

Understanding ADHD

6-week course
for parents/carers

ADD-vance

Registered Charity No. 1158968
www.add-vance.org





Learning Outcomes

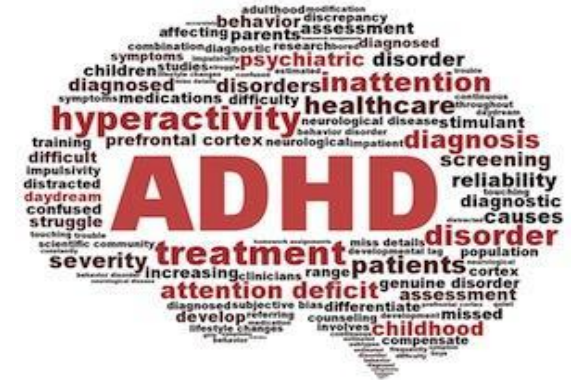
- To understand more about ADHD, including the strengths and challenges.
- To recognise ADHD in children and young people.
- To take away new information and ideas to help in your home.
- To know where to get more help.



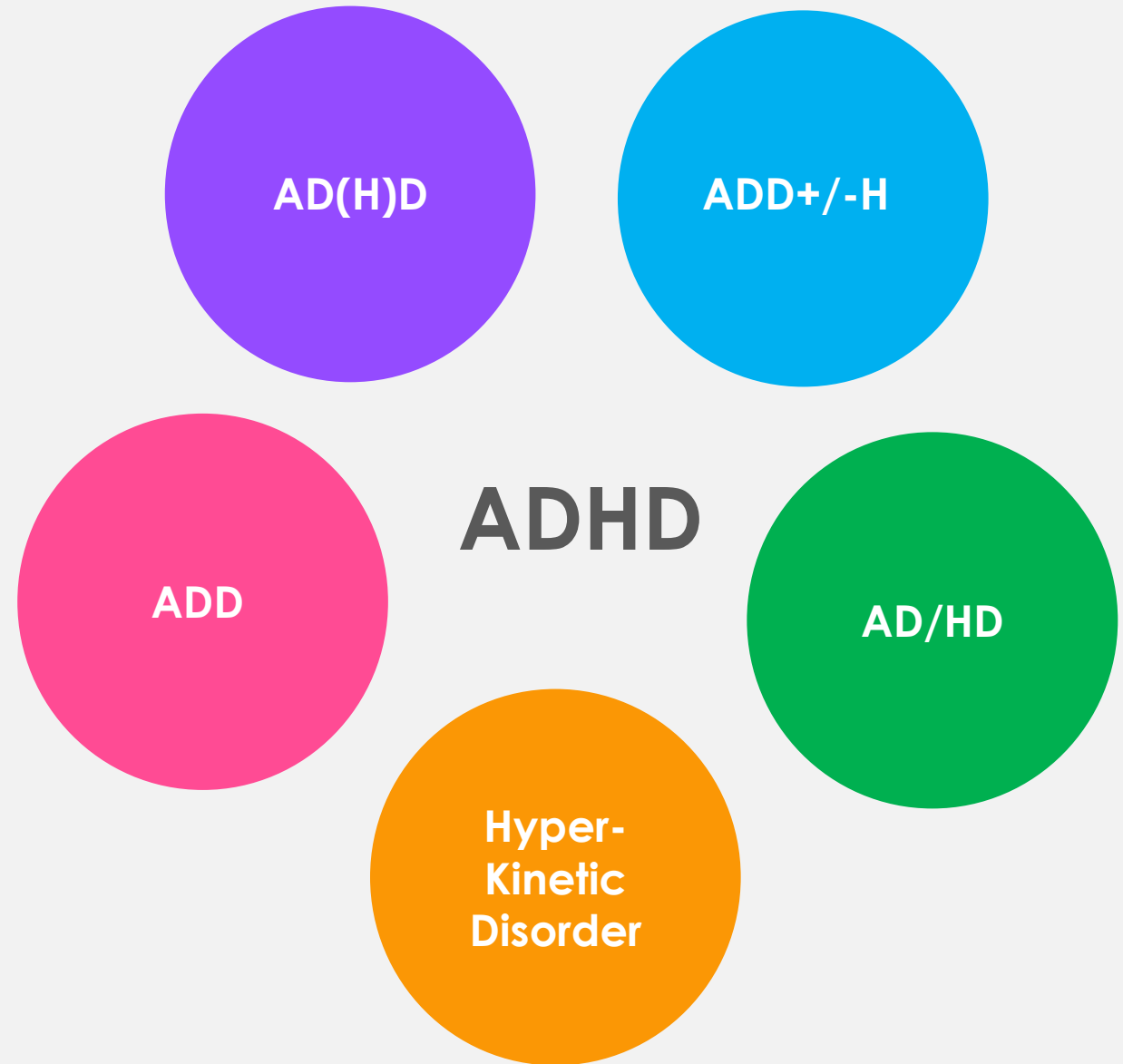
A cartoon illustration of a young boy with brown hair, wearing a blue t-shirt, grey shorts, and red and white sneakers. He is standing with his arms outstretched, juggling ten colorful balls (red, purple, green, pink, blue, orange, yellow, light blue, dark blue, and white) in a circular pattern above his head.

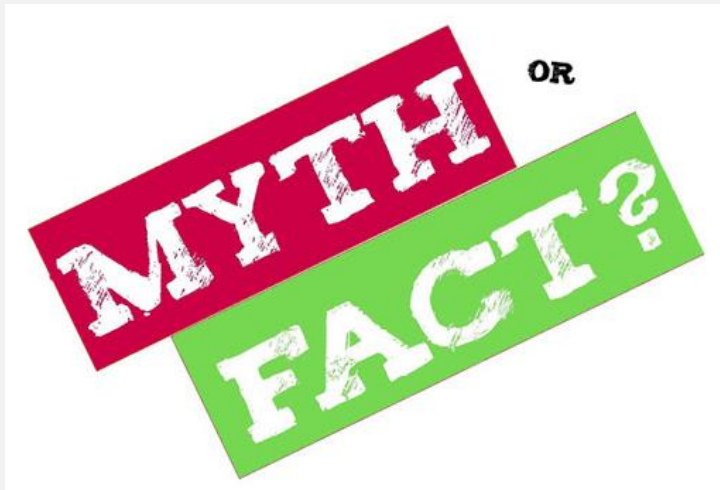


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Terminology





× ADHD is a new condition

✓ Recognised since the 17th century!

× ADHD is a 'made-up' condition

✓ Most researched neurodevelopmental condition;
Affects 2-5% of UK population (1 in 20)

× ADHD only effects social groups

✓ Affects all social groups, races, ethnicities

× ADHD is the result of poor diet/excess screen time

✓ Runs in families – 85-95% due to genes

× ADHD only affects boys

✓ Girls often go unnoticed



What Causes ADHD?



There has been extensive research to show that ADHD is strongly genetic and tends to run in families

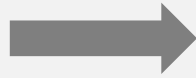
We don't know why some family members have ADHD and others don't - no specific causal factors have been isolated

We do know that the structure and function of the brain is different in people with ADHD.

Brain Chemistry



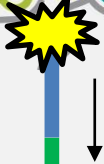
1. Ear receives auditory instruction



2. Brain processes auditory instruction and gives priority (or not!)



3. Brain sends a message (electrical impulse) along the appropriate neural pathway



4. Neuro-transmitters bridge the synapses so the message can travel all the way to the toes

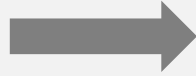


5. Electrical impulse reaches the big toe and it starts to wiggle

Brain Chemistry Lesson!



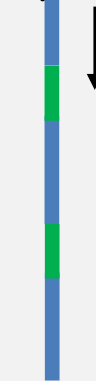
1. Ear receives auditory instruction



2. Brain processes auditory instruction and gives priority (or not!)



3. Brain sends a message (electrical impulse) along the appropriate neural pathway



4. Neuro-transmitters start to bridge the synapses but there isn't enough to bridge them all (or they are reabsorbed too quickly)



5. Electrical impulse never gets to the toe!

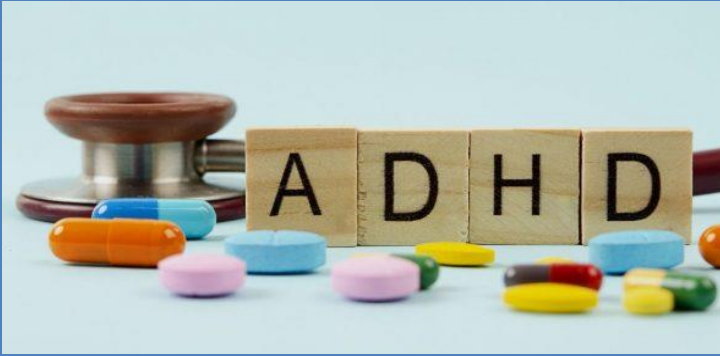
In the ADHD Brain . . .



Differences in the ADHD Brain



Neurotransmitter	Role	ADHD Level	Effect
Dopamine	Pleasure/ Reward	Reduced	Easily bored, lacking motivation; tend to repeat behaviours that stimulate extra dopamine
Noradrenaline	Concentration	Uneven	Uneven levels of attention; may be indifferent, depressed, withdrawn OR thrill-seeking, aggressive, impulsive
Serotonin	Mood	Reduced	Irritable, aggressive, sad; may affect sleep cycle



Medication



Common Concerns

- Medication will make my child like a zombie.
- I / School should be able to support them without medication.
- What if my child becomes addicted to medication?
- My friend's child had side effects and I don't want that for my child.
- Why would I give a 'stimulant' to my child who is already hyperactive?
- ADHD medication is over-prescribed to make teachers and parents lives easier.



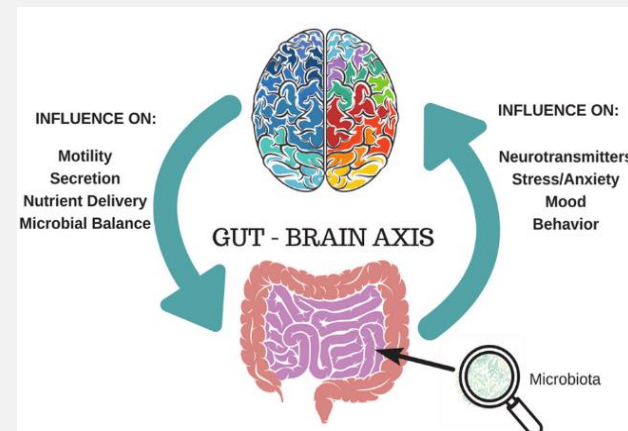
How does stimulant medication work?

- **Stimulant medication** increases neurotransmitter activity and blood flow to the brain.
- **Methylphenidate is the generic name** for the most commonly prescribed medication for ADHD.
- **Different formulations/brand names** of methylphenidate work in slightly different ways.
- **No brand is 'better' or 'worse'** - it's about finding the right formulation for your child.
- **There are common side effects** but these usually settle.



Alternatives

- **Non-stimulant medication** may be effective if stimulants don't work well for your child.
- **Anti-depressants** may be used to treat secondary anxiety, depression or other mental health disorders.
- **Melatonin** may be useful, especially if 'sleep onset' is a problem.
- **A balanced diet/good gut health/omega fatty acids** may contribute to improved symptoms.





Diagnosis



Two Categories

1. Inattention 2. Hyperactivity/Impulsivity

- ✓ At least 6 out of 9 symptoms (in either category)
- ✓ Symptoms present for at least 6 months
- ✓ Symptoms onset before the age of 12 years
- ✓ Symptoms exhibited in two or more locations
- ✓ Symptoms not better explained by another disorder

Diagnostic Statistical Manual (DSM)
American Psychological Association
Version V (2013)

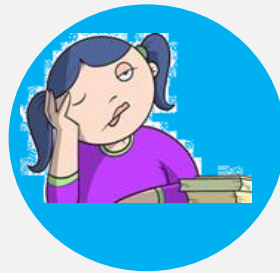
ADHD Diagnostic Terms (DSM V)



One umbrella term:

Attention Deficit Hyperactivity Disorder (ADHD)

Three sub-types:



Predominantly Inattentive Presentation (prev. ADD)
RHINO - Really Here In Name Only



Predominantly Hyperactive/Impulsive Presentation
No brakes!



Combined Presentation
Inattentive
Hyperactive
Impulsive

Another way to look at it . . .



**Inattentive
Daydreamer**



Classic Hyperactivity
'Tiggers Like to Bounce...
Bouncin' is What Tiggers Do Best!'



With Anxiety
Piglet is a great friend,
but sure scares easily...



Over Focused
'Don't bother me
while I am gardening'



With Depression
'Thanks for noticing me'



Tasmanian Devil!
'I am angry and
it's
not my fault'



ADHD as an Iceberg

Dr. Russell Barkley



Visible Traits

Hyperactivity

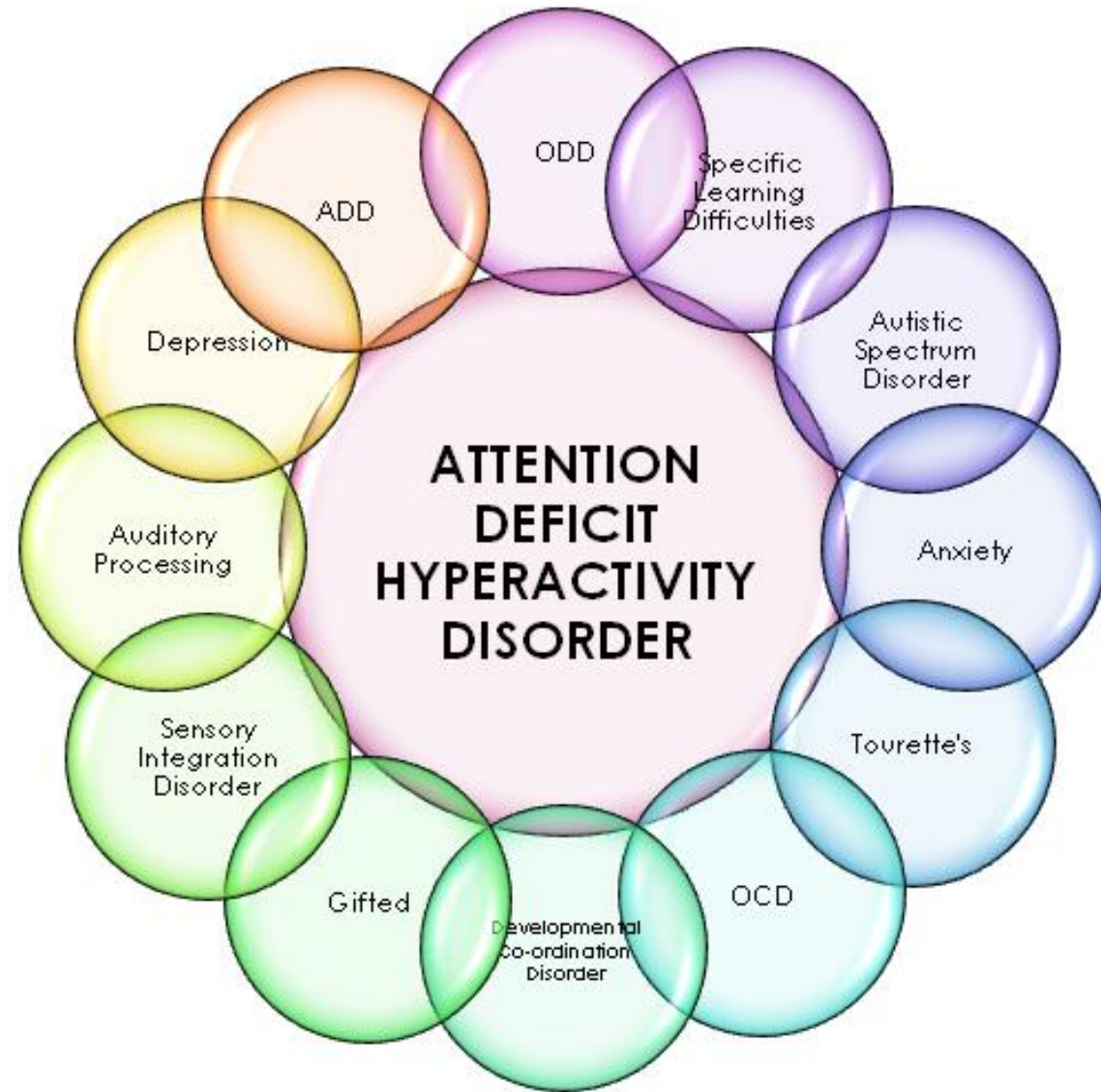
Impulsivity

Inattention

Under the Surface

- Impaired Executive Function
 - Co-existing Conditions
 - Family dynamics

Co-existing Conditions



RSD Rejection Sensitive Dysphoria



Rejection Sensitive Dysphoria

Rejection Sensitive Dysphoria (RSD) is not a medical diagnosis but a way of describing a type of emotional dysregulation.*

*From ClevelandClinic.org

An intense emotional sensitivity to (perceived) criticism or rejection

Often experienced by those with ADHD, Autism, Social Anxiety, or Trauma

Rejection triggers huge feelings of depression, rage, anger, or severe anxiety

Often seeing neutral or vague reactions as rejection or as silent criticism

Experiencing severe anxiety, avoidance, or big emotions before an anticipated rejection

Often people-pleasers to avoid being criticized

Difficulty starting tasks, projects, or goals when there's a chance of failure

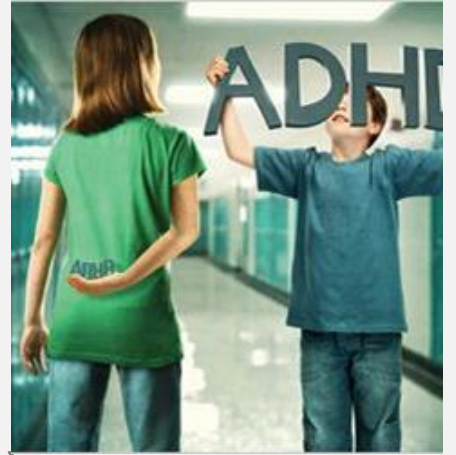
Inability to regulate emotional responses to feelings of failure and rejection

Fear of rejection negatively affects your life and relationships

SelfLoveRainbow

An ADHD Girl & Boy

- Inconsistent achievement
- Anxiety / depression
- Perfectionist behaviour
- Sleep issues / fatigue
- Outbursts of verbal aggression
- Body-focused repetitive behaviours (BFRBs)
- Over sensitivity to rejection /perceived rejection
- Increased peer rejection
- Social / emotional immaturity
- Low self esteem / sense of shame or inadequacy
- Hormones increase symptoms from puberty



With boys, similar traits can be found but often, more external, more oppositional, more hyperactivity, more 'conduct' problems – general sweeping statement.



Breakout Rooms

what are you doing to support them
currently??





What can we do?

- # Strategies for parents /carers
- Be sensitive to their difficulties
 - Actively 'coach' them how to plan/prepare
 - Give one instruction at a time
 - Allow processing time
 - Notice when they do something well
 - Reward good behaviour instantly
 - Notice the positives!



The Positives of ADHD!



Strengths and talents of people with ADHD

Awesome Qualities of ADHD

Intelligent *Fun* Out-of-the-Box Thinker *Creative*
Lives in the Moment Willing to Take Risks
Innovative Resilient *Highly Sensitive* Hyper-Focused
Sees Details Others Miss *Talkative* *Imaginative*
PROBLEM SOLVER **Multi-Tasker** Brain Surfs
Inspiring SINGLE-MINDED PURSUIT OF GOAL
Never Bored Never Boring *Charming* **Humorous**
Adventurous **TENACIOUS** **Productive** Unique
High Energy *Musically Intuitive*
Curious Resourceful
Good Negotiator
Different

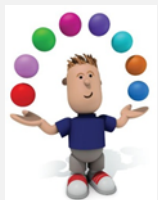
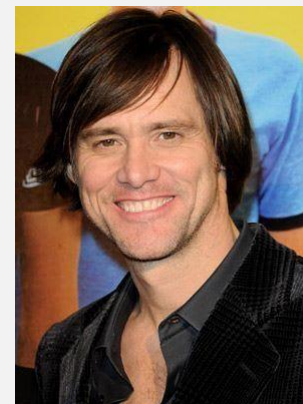
Celebrate your Awesomeness!

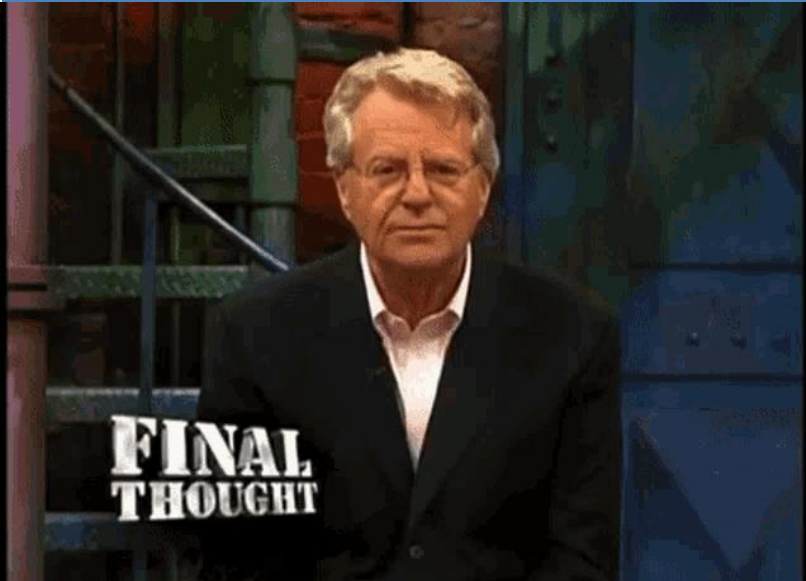
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Many Successful and Influential People have ADHD...



Do you recognise any of these talented people?





Some personal thoughts



Based on my experience and also coaching and teaching

- Ebbs and flows
- Adapts and changes as we get older
- Very much affected by surroundings
- You can't fight it off
- Learn to play to your strengths
- You can concentrate....ish
- The RSD is SO real!
- Don't expect us to fit into 'your' way

And Finally . . .



Thank You

Any Questions?

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