

Solutions is a parent newsletter published by ESS during the school year. Each issue highlights an important topic related to children's mental health and provides practical applications for parents in the home environment.

## Understanding ADHD

Based on their observations of classroom behavior, teachers are often the first to suggest to parents that their child may have ADHD, or Attention Deficit/Hyperactivity Disorder. The thought of a disorder that might interfere with a child's education and well-being, and possibly require medication and behavioral therapy, can be upsetting to any parent. But ESS staff can help parents determine whether a child does indeed have ADHD, and can help them get the treatment that can significantly decrease the long-term effects of this common behavioral disorder.

Children with ADHD can have symptoms in the following three areas: Inattention, Hyperactivity, and Impulsivity. A child with Inattention problems might frequently wander off task, be disorganized and messy, be prone to losing things, be distractible and forgetful, have trouble following instructions, and make careless mistakes. A child with Hyperactivity seems to be in constant motion, including in situations where stillness is appropriate (e.g. in class or a religious service), and might excessively fidget, tap, or talk. Children with Impulsivity problems often take action without thinking first, and may have difficulty waiting for rewards or expected outcomes. Impulsive children are often described as "having no filter", saying inappropriate things or frequently interrupting or intruding upon others.

Researchers do not know for sure what causes ADHD, although as with many disorders, there is likely a combination of genetic and other factors. The CDC estimates that approximately 11% of school-age children have ADHD. The disorder is more common in boys, but since girls more often show Inattention symptoms rather than Hyperactivity/Impulsivity symptoms, they are less likely to be diagnosed.

Although ADHD can have serious effects on academic performance, social relationships and self-esteem, there are numerous effective treatments that can help children reduce symptoms and succeed in school and life. Parents can consult with their child's pediatrician and consider additional consultations with a pediatric neurologist or psychiatrist to determine whether medication is necessary. But, there are also many behavioral interventions used by mental health professionals to help children develop organizational skills,

to focus more effectively (e.g. mindfulness techniques), to increase social skills, and to build confidence and self-esteem.

ESS staff are well equipped to assist parents in getting help for ADHD. They can locate professionals in the community to diagnose and prescribe medication, and can discuss with parents the pros and cons of medicating their child. They can teach ESS students a variety of self-management techniques, and work with teachers to support these students in the classroom. And, they can help parents discover better ways to manage their children's behavior at home.

Parents can help children with ADHD in numerous ways:

- Create and post a daily schedule and keep the same routine every day. Note changes on the schedule as far in advance as possible.
- Help your child organize everyday items (e.g., clothes, school supplies, sports equipment), so that everything has a place; model the habit of returning everything to its place.
- Help your child use planners or calendars to track school assignments.
- Being clear and consistent about rules.
- Recognize your child when rules are followed and desirable behaviors are demonstrated. Children with ADHD often receive and expect criticism.
- Take a break – talk with other parents – forgive your own mistakes. Children with ADHD can be very challenging to deal with!

### WEBSITES:

[www.nimh.nih.gov](http://www.nimh.nih.gov)  
[www.infoaboutkids.org](http://www.infoaboutkids.org)

**PARENTS MATTER: Please be an active participant on the in-school support team: you know your child best!**

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