nag!) Reward your child for good behavior as often as you can.

Make sure your child understands your directions. Get your child's attention. Tell him or her in a clear, calm voice exactly what you want. Give simple and short directions in a series of two to three tasks per request. Ask your child to repeat the directions.

Help your child prepare for school. Get ready the night before school—lay out clothing and school materials. Make enough time for your child to dress and eat in the mornings.

Limit choice, but do not dictate. If you make all the decisions for your child, he or she may be unable to make his or her own decisions later. Give your child choices when appropriate. It is best to give two choices to pick from so he or she does not get confused or frustrated.

Learn to establish a “quiet zone” in his or her life. Help your child to learn stress management techniques and to understand that he or she needs emotional “time outs” to regroup after an upset.

Minimize corrections and criticism. It may be with the best intentions that you give corrections and criticism. However, you may actually be contributing to your child’s feelings of inadequacy and low self worth.

Help your child look for ways to excel. Children with ADHD often feel that they are not good at anything. Encourage their strengths, interests and abilities. Help your child to use his or her skills as compensations for any limitations.

Help others to understand. Helping the parents of other children understand your child’s needs, may assist in them being more willing to include your child in play groups and other socializing activities.

Consult with teachers or other specialists. Whenever you feel it is necessary in order to better understand what might be done to help your child learn, talk with the appropriate teacher or specialist.

Take care of yourself. Taking care of a child with ADHD can be challenging. Take some time for yourself. Talk to a friend, watch a movie, take a bath, read, exercise, pray, meditate or do something else that recharges your spirit.

Conclusion

Children with ADHD are first and foremost *children*. If your child is diagnosed with ADHD, work closely with the child’s healthcare, educational and family team to ensure the most effective plan. Your feedback is extremely important. A successful management program may include family counseling. Ask your doctors for referrals.

Individuals with ADHD may need some special support, but the condition can be successfully managed. Know that your child can have a content childhood and be a successful, independent adult.

Additional resources

National groups

- **Children and Adults with Attention Deficit Disorder (CHADD)**
8181 Professional Place, Ste. 201 Landover, MD 20785
phone: 301-306-7070
and 800-233-4050
fax: 301-306-7090
web: <http://www.chadd.org/>
- **National Resource Center on AD/HD**
Established in 2003 with funding from the U.S. Centers for Disease Control
<http://www.help4adhd.org/>
- **The National Attention Deficit Disorder Association (ADDA)**
1788 Second Street, Suite 200
Highland Park, IL 60035
phone: 847-432-ADDA
fax: 847-432-5874
web: <http://www.add.org/>

Books for parents

- Cohen, M.W. (1997). *The Attention Zone: A Parent’s Guide to Attention Deficit/Hyperactivity Disorder*. Brunner/Mazel Trade.
- Hallowell and Ratey. (1995). *Driven to Distraction*. Simon & Schuster. New York.
- Moss, Robert A. (1996). *Why Johnny Can’t Concentrate: Coping With Attention Deficit Problems*. Bantam Doubleday Dell Pub.

Books for kids and teens

- Gordon, M. (1992). *My Brother’s a World-Class Pain: A Sibling’s Guide to ADHD-Hyperactivity*. GSI Publications.
- Quinn, P.O. & Stern, J. M. (1993). *Putting on the Brakes: Young People’s Guide to Understanding Attention Deficit Hyperactivity Disorder*. Magination.



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