

ADHD Information and Tips For Building Strong Families Facilitators

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Attention Deficit Hyperactivity Disorder, or ADHD, is a growing concern for families in the United States. Studies show that between 2 and 18% of school-age student population has ADHD (Rowland, Lesense & Abramowitz, 2002). In addition, more and more adults are being diagnosed with ADHD. A recent study out of Harvard found that 4.4% of adults have ADHD or symptoms of ADHD (Kessler et al., 2006). With the disorder gaining more and more attention it is important for families to understand more about ADHD and ways in which families can work together to make their child with ADHD more successful. This article has information and tips on modifying Building Strong Families activities to help the facilitator understand how to help families with ADHD in their workshops.

Symptoms of ADHD

ADHD is a neurological condition involving a failure in the cognitive functioning associated with inhibition and self-control. Children and adults with ADHD may show little impulse control, they may have problems sitting still in classes, paying attention to instructors, and staying involved with tasks. It is important to note that in order to receive an ADHD diagnoses, these problems must be developmentally inconsistent with the individual's age (APA, 1994). In other words, a child's problems with impulse control or inattention must be affecting their ability to function in a way that would be normal given their age. Behaviors associated with ADHD are divided into two main categories: Hyperactivity-impulsiveness and the inability to sustain attention.

Common symptoms of ADHD in children include inattentiveness, difficulty following through on instructions, difficulty organizing tasks, becoming easily distracted and forgetful, inability to sit still, constant fidgeting and squirming, always being "on the go," inability to wait their turn, talking excessively and becoming frustrated quickly with tasks or assignments. Children with ADHD show symptoms at home as well; they may have trouble participating in family outings and events; they may have serious problems keeping their rooms and spaces organized and clean; they may have significant trouble when working on homework, especially if they find it boring or confusing.

ADHD affects a child's ability to control his or her impulses. This means that a child who is 12 may act more like a 9 year old in regards to his ability to focus and have self-control. This does not mean that he is unintelligent; in fact, research shows that most

children with ADHD have at least normal intelligence (U.S. Department of Education, 2003).

Individuals with ADHD have described that having the disorder is like listening to a radio station that has lots of static or driving in the rain with bad windshield wipers. It is a constant hardship to understand the world and lessons being taught, and there is an inability to slow down (Hallowell, n.d.). It is a frustrating experience. Many people report feeling full of energy and having constant ideas and questions pop into their mind, without the time to follow through on one thought. Many individuals with ADHD work hard but still become disorganized or have trouble focusing and get marked as a daydreamer. ADHD can feel like running a race with no real idea of where the end might be.

Three types of ADHD

- Inattentive – individuals cannot seem to focus and have trouble staying on top of and finishing a project.
- Hyperactive-Impulsive – individuals are extremely active and seem to make rash decisions.
- Combined – individuals have difficulty focusing and have symptoms of hyperactivity.

ADHD can make it difficult for a child to be successful in school. It can also make it difficult for parents to understand how to work with and advocate for their child. If parents suspect ADHD, they should meet with their child's teachers to determine if the behaviors they see at home are happening in school as well. If so, they should ask for an assessment from the school or a pediatrician.

Adults with ADHD suffer from similar difficulties regarding inattention and hyperactivity. Adults who have ADHD may not have been diagnosed as a child and may just feel that something is different about how they function. Diagnosing ADHD in adults is difficult, as most diagnostic tools are made for children and do not measure adult symptoms in the same way (Weiss, Trokenberg Hechtman, & Weiss, 1999).

Adults who have ADHD may have the following symptoms:

- A poor educational history and achievement
- A history of frequent moves and job changes
- A tendency to become bored quickly
- A problem with frustration and impatience
- A short temper

- Have trouble with organization, keeping appointments, keeping personal spaces clean
- A tendency to daydream or drift off and not pay attention
- Have difficulty completing tasks (Yisrael, 2002)

ADHD in Building Strong Families

Adults and children with ADHD respond positively to several behavioral interventions in the classroom. Building Strong Families facilitators can do several things to ensure that the attention of individuals with ADHD is sustained and that the participant experience is maximized regardless of ADHD status.

For both children and adults:

- Make the schedule visible and try to follow it as closely as possible.
- Offer several breaks and let the participants know that they can be excused for a break at any time.
- Plan on lots of hands-on activities. BSF already involves many activities like this, but if you suspect your group has members with ADHD, then plan on keeping the activity level high.
- If needed, repeat instructions in a different way so that individuals with ADHD can process the information. For example, if instructions have been given verbally, it may help to either write or draw out the instructions in a step by step manner. Another suggestion would be to physically demonstrate the task one step at a time.

For children:

- Make the handouts and information colorful and bright to attract attention.
- Give instructions one step at a time.
- Ask questions to clarify: Who, what, why.
- Pair the students with peers who can serve as role models.
- Use physically active activities that encourage children to let energy out.
- Ask children to assist you in handing out papers, putting up posters and other things to capitalize on their energy and empower them as helpers.

For adults:

- Ask many questions about the subject.
- Ask the participants to relate the topic to their own lives.
- If someone looks bored or lost, stand close by them to remind them to focus.
- Provide alternative activities and answers. If you notice a person having trouble focusing and paying attention, move on to a more physical or active activity. For example, if you are facilitating a discussion on family strengths and notice a

participant who is having trouble paying attention, try to provide an activity that involves physical movement or group work so that the participant has a more active role in the learning process.

Building Strong Families facilitators can have a successful workshop by using some of these strategies for success with individuals who have ADHD. It is important to remember that just because someone displays the symptoms of ADHD, it does not mean he or she has the disorder. However, it is a good idea to keep these tips in mind when facilitating a workshop since they may help many participants feel included and successful (whether participants have ADHD or not).

Examples of Modifications to BSF Activities for Participants with ADHD

Below are two examples, one for adults and one for youth, of ways to modify BSF activities to encourage participants with ADHD to comprehend and take an active role in the learning process without feeling embarrassed or left out.

Adult Activity: “What Makes Families Strong?” From the Family Strengths Module

The current activity for “What Makes Families Strong?” involves reading through an overhead and describing nine family strengths that aid successful families. While this activity follows a more active and hands-on activity (the Block Activity), it changes the dynamic of the group from one that is involved in active-participation to one that is involved in quiet listening.

To modify this activity, it would be helpful to remember some of the tips listed above.

- 1) involve the participant in hands-on or active learning
 - 2) give the participant a responsible role in the lesson
 - 3) relate the subject back to the participants’ individual lives.
- First, rather than simply reading each family strength off of the overhead, divide the group into nine smaller groups.
 - Give each group a copy of one of the strengths.
 - Ask the groups to come up with a second definition of the strength and examples in their own lives of how the strength works.
 - Give the groups five minutes to brainstorm and work together, while they do this, make sure you are walking around and helping each group.
 - Have the groups share the definition of the strength, the definition that the group agreed on and the examples that the group came up with.
 - Ask clarifying questions – What roles did members of your family play when you were a child? How can a family be spiritual together outside of a house of

worship? What are some types of change that families deal with and how might they deal best?

- Ask the group for examples from their own lives for each strength.
- At the end, remind the participants that the strengths work together and that working on one benefits the others.

By modifying the “What Makes a Family Strong” activity in this way, facilitators can encourage participants with ADHD to take an active role in the learning process, make and understand connections between the lesson and their own lives, and feel like a responsible and participating member of the group.

Child Activity: “Who Does What?” From the Family Strengths module

The current activity for “Who Does What?” involves quiet introspection and drawing a picture of families and their roles. This activity follows a group activity, however both activities do not involve movement or physical action.

To modify this activity for children with ADHD, it might be helpful to keep in mind some of the key points mentioned above.

- 1) pair the students with peers
 - 2) make the activity physically active
 - 3) ask who, what and why questions
- First, rather than make this activity a quiet and introspective one, change the activity from a drawing to a game of charades.
 - Ask the children to pair up (try to pair up the child with ADHD with a competent peer who can guide the child and serve as a role model)
 - Pass out brightly colored slips of papers with different things that children do to help their family. Tell the children they are going to act out what is on the slip of paper, but if they can think of something else that they do to help their family, they can act that out instead.
 - Ask the children, in pairs, to act out the activity in front of the group.
 - Have the other children guess the activity from the actions of the pair.
 - After each pair acts out the activity, ask the group the following questions:
 - Why does that help out your family?
 - How do you feel when you do that task and help your family?
 - What makes you feel important in your family?
 - Once all of the pairs have had a chance to act out a helping activity, ask the group if there is any other things that they do that help their family. You can ask them if they want to act them out or just say them.

Modifying the “Who Does What?” activity in this way allows children to learn the concept of roles and responsibilities in families, apply it to their own lives, and remain active and involved in the process.

For more information on ADHD, see the following:

Missouri Developmental Disability Resource Center’s page on ADHD at http://www.moddrc.org/fast_fact.php?disID=5

The National Institutes of Mental Health’s page on ADHD at <http://www.nimh.nih.gov/publicat/adhd.cfm>

The U.S. Department of Education’s publication, Identifying and Treating Attention Deficit Hyperactivity Disorder: A Resource for School and Home at <http://www.ed.gov/rschstat/research/pubs/adhd/adhd-identifying-2006.pdf>

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