

PATIENTS AS PARTNERS

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Taking the bounce out of ADHD

What is ADHD and what can parents do to help?

Attention Deficit Hyperactivity Disorder (ADHD) is a condition that presents in children in the early school years. These children find it difficult to concentrate, focus on a specific task or control their behaviour. Between 3 and 5% of children have ADHD with a male to female ratio of 4:1.

"Having ADHD is like being put into a dark room with things left lying around to trip you. You don't get a torch – but everyone else in the room has one! You stumble and fall and bump into things – and when you finally learn how to walk around the room without tripping... you get moved to a new room". This is how Steven, 15, describes his ADHD. Michael, 16, says "It's like watching someone changing the channels on a tv really fast. You get a general idea but miss most of what's going on. Everyone else seems to get stuff easier than I do".

The primary characteristics of ADHD are hyperactivity, impulsivity and inattentiveness which appear early in the child's life. "Many children have these symptoms at a low level", says Dr David Benn, a Johannesburg Child Psychiatrist, "so it is very important that the child receives a thorough examination and appropriate diagnosis". Very often impulsiveness and hyperactivity are the first symptoms to present although different symptoms may appear in various settings depending on the demands placed on the child. A child who "can't sit still" in class will be more noticed than the inattentive daydreamer; a child who is impulsive and acts before thinking may be seen as a "discipline problem" whereas the child who appears sluggish or passive may be considered merely unmotivated.

All children can be restless, may daydream or sometimes act without thinking, but when this begins to affect the child's performance in school, his social relationships or behaviour at home, ADHD should be investigated.

Symptoms may vary dramatically across settings – a child may cope well in a structured extra-curricula activity but not cope at all in a classroom – which makes ADHD difficult to diagnose.

Hyperactive children always appear to be on the go, constantly in motion. They talk incessantly and can't keep still for long – "they squirm and fidget and are constantly getting up and moving around", says Janine Shamos, senior counsellor for the South African Depression and Anxiety Group (SADAG) and high school educator. Hyperactive teenagers and adults often report feeling internally restless. "I need to stay busy, I'll do anything and everything – but I must be busy", says Michael.

Impulsive children appear unable to think before they act – they will blurt out inappropriate comments, display unrestrained emotion and act without thought for consequences. "Teens often take the 'right now' choice which may have a smaller pay-off but is immediate, rather than waiting", says Dr Benn.

Inattentive children have trouble keeping their minds on one thing at a time. They get bored quickly and are easily distracted by irrelevant sights, sounds and smells. "Paying conscious attention to completing a task or learning something new is very difficult for these children", says Shamos, "and homework is particularly hard". These children seem to be daydreamers or "spacey". They have difficulty processing and assimilating information and are slower than other children at doing so. Instructions, particularly oral, are very difficult for the child to comprehend. Because these children seldom display significant hyperactivity or impulsivity problems, they are often overlooked.

Some of the signs of ADHD are when someone:

- has difficulty paying attention or staying focused on a task or activity
- has problems finishing assignments at school or home and jumps from one activity to another
- has trouble focusing on instructions and difficulty following through
- loses or forgets things such as homework
- is easily distracted, even when doing something fun
- has problems paying close attention to details or makes careless mistakes
- has trouble organizing tasks and activities
- has difficulty waiting one's turn



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- interrupts or intrudes on other people
- blurts out answers before questions have been completed
- fidgets with hands or feet or squirms about when seated
- feels restless
- talks excessively and has trouble engaging in activities quietly

“Children with ADHD will often become adults with ADHD” says the National Institute of Mental Health (NIMH). 60% of children with ADHD will not simply “outgrow” it and will display symptoms as adults. Typically however, adults are unaware they have the disorder. “The trouble with ADHD is that you’ve always had it so you don’t have a frame of reference”, says Dr Benn, “But a correct diagnosis of ADHD can bring considerable relief”. The adult ADHD sufferer frequently has negative perceptions of himself and consequently low self-esteem. Now, with a diagnosis, he can begin to understand his problems and take steps to face and effectively treat them.

Could you be living with Adult ADD?

- Do you have difficulty concentrating or focusing your attention on one thing?
- Do you often start multiple projects at the same time, but rarely finish them?
- Do you have trouble with organization?
- Do you procrastinate on projects that require a lot of attention to detail?
- Do you have problems remembering appointments or obligations?
- Do you have trouble staying seated during meetings or other activities?
- Are you restless or fidgety?
- Do you often lose or misplace things?

One of the first questions a parent has is “Why? Did I do something to cause this?” There is little evidence that ADHD can purely develop from social factors or child-rearing methods. Environmental factors can however influence the severity of the disorder and impairment of the child so parents should be forward looking to find the best possible ways to help the child. According to ADHD.com it is important for parents and sufferers to find experts with whom they are comfortable.

There are several intervention approaches that are available. While medication can help the child better control his behaviour problems, it takes time to undo the blame, frustration and anger that ADHD brings. Parents and children can benefit greatly from techniques that can develop coping skills and manage patterns of behaviour. “ADHD affects the whole family so interventions that support the whole family and teach the family new ways of interacting are critical”, says the ADD Support Group.

Psychotherapy: talk about thoughts and feelings and explore self-defeating patterns of behaviour

Behavioural Therapy: helps people develop more effective coping skills

Social Skills Training: can help children learn new and more appropriate behaviour

Support Groups: this helps parents connect with other people who understand the concerns and problems surrounding ADHD

Parenting Skills Training: gives parents tools and techniques for effectively managing their child’s behaviour

“Diet and lifestyle are very important”, says Dr Benn. “Dietary restrictions are effective for the hyperactivity component of ADHD”. NIMH suggests parents “set consistent rules that the child can understand and follow. Children with ADHD expect – and all too often constantly receive – criticism, so look for good behaviour and praise it”. “Stick to a schedule”, suggests the ADD Support Group. “Have the same routine every day and stick a copy of it somewhere visible like the fridge”.

A child with ADHD faces a difficult, but not insurmountable, task. In order for the child to achieve his full potential, he needs to receive understanding, support, guidance and treatment. Help is on hand and there are many resources available for parents, educators and adult sufferers.

ADHD Support Group: (011) 888-7655

www.adhasa.co.za

Childline: 0800 055 555

SADAG: (011) 783-1474/6

www.sadag.co.za

NIMH: www.nimh.nih.gov

ADHD Information form Eli Lilly and Company: www.adhd.com