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Parental Interventions for Children with ADD/ADDHD

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I was asked to include methods for treatment of depression in ADD/ADHD children, but it is probably best to spend the available time talking about how to prevent it before it occurs. Four medical corrections that need to be checked before parental intervention can succeed are: medicines, sleep disorders, thyroid 1) Type of medicine (Ritalin versus disorders and diet. Dexadrin, etc.) and timing are very important in children that have to have it. 2) Sleep disorders occur in some 30 % of ADD/ ADHD individuals. There are five kinds. There is often REM sleep depravation from thrashing. There is sometimes too much deep REM sleep as in bed wetters or needing 10-14 hr/day of sleep. This can be mitigated by lightening sleep with a low dose, only 10 mg, of Desapremine, Imeparemine or other MAOI medication. 3) A thyroid test should be given to all autistic children, all ADD/ADHD boys and all ADD/ADHD girls over 10 or 11. 80 % of women with ADD/ADHD have low thyroid stimulating harmone (THS) with symptoms of chronically cold hands and feet, dry skin and constipation. THS < 1.3 is low and needs correction. (The usual lab "norm" is incorrect.) 4) FAUS knows all about diet, so it doesn't need to be discussed here.

Constructive parental discipline and guidance are keys to shaping correct or at least acceptable behavior in the ADD/ ADHD child, but this are difficult to implement. Parents see traits that interfere with family life and portend future problems, but they tend to feel that there is little that can be done about the situation. The ADD/ADHD children tend to see themselves as "bad." Their traits are beyond their control and usually perception.

Parental natural response patterns can not be relied on, may be damaging and usually fail in understanding the nature of the child's disability. And parents of ADD/ADHD children often themselves have a history of similar problems. Their own behavior instincts then interfere and are not understood.

ADD/ADHD children do not process before or after they act. Actions tend instead to be determined by their feeling state of the moment rather than on integration of feelings and thoughts They tend to deny that they did with an eye to the future. something and truly believe what they say. They remember the last most recent event, not middle or prior events. The parent's role needs to be to help the child to process experiences in an exploratory and non-judgmental manner. "I guess before you stole that record that it must have been very appealing to you. When did you start to think that you might have done something that could get you into trouble? What happened, anyway?" Ouestions such as this begin to connect language with feelings and to use language as a way of directing and planning possible courses of action. On the other hand, if impulsive acts are greeted with a quick-reaction parental "no," the teaching of impulsivity is reinforced. Get them to think about action and how they feel rather than just react to them.

ADD/ADHD children are hypersensitive to being controlled, this apparently usually having to do with early experiences of being parented when they were infants. ADD/ADHD children do not have a feeling of connectedness and have difficulty sensing others around them as part of a social network.

They need lots of intense stimulation.

Discipline as a consequence of behavior is meaningless unless genuine praise and parental pleasure are part of the parent's regular communications with the child. Too often the parent-child relationship becomes dominated by control issues and discipline with too little parental pleasure, the child becoming resistive and depressed and then either carrying out acts in anger or withdrawing. A 5:1 ratio of fun free play to discipline is recommended, but the ratio in ADD/ADHD families is more typically 1:10 in the wrong direction. When this ratio is turned around most of the behavior problems go away. See "The Challenging Child," by Dr. Stanley Greenspan (McGraw Hill). There are five types of behavior problem personalities.

Discipline has to be accompanied with appropriate feelings and language. Statements like "That's stupid. What's wrong with you?" are damaging. Instead, state your feelings and don't attack, denigrate or label. Kids know when they "piss you off." They probably set out to do it in the first place, so there is no problem in letting them know how you feel. Your feelings whether positive or negative confirm the child's sense of importance to you. Use statements more like "You make me feel like knocking your block off. Why are you doing this?"

ADD/ADHD children need to learn event sequences with accompanying emotions more than they need to learn discipline. Every opportunity to discipline is an opportunity for parents to prod review and to tie together a sequential picture of what happened with memory of feeling states at the time. It is good to do this with positive things, too, like "If the water at the lake is as cold this year as it was last summer, what do you...?"

Punitive consequences to behavior are usually a form of retribution that makes the parent feel better for a while. The intent is to hurt or punish. The effect is anger, resentment and future aggressive behavior. It doesn't work.

Four traits in ADD/ADHD children that become stumbling blocks are: 1) negative punishing self-image, 2) stubborn oppositional nature, 3) repeating the same thing over and over again, and 4) non-recognition of their own responsibility in the sequence of things.

Negative Punishing Self-Image: They react to discipline as confirming their essential badness. They do not see that the parent or teacher is trying to help them establish inner controls and are very, very touchy. This developmental weakness in a child is usually in the parent, too. So the parent, also, needs to learn that constructive criticism is not an attack. When our parents criticized us was it in an irritated and angry tone or was it an attempt to clarify a difficult situation with someone they loved and respected? Keeping this question in mind changes how you think about and deal with your children even when they are defensive and hostile.

Some children simply do not respond to discipline. You give them the most thoughtful explanation of why such an activity is damaging to others and within minutes they'll be doing the same thing again. Eventually you raise the volume of your voice and the intensity of your feeling. You may find yourself on the verge of abusing your child. When it gets this far you find that you do get his attention finally, and for a brief while it works. Meantime your child has trained you in a sense to go at him or her in an aggressive and loud way. You are activating their attention and doing it with enough feeling so that they can get your message in.

Greenspan points out that there is no true learning unless it is associated with emotion as well as attention. Until both these components are present all of our activities are futile. At best without them, we may stop the child's activity, get an outlet for our mood, and give the hyperactive child the thrilling experience and perverse satisfaction of being in control of his parent's mood. This pattern of control transfer happens over and over again in families with behavior disorder children.

Stubborn Oppositional Nature: Many ADD/ADHD children are hypersensitive to control. And if one of the parents is the block off which the chip came, there is very little real hope of changing the child until the parent first changes. A stubborn, oppositional child can not be helped even by a professional a parent persists in being stubborn and oppositional. However, if parent problems are not present or have been alleviated, then the approach to use is Greenspan's formula. The ratio of play time to control time should be 5:1. This is usually all that is needed. It's like magic! If other modification is needed it is the tone in which we talk to our children when control is required. They hear tone first and content second.

A lot of these children are forgetful. They may promise to do something and then completely forget by the time they get into the next room. Help your child learn strategies to remember things, but start with issues that are important to the child not to you, not things like brushing teeth, making the bed or bringing homework assignment sheets. The task has to be emotionally compelling to get the child's full attention and for them to learn. Don't make them feel singled out or lectured to, and back off if they are resistive. The forgetful child does have things of vital interest to them. Start with these things.

Hyperactive kids do things before they think. A parent lecturing a hyperactive child about climbing on the furniture may as well be giving a lecture on the same subject to the furniture. Telling the child not to do something that he or she is going to do is not only a waste of time but also building up bad habits. Never take a position for which you can not follow through and make happen. Join rather than fight the inevitable and just try to change the curse of the direction.

ADD/ADHD children are often looking for attention and stimulation of any sort, and negative attention can be quite an gratifying as positive attention. This puts people in a very tricky situation in dealing with them. An angry parental reaction may be both gratifyingly stimulating to them and lets them know that they are in control again. It is almost a biological need for these children to be irritating.

They will forget how to put on their cloths. They require a huge amount of supervision. They may genuinely not able to de homework without someone else in the same room.

They have problems with power and control, so listen to what they have to say. Don't debate, and don't just say no automatically. But once you take a thoughtful position, never give in, which would be training them to keep pushing. "Intermittent positive reinforcement" (giving in to their pressure once in a while) is a killer. To cure this pattern, if you already have it going, you should start with giving in t everything for a week or two. This unlearns a kind of pressure. Then, from that point on say "now when I say 'no,' that's really it." And from then on never give in on any position you have taken no matter what. That's how to beat the rap.

There are ways to make things worse such as: lecturing your child, too many rules, more time directing and educating than playing and interacting. (Fathers especially tend to think their whole role is to educate their children about the world.)

Time Outs: They make things worse. They drive the parent and child apart in constant command and control battles rather than bringing them together. The child will eventually win the control battle.

Consequences with ADD/ADHD kids have to be immediate in connection with the action or otherwise the action has already been forgotten. You have to make a connection emotionally and cognitively between the event and the consequence, and you may only have a 30 second laps in which to do it. Consequences must not be separate and unconnected to any child action as perceived by the child.

And disciplinary consequences need to be as short as possible. For one thing, if you took away something of value a week ago and still have it, you can't take it away again. If you ground them for two weeks, you don't have much leverage. Resistance to grounding with penalty of more grounding is a common destructive battle that tends to emerge. Control conflict soon permeates all interactions. Disciplinary consequences should be almost as short as your child's memory, not very long for the ADD/ADHD child. Having to leave the table for just fifteen seconds may be enough. It is a display of control and power that they do not like and therefore discipline. Anything that is too long creates anger, long-term resentment and resistance.

Contracts: Never have an ADD/ADHD child sign a contract to do or not to do something. It is asking them to lie. It isn't going to work. It creates feelings of control conflict and opposition. If you use a contract, make it just a statement of understanding about what is expected of them and what you will do in anticipated events. Parents sign to follow through no matter what. Have them police it.

Q&A Session. Question about young child always wanting to come into parents bedroom at night: If they are having sleep trouble, set up a cot in your room. Don't let them end up in your bed all the time. Eventually move the cot to the hall.

Reviewer's Notes:

- This summary omits Dr. Mann's many examples and personal anecdotes. Also, he pointed out that because of shortage of time he was leaving out discussions of specialized techniques required for autism, of sleep disorders and of diet.
- In the 70's Drs. Mann and Greenspan authored the first paper in the psychiatric literature on ADD/ADHD in adults.
- Complementary video presentations by Richard Lavoy on teacher/parent techniques have been recorded by and are available through public radio, "Understanding Learning Disabilities" and "Fat City Workshop."