

## **PARENT STRESS MANAGEMENT TRAINING FOR ADHD**

- Greet parents and ask them to pick up their name tag on their way in.

### **WELCOME**

### **INTRODUCTION OF GROUP LEADER**

- Yashica
- INTRODUCTION OF ASSISTANT
- Sasha

### **GENERAL**

- Name tags
- Parking
- Toilets
- Phones
- Start times
- We will be starting each session at 6:30pm sharp. Each session will take approximately two hours, and will include a tea/coffee break.
- Audio-taping group sessions
- Because this is a research project, from time to time, I will be asking for your consent to tape record group sessions.
- This will simply allow me to check that I have covered all of the information I intended to cover for the group. The tapes will be kept for the length of the study, and once they have been checked, will be wiped. I will let you know ahead of time when this is going to happen.
- Questionnaires.
- Thank those parents who have completed and returned their questionnaires.

- For those parents who have not yet returned theirs, stress the importance of getting these back before next week.
- Any questions?

## **PART ONE: ORIENTATION TO THE PROGRAMME**

Tonight:

- Quick overview of the Parent Stress Management Programme
- Aims and expectations for the programme
- How the weekly group sessions are going to be run
- Spending a little bit of time together working out some group rules for the sessions
- Start talking about stress

## **OVERVIEW**

One thing which many parents have told us, and which I know from my own research into ADHD, and from the work of others in this area, is that parents of children with ADHD are really stressed in their roles as parents. I also know that this stress can have a negative effect on your relationships with your children and partners, and the way that you parent. As you know, I will be implementing a nine-week programme which aims to teach parents to manage their stress more effectively (**distribute Handout 1.1**). Some of you will already be doing some of the things that have been included in the programme, so I will ask you to bear with me on the things that you already know, and perhaps even share your knowledge and experiences with the group. The programme will hopefully provide you with a chance to re-master some old skills, while you build up some new skills for dealing with stress.

The programme aims to:

- Teach parents to recognise and be prepared to deal with the stress involved in parenting a child with ADHD
- To provide parents with information about ADHD (e.g. what causes ADHD, and what treatments are available)
- The programme also aims to teach problem-solving skills for dealing with common problems faced by parents of children with ADHD
- We will be looking at how the way we think and feel about situations can influence the way we respond to stress
- We will also be looking at some self-care skills which parents can use to reduce stress (e.g. improved time management, relaxation training)
- And looking at the most effective ways to communicate to your child and other family members, deal with health professionals, teachers, and advocate on behalf of your child
- Finally, we will be briefly reviewing some basic principles of behaviour management for use with children with ADHD

It is perhaps important to note that the programme does not aim to change your child's behaviour, but rather aims to help you better deal with the stresses of parenting a child with ADHD. The aim is not to completely eliminate your stress but to help you to cope more effectively with stress. The skills learned in the programme will hopefully be useful when dealing with your child with ADHD, but can also be used in all walks of life. It is hoped that by improving the way that you deal with stress, this will have a positive effect

on your general well being, the ways that you parent, and ultimately, your child's behaviour.

One of the first questions parents often ask me is do I have children and do I really know what its like for them. Yes I do but she does not have ADHD. However, I have had a fair bit of experience working with children, especially those with ADHD. I don't think this will interfere with the running of the group, because my job is to raise ideas and guide parents in finding the best solutions to their stress.

- Questions?

## **SESSION STRUCTURE**

- **REVIEW:** From next week, each session will begin with a review of the material covered during the last session. We will also use this time to answer any questions you might have about the material covered and to check how everyone got on with their homework assignments.
- **HOMEWORK:** Homework will generally involve applying and practising those skills learnt in session, and a little bit of preparation for the following week. I encourage you to try out those skills learned each week, and it will be important for everyone to practise these skills in order for them to be effective. I am also eager to know what you found helpful, what was difficult/easy to do, or what other resources/information you may have found over the week which may be of interest/beneficial to the group. This sort of information will be useful in making improvements to the programme in the future.
- **CURRENT SESSION TOPIC:** After the review, I will be introducing the topic for the day's session. This will usually involve a half hour presentation, before we break into smaller groups for discussion and to practise those skills taught. This

will be followed by a group discussion, a review of the material covered, and then exercises will be set for homework. There will also be time for questions at the end.

- **QUESTIONS:** Although I have had a fair bit of experience in this area, I don't pretend to know everything, so from time to time, I may get you to leave questions with me until the next session. What I will do is go away and search for the best answers, which I will then be able share with the group the following week.
- **HANDOUTS:** I will be covering a lot of information in session, so I will be providing handouts each night which provide more information about the things covered and the homework exercises. This will let you have a permanent record of the skills taught, and which may also be used as a reference in the future.
- **TEA/COFFEE BREAK:** We will also be taking time during each session for a quick tea/coffee break, so that you can get to know one another, and ask any questions you might have (when would parents like this to be?).
- Questions?

## **GROUP RULES**

The success of the group is really going to depend on everyone getting involved. In order for the groups to run smoothly and for everyone to get the most out of them, we will need to set up some group rules for the weekly sessions.

- (1) Everyone will be encouraged to take part in group discussions and everyone should get a chance to talk if they want. I want parents to feel safe and comfortable expressing their difficulties, asking questions, and so on. There are no stupid questions here, and no question is too small. If you really don't feel

comfortable asking questions in front of the group, or feel that your questions are too personal to share with the group, we can leave some time at the end of each session for you to write these down, or you can come and have a chat to me, or you are free to call me during the day.

- (2) What gets talked about in the group stays in the group. This doesn't mean that you can't discuss the things you have learnt during the programme at home, or with other people. What it does mean is that we always show respect for those individuals who have shared their experiences with us.
- (3) We need to try to talk about both the positive and the negative. This is not to say that you shouldn't feel free to talk about the difficulties you are having with your child. It's just that we need to strike a balance between the positive and the negative in order to find constructive solutions to our problems.
- (4) If I think that something you have raised in a group session might be better discussed personally rather than in the group, I will let you know.

## **PART TWO: STRESS**

### **OVERVIEW**

In the time remaining, we are going to begin talking about stress:

- What is it?
- How do we recognise when we are under stress?
- What sort of effects does stress have on our parenting practices? And on other aspects of our lives?
- Where stress comes from?
- We will also begin thinking about how we can better deal with stress.

## **WHAT IS STRESS?**

Stress is a word that we commonly use to describe the variety of often unpleasant emotions that we feel when we feel we are under pressure. This pressure can come from a variety of sources, including:

- The work place (e.g. when your workload becomes too high for you to possibly cope)
- Home (e.g. financial difficulties, child behaviour)
- We may even exert pressure on ourselves (e.g. in trying to be a perfect parent).

As you can see, stress can arise both out of different events/situations (e.g. the workplace) while it can also arise from our feelings about different events/situation (e.g. trying to always be the best). So it's not always just the situation that causes us to feel stressed. If this were the case, we would expect everyone to respond to the same stressful situation in exactly the same way, all of the time. We have probably all had times where we have reacted to exactly the same situation in completely different ways. Our reaction will depend on what's happening around us, but will also usually depend on how we are feeling at the time. The way that we think about a particular situation will also influence how we react to it.

It is also important to remember that in small doses stress can be good for us – for instance, consider an athlete going into a major competition – the stress that they feel before an event can help to energise and motivate their performance. Without it we can often lack the energy and enthusiasm we need to get things done. However, when our stress becomes excessive, or when it is prolonged, stress can be damaging, both to us and others.

**EXERCISE: Ask parents to tell us/describe what stress means to them. "What do they mean when they say they are stressed" Their definitions can include:**

- Feelings (eg feeling on edge)
- Thoughts (eg I can't cope)
- Behaviours (eg talking faster)
- Events (eg Parent Teacher Interviews)
- Physical Responses (eg muscle tension, shakiness)
- Generate a list of definitions on the board. Highlight which of their responses are *thoughts, feelings, behaviours* and *physical responses* to stress
- CONCLUSIONS
- There are an infinite number of ways that we can respond to stress - these can include physical responses/reactions, thoughts, feelings and behaviours.
- We all respond to stress in different ways.
- We all face difficult and challenging situations in life, yet we do not all respond to these situations in the same way. *It is important to recognise that it is not just the situation which causes us to feel stressed.* The way we think about (or interpret) a situation will also contribute to our stress (eg our students learning to carry out interviews. Same situation for all students - however some students will find it exciting and view it as a chance to learn new skills. Others will view it negatively, and see it as an opportunity to embarrass themselves in front of others).
- It is important to recognise these early warning signs that we are becoming stressed, so that we can deal with these in a productive/constructive way. This sounds easy, but sometimes we don't notice that we are becoming stressed until it



has become really bad, and it is too late to do anything about it. By learning to recognise early indicators of stress, we can try to do something about it before it gets beyond our control. This is important because most of us are able to solve problems more effectively when we are calm.

- We also know that stress can affect the way we parent, and our ability to deal with problem situations with our children (especially when we become so stressed that we deal with problem situations in unproductive ways that make stressful situations worse).
- **EXERCISE:** Ask parents to begin thinking about the effect their stress has on others (and how sometimes when we are under stress, the way we deal with/approach problem situations can actually make them worse). Emphasise the need to identify our stress early, so that we may direct efforts at minimising it so that it does not result in even more stress.

## **SOURCES OF STRESS**

Begin thinking about where our stress comes from

**EXERCISE:** In groups of 3 or 4, ask parents to think of situations where they have felt stressed over the last week or so. These do not have to be limited to the stress involved in parenting a child with ADHD, and should include stress arising from work, home, their child's school, relationships, outside interests, etc. After 10 minutes, generate a list on the board.

## **CONCLUSIONS**

- There are a wide range and variety of situations that people find stressful

- Some stressful situations may arise from factors within ourselves (e.g. a lack of self-confidence going into a job interview)
- Others may stem from outside (or external) factors (e.g. high work loads, financial difficulties).
- Some situations may be able to be dealt with, while others will not.
- Some of those situations that are stressful to some parents, will not be stressful for others.
- Everyone's reactions to stress are different. We each define what will be viewed as stressful. What is stressful and threatening to me, may not necessarily be stressful for you.

### **HOMEWORK (distribute homework sheet)**

Some of you will have found this task quite easy, while others will not have had so much practice at recognising when you are becoming stressed. For homework this week, we will be asking you to think of three times when you were stressed (you can record more if you want) in the upcoming week. This will not be shared with the group, but will be for your own information. Briefly note down what happened (ie what was going on at the time), how stressed you felt, how bad you felt, what you thought (try to remember what was going through your head at the time), if you behaved differently, and what physical signs you noticed that let you know you were becoming stressed. This will help you to recognise when you are becoming stressed, before your stress gets beyond your control. In later sessions, we will be discussing things you can do to minimise your stress at these times, so that you can prevent your stress from getting beyond your control.

## **MANAGING STRESS**

We will be learning a number of skills over the next few weeks that, with a little practice, will hopefully help you to reduce your stress. To begin with it will be important that we continue to think about what stress is, where it comes from, and how to recognise the early warning signs that we are becoming stressed so that we can intervene and prevent our stress from getting beyond our control.

### **Questions?**

- Give parents the chance to write down any questions or suggestions they may have.

## **NEXT WEEK: EDUCATION**

- We will be providing parents with information about ADHD.
- Parents should feel free to write down any things they would like to see discussed during this next session, or can feel free to give me a call during the week.
- Bring homework with them (I need to know if parents were able to do it, because this may impact on how much they were able to learn). I am not going to give you a hard time if you have not completed your homework, I just would like to know for my records whether you attempted these tasks.
- Parent Questionnaires that have not yet been returned.



## **PARENTING STRESS MANAGEMENT FOR ADHD PROGRAMME**

<b>SESSION</b>	<b>DATE</b>	<b>TOPIC</b>
One	17 January	Stress
Two	24 January	Education
Three	31 January	Resources
Four	7 February	Problem Solving Skills
Five	15 February	Cognitive Restructuring
Six	21 February	Communication Skills
Seven	28 February	Self Care skills
Eight	7 March	Behaviour Management
Nine	14 March	Wrap-up session

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## SESSION ONE: HOMEWORK ASSIGNMENT

### RECOGNISING STRESS

Over the next week, try to think of at least three situations where you have felt stressed, and complete the following for each:

1. Give a brief description of the stressful situation. What happened?

2. How stressed did you feel?

1	2	3	4	5	6	7	8	9	10
no									extremely
stress									stressed

3. What were you thinking at the time?

4. What did you do? How did you behave?

5. What physical changes or reactions did you notice?

6. How did this affect those people around you?

## **Session One: Orientation/Stress Cheat Sheet**

### **WELCOME**

### **INTRODUCTION**

- Yashica
- Sashika

### **GENERAL**

- Name tags
- Parking
- Toilets
- Phones
- Start times
- Audio-taping of Sessions
- Questionnaires
- Questions?

### **PART ONE: ORIENTATION TO THE PROGRAMME**

- Overview of Parent Stress Management Programme
- Aims and expectations of Parent Stress Management Programme
- Running of weekly group sessions
- Group Rules
- Stress
- OVERVIEW
- Parents of children with ADHD are highly stressed

- Nine week programme to teach parents to manage their stress more effectively  
(handout 1.1)
- Programme aims to
- Teach parents about Stress
- Provide parents with information about ADHD
- Explore resources available to parents of children with ADHD
- Teach parents problem solving skills
- Explore how situations can influence responses to stress
- Teach self care skills
- Teach effective communication skills
- Review basic principles of behaviour management
- Programme does not aim to change your child's behaviour, or to completely eliminate your stress.
- I have a child but she does not have ADHD, but I have experience.

Questions?

## SESSION STRUCTURE

- Review of material covered in previous session and questions.
- Review of homework from previous session.
- Current topic: half hour presentation, group work, group discussion, homework and questions.
- Questions: you may need to leave questions with me so I can search for the best answer.
- Handouts: a permanent record of skills taught and a future reference



- Tea/Coffee break each week, When would you like this to be?

## GROUP RULES

- For groups to run smoothly and for everyone to get the most out of the session we need group rules
- Everyone is encouraged to take part in group discussions. What to do with questions too personal for group.
- What gets talked about in the group stays with the group.
- The positive and negative aspects of parenting a child with ADHD.
- If you raise something too personal, I will let you know.

## PART TWO: STRESS

### OVERVIEW

- Stress: What it is
- Recognising Stress
- Effects on parenting practices and other aspects
- Sources
- Better ways of dealing with stress

### WHAT IS STRESS

- Stress: variety of unpleasant emotions we feel when under pressure. Stress can come from a variety of sources.
- It's not just the situation which causes us to feel stressed. Our reactions depend on what's happening around us.

- Small amounts of stress can be good but excessive or prolonged stress is damaging.

EXERCISE: Ask parents to tell us/describe stress. Generate list of definitions on board, emphasising thoughts, feelings, behaviours and physical responses to stress.

## CONCLUSIONS

- An infinite number ways to respond to stress.
- We all respond to stress in different ways.
- We all face stress, yet we all do not respond to stressful situations in the same way. It is not just the situation that causes us to feel stressed.
- It is important to recognise the early warning signs of stress, so we can deal with stress in a productive/constructive way.
- Stress can also affect the way we parent and our ability to deal with problem situations.

## SOURCES OF STRESS

- EXERCISE: In groups, think of situations over the last week in which you have felt stressed. 10 minutes later, list situations on board.

## CONCLUSIONS

- Wide variety of situations people find stressful
- Stress from internal factors
- Stress from external factors

- Some situations will be dealt with
- Stress for one person is not stress for another
- People's reactions to stress will be different

#### HOMEWORK (handout Homework Sheet)

- Record three times when you feel stressed in order to practice recognising stress

#### MANAGING STRESS

- You will be learning how to manage stress over the next eight weeks. Need to continue to think about stress.

Questions?

#### NEXT WEEK: EDUCATION

- Provide parents with information about ADHD.
- Things parents would like to discuss next week.

#### QUESTIONNAIRES

## SESSION 2: EDUCATION

- Name Tags
- REVIEW: STRESS
- Last time we began to talk about stress
- What stress is
- How we recognise when we under stress
- We began thinking about how our stress can affect the way we parent, our relationships with others
- And we also began to think about which situations/events are a source of stress to us
- Important points to remember:
- Stress is the word we use for a variety of often unpleasant feelings that we feel when we are under pressure
- This pressure can arise from external sources/events (e.g. the workplace, home), but can also arise from our thoughts and feelings about events/situations (e.g. always trying to be a perfect parent)
- Each of us respond to stress differently
- Our responses/reactions may include thoughts (e.g. “I can't cope”, “oh no, not this again), feelings (e.g. feeling overwhelmed, irritable), behaviours (e.g. “snapping” at others, eating more/less), and/or physical responses (e.g. muscle tension, headaches, teeth grinding)
- The way that we react when we are under stress, can sometimes lead to more stress
- By becoming more aware of those situations that cause us to feel stressed, and by learning to recognise the early warning signs that we are becoming stressed, we can begin to intervene before our stress gets beyond our control.
- Questions?
- HOME PRACTICE

- Last time, we asked parents to record three situations where they felt stressed, and for each situation note down what happened, how stressed you felt, what you were thinking at the time, what you did, what physical changes/reactions you noticed, and also how your stress affected those around you.
- Did everyone get a chance to try this? (Note down those parents who have not tried task)
- Any difficulties with this?
- Would anyone like to share with the group what they found doing this exercise? Again, this exercise was set to help you think more about those situations that cause you to feel stressed, and to help you learn to recognise the early warning signs that you are becoming stressed. This skill will help us to be prepared for these situations, while also giving us an early indicator that it is time to begin dealing with our stress - before it gets beyond our control.
- Questions?

## **TODAY'S TOPIC: EDUCATION**

### ***AIMS:***

- Although some parents will be well informed about ADHD, we know that this is not true for all parents. By providing information about ADHD we aim to
- Answer any questions you may have about ADHD
- Correct any misconceptions about ADHD. ADHD is a very controversial topic at the moment, there are a lot of different opinions out there (e.g. about what causes ADHD), and also a lot of misinformation/ misconceptions about the disorder. We aim to provide you with the most up to date information we have about ADHD, and also want to guide you in finding out where you can look for more information yourselves.
- Guide parents in having realistic expectations for their child with ADHD. e.g. because these kids can behave well in some situations, but not in others, it is sometimes easy to think that all of their problem behaviour is purposeful. This can lead parents to feel frustrated and angry. By better understanding why these

kids behave the way they do, we can change the way that we look at problem behaviours, which will lead to less stress.

- Empower parents in talking about their child's difficulties and communicating their child's needs to others (e.g. family members, teachers, schools, other parents). Parents also often say that a frequent source of stress for them is that other people assume that their child's behaviour is caused by bad parenting. We know that this is not true. By better understanding ADHD, we want parents to feel more confident in challenging these kinds of assumptions, which will again, help them to avoid a lot of unnecessary stress.
- Each of you will know different things, and know different amounts about ADHD. We will ask you to bear with us on the things that you may already know, and perhaps use this as an opportunity to share your knowledge with the group.
- We want parents to remember that no question is too small, and that there are no stupid questions here (chances are if you are unsure of something, there will be somebody else in the group who is too).
- As we said last week, we will do our best to answer any questions you might have in session. If we are not sure, we may ask you to leave your questions with us until next time, so we can go away and search the best answers. If we don't have time to cover your questions in session, or if you or other family members, teachers, etc come up with any questions during the week, feel free to write these down, or give us a call during the week, so that we can answer them next time.

**NOTE:** *Write down any questions that have come up in session, so these may be covered in other group sessions, so that each group is receiving the same information.*

## **OVERVIEW:**

Tonight we are going to be reviewing some key points about ADHD, including

- How long ADHD has been around
- What ADHD is
- Some of the terms we use when talking about ADHD
- Other difficulties that children with ADHD may experience
- What happens to ADHD children when they grow up
- We will also be discussing what we know about the causes of ADHD
- Treatments for ADHD (including medication)
- We will also be providing some time for parents to ask us any questions you may have about ADHD that we have not already covered.
- Finally, we will also provide you with the names of some books that we have found helpful in learning about ADHD, and talk a little about where you can find out more information about ADHD yourselves.

**NOTE:** We will be presenting a lot of information in this session. Parents shouldn't worry if they are having trouble taking everything in, because we will be providing a handout at the end of the session that will summarise everything we have covered in session, and provide some additional information. This session will probably involve quite a bit of talking on our behalf (*remind parents that the rest of the sessions will be more practical in terms of parents getting involved and trying out new skills*).

## **HOW LONG HAS ADHD BEEN AROUND?**

- ADHD is not a new disorder (the first record of a diagnosis of ADHD in the medical literature was in 1902 - This case was not called ADHD, but symptoms consistent with ADHD were described).
- However, today more children than ever are being diagnosed as having ADHD.
- Two common asked questions are:
- Why is this?
- Has it just become an excuse for children's behaviour?
- ADHD may be more commonly diagnosed today for several reasons:

- We now know more about ADHD, and are able to better recognise it
- The diagnostic criteria have changed over the years
- We are perhaps not dealing with ADHD as well as we have done in the past (e.g. classroom sizes are bigger, less support from extended families)
- Our expectations of children may have changed over time (e.g. in the past, it may have been more acceptable for active children who did not show an interest school to leave at an early age to work in outdoor occupations, whereas nowadays, these children may be confined to classrooms for longer periods).

### ***WHAT IS ADHD?***

- The term ADHD describes a pattern of developmentally inappropriate behaviours, which is characterised by difficulties with inattention, hyperactivity and impulsivity.

#### **(1) INATTENTION**

- Children with ADHD often have difficulty focusing, or keeping their attention on a task or activity without being distracted.
- As a result, these children often have difficulty following directions, doing as they are told, and finishing tasks like household chores or home practice.
- However, parents of children with ADHD often tell us that their children can focus on activities like video games, or cartoons for long periods, without distraction.
- It seems that these children have difficulty concentrating when the task is imposed on them by someone else (e.g. if a parent asks a child to do his home practice), but they are able to concentrate for longer periods if they choose a task themselves.
- These children may also have difficulty motivating themselves on tasks they find uninteresting.



## **(2) HYPERACTIVITY**

- Children with ADHD may fidget constantly, get up from their seats, run and climb about in situations where it is inappropriate, have difficulty playing quietly, and talk excessively
- Not all children with ADHD are hyperactive.
- Not all children with ADHD who are hyperactive are hyperactive in all situations.
- Children with ADHD are most likely to be hyperactive in more confining situations that demand the child's concentration.
- Hyperactivity may vary according to the child's age and developmental level.

## **(3) IMPULSIVITY**

- Children with ADHD may also behave impulsively (e.g. they may blurt out answers before they have had a chance to listen to the question properly, they may have difficulty waiting their turn, and they may often interrupt or intrude on others)
- These children often act without first thinking of the possible consequences of their actions.
- So, even when they know the rules, they may still have difficulty following them.
- Because they don't always think first, children with ADHD may also take greater physical risks than others (e.g. running onto the road without looking), which may explain why these kids tend to suffer more medical injuries than other children.

- Inattention, hyperactivity and impulsiveness are common traits amongst some children, however, what makes children with ADHD different, is that they display more of these behaviours, more often, than other kids their own age do.
- Children with ADHD may display these behaviours to different degrees depending on where they are (e.g. children with ADHD may be more inattentive at school, where there are more demands made for their attention). They may also display fewer behaviour problems in novel situations/unfamiliar environments, or where they are receiving one-on-one attention. Children with ADHD may also pay more attention to colourful/highly stimulating materials.
- Under the current diagnostic criteria (DSM-IV), children do not need to be inattentive, overactive, *and* impulsive to receive a diagnosis of ADHD. There are three kinds (or subtypes) of ADHD
- Inattentive - children who mainly have difficulty with attention
- Hyperactive/Impulsive - children who mainly have difficulty with hyperactivity/impulsivity
- Combined - children who have difficulty with both inattention and hyperactivity/impulsivity. Most children with ADHD fall into this category.
- The term most currently used in New Zealand to describe children with these problems is Attention Deficit Hyperactivity Disorder (ADHD). This term includes **both Attention Deficit Disorder with (ADD-H) and with out (ADD) hyperactivity.**

## OTHER DIFFICULTIES

- In addition to having problems with attention, hyperactivity and impulsiveness, children with ADHD often have what we call associated difficulties. It is

important to note that these are not symptoms of ADHD, but commonly occur along with the core symptoms. Not all children with ADHD will have all of these difficulties, and they may vary according to the child's age and developmental level.

#### (1) LEARNING DIFFICULTIES

- Children with ADHD are more likely than other children to suffer from specific learning disabilities, due to difficulties in their attention/ concentration, perception (e.g. comprehension), and short term memory. *(But not all children with ADHD have learning difficulties, and having a learning difficulty is not the same as having ADHD).*
- They may also have difficulty making sense of and remembering information (especially verbal information). This is not to say that they have any difficulty hearing the information. In fact, children with ADHD can often repeat back information, without necessarily “registering” what has been said, or what they have been asked to do.
- Difficulty where multiple instructions are issued at one time (as is often the case in the classroom). These children may have difficulty starting and completing work assigned to them as a result, and are often reprimanded for being lazy, irresponsible, and defiant.
- For some of these children, it may become easier to try not to do the work, than face the frustration of doing it poorly.
- It is not uncommon for some of these children to misbehave in order to hide their difficulties.

## (2) AGGRESSIVE BEHAVIOUR

- Some children with ADHD are described as angry, stubborn, hostile and oppositional, especially in response to the command of others.
- These children are often easily frustrated, prone to temper tantrums, and tend to strike out at others in response to minor provocation.

## (3) SOCIAL DIFFICULTIES

- Children with ADHD may also have difficulty getting along with other children their own age. They may refuse to interact with other kids, be bullied (or alternatively bully others), and may be easily influenced by their peers.
- Their impulsive behaviours may lead to socially unacceptable behaviours (e.g. aggression), which may also result in social isolation and/or rejection by their peers.
- Children with ADHD generally behave better in one-on-one situations, and are often more comfortable socialising with younger playmates, perhaps because they are often more forgiving/tolerant of social misbehaviour.

## (4) LOW SELF ESTEEM

- Because they are often constantly reprimanded and criticised for their behaviour, children with ADHD may suffer from low self esteem and a sense of low self worth

- These children frequently seek reassurance, and may behave poorly (e.g. acting as class clown, putting themselves or others down) in order to seek the attention of their peers and gain approval.
- Their continuing frustration may cause them to be aggressive, or alternatively, they may become withdrawn, depressed, or develop various body complaints (e.g. headaches, stomachaches, and more generalised aches and pains).
- Some of these children may attempt to avoid school activities out of fear of failing and/or appearing dumb in front of others.

#### (5) POOR MOTOR CO-ORDINATION

- Children with ADHD also commonly experience difficulty with gross motor coordination. They may appear clumsy or poorly coordinated (e.g. they may have difficulty in ball sports - which may compound their difficulties forming and maintaining relationships with others, especially for boys, who may be excluded from, or held in poor regard when participating in sporting activities).
- Children with ADHD may also have difficulty with fine motor skills (e.g. handwriting skills, tying up shoelaces, doing up buttons).
- In some cases they may have more severe difficulties with gross motor coordination (e.g. these children may appear awkward or ungainly when walking, have problems hopping, skipping, jumping running, riding bike, or skateboarding).

## (6) OTHER DISORDERS

- Oppositional Defiant Disorder (up to 40% for children, up to 65% for adolescents).  
This is when a child displays a persistent “pattern of uncooperative, defiant, and hostile behaviour toward authority figures that does not involve major antisocial violations, is not accounted for by the child’s developmental stage, and results in significant functional impairment” (Vitiello & Jensen, 1995, p. 2317).
- Conduct Disorder (up to 45% for children, up to 50% for adolescents)
- This disorder is characterized by behaviour that is repetitive, aggressive and violates the rights of others and and/or violates social norms or rules.
- Higher prevalence of mood disorders, anxiety disorders, learning Disorders, communication disorders, and Tourette’s disorder.

## WHAT HAPPENS TO CHILDREN WITH ADHD WHEN THEY GROW UP?

- We used to think that children “outgrew” ADHD, and that their symptoms would generally disappear over time. What we now know is that symptoms of ADHD don’t usually disappear completely, but that they tend to change as the children get older.
- As children with ADHD get older, some of their symptoms may become less obvious.
- By late childhood/early adolescence, excessive running, climbing, and difficulties remaining seated are less common. Some adolescents with ADHD may still be a bit fidgety, and feel jittery or restless a lot of the time.
- Although inattentiveness and impulsiveness tends to improve as these kids get older, many children with ADHD will still have more attention problems and more difficulty controlling their behaviours compared to other teens.
- Some children with ADHD may continue to have trouble keeping up at school, and may be thought of as having a negative or rebellious attitude toward school by

their teachers and peers. These children may also come into conflict with authority figures more often.

- In the majority of cases, symptoms of ADHD will improve during late adolescence and adulthood, although a small number will continue to have symptoms into mid-adulthood.
- Children with ADHD are also at greater risk for alcohol abuse, depression and criminal behaviour if left untreated. So far we haven't been able to tell which children with ADHD will do well as adults. It is also important to remember that each child is different. What we do know is that by treating these children early, kids with ADHD can grow up to be successful, responsible, and happy adults.

## **WHAT CAUSES ADHD?**

- Although research into the causes of ADHD is being carried out in many parts of the world, no single cause has been identified as causing the disorder. However, there is a general consensus that ADHD is likely to be caused by a combination of different factors.
- We are going to discuss a number of these factors tonight. It is important to keep in mind, that to date, we still don't know exactly what causes ADHD. The factors we are going to discuss are things which people researching in this area think *may* contribute to ADHD.
- Numerous factors have been implicated in ADHD, however, no one factor has been able to fully explain what causes the disorder.
- Although we do not yet know what causes ADHD, we do know what does not cause this disorder.

## **WHAT DOESN'T CAUSE ADHD**

### **(1) DIET/ALLERGIES**

- There are some people who believe that ADHD may be caused by sugar and food additives (such as preservatives and food colourants) and/or allergies. However, there is very little research to support this idea.
- If diet were involved, we would expect children with ADHD to behave like normal children if we remove sugar and food additives from their diets. This is not the case.
- Likewise, if we were to give sugar and food additives to children without ADHD, we would expect at least some of them to develop ADHD. We know this is also not the case.

That is not to say that these types of foods/allergies won't aggravate ADHD-type behaviours. It simply means that they do not cause them. (e.g. faulty carburetor analogy: if you put the wrong kind of gasoline in a car with a faulty carburetor, the car will run even more poorly. That is not to say that the underlying problem is the gas, it is the carburetor).

### **(2) POOR PARENTING/FAMILY ENVIRONMENT**

- Poor parenting or a poor family environment does not cause ADHD. Obviously parenting practices and factors within the home environment will impact on a child's behaviour, but this does not mean that they cause the child's behaviour. It is in fact it is just as likely that the child's behaviour has as much influence over the parent's practices and the home environment. It is highly unlikely that any purely social cause, such as "bad parenting" is responsible for ADHD. In fact, we now know that these factors tend to contribute to more to aggressive and defiant behaviours, rather than worsening ADHD-type behaviours. (*In fact if bad parenting is the cause – then we don't make a diagnosis of ADHD*).



## SO WHAT DOES CAUSE ADHD?

- Current thinking has suggested that there is perhaps a biological component to ADHD. That is not to say that the environment is not important, the environment obviously impacts on children's behaviour and vice versa.

## POSSIBLE CAUSES OF ADHD

### (1) HEREDITY

- Recent research in ADHD suggests that there may be a genetic predisposition (vulnerability) to the disorder. This means that if one person in the family has ADHD, there is a higher risk that other members of the family will have it too. Several studies have also suggested that parents of children with ADHD are more likely to have had attention problems, and impulse control problems when they were children. We are not yet sure what exactly is inherited (It is likely that it is the predisposition to developing ADHD that is inherited and not ADHD itself).

### (2) BRAIN INJURY

- It was thought that ADHD may be caused by brain injury. This suggestion has arisen out of studies looking at the similarities between the behaviours of children with ADHD and people who have suffered damage to the front part of the brain. The part of the brain that we think is involved (the orbital-frontal region) we also think is responsible for inhibiting behaviour, sustaining attention, employing self control, and planning for the future. It is thought that damage to this area may occur following:
  - Some kind of trauma (e.g. fall or blow to the head, complications during pregnancy or delivery)
  - Disease/infections (e.g. encephalitis, meningitis)

- Fetal exposure to alcohol and tobacco
- Early exposure to high levels of lead (especially between 12-36 months of age).
- However, only a minority of children with ADHD have suffered a brain injury, which leads us to believe that these factors in isolation do not cause ADHD, and that something else must be disrupting the development of this part of the brain.

### (3) ABNORMAL BRAIN DEVELOPMENT

- Some theorists have suggested that the brain develops more slowly in children with ADHD than in normal children. This could explain why the social behaviour, and motor co-ordination and development of children with ADHD often resembles that of younger non-ADHD children. However, other studies looking at the brains of ADHD children have not found them to be noticeably different in size or slower in development. So, although abnormal brain development may be involved in ADHD, we know that it is not the only cause .

### (4) LESS BRAIN ACTIVITY

- It is currently believed that ADHD may be due to understimulation of the brain areas that allow a child to maintain their attention, delay impulsive responses, control motor activity, follow rules, maintain motivation, and plan behaviour. It is not known why this understimulation occurs. It is thought that it may be associated with a shortage of certain neurotransmitters in the brain. Neurotransmitters are like chemical messengers in the brain, which tell the body what to do, and how to respond. We think that these might be involved in ADHD for several reasons.

- Stimulant drugs that increase these chemicals in the brain are able to temporarily improve the behaviour of children with ADHD.
- If we destroy the pathways that these chemicals travel through in animals such as rats and dogs, we notice that these animals will become quite hyperactive.
- If we use stimulant medications (which increase the amounts of these chemicals in the brain), we can improve the behaviour of these animals.
- Again, these studies can not be considered proof that ADHD is caused by a shortage of these chemicals in the brain, although the research in this area is promising.

Questions?

## **TREATMENTS**

There are no effective long term treatments for ADHD. Current treatment approaches aim to manage symptoms. The most common treatment options for ADHD include

- Stimulant medication
- Behaviour modification/management
- A combination of the two (current research suggests this will achieve the best outcome).

## **STIMULANTS**

- The most widely prescribed medication currently used in the treatment of ADHD is called Methylphenidate (Ritalin).

- It may seem unusual giving stimulants to already active kids, however, Ritalin works by increasing levels of those chemicals in the brain that help a child to maintain attention, delay responses, inhibit behaviour, etc.
- Research on Ritalin has shown that as many as 90% of children being treated with Ritalin will show improvements in their concentration, and a reduction in impulsive and hyperactive behaviours (however, this usually depends on whether the child also has any other psychiatric/developmental difficulties). *Emphasis individual variability.*
- Stimulants appears to work best with Combined Type ADHD (as many as 70-90% will show improvements), and is a little less effective with Inattentive Type ADHD (55-65%). Not much is known about the effectiveness of stimulants with Hyperactive Type ADHD.
- It is important to remember that Ritalin only treats the symptoms of ADHD – it is not a cure. For instance, we know that children being treated with Ritalin may show improvements in their academic performance. Ritalin does not increase the children's academic ability per se, it just makes them more available to learn (e.g. because they are able to spend more time on task, do not get out from their seats as often).
- Likewise, Ritalin does not cause children to behave. It can, however, allow children to attend better to instructions (e.g. to do their home practice), and allow them to better stay on task until the chore is complete. Stop medication, effects will disappear. Children may have developed more skills, doesn't give them skills they don't have, they have to learn them.
- In this respect, Ritalin should not be the sole treatment for ADHD, and is best combined with other treatments such as behaviour modification, academic tutoring (where necessary).

- Ritalin does have some (mainly mild) side effects, including; decreased appetite, insomnia, anxiety, irritability, proneness to crying (however, many of these symptoms have been found in children with ADHD who are not medicated. This has lead some researchers to think that these may be characteristics of ADHD, rather than the medication). These side effects usually occur in the first two weeks of taking the medication, and will generally diminish/disappear with a reduction in dose.
- It is important to remember, however, that these side effects may also differ markedly from child to child.
- Stimulant medication may cause/worsen motor/vocal tics in a small number of cases. These will usually disappear once the medication has been stopped. It is important when considering medication for your child whether there is a personal/family history of tics/tic disorders (e.g. Tourette's Disorder).
- The child's behaviour may worsen when the level of stimulant medication in the child's bloodstream gets low (i.e. late in the afternoon/early evening). This is known as a rebound effect. Lowering the child's noon-time dose, or giving a lower dose in the afternoon may help.
- High doses of Ritalin may cause children to lack spontaneity, appear socially aloof, or "overcontrolled" in their behaviour. Your child may need to be medicated at a lower dose if this is the case.
- It is important to monitor child's reaction to medication,
- Ritalin has received much attention in the media in recent months. Unfortunately, this has also been accompanied by a lot of speculation and misperceptions about the drug.
- Common myths include:

- If my child shows improvements after taking stimulant medication, this is a sign my child has ADHD. Some normal children have shown a marked improvement in their attentiveness after taking ADHD medication.
- Ritalin can stunt growth. Weight loss (approximately 1 kilogram) may occur in the first year of treatment. This may be caused by the reduction in appetite that sometimes occurs with Ritalin. Long term, no noticeable differences have been found between the height and weight of those children who have been treated with Ritalin and those who have not. Furthermore, medication can be discontinued during school holidays to increase the chances of a growth rebound.
- Ritalin can lead to drug abuse and addiction. There is no evidence that children who are treated with Ritalin are any more likely to abuse drugs than other children. There is also no evidence that children can become addicted to Ritalin.
- There are no known long term disadvantages associated with taking Ritalin. It is difficult to say how long each individual child should continue to take the Ritalin, and in most cases children will be taken off it periodically to see if they still need it. In many cases, children will continue to have a good response to Ritalin into their teens and adulthood. It is important to remember that just because your child has ADHD, this does not mean that he/she has to receive medication. There are several issues which you might want to think about when considering medication:
- Has your child had a thorough physical/psychological examination? (e.g. is there a personal/family history of tics?)
- Age of child? Medication can be less effective/lead to more severe side effects among children less than four years and is not typically recommended.

- What other treatment options are available that you may try first? (e.g. behaviour management).
- How severe are your child's behaviours? It may be that medication is the fastest, most effective method of treating your child's behaviour.
- Are you able to adequately supervise your child's medication/guard against its abuse?
- How do you as a parent feel about medication? If you are really opposed to the idea, you should not feel pressured. Take time to weigh up the pros and cons, before you make any decisions.
- Is there any chance that anyone in your family/who has contact with your child could use the drug themselves, or sell the drug to others?
- Can you afford the medication and the other costs that go with it? (e.g. follow-up visits to the doctor).
- How does your child feel about taking the drug. It will be especially important to discuss the reasons why you think it is important to take medication with older children (who may resist medication if they don't fully understand the advantages of taking the drug).

## BEHAVIOUR MANAGEMENT

- We will discuss behaviour management in more detail in our session on parent management in session eight. In summary, most behaviour management programmes aim to teach parents skills to better deal with their children's difficult behaviours. These programmes aim to teach parents to:
  - Attend to and reward positive child behaviour
  - Give effective commands to their children

- Consistently apply negative consequences for poor behaviour
- Problem solve the difficulties that they face with their child's behaviour

Behaviour management should apply at home and at school. This means that it needs to be used by all adults who interact with your child, and it needs to be used consistently.

## **QUESTIONS?**

## **RECOMMENDED READING**



## **Session Two: Education**

### **Cheat Sheet**

#### **REVIEW: STRESS**

- Key points
- Questions
- Home practice assignment and questions

#### **TODAY'S SESSION: EDUCATION**

##### **AIMS:**

- Answer questions
- Correct myths/misconceptions about ADHD
- Guide parents in generating realistic expectations for their child
- Empower parents in talking about their child's difficulties and communicating their child's needs to others

#### **HOW LONG HAS ADHD BEEN AROUND?**

- Not a new disorder
- Appears to be more frequent
- Better able to recognise it
- Changes to diagnostic criteria
- Perhaps not as good at dealing with it
- Expectations of children changed

#### **WHAT ADHD IS**

- Pattern of developmentally inappropriate behaviours characterised by

- Inattention
- Hyperactivity
- Impulsivity
- Frequency and severity of symptoms more than other children the same age
- Situational variability in symptoms
- Some of the terms we use when talking about ADHD
- Inattentive
- Hyperactive/Impulsive
- Combined
- Other difficulties that children with ADHD may experience:
- Learning difficulties
- Aggressive behaviour
- Social difficulties
- Low self esteem
- Poor motor-coordination
- Other disorders:
- Oppositional Defiant Disorder
- Conduct Disorder
- Mood, anxiety, learning, communication, Tourette's

## WHAT HAPPENS TO CHILDREN WITH ADHD WHEN THEY GROW UP

- Children do not outgrow symptoms
- Symptoms may become less obvious (e.g. gross motor activity)
- Inattentiveness and impulsiveness may improve, still difficulties though

- Trouble keeping up at school, negative, rebellious attitude, conflict with authority figures during adolescence
- Some may continue to have symptoms into adulthood
- Risk for alcohol abuse, depression, criminal behaviour

## WHAT WE KNOW ABOUT THE CAUSES OF ADHD

- No single cause known, probably combination of different factors

## WHAT DOESN'T CAUSE ADHD

- Diet/allergies
- Poor parenting/dysfunctional home environment

## POSSIBLE CAUSES OF ADHD

- Heredity
- Brain Injury
- Abnormal Brain Development
- Less Brain Activity

## TREATMENTS FOR ADHD:

### 1) STIMULANT MEDICATION

- Ritalin
- no cure – treats symptoms only
- side effects
- myths
- Improvement with Ritalin equals ADHD diagnosis

- Ritalin stunts growth
- risk for drug abuse/addiction
- Issues for consideration when thinking about medication

## 2) BEHAVIOUR MANAGEMENT

- attending to and rewarding positive child behaviour
- giving effective commands to children
- consistently applying negative consequences for poor behaviour
- Problem solving difficulties
- Best outcome combines medication and behaviour management

Questions?

- Recommended Reading
- Home practice

## **ATTENTION DEFICIT HYPERACTIVITY DISORDER**

Attention Deficit Hyperactivity Disorder (ADHD) is defined as a pattern of behaviours in which a child shows developmentally inappropriate levels of inattention, impulsivity or hyperactivity. It is the most common mental health problem of childhood, affecting 3%-5% of the population, and is considerably more common in boys than in girls. The behaviour of children with ADHD usually results in serious disturbances in their relationships with their parents, teachers, peers and siblings, as well as academic problems. The symptoms of ADHD listed in the Diagnostic and Statistical Manual (DSM-IV) of the American Psychiatric Association are reported below.

## **SYMPTOMS OF INATTENTION**

- fails to give close attention or makes careless mistakes
- has difficulty sustaining attention in tasks or play activities
- does not follow through on instructions and fails to finish tasks (not due to oppositional behaviour or failure to understand instructions).
- has difficulty organising tasks and activities
- avoids or dislikes tasks that require sustained mental effort (e.g. schoolwork, home practice)
- loses things necessary for tasks and activities (e.g. toys, books)
- is easily distracted
- is forgetful in daily activities

## **SYMPTOMS OF HYPERACTIVITY**

- fidgets with hands or feet, or squirms in seat
- leaves seat in classroom or in other situations in which remaining seated is expected
- runs or climbs excessively when it is inappropriate (in adolescents, may be feelings of restlessness)
- has difficulty playing or engaging in leisure activities quietly
- is always on the go, acts as if “driven by a motor”
- often talks excessively

## **SYMPTOMS OF IMPULSIVITY**

- blurts out answers before questions have been completed
- has difficulty awaiting turn
- interrupts or intrudes on others (e.g. butts into conversations or games)

There are three different subtypes of ADHD. These are:

- Combined Type: A minimum of 6 symptoms present from each of the lists above.

- Predominantly Inattentive Type: A minimum of 6 symptoms of inattention present.
- Predominantly Hyperactive-Impulsive: A minimum of 6 symptoms of hyperactivity/impulsivity present.
- The term currently used to describe children with these problems is Attention Deficit Hyperactivity Disorder (ADHD). This term includes both Attention Deficit Disorder with (ADD-H) and without (ADD) hyperactivity.
- Inattention, hyperactivity and impulsiveness are common traits amongst some children, however, what makes children with ADHD different, is that they display more of these behaviours, more often than other children their own age do.
- Children with ADHD may display these behaviours to different degrees depending on where they are (e.g. children with ADHD may be more inattentive at school, where there are more demands made for their attention). They may also display fewer behaviour problems in novel situations/unfamiliar environments, or where they are receiving one-on-one attention.

In addition to having problems with attention, hyperactivity and impulsivity, children with ADHD often exhibit other problems including:

- defiant and non-compliant behaviour towards adults
- verbal and physical aggression towards peers and siblings
- social difficulties
- low self esteem
- learning disabilities
- poor motor co-ordination

## **OUTCOME**

- We used to think that children “outgrew” ADHD, and that their symptoms would generally disappear over time. We now know that symptoms of ADHD don’t

usually disappear completely, but that they tend to change as the children get older.

- As children with ADHD get older, some of their symptoms may become less obvious. By late childhood/early adolescence, excessive running, climbing, and difficulties remaining seated are less common. Some adolescents with ADHD may still be a bit fidgety, and feel jittery or restless a lot of the time. Although inattentiveness and impulsiveness tends to improve as these children get older, many children with ADHD will still have more attention problems and more difficulty controlling their behaviours compared to other teens.
- Some children with ADHD may continue to have trouble keeping up at school, and may be thought of as having a negative or rebellious attitude toward school by their teachers and peers. These children may also come into conflict with authority figures more often.
- In the majority of cases, symptoms of ADHD will improve during late adolescence and adulthood, although a number of individuals will continue to have symptoms into mid-adulthood.
- Children with ADHD are also at greater risk for alcohol abuse, depression and criminal behaviour if left untreated.

### **CAUSES OF ADHD**

- No single factor has been identified as causing ADHD. ADHD appears to have a strong biological basis, and may run in families. In a small percentage of cases it may be connected with greater than normal pregnancy complications. In even fewer cases, it may occur as a direct result of disease or trauma to those areas of the brain which help a child to sustain attention, delay impulses, and inhibit their behaviour. It is likely that ADHD is caused by a combination of different factors.
- Research has not supported that popular view that food additives, preservatives or sugar cause ADHD. While in a few individuals their allergies can contribute to a worsening of ADHD, these allergies are not viewed as the cause of ADHD. We also know that poor parenting or a dysfunctional family environment does not

cause ADHD. Parenting practices and factors within the home environment may impact on a child's behaviour, but they do not cause ADHD. It is more likely that these factors contribute to aggressive and defiant behaviours, rather than worsening ADHD-type behaviours.

## TREATMENTS

- An effective long-term treatment for ADHD is yet to be found. Current treatments for ADHD aim to help manage the symptoms of the disorder, but do not cure them. The most common treatment options for ADHD include:
- Stimulant medication
- Behaviour modification/management

## STIMULANT MEDICATION

- The most widely prescribed medication currently used in the treatment of ADHD is called Methylphenidate (Ritalin). Ritalin works by increasing levels of those chemicals in the brain that help a child to maintain attention, delay responses, inhibit behaviour, etc. Research on Ritalin has shown that as many as 90% of children being treated with Ritalin will show improvements in their concentration, and a reduction in impulsive and hyperactive behaviours (however, this usually depends on whether the child also has any other psychiatric/developmental difficulties). It is also important to remember that individual children can vary markedly in their response to stimulant medication.
- Ritalin does have some (mainly mild) side effects, including decreased appetite, insomnia, anxiety, irritability, proneness to crying. These side effects usually occur in the first two weeks of taking the medication, and will generally diminish/disappear with a reduction in dose. It is important to remember, however, that these side effects may also differ markedly from child to child. In a small number of cases, stimulant medication may cause or worsen motor and/or vocal tics. These will usually disappear once the medication has been stopped.



- The child's behaviour may worsen when the level of stimulant medication in the child's bloodstream gets low (i.e. late in the afternoon/early evening). This is known as a rebound effect. Lowering the child's noon-time dose, or giving a lower dose in the afternoon may help. Any changes in your child's medication should be discussed with your physician first.
- Ritalin does not stunt growth. Weight loss (approximately 1 kilogram) may occur in the first year of treatment. This may be caused by the reduction in appetite that sometimes occurs with Ritalin. Long term, no noticeable differences have been found between the height and weight of those children who have been treated with Ritalin and those who have not.
- Ritalin does not lead to drug abuse and addiction. There is no evidence that children who are treated with Ritalin are any more likely to abuse drugs than other children. There is also no evidence that children can become addicted to Ritalin.
- There are no known long term disadvantages associated with taking Ritalin. It is difficult to say how long each individual child should continue to take the Ritalin, and in most cases children will be taken off it periodically to see if they still need it. In many cases, children will continue to have a good response to Ritalin into their teens and adulthood.

## **BEHAVIOUR MANAGEMENT**

- Behaviour management programmes in which parents and teachers are taught skills to better manage child behaviour are the most widely recommended and effective, non-medical, short-term treatment for ADHD.
- Behaviour Management programmes aim to reduce problem behaviour, and to increase appropriate behaviour by:
  - Establishing and clearly enforcing clear rules for children
  - Giving clear and appropriate commands
  - Using rewards to encourage good behaviour

- Using appropriate non-physical punishments to discourage bad behaviours
- Although these procedures will not cure ADHD, they may increase the chance that the child will succeed. Research with children with ADHD in this area has indicated that behaviour management programmes may lead to significant improvements in task-related attention, academic productivity and social behaviour.
- For many children with ADHD, the combination of medication and behaviour modification is the most effective treatment.

### RECOMMENDED READINGS

Barkley, R. A. (1990). *Attention Deficit Hyperactivity Disorder: A Handbook for Diagnosis and Treatment*. New York: Guilford Press.

Barkley, R. A. (1998). *Attention Deficit Hyperactivity Disorder: A Handbook for Diagnosis and Treatment 2<sup>nd</sup> edition* New York: Guilford Press.

\*\*Barkley, R. A. (1995). *Taking Charge of ADHD*. New York: Guilford Press.

\*DuPaul, G. J., & Stoner, G. (1994). *ADHD in the Schools: Assessment and Intervention Strategies*. Guilford Press: New York.

\*\*Forehand, R. L. & Long, N. (1996). *Parenting the strong-willed child: The clinically proven five-week program for parents of two- to six-year-olds*. Chicago: Contemporary Books.

Greenberg, G., & Horn, W.F. (1991). *Attention Deficit Hyperactivity Disorder: Questions and Answers for Parents*. Illinois, Research Press.

Kennedy, P., Terdal, L. & Fusetti, L. (1993) *The Hyperactive Child Book*. New York, St Martin's Press.

\*\*Pfiffner, L. J. & Barkley, R. A. (1990). Treatment of ADHD in school settings. In R. A. Barkley, *Attention-Deficit Hyperactivity Disorder: A handbook for diagnosis and treatment* 2<sup>nd</sup> edition (pp. 458-490). New York: Guilford Press.

McNamara, B.E. & McNamara, F.J. (1993). *Key to Parenting a Child with Attention Deficit Disorder*. New York, Barron's Education Series.

\*\*Rief, S. F. (1993). *How to reach and teach ADD/ADHD children: Practical techniques, strategies, and interventions for helping children with attention problems and hyperactivity*. The Centre for Applied Research in Education West, New York: Prentice-Hall.

Weiss, G., & Trokenberg Hechtman, L. (1993). *Hyperactive Children Grown*. Guilford Press: New York.

## **SESSION 3: RESOURCES**

### **REVIEW: EDUCATION**

- Last week we began talking about ADHD
- how long ADHD has been around
- what ADHD is
- some of the terms we use when we are talking about ADHD
- other difficulties children with ADHD may experience
- what happens when ADHD children grow up
- what we know about the causes of ADHD
- treatments for ADHD, including medication and behaviour management

Key points to remember:

- ADHD is not a new disorder. It may appear that more kids are being diagnosed today because we are better able to recognise it, diagnostic criteria have changed, we are perhaps not dealing with it as well as we used to, and our expectations of children may have changed.
- ADHD is characterised by a pattern of developmentally inappropriate levels of inattention, hyperactivity, and impulsivity. Children with ADHD show more of these behaviours, more often than other children their age. Children with ADHD do not have to have difficulty with all of these to receive a diagnosis of ADHD. They may experience primary difficulties with attention (Inattentive subtype), Hyperactivity/Impulsivity (Hyperactive/Impulsive subtype), or in the majority of cases, have

difficulty with both (Combined subtype). Children with ADHD may not display these behaviours to the same degree in every situation, and may have more difficulty in situations that are more confining, or where there are higher demands placed on their attention (e.g. the classroom).

- Some (but not all) children with ADHD will also experience associated difficulties, including learning difficulties, aggressive behaviour, social difficulties, low self esteem, poor motor co-ordination, and in some cases oppositional behaviours or conduct problems. There is also a higher rate of mood disorders, anxiety disorders, communication disorders, and Tourette's disorder amongst children with ADHD compared to children without ADHD.
- Children with ADHD do not grow out of ADHD. Their symptoms may become less obvious as they grow up, but in the majority of cases, children with ADHD will continue to have difficulties into adolescence and adulthood.
- We do not yet know the cause of ADHD. There seems to be a biological link, and it appears that if one person in the family has ADHD, there is a higher chance that other family members may also have this disorder. It is not yet exactly clear what is inherited. Current research has suggested that children with ADHD may have less of those neurotransmitters in the brain which are responsible for sustaining attention, delay in responses/impulses, controlling motor activity, planning behaviour, etc.

- Although we do not yet know exactly what causes ADHD, we do know what does not. There is no evidence to suggest that diet, allergies, poor parenting, or a dysfunctional family environment cause ADHD. These factors may well impact on a child's behaviours, but they do not cause them.
- There are no effective long term treatments for ADHD. Treatment approaches aim to help manage ADHD symptoms, but do not cure them. The most common treatment approaches to ADHD include stimulant medication and behaviour management.
- Stimulant medications work by increasing neurotransmitters in the brain which help a child to sustain attention, control motor activity, delay responses, and plan behaviour, etc. Side effects are typically mild, and can usually be managed by lowering the dose. There is no evidence that Ritalin stunts growth, or increases the likelihood of drug abuse/addiction.
- Behaviour management aims to teach parents to attend to and reward positive child behaviour, give effective commands to their children, consistently apply negative consequences for poor behaviour, and help parents to problem solve the difficulties that they face with their child's behaviour.

**Questions?**

## Resources

- ADHD Parent Support Groups
- Schools for children with Specific Learning Disabilities

### ADHD SUPPORT GROUPS

These support groups are run by professionals in the field and aim to provide information, resources, support, advocacy, professional training, policy, etc. They offer contact with other parents, access to information pertaining to ADHD, newsletters, information on parent support groups, seminars and access to community groups and interested professionals.

1. Linda McGregor  
42 Ridge Rd.  
La Lucia  
031 – 572 6338
2. Jerzeel Wardle  
97 Blenheim Rd.  
Pinetown  
031 – 701 2646
3. Robin Van Der Plink  
63 Northway Rd.  
Athlone  
031 – 564 9519
4. Livingston Primary School – Shireen Mohammed  
70 Livingston Rd.  
Windermere  
031 – 312 2026  
9:00 – 10:00am Tuesdays
5. Attention Deficit and Hyperactivity Support Group of Southern Africa (ADHASA)  
Tel: 011-888-7655  
9:00am – 1pm, Mondays-Fridays  
Website: [www.adhasa.co.za](http://www.adhasa.co.za)

6. ADHD Support Centre of Southern Africa  
Tel: 012-802-1077  
Website: [www.adhdcentre.co.za](http://www.adhdcentre.co.za)
7. Pro Ed Assessment and Therapy Centre  
Rondebosch  
Tel: 021-686-1567  
Website: [www.proedhouse.co.za](http://www.proedhouse.co.za)

### **Schools for Children diagnosed with Specific Learning Disabilities**

The following schools aim to support the educational development and social well-being of children with average intelligence, who have specific learning disabilities and problems in reading, writing and or maths.

#### **1. The Browns School**

**28 Marrianridge Road**

**Pinetown**

**Tel: 031 – 700 3535**

- From 3 years of age.
- Children must be educable, that is I.Q. of 55 and above.
- Grades 1 – 9.
- Child must have specific learning disability ( reading, writing, maths)
- Disability must require more than 2 years remediation.
- Multi-disciplinary approach – remedial teachers, Occupational therapists, Physiotherapists, Speech therapists, Psychologists and Medical specialists.

#### **2. Livingstone Primary School**

**70 Livingstone Rd.**

**Windermere**

**Tel: 031 – 312 2026**

- Grades 1 – 5.



- Psychological report by a departmental psychologist, before child is admitted.
- Speech therapist's and/or Occupational therapist's report may also be required.
- Parent interviews are held weekly.
- Multi-disciplinary approach.

### **3. Kenmont High School**

**45 Island View Rd.**

**Fynnland**

**Tel: 031 – 466 4477**

- Grades 1 – 12.
- Average or above average potential, but must have a specific learning disability and require long-term, intensive intervention.
- Remedial methods are used and mainstream department syllabi are followed.
- Multi-disciplinary approach – remedial teachers, therapists, psychologists and general assistants.

### **4. Pinetown Senior Primary**

**20 Church Lane**

**Pinetown**

**Tel: 031 – 400 2211**

- Grades 1 – 5.
- Good average I.Q.
- Multi-disciplinary approach – Remedial teachers, Speech therapists.
- Short-term remedial intervention (delays of 2 years or less in academic performance).

## **Session Three: Resources**

### **Cheat Sheet**

#### **Review: Education**

Last week we began to talk about ADHD

Key points to remember:

- ADHD is not a new disorder
- Primary symptoms and subtypes
- Associated difficulties
- Children with ADHD do not grow out of ADHD
- Unknown cause of ADHD
- What does not cause ADHD
- No long term treatments
- Stimulant medication
- Behaviour management

## **RESOURCES**

### **ADHD SUPPORT GROUPS**

- Linda McGregor  
42 Ridge Rd.  
La Lucia  
031 – 572 6338
- Jerzeel Wardle  
97 Blenheim Rd.  
Pinetown  
031 – 701 2646

- Robin Van Der Plink  
63 Northway Rd.  
Athlone  
031 – 564 9519

- Livingston Primary School – Shireen Mohammed  
70 Livingston Rd.  
Windermere  
031 – 312 2026

### **Schools for children diagnosed with Specific Learning Disabilities**

- The Browns School  
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Tel: 031 – 312 2026

- Kenmont High School  
Tel: 031 – 466 4477

- Pinetown Senior Primary  
Tel: 031 – 400 2211

## **SESSION4:PROBLEM SOLVING SKILLS**

- **Name Tags**

**REVIEW: RESOURCES:** Check Information/Questions/Progress

**REVIEW: STRESS:** Still practicing skills learnt in this session; recognising stress, the early warning signs of stress. Important to keep practicing these skills.

### **TODAY'S TOPIC: PROBLEM SOLVING**

#### ***AIM:***

We all solve problems every day of our lives. Most of us use these skills automatically, without thinking too much about them. However, when we are under stress, it may be harder to use these skills well. Tonight's/Today's session is going to review a systematic method of handling problem situations, so you can deal with your problems more effectively, even when the stress of a situation is clouding your thinking. By improving the way that we deal with difficult situations, we can hopefully reduce our stress. The skills that you learn this evening/today will be useful when attempting to resolve problems experienced with your child with ADHD, but can and should be used to solve problems of all kinds.

#### **OVERVIEW:**

- we will be looking at the ways that we sometimes respond to problem situations when we are under stress

- defining problem situations
- generating a variety of possible solutions
- weighing up the pros and cons of each plan and deciding upon the best one
- putting the chosen solution into practice
- evaluating the chosen solution

## **HOW DO WE RESPOND TO PROBLEMS WHEN WE ARE UNDER STRESS?**

**EXERCISE:** Ask parents to tell us how they approach problems when they are under stress, e.g.:

- *Avoidance* (e.g., leaving the room)
- *Ignoring or tolerating* a situation in the hope it will go away
- *Doing nothing* in the hope the situation will improve all by itself
- Many of us will tend to repeatedly employ our usual (or habitual) methods of problem solving, even if we know that they do not generally work. When we fail to resolve difficulties in this way, our problems tend to build up, until they finally provoke an emotional outburst or other stress related responses (see session one). These kinds of responses are often non-productive – our emotions may be heightened, we may respond quickly and impulsively, say things we don't mean to, and behave in ways, which we find unacceptable.
- Although problem solving is a relatively simple technique in theory, it is often easier said than done. *It also takes practice.* It will be important to try to *anticipate* problem situations and *plan ahead*. By being prepared in this way, we will have a much better chance at dealing with our problems effectively. It will be

important to try not to solve our problems at rushed and chaotic times (finding the time for problem solving may present a problem in itself!).

**EXERCISE:** Ask parents to suggest a problem with which we can demonstrate the steps to problem solving.

## **STEP ONE: DEFINING THE PROBLEM**

- **Use clear and specific terms** to define the problem. Describe the situation in as much detail as possible (e.g. “my child does not always do his homework when I ask him” is better defined than “my child does not listen to me”).
- **Try not to accuse or blame other people.** (e.g. “my child does not tell the truth when confronted about completing his homework” is better defined than “my child tells lies”. The first definition implies that the child does not lie all of the time, but usually only when confronted about homework issues).
- Try to **rephrase your problem as a positive behaviour**, such as something you desire from the child, as opposed to something your child does not do (e.g. "I would like my child to do his home work when I ask him").
- When problem solving with others, **check that you got your point across.** Ask the parents to paraphrase your problem definition to check whether they understood you. *Listen.* If you have not been understood, attempt to redefine your problem.

- Defining our problems sometimes reveals that several different problems are being brought up at once. These may actually be separate problems, and it may be important to deal with one at a time. It is sometimes important to **break our problems down into smaller, more manageable, problems** in this way. If this is the case, select the problem you wish to deal with, and write the remaining problems on a piece of paper to be dealt with at a later stage.

## **STEP TWO: GENERATING A VARIETY OF ALTERNATIVE SOLUTIONS**

- **Brainstorm** possible solutions for handling the problem behaviour and achieving your goal.
- List as many ideas as possible – remember, **quantity** breeds quality.
- **Don't evaluate your ideas at this stage.** It is important that we don't consider at all whether or not a solution is practical or even possible. We need to keep an open mind at this stage, in order to give ourselves the opportunity to think around our problems. We are *aiming for as many solutions as we can come up with*, including some impossible ones. Anything goes at this stage, remember you don't have to implement everything you have listed here.

## **STEP THREE: EVALUATING THE IDEAS AND SELECTING THE BEST ONE**

- Take turns evaluating each idea. Consider the **advantages and disadvantages** of each solution, and the **likely consequences/outcomes** of each possibility.
- Role-playing may help here. You may be in the habit of thinking that people will respond in various ways to your actions – try to think of examples where this has not been the case. (e.g. you may be reluctant to ask a family member to look after the kids while you have some time out for fear that they will be annoyed by your request. Although this may have been the case last week while your partner was finishing off a proposal for work, try to think of times when this has not been the case).
- Consider whether your **goals/desires** for change are **realistic**? (e.g. do you want your child to always do his homework without having to be asked?)
- Sometimes the best thing to do is to **do nothing**. Sometimes the only way to avoid an emotional outburst is to get away and leave the room for a brief time. If the problem is beyond our control at the time, it may be best to accept it until we can change it. It beats spinning your wheels and getting nowhere. However, we have talked a little about the importance of providing consequences for poor behaviour as soon as possible. This is where it will be really important to anticipate and prepare ourselves for these situations, so that we can respond to them automatically without becoming too stressed.
- There will be other times when the best solution to a problem is to **learn to accept that we can not change a situation.**



- Rank your solutions from best to worst. **Select the best one.**

#### **STEP FOUR: PLANING TO IMPLEMENT THE SELECTED SOLUTION**

- Look in more detail at your chosen solution.
- Decide *what* to do, *where* to do it, and *when*. You may want to role play how you will go about setting your plan into action. Anticipate and discuss any difficulties you might encounter. By being prepared, you increase the chances that you will deal effectively with a problem.
- Where appropriate, decide upon the consequences for compliance or non-compliance with your solution.
- Implement your chosen solution.
- Remember, you are simply going to test an idea to see if it works. Try to be realistic. Your problems are unlikely to resolve themselves in a few days, no matter how good your problems solving skills are. Don't be thrown off track by failure to see results immediately, stick with your plan, and after a week or so, evaluate its success.

#### **STEP FIVE: EVALUATING YOUR CHOSEN SOLUTION**

- How did it go? Is the situation still the same, better, or worse? Remember, sometimes the aim is not to change the problem situation itself, but to improve the way that we deal with it (e.g. your child may still refuse to do his homework each night, however, you may be able to deal with it without becoming so stressed).
- How can you improve on the action plan you have implemented in the future?
- Do you need to formulate another plan of action? If so, it may be time to go back to your original list of possible solutions and try out another approach.

**EXERCISE:** Ask parents to each choose a problem situation that they would like to attempt to resolve. In small groups, ask parents to work through the first five steps (excluding implementing their plan), providing feedback/discussing any difficulties after each step.

### **REVIEW:**

- Tonight we have been reviewing a technique for dealing with problem situations. Although this will be useful in dealing with your child with ADHD, these skills can and should also be used in any problem situations you may encounter.
- By being better prepared to deal with problem situations in this way, we can deal with stressful situations more effectively, and prevent our stress from getting beyond our control, or even avoid potential sources of stress.

### **HOME PRACTICE:**

- Implement your chosen solution.
- Record **three** situations where you have attempted to use problem solving skills.
- Practice, practice, practice.

**Questions?**

## **Session Four: Problem Solving Skills Cheat Sheet**

**REVIEW:**     **Resources:** Check Information/Questions/Progress  
**Stress:** Still practicing skills from this session

### **TODAY'S TOPIC: Problem Solving Skills**

**Aim:** Review a systematic method of dealing with problem situations

**Overview:**     The ways we respond to problem situations when under stress  
                       Defining problem situations  
                       Generating possible solutions  
                       Deciding on the best solution  
                       Utilising the best solution  
                       Evaluating the chosen solution

### **How do we respond to problems when we are under stress?**

**EXERCISE:** How do you approach problems when under stress?

- Many of us repeatedly employ usual problem solving methods, even when they do not work.
- Problem Solving is easier said than done and requires practice

**EXERCISE:** Suggest problem to use as an example

### **Step One: Defining the Problem**

- Use clear and specific terms to define the problem.
- Try not to accuse or blame others
- Rephrase problem as positive behaviour
- Check your point has come across
- Defining problem sometimes reveals a number of different problems

### **Step Two: Generating a Variety of Alternative Solutions**

- Brainstorm possible solutions
- List as many solutions as possible

- Don't evaluate ideas at this stage

### **Step Three: Evaluating Ideas and Selecting the Best One**

- Evaluate each idea in turn
- Roleplaying may help
- Are your goals/desires for change realistic?
- Sometimes the best thing to do is nothing.
- Sometimes the best thing is to accept the situation
- Rank solutions from best to worst.

### **Step Four: Planning to Implement the Selected Solution**

- Look in more detail at chosen solution.
- Prepare.
- Decide upon consequences.
- Implement.

Remember, you are simply testing your solution. Be realistic.

### **Step Five: Evaluating chosen solution**

- How did it go?
- Improvements
- Do you need to formulate another plan of action

**EXERCISE:** Choose a problem you would like to solve. In small groups, work through the five steps.

### **Review:**

- Reviewed a problem solving technique
- Preparation helps to deal with problem situation and prevent stress

### **Home practice:**

- Implement chosen solution
- Record three situations

**Next Week:** Cognitive Restructuring

## SESSION FOUR: HOME PRACTICE

### PROBLEM SOLVING

List some times and places for effective problem solving

Describe the problem:

What solutions did you think about using? What were the advantages/disadvantages of each? (Consider both the short and long term consequences of your solutions here).

What solution did you try?

How did it work?

1	2	3	4
Not at all	Just a little	Pretty well	Great

How can you improve on you action plan in the future?

### PROBLEM SOLVING SKILLS

#### STEP ONE: DEFINING THE PROBLEM

- \* Use clear and specific terms to define the problem. Describe the situation in as much detail as possible (e.g. “my child does not always do his home practice when I ask him” is better defined than “my child does not listen to me”).
- \* Try not to accuse or blame other people (e.g. “my child does not tell the truth when confronted about completing his home practice” is better defined than “my child tells lies”. The first definition implies that the child does not lie all of the time, but usually only when confronted about home practice issues).
- \* Try to rephrase your problem as a positive behaviour, such as something you desire from the child, as opposed to something your child does not do (e.g. “I would like my child to do his home practice when I ask him”).
- \* Check that you got your point across. If you are problem solving with someone else, check whether you have been understood. Listen. If you have not been understood, attempt to redefine your problem.
- \* Defining our problems sometimes reveals that several different problems are being brought up at once. These may actually be separate problems, and it may be important to deal with one at a time. It is sometimes important to break our problems down into smaller, more manageable, problems in this way. If this is the case, select the problem you wish to deal with, and write the remaining problems on a piece of paper to be dealt with at a later stage.

## **STEP TWO: GENERATING A VARIETY OF ALTERNATIVE SOLUTIONS**

- \* Brainstorm possible solutions for handling the problem behaviour and achieving your goal.
- \* List as many ideas as possible – remember, quantity breeds quality.
- \* Don’t evaluate your ideas at this stage. It is important that we don’t consider at all whether or not a solution is practical or even possible. We need to keep open at this stage, in order to give ourselves the opportunity to think around our problems. We are aiming for as many solutions as we can, including some impossible ones. Anything goes at this stage, remember you don’t have to implement everything you have listed.

## **STEP THREE: EVALUATING THE IDEAS AND SELECTING THE BEST ONE**

- \* Take turns evaluating each idea. Consider the advantages and disadvantages of each solution, and the likely consequences/outcomes of each possibility.
- \* Roleplaying may help here. You may be in the habit of thinking that people will respond in various ways to your actions – try to think of examples where this has not been the case. (e.g. you may be reluctant to ask a family member to look after the kids while you have some time out for fear that they will not be annoyed by

your request. Although this may have been the case the last time when you asked, try to think of times when this has not been the case).

- \* Consider whether your goals/desires for change are realistic? (e.g. do you expect your child to always do his home practice without having to be asked?)
- \* Sometimes the best thing to do is to do nothing. Sometimes the only way to avoid an emotional outburst is to get away and leave the room for a brief time. If the problem is beyond our control at the time, it may be best to accept it until we can change it. It beats spinning your wheels and getting nowhere. However, we have talked a little about the importance of providing consequences for poor behaviour as soon as possible. This is where it will be really important to anticipate and prepare ourselves for these situations, so that we can respond to them automatically without becoming too stressed.
- \* There will be other times when the best solution to a problem is to learn to accept that we can not change a situation.
- \* Rank your solutions from best to worst. Select the best one.

#### **STEP FOUR: PLANING TO IMPLEMENT THE SELECTED SOLUTION**

- \* Look in more detail at your chosen solution.
- \* Decide what to do, where to do it, and when. You may want to role play how you will go about setting your plan into action. Anticipate and discuss any difficulties you might encounter. By being prepared, you increase the chances that you will deal effectively with a problem.
- \* Where appropriate, decide upon the consequences for compliance or non-compliance with your solution.
- \* Implement your chosen solution.

Remember, you are simply going to test an idea to see if it works. Try to be realistic. Your problems are unlikely to resolve themselves in a few days, irrespective of how good your problems solving skills are. Don't be thrown off track by failure to see results immediately, stick with your plan, and after a week or so, evaluate its success.

#### **STEP FIVE: EVALUATING YOUR CHOSEN SOLUTION**

- \* How did it go? Is the situation still the same, better, or worse? Remember, sometimes the aim is not to change the problem situation itself, but to improve the way that we deal with it (e.g. your child may still refuse to do his home practice each night, however, you may be able to deal with it without becoming so stressed).
- \* How can you improve on the action plan you have implemented in the future?

- \* Do you need to formulate another plan of action? If so, it may be time to go back to your original list of possible solutions and try out another approach.



## **SESSION 5: COGNITIVE RESTRUCTURING**

### **REVIEW OF LAST WEEK: PROBLEM SOLVING**

Last week we looked at some of the ways we respond to problem situations (e.g. avoidance, ignoring, behaving impulsively, making rash decisions). It is difficult to respond effectively when we are faced with problem situations, particularly when we are under stress. Last time we reviewed a systematic method for dealing with problems, which we can use when we are under stress. This involved:

- defining the problem
- generating possible solutions to the problem
- evaluating possible solutions
- selecting the best one(s)
- implementing the solution
- evaluating the outcome

The aim is to practice using this skill so that it becomes automatic, so that we can respond effectively even when the stress of a situation is clouding our thinking. This will hopefully increase the chances that we can deal with our problems more effectively, which will hopefully reduce our stress.

### **Review of Home Practice**

For Home Practice, we asked everyone to try to record at least three problem situations.

How did everyone go with this? Any difficulties? Did anyone have any successes?

# COGNITIVE RESTRUCTURING

Today's session is going to be dealing with how we think about situations/events, and how this can affect the way we feel about and react to them. This is important because the way that we think about situations will often influence how we react to them, both in terms of what we feel and how we behave.

**EXERCISE:** Imagine you are at home alone on a dark, stormy night and you hear a loud crash in the next room.

**How would you respond to this?**

- **How would you feel?**
- **How would you behave? (i.e. what would you do?)**

As we all know from our first session, different people will respond to potentially stressful situations in different ways. For instance, one way of responding to the “crash” situation is to think that someone is attempting to break into your home. This line of thinking will probably result in fear and panic. Another person may respond to the situation by thinking that they forgot to close the window in the room, and the wind has blown it shut. This line of thinking may allow the person to calmly get up from bed, and close the window, before returning to sleep. As you can see, the same situation (**A** Activating event) can be thought of in different ways (**B** Belief System/Thoughts), and can lead to different feelings and behaviours (**C** Consequence). If this were not true, then each of us would respond to the same situation in exactly the same way. It is thus important to remember that the way that we each think about events and situations can influence our feelings and behaviours about them.

**EXERCISE:** Another way of illustrating this point is to imagine that Ben/Paula, who you did not know, walked into the room and pointed a gun at you.

- **How would you feel if you did not know what a gun was? What would you be thinking?**
- **How would you feel if you knew what a gun was? What would you be thinking?**

Again you can see how the way that we think about a situation can affect our feeling and behaviours.

By thinking about potentially stressful situations in different ways, we can reduce, or in some cases avoid, the stress we would normally feel. This skill also allows us to be more open to change, and to better implement the problem solving skills that we learned last week. This is important because we know that our negative thoughts can actually prevent us from acting and changing situations for the better (e.g. when we assume that we can not change a problem, without even trying). Furthermore, during the problem solving exercise, you may have encountered some problems, which seemed to be beyond your control, and unable to be fixed. By altering the way we think about these situations and looking at them differently, we can also learn to accept and better cope with the stress that they cause us.

## **OVERVIEW:**

Today's session aims to

- Help us to recognise how our thoughts can impact on/influence our feelings and behaviours

- Learn to identify our own pattern of thinking and identify those negative thoughts, which cause us to feel stressed
- Increase our awareness of common thinking errors
- Learn to challenge these thoughts and errors so as to decrease the stress they cause us

It takes a fair bit of practice to stop and recognise our thoughts so that we can begin to challenge them (especially when we are stressed), so don't worry if you are not able to pick up on your thoughts straight away.

Tonight/today we will also be looking at some coping self-statements that we can use to help us get through difficult situations in the short term (i.e. think about positive thoughts before we get stressed).

## ***AUTOMATIC THOUGHTS***

Our initial reactions to situations are usually automatic, thoughts pop into our heads, and tell us what to feel (e.g. when Brigitte receives a phone call at 7am she immediately assumes that something is wrong). We don't have to be under stress in order to have negative automatic thoughts, however, when we are under stress, the way that we view a stressful situation may differ from the way that we would view it if we were feeling calm and happy. When we are under stress, we may not always take all the facts into account, and our thoughts may reflect the negative feelings that we are having at the time. Such negative thinking may make you feel more stressed, and may prevent you from effectively dealing with a problem situation. This can create a vicious cycle, whereby the situation may worsen, resulting in more negative thoughts, increased stress, and so on.

All of us tend to think negatively at times. The purpose of this session is to make you more aware of how your thinking affects the way that you feel and behave. It takes practise to learn to recognise and challenge negative thoughts. *For instance, you may always walk in the same direction to work, often without thinking. There may be different ways of going, but you may tend to take the same way each time. In order to take a different route, you may need to actively remind yourself to walk a different way.*

Likewise, in order to recognise and challenge our automatic thoughts, we have to actively remind ourselves to look out for and challenge our negative thoughts so that our new thoughts may become automatic. The first step in this process will be to identify those negative aspects of our thinking. To begin with we are going to look at some common errors in thinking.

## **COMMON ERRORS IN THINKING**

### **(1) Overgeneralisation**

This occurs when you take one fact or event and make a general rule about it.

Say, for instance, that you attempted to use the problem solving skills learned in last week's session and were unsuccessful in your efforts. *If you were to overgeneralise, you might think that you will never be able to use the skills successfully, or that they simply do not work.* Likewise, some of you may have encountered difficult teachers at your child's school. *If you were to overgeneralise, you could conclude that all teacher's are not helpful.* Despite the fact that we have heard of some teachers who have been helpful, this sort of thinking/expectation will set you up to have negative experiences with your child's teacher and school.

**(2) Filtering**

This occurs when you focus on the negative things around you, and filter out all of those positive things that are happening. *For example, you would have enjoyed the family picnic if it wasn't for the burnt chicken. In this example, you focus on the negative aspects of the situation (the burnt chicken), while filtering out the positive aspects (such as getting together with family members that you haven't seen in a long time), which results in negative feelings about the picnic in general.*

In terms of parenting, engaging in thinking that involves filtering may mean that it is easy to fall into a cycle of only noticing poor behaviour, while failing to notice the positive things that your child does (e.g. following instructions straight away, showing affection toward a parent or sibling, playing quietly without having to be told). One other danger of filtering (focusing on negative aspects, and filtering out the positive) is that your negative problems can often appear worse and more numerous than they actually are.

**(3) All or Nothing Thinking**

This occurs when you lump things into absolute, black and white categories, with no middle ground. With this line of thinking, you have to be perfect, or you are worthless. *For instance, you may have been unsuccessful when dealing with a problem situation with your child. The all-or-nothing thinker would conclude that they are a failure as a parent, even if they had had some success in dealing with other problems during the week.* The danger of this line of thinking is that given that no parent can be perfect all of the time, the minute you make a mistake, you must conclude that you are all bad. Likewise, some of us strive to be the best at

everything we do, and when we do not succeed at one thing, we think ourselves complete failures. What we perhaps need to do in these situations is to challenge these thoughts (e.g. by asking ourselves would it really be the end of the world if we were not the best at everything).

We may also view others in “all-or-nothing” terms. *For instance, we may conclude that because a child deliberately misbehaves on one occasion, that all of their behaviour must be deliberate and purposeful.* We know that this is not true for children with ADHD, and in fact is not true for most children.

As you can see, this type of thinking can prevent us from generating realistic expectations about ourselves and others.

#### **(4) Self Blame**

This occurs when you consistently blame yourself for everything that happens around you, even those things that may not be your own fault. *For instance, many parents of children with ADHD blame themselves for their children's poor behaviours, despite the fact that we know parents do not cause ADHD.* The danger of this line of thinking is that it can blind parents to their accomplishments and good qualities as parents.

#### **(5) Mind reading**

This occurs when you think that you know what everyone else is thinking, and may happen more often with people we know well (e.g. partners, family members, close friends). *For instance, you may assume that someone does not like you when*

*they pass you in the street without saying hello, when in fact they were in a hurry and did not see you.*

### **HOME PRACTICE EXERCISE:**

- (1) Have parents record their thoughts about three stressful situations/events (including any judgements or beliefs they may hold about the situation, their predictions and worries).
- (2) Next, have parents examine their statements and identify if they have engaged in any negative thoughts.
- (3) Finally, have parents answer their negative thoughts, and search for more balanced alternatives by asking logical questions. The following questions may be useful to challenge errors and replace them with more helpful thoughts:
  - What evidence is there for what I am thinking?
  - Am I confusing a thought with a fact?
  - Do I really know what is happening in this situation?
  - Am I being honest with myself? Is it possible I am denying the truth, or misplacing the blame?
  - Are my information sources reliable? Is the information I am basing my thoughts on reliable and truthful?
  - How would someone else feel about this situation?
  - Am I thinking in all or nothing terms? “If I cant do this then I am a failure”
  - Am I overestimating how bad a situation is? What would be so bad about this? Is this the worse thing that could happen today?



- How will things be in a few hours, a week, or a month or so from now? Try to put things in perspective.
  - Am I overestimating the likelihood of an event? Is it really worth worrying about?
- (4) When challenging cognitive errors, rebuttals must be strong. Try to imagine your rebuttals spoken in a loud and forceful voice.
  - (5) Rebuttals must be non-judgemental. We need to move away from “musts” and “shoulds” (e.g. saying “It would be good if I could finish the housework today” places far less pressure on yourself than saying “I must get the housework work finished today”). We need to get rid of notions of right and wrong, and **focus on on what is, not what should be**. Be very exact in your statements, rather than exaggerating or minimising your concerns.
  - (6) Be specific. Think in terms of specific behaviour, or a specific problem. Instead of saying “my child never behaves”, say “my child is not behaving at the moment, which is frustrating for me because I know he can behave better than this”.
  - (7) Seek balance. Include the positive as well as the negative (e.g. even if you were unsuccessful in your problem solving attempts over the last week, try to recall all of those times when you have successfully resolved problems).
  - (8) Where possible, test out your new thoughts to see whether they are true (e.g. just because the phone rings during the day does not always mean there has been a tragedy at school).

When we are stressed out, it is not always easy to challenge our thoughts at the time. It also takes time and practise. In the meantime, it may be useful to prepare some

statements in advance to help you cope with feeling overwhelmed and help you to prepare to challenge the negative thoughts that are provoked by these difficult situations.

## **COPING SELF-STATEMENTS**

Below are some examples of coping self-statements that can be used before, during and after a stressful situation. These statements aim to help you prepare for stressful situations, keep you focused on the problem at hand and help you better handle stressful situations when they actually occur, help you cope with the feeling of being overwhelmed, and reward yourself for successfully coping with the situation. It is really important to reward yourself for coping in stressful situations. Chances are you will cope better with these kinds of situations in the future, if you reward yourself for your successes with them now.

## **PREPARING FOR STRESSFUL SITUATIONS**

- What is it I have to do?
- I can develop a plan to deal with it.
- Just think about what I can do about it. That's better than getting stressed about the things I can't change.
- Just think rationally, try not to think negatively.
- Don't worry, worry doesn't help anything.

## **HANDLING STRESSFUL SITUATIONS**

- I can meet this challenge.
- One step at a time, I can handle this situation.
- Don't think about how stressed I am feeling. Stay focused. Just think about what I have to do.
- Relax, I'm in control. Take a slow deep breath. Good.

## **COPING WITH THE FEELING OF BEING OVERWHELMED**

- If I'm feeling overwhelmed, just take a deep breath and pause.
- Keep focused on the present, think about what is it I have to do.
- It is natural that I get stressed in these kinds of situations.
- I don't have to eliminate my stress totally, just keep it manageable.
- This will be over shortly.
- This isn't the worse thing that could happen.
- Just think about something else.

## **REINFORCING SELF STATEMENTS**

- It worked, I was able to do it.
- It wasn't as bad as I expected.
- I made more out of the fear than it was worth.
- I'm really pleased with the progress I am making.
- I did it!

The idea is to study the list until you become totally familiar with each of the self statements, so that later on, when you are becoming stressed, you can use coping self-statements to challenge your negative thoughts automatically, even when the stress of a difficult situation is clouding your thinking.

It is a good idea to refresh your self-statement list periodically, deleting old, or adding new statements. You can keep them available by copying them onto small cards to carry in your purse, pocket, or even cigarette packet. This way if you are feeling stressed, your coping self-statements can serve as a reminder to recognise and challenge your negative thinking.

**EXERCISE:** Have parents break into small groups and prepare some coping self-statements for use in future problem situations. Copy some of the self-statements onto some card, so parents can carry and use them throughout the week.

## **Session 5: Cognitive Restructuring**

### **Cheat Sheet**

#### **REVIEW: Problem Solving Skills**

A systematic method of dealing with problems when we are under stress

- defining the problem
- generating possible solutions to the problem
- evaluating possible solutions

- selecting the best one(s)
- implementing the solution(s)
- evaluating the outcome

The aim is to practice this skill until it becomes automatic

Home Practice

### **THIS WEEK: Cognitive Restructuring**

How we think about situations and events and how this influences how we feel about and react to them.

**EXERCISE: Imagine you are at home on a dark, stormy night and you hear a crash in the next room. How do you respond to this?**

Different people respond in different ways. The same situation (A Activating event) can be thought of in different ways (B Belief System/Thoughts) and can lead to different feelings and behaviours (C Consequences).

**EXERCISE: Imagine Ben/Paula, who you don't know, walks into the room and points a gun at you. How would you feel if you didn't know what a gun was? If you did know what a gun was?**

EXAMPLE: Parent who feels wound up and stressed when the phone rings during the day because they assume it's the school is calling about child, but doesn't when phone rings at night.

Altering the way we think about stressful situations; reduces stress, makes us more open to change, makes us better able to implement problem solving skills, help us to act and change situation for the better, can help us accept and better cope with stressful situations.

### **Overview:**

- Help us recognise how our thoughts can influence and feelings and behaviours.
- Learn to identify our own pattern of thinking and identify those negative thoughts which cause us to feel stressed.
- Increase our awareness of common thinking errors.
- Learn to challenge these thoughts and errors so as to decrease stress.
- This takes practice
- Coping self statements

### **Automatic Thoughts**

- Our initial reactions are automatic.
- We don't have to be under stress to have negative automatic thoughts.
- But stress can create a vicious cycle whereby negative thoughts create more negative thoughts.
- Need to recognise and challenge automatic thoughts by reminding ourselves to challenge those thoughts.

### **Common Errors in Thinking**

(1) Overgeneralisation: taking one fact or event and making a general rule about it.

Examples.

(2) Filtering: Focus on negative things to the exclusion of positive things. Examples.

(3) All or Nothing Thinking: Lumping things into absolute, black and white categories with no middle ground. Examples.

(4) Self Blame: Consistently blaming self for everything that happens around you.

Examples.

(5) Mind Reading: Thinking you know what everyone else is thinking. Examples.

### **Home Practice:**

(1) Have parents record three stressful events, including judgements/beliefs.

(2) Examine statements and identify negative thoughts

(3) Search for more balanced alternatives by asking logical questions

(4) Rebuttals to cognitive errors must be strong.

(5) Rebuttals must be non-judgemental.

(6) Be specific in terms of child behaviour and problem

(7) Balance the negative with the positive.

(8) Test new thoughts to see whether they are true.

### **Coping Self Statements**

To be used before, during and after stressful situations

PREPARING FOR STRESSFUL SITUATIONS

HANDLING STRESSFUL SITUATIONS

COPING WITH THE FEELING OF BEING OVERWHELMED

## REINFORCING SELF STATEMENTS

Practice these coping self statements so they become automatic

Refresh self statements list periodically

**EXERCISE:** In groups, parents prepare coping self-statements.

**Next Week:** Communication Skills



## **SESSION FIVE: COGNITIVE RESTRUCTURING**

### **HOME PRACTICE**

1. Briefly describe the problem.
2. What were you thinking at the time? What was causing you to feel most stressed? What did you think would happen?
3. Identify your negative thoughts from above. How many cognitive errors did you make? What were they?
4. Challenge these errors by replacing them with more helpful, positive thoughts.
5. Generate some coping self-statements to use
  - (a) before the problem occurs
  - (b) during the problem
  - (c) after you have dealt with the problem

## **COGNITIVE RESTRUCTURING**

The way that we think about situations will often influence how we react to them, both in terms of what we think and how we behave. By looking at stressful situations in different ways, we can attempt to minimise, or in some cases avoid, the stress we would normally feel. This skill also allows us to be more open to change, and to better implement the problem solving skills that we learned last week. This is important because we know that our negative thoughts can actually prevent us from acting and changing situations for the better (e.g. when we assume that we can not change a problem, without even trying). Furthermore, during the problem solving exercise, you may have encountered some problems, which seemed to be beyond your control, and unable to be fixed. By altering the way we think about these situations and looking at them differently, we can also learn to accept and better cope with the stress that they cause us.

When we are under stress, the way that we view a stressful situation may differ from the way that we would view it if we were feeling calm and happy. When we are under stress, our thoughts may not always take all the facts into account, and may reflect the negative feelings that we are feeling at the time. Such negative thinking may make you feel more stressed, and may prevent you from effectively dealing with a problem situation. This can create a vicious cycle, whereby the situation may worsen, resulting in more negative thoughts, increased stress, and so on.

### **COMMON ERRORS IN THINKING**

#### **(1) Overgeneralisation**

This occurs when you take one fact or event and make a general rule about it. Say, for instance, that you attempted to use the problem solving skills learned in last week's session and were unsuccessful in your efforts. If you were to overgeneralise, you might think that you will never be able to use the skills successfully, or that they simply do not work.

#### **(2) Filtering**

This occurs when you focus on the negative things around you, and filter out all of those positive things that are happening. For instance, it is easy to fall into a cycle of only noticing poor behaviour, while failing to notice the positive things that your child does (e.g. following instructions straight away, showing affection toward a parent or sibling, playing quietly without having to be told). One other danger of filtering out your negative problems can be that they often appear worse and more numerous than they actually are.

#### **(3) All or Nothing Thinking**

This occurs when you lump things into absolute, black and white categories, with no middle ground. With this line of thinking, you have to be perfect, or you are

worthless. For instance, you may have been unsuccessful when dealing with a problem situation with your child. The all-or-nothing thinker would conclude that they are a failure as a parent, even if they had had some success in dealing with other problems during the week. The danger of this line of thinking is that given that no parent can be perfect all of the time, the minute you make a mistake, you must conclude that you are all bad.

We may also view others in “all-or-nothing” terms. For instance, we may conclude that because a child deliberately misbehaves on one occasion, that all of their behaviour must be deliberate and willful. We know that this is not true for children with ADHD, and in fact is not true for most children. This type of thinking can prevent us from generating realistic expectations about ourselves and others.

#### **(4) Self Blame**

This occurs when you consistently blame yourself for everything that happens around you, even those things that may not be your own fault. For instance, many parents of children with ADHD blame themselves for their children’s poor behaviours, despite the fact that we know parents do not cause ADHD. The danger of this line of thinking is that it can blind parents to their accomplishments and good qualities as parents.

#### **(5) Mind reading**

This occurs when you think that you know what everyone else is thinking, and may happen more often with people we know well (e.g. partners, family members, close friends). For instance, you may assume that someone does not like you when they pass you in the street without saying hello, when in fact they were in a hurry and did not see you.

### **CHALLENGING COGNITIVE ERRORS**

It is important to challenge our negative thoughts. We can search for more balanced alternatives by asking logical questions. The following questions may be useful to challenge errors and replace them with more helpful thoughts:

- \* What evidence is there for this thought?
- \* Am I confusing a thought with a fact?
- \* Do I really know what is happening in this situation?
- \* Am I being honest with myself? Is it possible I am denying the truth, or misplacing the blame?
- \* Are my information sources reliable? Is the information I am basing my thoughts on reliable and truthful?
- \* How would someone else feel about this situation?
- \* Am I thinking in all or nothing terms? “If I cant do this then I am a failure”

- \* Am I overestimating how bad a situation is? What would be so bad about this? Is this the worst thing that could happen today?
- \* How will things be in a few hours, a week, or a month or so from now? Try to put things in perspective.
- \* Am I overestimating the likelihood of an event? Is it really worth worrying about?

When challenging cognitive errors, rebuttals must be strong. Try to imagine your rebuttals spoken in a loud and forceful voice.

Rebuttals must be non-judgemental, Get rid of notions of right and wrong, concentrate on what is, not what should be. Be very exact in your statements, rather than exaggerating or minimising your concerns.

Be specific. Think in terms of specific behaviour, or a specific problem. Instead of saying “my child never behaves”, say “my child is not behaving at the moment, which is frustrating for me because I know s/he can behave better than this.

Seek balance. Include the positive as well as the negative.

Where possible, test out your new thoughts to see whether they are true.

## **COPING SELF-STATEMENTS**

When we are stressed out, it is not always easy to challenge our thoughts at the time. It may be useful to prepare some statements in advance to help you prepare to challenge the negative thoughts that are provoked by these difficult situations.

## **PREPARING FOR STRESSFUL SITUATIONS**

- \* What is it I have to do?
- \* I can develop a plan to deal with it.
- \* Just think about what I can do about it. That's better than getting stressed about the things I can't change.
- \* Just think rationally, try not to think negatively.
- \* Don't worry, worry doesn't help anything.

## **HANDLING STRESSFUL SITUATIONS**

- \* I can meet this challenge.
- \* One step at a time, I can handle this situation.
- \* Don't think about how stressed I am feeling. Stay focused. Just think about what I have to do.
- \* Relax, I'm in control. Take a slow deep breath. Good.

## **COPING WITH THE FEELING OF BEING OVERWHELMED**

- \* If I'm feeling overwhelmed, just take a deep breath and pause.
- \* Keep focused on the present, think about what is it I have to do.
- \* It is natural that I get stressed in these kinds of situations.

- \* I don't have to eliminate my stress totally, just keep it manageable.
- \* This will be over shortly.
- \* This isn't the worse thing that could happen.
- \* Just think about something else.

## **REINFORCING SELF STATEMENTS**

- \* It worked, I was able to do it.
- \* It wasn't as bad as I expected.
- \* I made more out of the fear than it was worth.
- \* I'm really pleased with the progress I am making.
- \* I did it!

The idea is to study the list until you become totally familiar with each of the statements, so that later on, when you are becoming stressed, you can use coping self-statements to challenge your negative thoughts automatically, even when the stress of a difficult situation is clouding your thinking.

It is a good idea to refresh your self-statement list from time to time, deleting old, or adding new statements. You can keep them available by copying them onto small cards to carry in your wallet, purse or pocket. This way if you are feeling stressed, your coping self-statements can serve as a reminder to recognise and challenge your negative thinking.

## **SESSION 6: COMMUNICATION SKILLS:**

### **REVIEW: COGNITIVE RESTRUCTURING**

Last time we began talking about how the way that we think about situations/events can influence how we respond to them, both in terms of our feelings and our behaviours.

Key points to remember:

- The way that we think about situations/events will influence how we respond to them, both in terms of how we feel and how we behave.
- Our initial reactions to situations are usually automatic, they pop into our heads and tell us what to think and feel. When we are under stress, these may reflect the negative feelings we are having at the time.
- Last week's session aimed to increase our awareness of these negative thoughts, and how they contribute to our stress.
- To help us with this, we identified some common negative thoughts (e.g. overgeneralisation, filtering, all-or-nothing thinking, self-blame, mind reading), which we sometimes engage in.
- By increasing our awareness of these types of negative thoughts, we can better challenge them. This takes time and practice.
- In the meantime, we discussed some coping self-statements to help us better cope with stressful situations and challenge our negative thoughts.

### **Review of Home Practice**

Last time we asked parents to think about three stressful situations/events and try to identify and challenge any negative thoughts that occurred.

- How did everyone go with this?
- Were they able to identify their negative thoughts?
- How did they go at challenging them?

This may be a difficult task, especially when we are not used to thinking about our thoughts. It also takes time and practice.

We also asked parents to keep using the coping self-statements that we made up during the last session.

- How did everyone go with these?
- What sort of effect did these have on your ability to cope with stressful situations?

Again, these will continue to become more effective with time and practice.

## **TODAY'S SESSION: COMMUNICATION SKILLS**

This session is going to be looking at the way we communicate with others, including our children, partners, family, and health and education professionals.

- Sometimes, especially when we are under stress, we find that we are not able to effectively communicate our needs and wants to others (e.g. getting children to do as they are told, obtaining support from partners and other family members, explaining your child's difficulties to his/her teacher).

- This can cause us to feel frustrated, and can result in negative interactions/bring us into conflict with other people.
- Furthermore, if we cannot effectively communicate our needs and wants to others, they are unlikely to be fulfilled/satisfied.
- By learning about effective ways to communicate our needs to others, we can experience more positive interactions with those people around us, increase the level of support that we receive from others (and the level of support that we can offer to others), while increasing the likelihood that our needs and wants will be satisfied.
- Improved communication skills will also reduce our experience of stress in these interactions.

## **OVERVIEW**

- Communicating effectively with children
- Giving effective commands
- Communicating effectively with others (e.g. partners, family members, education and health professionals)
- Communicating difficulties to others
- Listening to others

## **COMMUNICATING EFFECTIVELY WITH CHILDREN**



**EXERCISE:** What difficulties do parents have communicating to their children? (e.g. child won't listen, doesn't do as s/he is told, doesn't always understand what s/he has been asked to do). How does this make parents feel?

- These kinds of difficulties can prove stressful to parents, particularly when they have to repeat themselves over and over again in order to get their message across or get a job done.
- By improving the way that we communicate requests/commands to children, we can increase the likelihood that children will comply, and decrease the likelihood that we will become stressed.

## **GIVING EFFECTIVE COMMANDS TO CHILDREN**

**Exercise:** Poor Communication Example (mum asking child to do his/her homework).

Get parents to identify problems in mum's communication approach.

- (1) **MAKE SURE YOUR CHILD IS PAYING ATTENTION.** For instance, try to avoid giving instructions when the television, video or stereo is on. Your child may not listen to you when there is something more entertaining going on in the room. Either turn these distractions off, or ask your child to turn them off themselves before giving a command/making requests. Establish and maintain eye contact. Consider the time of day when you are issuing the instructions (e.g. it may be better to ask your child to tidy their room in the afternoon rather than in the morning when they are rushing to get to school.)

- (2) **TRY TO GIVE ONE COMMAND AT A TIME.** Most children are only able to follow one or two things at a time, so try to be specific, making only one request at a time. If the task being requested is complicated, break it down into smaller steps, requesting one small step at a time.
- (3) **TRY NOT TO PRESENT COMMANDS AS QUESTIONS OR FAVOURS.** State commands simply and directly in a serious tone of voice (this does not have to be negative).
- (4) **ASK THE CHILD TO REPEAT THE COMMAND.** This is especially important when you are not sure if your child has actually heard or understood your command. Also, for children with a short attention span, repeating commands may increase the likelihood that they will comply with your requests.
- (5) **MAKE SURE YOU MEAN IT.** Never give a command you do not intend to follow through to completion. Plan ahead on backing up your commands with appropriate consequences (positive or negative) to show you really mean what you have said (you may want to use your problem solving skills here). As soon as you have given a command or request and your child begins to comply, praise him/her for complying (i.e. be immediate).

EG: "I like it when you do as I ask"

"It's great when you get dressed in the morning when I ask"

"Thanks for making your bed when Mum asks"

"Look at how well you are doing your Home Practice..."

"Good boy for cleaning your room so nicely....."

Try to be specific about which aspects of the behaviour you appreciate. Also, try not to give back-handed compliments (e.g. "I like it much better when you do as I say the first time, and I don't have to ask you a million times"). Try to remain as positive as you can.

Often when we make requests, we go away and then return to see if they have been done. It is especially important that when a child does follow instructions, that whenever possible, you stay and attend, or return frequently to positively comment on their behaviour. This positive reinforcement may also double as a subtle reminder of what the child is supposed to be doing, and may increase the chance that your child will remain on task long enough to complete the task/request.

If your child does a job or chore without being told to do so, provide especially positive praise. You may even wish to provide a small privilege or treat for your child at these times. This may encourage your child to follow household rules and do household chores/jobs without being told to do so.

**Good Communication Example (mum asks child to do his/her homework)**

**COMMUNICATING EFFECTIVELY WITH OTHERS**

**EXERCISE:** Who do you have difficulties communicating with? (e.g. partners, family members, teachers). What is it that you are having difficulty communicating? How does this make you feel? How does this affect your ability to resolve difficulties/conflicts with others?

- When we are unable to effectively communicate to others we may have difficulty resolving problem situations, accessing support and resources, and maintaining positive relationships with others.
- This can lead us to feel frustrated, angry, misunderstood, and unsupported.
- We can aim to reduce our stress by improving the way that we communicate with others.

## **COMMUNICATING YOUR NEEDS TO OTHERS**

**EXERCISE:** Poor Communication (e.g. quiet voice, unassertive posture, little/no eye contact, nervous gestures, self-blaming remarks, poorly defined difficulties). Ask parents for their opinions on the effectiveness of the communication. How would that make them feel if someone approached them with this difficulty? What would they think about the other person?

**WHAT** The first step in successfully communicating your needs to others is to know exactly what they are. We are better able to resolve our difficulties if they are defined in clear and specific terms (e.g. see Problem Solving section). This way, other people will know exactly what we want/desire from them. Try to state your difficulties in positive terms and be goal oriented (i.e. what exactly is it that you hope to achieve by

communicating this problem to someone else?). It is probably best to try and approach one difficulty at a time.

**WHEN** The next step is to work out the best time to discuss the problem. Ideally, this should suit everyone involved and should not be done at rushed or chaotic times. If you do not feel that you are able to communicate your difficulties in a confident and constructive way, it may be better to leave it for another time.

**WHERE** If you have difficulty communicating to people face to face, you may want to have a script in front of you of what you want to say, and discuss it over the phone. If you do choose to speak to someone face to face, it may be possible to take the other person away from their usual setting (e.g. school) so that you can discuss your difficulties in a neutral place.

**HOW** The way in which we communicate our difficulties will greatly determine the response that we get from other people, and the likelihood that the problem will be resolved. It is important that we communicate difficulties so as not to blame or intimidate others, so that they do not become defensive, and reluctant to change.

- Maintain eye contact (shows you are confident and sincere), an assertive posture (head up, relaxed, no slouching), and a firm/confident tone of voice. Speak loud enough so that you can be heard, no whispering, but not so loud that you risk intimidating the other person.

- It is important that these non-verbal cues (e.g. posture, facial expression, tone of voice) match/are appropriate to what you are saying (e.g. it is inappropriate to deliver bad news with a smile)
- Be aware of how you would feel if were in the other person's position (you may want to role play what you are going to say in a mirror, tape record your requests, or ask someone else to listen while you communicate your difficulties and then ask them how you came across).
- Constructive criticism should reflect a concern or dislike for a person's behaviour (e.g. "you don't always listen when I am telling you about the problems I am having with the kids") and not label the person themselves (e.g. "you are a selfish person").
- We can reduce the blame that the other person feels by using "I" statements (e.g. "I feel frustrated when you don't help me put the kids to bed" is better than saying "you never do anything around here").
- Be on the lookout for overgeneralisations here (e.g. always, never, everyone, nobody).
- Make your point clearly, and then check if you have been understood.
- Enquire about any factors that may be affecting the other person's behaviour (e.g. teachers may be susceptible to personal problems too which could affect their responses to a child's behaviour). You may also want to admit your own difficulties with the problem (e.g. if you are discussing your child's classroom behaviour with your child's teacher, it may be useful to discuss similar difficulties that you are having at home).
- Explore the other person's point of view (watch out for tendencies to self blame here).

- Discuss strategies for change. Problem solve.

**EXERCISE:** Good Communication Example (e.g. maintaining eye contact, upright posture, firm tone of voice, well defined goal-oriented difficulties). Ask parents for their opinions of the effectiveness of this communication? How would they feel if someone approached them in this way?

## **BEING A GOOD LISTENER**

Communication is not always about saying what we think and feel. Effective communication is a two way process which also involves being a good listener. Listening does not merely involve “hearing” what the other person has said, but involves active participation on behalf of the listener. Listening can be broken into both verbal and non-verbal behaviours.

## **VERBAL-LISTENING**

**EXERCISE:** Give examples of negative verbal-listening (e.g. cross complaining, interrupting, finishing off sentences). How does this make parents feel when this is done to them? What sort of effects do these sort of behaviours have on their ability to resolve difficulties/problems with others? Ask parents to think about the kinds of negative verbal listening behaviours that they engage in.

- Listening is an essential part of effective communication.

- We are less likely to understand what others are trying to say to us if we talk at cross-purposes, interrupt them with our own opinions, and assume we know what they are going to say. We are also less likely to resolve our differences in this way.
- As important as it is to make sure that you get your own point across, it is also important to check that you fully understand what other people are trying to say to you. This can be difficult, particularly when we engage in negative thinking patterns (e.g. mind reading, filtering).
- It may be useful to try and paraphrase what we have heard (e.g. "It sounds like your saying..." or "I think ....") and check that you have understood what has been said (e.g. by asking "is that right?" or "is that what you meant?").
- That is not to say that you have to agree with everything you have heard. It is important however, to listen, understand, and acknowledge the feelings and opinions of others.

## **NON-VERBAL LISTENING**

Other people may also infer a lot about the way we think and feel through non-verbal means.

**EXERCISE:** Model negative non-verbal listening behaviour (e.g. looking away, shifting in chair, doodling) while a volunteer from the group talks about a neutral topic (e.g. how they spent their day). Ask parent how they felt (e.g. angry, sad, frustrated, ridiculed, hurt) and what they were thinking (e.g. she's not interested). What sort of negative non-verbal listening behaviours do other group members engage in when listening to other people?



**EXERCISE:** Model positive non-verbal listening (e.g. sitting forward, nodding, making eye-contact) while the same volunteer from the group talks about their neutral topic. Ask parent how they felt this time, and what thoughts were running through their mind. What sort of positive non-verbal listening behaviours do other group members engage in when talking to other people?

- Other people may infer a lot about the way that we think and feel about them from our non-verbal communication.
- It will be important to recognise our negative non-verbal behaviours, and practise positive behaviours so that we get the right message across (e.g. that we are interested).
- It may not always be possible to fully engage in positive non-verbal listening behaviours (e.g. if a family member is trying to tell us about their day while you are cooking tea), in which case you may have to tell them that you are interested in listening to them, but that you are going to continue cooking tea while you do.

**EXERCISE:** Break into small groups, and ask parents to think of some situations where they have had difficulty communicating their concerns/difficulties to others. Develop a plan to communicate concerns effectively and role-play this in group.

## **HOME PRACTICE**

Choose three situations where you have had difficulty communicating your concerns to others and develop a plan to communicate your concerns effectively. Role-play this with someone else/practice in front of a mirror/with a tape recorder to see how you come across, then put the plan into action.

**NEXT WEEK: Self-Care Skills**

## **Session Six: Communication Skills**

### **Cheat Sheet**

#### **REVIEW: Cognitive Restructuring**

- The way we think about situations/events influences our responses to those situations/events.
- Initial reactions are automatic.
- Aimed to increase awareness of negative thoughts and their contribution to stress.
- Identified common negative thoughts.
- Identification of negative thoughts means we can challenge them.
- Coping self statements

#### **Home Practice:**

- Identifying three stressful situations/events
- Using coping self statements

#### **TODAY'S SESSION: Communication Skills**

##### **The way we communicate with others**

- Sometimes, especially when under stress, we are not able to effectively communicate with others.
- This can cause frustration, negative interactions and conflict.
- Ineffective communication means that needs and wants will probably be unfulfilled.

- Increasing communication skills means increased positive interactions, level of support, that our needs and wants will be fulfilled and level of stress will be decreased.

## **Overview**

- Communicating with children, including effective commands.
- Communicating effectively with others.
- Communicating difficulties with others.
- Listening to others.

## **Communicating Effectively with Children**

### **EXERCISE: What problems do parents have in communicating with their children?**

Improving communication increases chance that requests and commands will be complied with.

## **Giving Effective Commands to Children**

- Make sure child is paying attention.
- Try to give one command at a time.
- Try not to present commands as requests or favours.
- Ask child to repeat command.
- Make sure you meant it.
- Remain with child while they comply
- Reward child for compliance

- When child does chore or job without being asked provide especially positive praise

## **Communicating Effectively with Others**

**EXERCISE: Who do you have difficulties communicating with? What do you have difficulties communicating? How does this make you feel? How does it affect your ability to resolve difficulties and conflicts?**

- The inability to communicate with others leads to difficulty resolving issues, accessing support and resources and maintaining positive relationships.
- This can lead us to feel frustrated, angry, misunderstood and unsupported.
- Improving communication with others can reduce our stress.

## **Communicating with Others**

### **EXERCISE: Poor communication**

**What:** Know what your needs are.

**When:** Work out the best time to discuss the problems

**Where:** Over the phone with a script? In a neutral place?

**How:**

- Non-verbal cues
- Non-verbal cues match the message being delivered.

- How would you feel in the other person's position?
- Try to focus on behaviour, not person.
- Reduce blame by using "I" statements.
- Watch for overgeneralisations
- Make point clearly; check that you have been understood.
- Enquire about other factors that may be affecting the other person's behaviour.
- Explore other person's point of view.
- Problem solve.

## **EXERCISE: Good Communication**

### **Being a Good Listener**

Listening can be broken down into verbal and non-verbal listening behaviour.

### **Verbal Listening**

## **EXERCISE: Examples of negative listening behaviour**

- Listening is an essential part of communication.
- We are less likely to understand others or resolve differences if we talk at cross-purposes, interrupt and make assumptions.
- Check that you fully understand others.
- Paraphrase what you have heard.
- You don't have to agree with everything the other person has said.

## **Non-verbal Listening**

**EXERCISE: Model negative non-verbal listening behaviour**

**EXERCISE: Model positive non-verbal listening behaviour**

- Others infer from our nonverbal behaviour.
- Important to recognise negative nonverbal behaviour and practice positive nonverbal behaviour.
- It is not always possible to engage in positive nonverbal listening behaviour.

**EXERCISE: In small groups ask parents to think of a situation where they have had difficulty communicating. Ask parents to develop a plan to communicate effectively and then role-play that plan.**

**Home Practice:** Choose three situations where there are communication difficulties.

Develop plan to communicate effectively. Role-play. Put into action.

**Next Week:** Self Care Skills

## **SESSION 7: SELF-CARE SKILLS**

### **REVIEW: COMMUNICATION SKILLS**

Last time we began talking about communication:

- \* how sometimes, especially when we are under stress, we find that we are not able to effectively communicate our thoughts, feelings, needs and wants to others (e.g. getting children to do as they are told, obtaining support from others, explaining your child's difficulties to school teachers, resolving problems/conflicts).
- \* This can cause us to feel frustrated, and can result in negative interactions with others.
- \* Furthermore, if we are unable to effectively communicate our needs, they may not be being met.
- \* Last time we looked at some ways to improve our communication with others, including
- \* giving effective commands to children
- \* improving the way that we communicate to others by defining what is we want to communicate, when and where we can best communicate our concerns, and thinking about the way in which we communicate to others (e.g. in terms of our body language, considering the other person's point of view), and how this can affect how receptive others will be to us.



- \* We also talked a little about communicating negative feedback and the importance of focusing on the behaviour rather than the person, owning our feelings, using I statements, and the need to watch out for overgeneralisation and blaming.
- \* We also talked about the importance of being a good listener, both in terms of our verbal behaviours (e.g. cross complaining, interrupting, finishing off other people's sentences) and non-verbal behaviours (e.g. attending, maintaining eye contact, sitting upright in a forward position to show we are interested).

## Homework

For homework we asked parents to try and record three situations where they have had difficulty communicating to another person(s) and then develop a plan to communicate their concerns effectively. How did everyone go with this? Any difficulties? Any successes?

## **TODAY'S SESSION: SELF CARE SKILLS**

Often in attending to the needs of those around us (e.g. children, partners, extended family, friends), we neglect our own needs. Parents who attend to their own needs will be better able to attend to those of others. Looking after ourselves is the first step in taking care of our families. Attending to your own needs will also help you to deal with stress.

## **OVERVIEW:**

- \* Time management
- \* Pleasant event scheduling
- \* Relaxation
- \* Nutrition
- \* Exercise
- \* Sleep

All of these may require problem solving skills.

## **TIME MANAGEMENT**

Time management involves finding the time to manage our time.

- \* Often it seems there are not enough hours in the day, and we feel it is impossible to get everything done that has to be done.
- \* It may also be difficult to find time to do those things you want to do, such as spending together as a family, time alone with partners, time with each of your children on a one-to-one basis, time with friends, or time to engage in interests outside of the home. We may also have difficulty finding time to spend alone.

- \* This can lead us to feel frustrated and overwhelmed, and may not use the time we have effectively or efficiently.
- \* Good time management skills can help us to strike a balance between these competing demands, and help us to reduce the stress in our lives.

The first thing you need to do is make time to manage your time (you may need to use Problem Solving skills here to find the time to do this). Every evening, or first thing in the morning, set aside time to plan the day ahead.

- (1) **SET GOALS** Decide what you would like to get out of your day. Be realistic about what you are able to achieve.
- (2) **MAKE A LIST** of the things that you think you *need* to do and the things that you *want* to do each day. Your commitments for each day should also include time for Time Management and time for yourself. By making a list we don't have to spend so much time trying to remember what it is we need/would like to do.
- (3) **PRIORITISE**

- \* What *must* be done today? What can wait?

- \* What do I *want* done today?

- \* What can I delegate? If I can, to whom? (e.g. practice shared parenting where possible. You may want to ask your partner, other family members, neighbours or friends to look after the children during specific times each week, and make the time to return the favour to them).
- \* Ask yourself what will happen if I don't do some things on the list? If nothing, can I take these things off my list?
- \* Challenge your negative thoughts. "What is the worst that can happen because that did not get done?" "It will probably still be there tomorrow".
- \* Try not to say that things "have" to get done, but say "it would be good if I could get that done today, If I do not, I will try again tomorrow".
- \* Be flexible – your demands may change as the day goes on.

- (4) Learn how to say no to those things which you do not have time for and which are not a priority for you. If you feel uncomfortable about a request, you should listen to your feelings and say no. This takes practice.

#### WAYS OF SAYING NO

- \* If you feel yourself hesitate when someone makes a request, this may indicate that you do not want to do it.

- \* Assert your right to ask for more information/clarification.
- \* Practice saying no. It is crucial to give a simple no rather than a long winded statement. It is enough to simply say that you don't want to.
- \* Learn to say no without saying that you are sorry.

**EXERCISE: Break parents into pairs, and ask them to practice making requests of each other and saying no.**

- (5) **ORDER** or sequence the tasks to be done. Find the sequence that suits you best. Some people find the day much more pleasurable if they start with a task they must do, and then follow it up with one that they want to do and enjoy. In this way they have something to look forward to and the unpleasant task doesn't play on their mind all day. Record your schedule in a diary/planner, on a list, whiteboard, etc. If you are inclined to lose lists, or forget to look at them, place little signs/cue cards around you (e.g. on the back of the door, in the car) to remind you.
- (6) **ONE THING AT TIME** Where possible, try to do one task at a time and try to finish what you start. Don't jump from one task to another leaving behind a stack of half-completed tasks. Having too many projects going at one time can lead to confusion, forgetfulness, and a sense that uncompleted projects are hanging over your head. This can cause us to feel overwhelmed, and can cause non-productive

or avoidant work habits. This also saves you having to repeatedly start the same tasks over again, and also means that unfinished tasks won't be playing on your mind and interfering with the task at hand.

(7) **RELAX** Don't rush immediately from one task to another. Plan brief breaks and time to relax, tea breaks, lunch breaks, and timeout for yourself. Everybody needs time out. This needs to be scheduled in.

(8) **REVIEW** your progress throughout the day. Tick off those things that you have accomplished/completed.

(9) **BEWARE OF PROCRASTINATION** Are you putting a task off because you are setting yourself too high a standard or because it seems too hard? Do you want to say no?

- \* Are you being unrealistic about what you could do?

- \* Could you do it now and get it out of the way?

Watch out for all-or-nothing-thinking (e.g. "If I can't do everything then I might as well do nothing").

(10) **PRAISE** yourself for the things you have achieved at the end of the day. If you didn't achieve everything on your list, don't be too hard on yourself. Consider all of those things you have achieved. Don't go to sleep thinking "I should have got that done". Keep in mind all of those things that you have successfully completed during the day.

**EXERCISE: Hand out the weekly schedules and have parents fill in their commitments for tomorrow. Include time for Time Management and time for self.**

### **PLEASANT EVENT SCHEDULING**

- \* Sometimes we get so busy doing the things that we have to do, that we do not take the time to do things that we want to do just for enjoyment.
- \* Taking the time to engage in events that are absorbing and enjoyable, can help to reduce our stress.
- \* Engaging in pleasant events need not be expensive, nor do they have to be time consuming (e.g. it may be taking ten minutes out of your day to read a good book, taking time to play games with your children/talk to your partner about his/her day, or taking a relaxing bath).
- \* At first, it may seem odd scheduling in times and events for people you live with and see everyday, but this can be especially rewarding if you don't currently find the time to engage in pleasant activities together, as is sometimes the case .
- \* Try to list some activities that you find pleasant and make sure that you put at least a couple of these into your daily schedule. You may also want to use some of the pleasant events suggested on the forms provided (see Handout).

**EXERCISE: Have parents select three pleasant events and schedule these into their**

**weekly schedule.**

## **RELAXATION TRAINING**

Many people use relaxation techniques to relax mentally and physically, and lower their overall stress level. Relaxation takes time and practise to master. There are several types of relaxation techniques available, including

- \* Progressive muscle relaxation. PMR involves tensing and releasing the muscles in different parts of the body. An important part of PMR training is to recognise the difference between being tense and being relaxed. If you are able to recognise that your body is getting tense, you are able to begin to relax it before the tension gets too severe, and beyond your control.
- \* Release only Relaxation. ROR makes use of the skills learned in PMR, but does not involve tensing. The basic idea is to direct suggestions of relaxation to each muscle group in turn.
- \* Body Scanning. This involves directing your attention to various areas of the body in search of tension. This skill can be used anywhere, anytime (e.g. waiting in a queue, stopping at a red light). The idea is to imagine various parts of your body and check them for tension, then apply relaxation skills to relieve the tension in those areas.



- \* Visualisation. This skill involves relaxing your body, clearing your mind of distractions, and imagining/visualising pleasant/relaxing scenes (e.g. a tropical island, cool forest, clear stream). This skill can be especially useful where we suffer from cognitive anxiety (as opposed to physical/muscular tension) as it occupies the mind and aims to exclude unpleasant/negative thoughts.

Many health professionals will have training in relaxation techniques. Relaxation books/cassettes may also be purchased from bookstores.

Ask parents to generate other ways of relaxing (e.g. massage, warm bath, shower, reading a book). Need to choose what works best for you. Will be different for each parent.

We are also better able to resist stress by eating well, exercising regularly, and getting adequate sleep.

## **NUTRITION**

Try to eat a healthy diet. Again, you may need to schedule the time to ensure that your diet is adequate, and to take the time to shop properly, cook and eat (particularly during the day when you are not having to attend to the nutritional needs of others, and perhaps are inclined to skip meals). Always schedule in mealtimes (maybe have a roster).

## **EXERCISE**

Regular exercise lessens stress, builds stamina and makes us generally more able to meet the demands of our day. Again, take the time to schedule this into your week. You may want to combine this with the time that you spend with partners, family members, or friends (e.g. spending twenty minutes going for a brisk walk together). You will benefit from as little as 20-30 minutes of exercise, three times a week. Ask parents to schedule in at least two exercise sessions during in their weekly schedules. Brainstorm when the best time to do this may be, who they could do it with, etc.

## **SLEEP**

Most people need 6-8 hours of full sleep to function at their best. Some people need more, some less. There are several things you can do to improve your sleep patterns if you are having difficulties:

- \* Try not overeat at dinner time. Eating requires the stomach to work, and sleep is a time for rest not work. Avoid late evening snacks.
- \* Try to limit your fluid intake during the two hours before sleep. The need to urinate during the night can stimulate disturbed dreams and early wakening. Try not to drink large quantities of alcohol in the evening. It is dehydrating and increases the frequency of urination.
- \* Sleep in a quiet environment, in a moderate temperature.
- \* Try to avoid stressing about the next day at bedtime. Planning ahead may help you to do this. Bed should be a place for sleep, not worry (this is an

important consideration if you are inclined to study, complete work, etc in your bedroom). If you are having difficulty controlling your negative thoughts at bedtime, get up from bed, and try to resolve your worry in another part of the house. Alternatively, place a notebook by the bed, write down your worries and place them aside until the morning. This way you can rest assured that you will not forget them.

- \* Try and rest during the daytime. Pause, let go and unwind. If you are having difficulty sleeping at night however, try not to take long naps during the day.

**EXERCISE: begin to fill in the Time Management schedule for each day this week, scheduling in your commitments, time for time management, and time for pleasant activities.**

## **HOMEWORK**

Construct a list of pleasant events/activities. Schedule at least two of these each day.

Continue filling in the weekly schedule.

## SELF-CARE SKILLS

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## **EXERCISE**

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## **SLEEP**

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- \* Try to limit your fluid intake during the two hours before sleep. The need to urinate during the night can stimulate disturbed dreams and early wakening. Try not to drink large quantities of alcohol in the evening. It is dehydrating and increases the frequency of urination.
- \* Sleep in a quiet environment, in a moderate temperature.
- \* Try to avoid stressing about the next day at bedtime. Planning ahead may help you to do this. Bed should be a place for sleep, not worry (this is an important consideration if you are inclined to study, complete work, etc in your bedroom). If you are having difficulty controlling your negative thoughts at bedtime, get up from bed, and try to resolve your worry in another part of the house. Alternatively, place a notebook by the bed, write down your worries and place them aside until the morning. This way you can rest assured that you will not forget them.
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## **Session Seven: Self-Care**

### **Cheat Sheet**

#### **REVIEW: Communication Skills**

- Sometimes, when under stress, we are not able to effectively communicate with others.
- This can cause frustration and negative interactions and may mean that our needs will not be met.
- Looked at ways to improve our communication
- giving effective commands to children
- Improving ways we communicate with others.
- Communicating negative feedback.
- The importance of being a good listener.

Homework

#### **TODAY'S SESSION: Self Care Skills**

When caring for others, often forget about self. Self care is first step in caring for others.

#### **Overview:**

- Time management
- Pleasant events scheduling
- Relaxation
- Nutrition



- Exercise
- Sleep

May require problem solving

## **Time Management**

Finding the time to manage our time.

- Not enough time to do everything.
- Not enough time to do what we want to do.
- This can lead to frustration and a sense of being overwhelmed.
- Good time management skills can strike a balance between competing demands and will reduce stress.
- Making time to manage time, plan the day ahead.
- Set goals
- Make a list of "need to do" and "want to do"
- Prioritise
- Learn to say "no". Ways of saying "no".

**EXERCISE: Parents practice making requests of each other and saying no to each other**

- Order tasks to be done in a way that suits you.
- Do one thing at a time.
- Relax, take time out.
- Review progress throughout the day.
- Beware of procrastination and why you're procrastinating.

- Praise yourself at the end of the day for practising time management successfully.

### **EXERCISE: Parents fill in their schedule for tomorrow**

#### **Pleasant Events Scheduling**

- We can get so busy doing things we have to do, we can't do things we enjoy.
- Doing things we enjoy can reduce our stress.
- Things we enjoy do not need to be expensive or time consuming.
- It may seem odd scheduling time for enjoyment, but it is rewarding.
- Try to list some of our pleasant activities.

### **EXERCISE: Parents select three pleasant events and schedule these into their week**

#### **Relaxation Training**

Relaxation techniques relax you mentally and physically and reduce overall stress.

Techniques take time and practice to master. There are several types available, including.

- Progressive muscle relaxation.
- Release on relaxation
- Body scanning
- Visualisation

Many health professionals are trained in techniques. Books/cassettes can be bought.

Ask parents to choose other ways of relaxing, choose best for them.

## **Nutrition**

Healthy diet can reduce stress. May need time to ensure diet is adequate.

## **Exercise**

Exercise lessens stress, builds stamina and makes us more able to meet the demands of the day. May need to schedule time for exercise. Can benefit from 20-30 mins exercise 3 times a week.

## **Sleep**

Most people need 6-8 hours sleep a night.

Ways to improve sleep patterns

- Try not to overeat at dinner
- Limit fluid intake before sleeping
- Sleep in quiet environment with moderate temperature.
- Avoid stressing in bed.
- Try to rest during the day, but not too much.

**Homework:** List pleasant events/activities, plan into week. Continue filling in schedule.

**Next Week:** Parenting Skills

## SESSION 8: PARENTING SKILLS

### REVIEW: SELF CARE SKILLS

Last time we discussed how often in attending to the needs of those around us (e.g. children, partners, extended family, friends), we neglect our own needs.

- \* Parents who attend to their own needs will be better able to attend to those of others.
- \* Attending to your own needs will also help you to deal with stress.

To help parents better attend to their own needs we discussed the importance of

- \* Time management
- \* Setting goals for the day
- \* Listing those things you need to do and those things you want to do
- \* Prioritising
- \* Deciding about the order in which tasks get done
- \* Trying to do one thing at a time
- \* Scheduling time into your day to take time out and relax
- \* Reviewing your progress throughout the day
- \* Thinking about whether we tend to procrastinate and why
- \* Praising yourself for those things you have achieved
- \* The importance of scheduling pleasant activities into your day

- \* Relaxation
- \* Progressive muscles relaxation
- \* Relax only relaxation
- \* Scanning
- \* Visualisation
- \* Nutrition
- \* Exercise
- \* Sleep

For homework, we asked parents to complete daily schedules of activities (including commitments, time for time management, pleasant events, and some exercise). How did everyone go with this?

## **TODAY'S SESSION: PARENTING SKILLS**

- \* Things we are going to talk about won't apply to everyone.

## **OVERVIEW**

- \* Behaviour principles

We will also be discussing behaviour management techniques for use with children under eight years of age. This will include providing information about:

- \* Attending

- \* Decreasing disruptive behaviour
- \* Token system of rewarding good behaviour
- \* Negative consequences for poor behaviour
- \* Time out

Finally we will be discussing suggestions for effective behaviour management with older children and adolescents. This will include:

- \* Understanding adolescent development and the impact of ADHD
- \* Developing realistic expectations
- \* Establishing household rules
- \* Monitoring and enforcing rules
- \* Communicating with teens
- \* Problem solving

## **BEHAVIOUR PRINCIPLES**

These will apply to all kids, not just children with ADHD.

- (1) Make consequences immediate. The sooner feedback is provided (both positive and negative), the more effective it will be.
- (2) Make consequences specific. State expressly and specifically what it is that you like/dislike about your child's behaviour (and not the child).

- (3) Give feedback frequently. Rewards need to be more frequent when dealing with children with ADHD.
- (4) Make consequences consistent across settings, over time, and between parents/family members.
- (5) Provide incentives for good behaviour. Children with ADHD need both rewards and negative consequences/punishment for their behaviour. Punishment, when used alone, or in the absence of ongoing rewards/positive feedback is not very effective at changing behaviour. Children with ADHD may also require more powerful incentives than other children to encourage them to complete work, follow rules, or behave well. These incentives can include hugs, praise, privileges, special snacks or treats, tokens or points, and even occasionally money (it is important that incentives be sustainable in terms of the demands they place on your time, finances, etc).
- (6) Anticipate and plan for misbehaviour before it occurs.
- (7) Share in the problem

## **BEHAVIOUR MANAGEMENT TECHNIQUES FOR YOUNG CHILDREN**

Behaviour management is hard work and requires time, parents need to stick with it. The suggestions below are suited for use with children between 2 and 8 years of age, and are designed for use with children with behaviour problems. However, these have not been designed for use with children with ADHD specifically. The techniques we are going to

talk about tonight aim to help parents better deal with disruptive and difficult behaviour, but do not attempt to resolve them entirely. If your child also has severe/additional or comorbid behavioural difficulties (e.g. ODD, CD) you may benefit from professional help.

We are going to briefly go over several techniques so parents can begin to get an idea of what might be involved in a general child behaviour management programme. In practice, each of the suggestions below should take at least one week to implement and practice. This makes sense when you consider that your child has probably taken months, even years to develop his/her current behaviour patterns.

Setting up a behaviour management programme requires some serious thought (e.g. which behaviours do you want to target, which behaviour management techniques are you able to sustain in terms of time, demands placed in offering reinforcements/providing negative consequences for poor behaviour, etc).

There are several good self help books available which offer more information on these techniques

e.g. Forehand, R. & Long, (1997) Helping the strong willed child.

Wallace, I. (1996) You and your ADHD child – practical strategies for dealing with everyday problems. Harper Collins, Sydney.



Each of the suggestions below builds on the previous one. Such programmes aim to first teach parents to encourage and provide incentives for good behaviour, and then deal with negative behaviours. It is important not to skip straight on to punishments.

## **ATTENDING**

**GOAL:** To lay the groundwork for a more positive relationship between you and your child, by seeing and focusing on your child's positive behaviour.

**AIM:** To learn to “tune in” to your child's positive behaviours and let him/her know that you are really interested in the positive things he/she does.

**WHY:** Often when faced with the challenge of parenting challenging children, we can fall into a cycle of only noticing poor behaviour. This means we may not give as much positive feedback and warmth as we would like to give to our kids. Children are sometimes aware of this and may keep behaving poorly as result, making you – the parent – feel worse about them and their behaviour. By “tuning in” to your child's good behaviour, you can begin to break this cycle, and begin to work on a more positive parent-child relationship. This means that your child will not only be happier, but may also be more willing to cooperate with you, as a parent.

## **PLAN:**

(1) Set aside 20 minutes at the same time each day to be used for “special time” with your child. Choose a time when you will be most attentive – preferably not times when you are busy, when you have chores to do, or when you may be called away

(you may need to use your Problem Solving and Time Management skills to find the time to do this).

- (2) This time is exclusively for you and your child. Other children should be placed under the care of the other parent, (or perhaps an older sibling) at this time. If possible, “special times” might even be held after your child’s brothers and sisters have gone to bed.
- (3) Each day, alert your child when it is that “special time” again. Let your child choose a game or activity they would like to share with you - within reason (watching television should not be included).
- (4) Now relax. Watch your child for a few minutes – join in. Imitating your child’s play shows you are interested and approving, and also teaches your child to play with others.
- (5) After a few minutes, describe out loud what your child is doing. Try to be enthusiastic. This should sound something like a sports commentary of the child’s behaviour. You may need to practice this skill with your partner/other family members first.
- (6) Try to avoid asking questions or giving commands (unless you are unsure of what the child is doing). This is a time for you and your child to relax and enjoy one another’s company.

(7) Praise your child for those things you like about his/her behaviour. Try to be honest.

(8) If your child misbehaves, turn away and look somewhere else for a few moments. If this carries on, tell your child that the playtime is over and leave the room. Inform your child that you may play together later if he/she can behave nicely. If your child continues to misbehave, use your usual form of discipline/punishment.

During this first week, try to make time for “special playtime” every day. This may be reduced to three to four times the following week, and should continue indefinitely.

### **SOME HINTS:**

- (1) Always give approval as soon as possible.
- (2) Try to be specific about the behaviours you like.
- (3) Try to avoid backhanded compliments (e.g. “It’s great when you play nicely. Why can’t you play like this all of the time”).
- (4) Be patient.
- (5) Finally, reward yourself for your efforts, it’s not easy, so you deserve it!

### **DECREASING DISRUPTIVENESS**

**GOAL:** To decrease disruptions by increasing your child's independent play (again this is probably more suited to younger children).

**AIM:** To extend attending skills to instances of independent play.

**WHY:** Parents often remark that they are unable to do certain things, such as talk on the telephone, cook dinner, talk to their partner and so on, without being interrupted by their child. Often we pay a lot of attention to these interruptions, which perhaps encourages this sort of disruptive behaviour. Furthermore, often we don't pay any attention when the child plays quietly without interruption (especially if we are worried about "rocking the boat"). It follows, by encouraging and rewarding independent play, we may be able to decrease disruptions and have more time to do the things we need (and want) to do.

**PLAN:** Choose a task or activity (e.g. cooking dinner) with which you can practise the following skills.

- (1) When you are about to do something (e.g. cooking dinner, making a phone call) you will want to tell your child two things. Firstly, tell him/her that you are about to do something on your own, and that you would like him/her to do something specific (e.g. watch television, play with his/her Lego) while you are busy. This should not be a chore, but something that the child enjoys doing - within reason. Secondly, tell him/her that you do not want to be interrupted (Hint: use those skills learnt in the communication session for giving effective commands).
- (2) After you have begun your task or activity, take time out to stop and praise your child for not interrupting. Next, remind the child to keep at their assigned activity and not to interrupt you.

- (3) Return to your task. After a few moments, return to your child and praise them again for their play (i.e. repeat step 2) before returning to your own task. Wait a little while longer this time, then praise your child again.
- (4) Over time, you will be able to decrease the number of times you will have to praise your child for not interrupting you and thus increase the amount of time you can stay at your own task. To start with, you will want to offer praise often (say every 30 seconds), however, after a few times, you will be able to wait several minutes before praising your child. Each time, try to stay at your own task for a longer amount of time before going back to offer praise.
- (5) If your child looks as if your child is going to interrupt you, quickly stop what you are doing and praise your child for not interrupting. Remind them that you are busy, and that they are to continue doing the task or activity you asked them to do.
- (6) As soon as you have finished your task (e.g. cooking dinner) give your child some special praise for letting you finish what you had to do. You may offer some small reward here if you want.

## WHEN PRAISE IS NOT ENOUGH

**GOAL:** To further increase compliance to parental requests.

**AIM:** To establish a formal system for rewarding your child's good behaviours.

**WHY:** As you have learnt, your attention and praise can be an effective reward for managing your child's behaviour. However, sometimes praise is not enough and a more powerful reward (or reinforcer) is needed. The "poker chip" program is one such reinforcer. The program works in a similar fashion to the way money works. Specifically, your child can "earn" poker chips for good behaviour, which can be exchanged for a variety of rewards or privileges. Such programs are a convenient way of reinforcing your child's behaviours as you can dispense rewards immediately, in any situation. This is important given that we know that children with ADHD benefit most from immediate gratification. The program can also be tailored to suit individual family's (e.g. the amount of tangible reinforcers/time available). Also, because the poker chips can be exchanged for a variety of rewards, they will continue to provide a good incentive for good behaviour and your child will be less likely to get bored. Furthermore, this program will further encourage you to "tune in" to and reward your child's good behaviours (which we sometimes overlook).

**PLAN:**

- (1) Find a set of plastic poker chips, checkers, buttons or some other durable, small items which can be used as tokens. Try to get three different coloured chips, which can denote different values. Take one of each colour and tape them to a piece of cardboard and place it in a location which is clearly visible to the child (e.g. the fridge). On each chip, write the value of the chip (e.g. 1, 5, 10 points).

- (2) Take some time and explain to your child that you really want to provide some even greater rewards because he/she has been so good at home lately. Try to be positive and enthusiastic when presenting this to your child (the focus here is on his good behaviours only). Tell him/her that you want to set up some new rewards so that your child can earn nice things for behaving properly.
- (3) Next, make a "bank" for your child's chips to be kept in (e.g. from a shoebox or an old jar). Have some fun decorating it with your child.
- (4) Now, you and your child should make a list of privileges that the child enjoys (e.g. watching television or videos, riding a bike, staying with a friend, having a favourite desert after dinner). These do not have to be costly (remember, your child values your attention - perhaps you may do something together as a reward). Try to think of at least 10-15 things. About one third of these should be available for the child on a day to day basis (e.g. watching television, playing with a parent). Another third should be mid-term goals that require several days of earnings (playing with a friend). Finally, the remainder should be highly desired, long term privileges (e.g. going out for a treat, buying a toy) which the child will have to save for over several days or weeks. (NOTE: these should not include privileges such as meals, clothing, or basic needs).
- (5) Now, make up a second list containing the jobs and chores you often ask your child to do. These can be household chores like setting the table, picking up toys, tidying the lounge. You can also include things like getting ready for bed, sharing toys with others, brushing teeth, or any other requests that usually cause a problem. You may

also include social behaviours such as not hitting, yelling, etc. Bonus chips may also be offered if the child does his/her chores in a prompt and pleasant manner (these do not have to be paid every time however, and should be reserved for extra good behaviours).

- (6) Next, take each job or chore and decide how much it is worth in chips. Use a range of about 1-10 chips, giving more chips to harder jobs and requests that have previously been quite problematic (e.g. going to bed).
- (7) Inform your child that chips will only be given for jobs that are done on the first request. If you have to repeat a command, the child will not receive any chips for doing it.
- (8) To begin with, try to be alert for any opportunities to reward your child. Give away chips for even the smallest of good behaviours, even if they are not on the job list.

**IMPORTANT NOTE:** Do not take chips away for poor behaviour. Chips are only to be used as rewards at this stage and are not to be taken away as a punishment. Your child may otherwise lose interest in the program before they become motivated enough for it to be successful.

### **SOME HINTS:**

- (1) Being generous with chips during the first week or so will greatly enhance your child's desire to take part in the program. Children should be rewarded for even the



simplest of good behaviours to begin with in order to show them how easy it is to earn chips.

- (2) Chips are to be given only after a request has been completed, and may only be exchanged for rewards once the amount specified on the reward list is met.
- (3) Administer chips in a positive and enthusiastic manner, detailing exactly which behaviour is being rewarded (i.e. be specific). When chips are exchanged by the child for a reward, the child is to take them from the bank and pay them to the parent.
- (4) If there are two parents in the home, both parents are encouraged to award chips to their child.
- (5) Reward any sort of good behaviour - even if it is not on the list. You may also want to reward your child for independent play when you are busy.
- (6) Every few weeks, review the reward list with your child to see if new ones should be added or others dropped because they are never requested by the child. In addition, new jobs and chores may be added to the job list.

After a couple of weeks, you may begin to introduce the use of fines into the poker chip program as a punishment for non-compliance and unacceptable behaviour.

**PLAN:**

- (1) When fining your child, deduct the same amount that would have been awarded if the child had complied with your request. For instance, if the child usually receives two chips for making his/her bed, a failure to do so will result in a deduction of two chips from his/her bank.
- (2) You may wish to add a list of poor or undesirable behaviours to your list (e.g. aggression, hitting, swearing) to which your child is aware. Remember, the more severe the behaviour, the greater the penalty.

**NOTE:** Children may respond to fines with anger, tantrums and so on. Some parents may wish to fine these reactions, however, this may further provoke a negative reaction or "punishment spiral", where the child may end up being fined more chips than he/she can ever hope to earn, and lose motivation in the program. As such, the child should only be fined once, then the usual methods of discipline should be implemented.

## ***NEGATIVE CONSEQUENCES***

**GOAL:** To deal effectively with problem behaviour and non-compliance.

**AIM:** To review negative consequences as a punishment for selected misbehaviours.

**WHY:** To date, we have learnt the importance of both attending and more tangible reinforcers (e.g. the "poker chip" program) in encouraging good behaviours.

Nevertheless, problem behaviours will still arise from time to time, so we should also be prepared to deal with these.

It is vital that you never give a command that you do not intend to back up with consequences to make sure that the job gets done. It is important to be specific about which behaviours you want to target. It is also best to deliver negative consequences early in the sequence of misbehaviour, before the child gets too far out of control. The choice of consequence will depend on the nature, frequency and severity of the misbehaviour. Listed below are some possible negative consequences. It is important that the child is informed of these in advance.

- \* Withdrawing attention/planned ignoring. This is useful if we are inclined to (inadvertently) reinforce negative behaviours by paying attention to them.
- \* Reprimands (these should be immediate and brief, and should be specific to the child's behaviour – not the child). Discussing misbehaviour publically is best avoided to reduce the chance of giving it status. It will also reduce the likelihood of lowering the child's self esteem or making him/her a scapegoat in the future.
- \* Response cost (recommended for children five years and upwards). This may involve a loss of tokens if you are using the token system, or a loss of privileges.

It may be useful to use your Problem Solving skills to decide which negative consequences are appropriate and will be effective with your child. It is important to anticipate problem behaviours and plan your responses.

## **TIME OUT**

For serious types of non-compliance/rule violations (e.g. repeated non-compliance, tantrum behaviours, hitting, swearing) Time Out may be used.

### **PLAN:**

- (1) Always give your first command in a firm but pleasant voice. Try not to ask it as a favour or yell at the child (see Communication session handout on Giving Effective Commands). Make it a simple, direct statement to the child in a businesslike tone of voice.
- (2) After you have given the command, count to five to yourself. Do not count aloud, as the child will eventually rely on this counting in learning when to comply to a command.
- (3) If the child has not made a move to comply within these five seconds, you should make direct eye contact, raise your voice to a slightly louder level, adopt a firm posture and stance and say  
  
"If you don't (do what I asked - be specific) then you are going to sit in the chair/take a time out (point to a chair placed in the corner for this purpose)".
- (4) Once you give this warning, count to five again.
- (5) If the child has not started to comply within this time, then say

"Because you did not ..... (be specific), you have to take a time out"

You should say this loudly and firmly and take the child to the time out chair. The child is to go to the chair immediately, regardless of any promises he or she may make. The child is not to go the bathroom, get a drink, or stand and argue with the parent.

- (6) Place the child in the chair and wait until s/he is quiet. Set a timer and tell the child they are to stay in time out until the timer sounds. For older children, you may say

"You are to stay there for .... minutes".

Some parents choose to tell their child that they will halve the initial sentence if the child is immediately compliant and quiet. Other parents may choose to tell their children that they will add on time if the child does not settle. It is really up to the individual parent as to what works best for you. Whatever you decide, it is really important that the child is not released from Time Out until s/he is quiet.

- (7) Do not argue with the child while he or she is in time out. No one else (e.g. siblings) is to talk to the child during this time. Instead you should go back to doing your previous work but be sure to keep an eye on what the child is doing in the chair. When the child has served the appropriate time then return to the child and say

"Are you ready to do as I asked?"

If the child did say something he or she can not correct, such as swear or hit, the child is released from Time Out after the parent has explained why that behaviour is unacceptable.

(8) At this point, if the child was placed in Time Out for non-compliant behaviour, the child is to go do what he/she was told to do before Time Out. If the child refuses to do as s/he is told, then the child must serve another “sentence” in the Time Out chair (i.e. repeat steps 5-7) until the child complies to the request. It is perhaps wise to place a maximum sentence (e.g. thirty minutes) if the child fails to comply to the initial request.

(9) Watch for the next appropriate behaviour by your child, and praise it. This ensures that the child knows that you are not angry at him/her but at what the child did/their behaviour.

### **WHAT IF THE CHILD LEAVES THE CHAIR WITHOUT PERMISSION?**

Many children will test their parent's authority when time out is first used. They will try to escape from the chair before time is up. Parents may choose to begin timing only when the child is seated, use response cost (e.g. fining the child), remove privileges, or ground the child if s/he leaves the Time out chair. Using an adult size chair with smaller children may prevent them from getting out of the chair easily, or shifting the chair while they are seated in it.

## **WHERE SHOULD THE CHAIR BE PLACED?**

The chair should be a straight backed, dinette-style chair. It should be placed in a corner far enough away from the wall that the child can not kick the wall while in the chair.

There should be no play objects nearby, and the child should not be able to watch television from the chair. Most parents use a corner of the kitchen, laundry room, a hallway, or a corner of a living room, not occupied by others. The location should be such that parents can observe that the child is safe while they continue about their business. Do not use bathrooms, closets or the child's bedroom.

## **WHAT TO EXPECT**

If your child follows the typical pattern of most behaviour problem children, you can expect he/she will become quite upset when first sent to time out. Children may become quite angry or vocal while in time out or may cry because their feelings have been hurt. For many children, this prolonged tantrum or crying results in their having to remain in time out well beyond their minimum sentence because they are not yet quiet. However, with each use of time out, you will find your child becoming much quieter much sooner. Eventually the child will become quiet for most of the minimum sentence, and will agree to do what was asked immediately thereafter. You will also find that your child will begin to obey your first commands, or at least your warnings about time out, so that the frequency of time out eventually decreases. However, this may take several weeks to achieve.

## **PARENTING ADOLESCENTS**

The normal challenges of adolescence can be magnified dramatically for children with ADHD. ADHD teens may be faced with academic failure, social isolation, depression, and low self esteem, to name but a few. They may continue to have difficulty completing schoolwork and homework tasks, following household rules and complying to parental requests (e.g. to do chores), choosing appropriate friends and suitable places to socialise, respecting the rights of others, conducting themselves responsibly while away from home (e.g. in terms of alcohol use, drug use, or sexual activity), and keeping to curfews. There are several steps we can follow to help prepare your teen for this developmental period, and help you as a parent to cope with it.

### **1. UNDERSTANDING ADOLESCENT DEVELOPMENT AND ADHD**

ADHD teens undergo the same major changes into physical maturity and face the same challenges as all teenagers. Yet they may lack the emotional and social maturity of their teenage counterparts. They may still desire independence as much as the next teen, but be less ready to assume the responsibilities that this kind of independence involves. That is not to say, that we should excuse the behaviours of adolescents with ADHD, but rather that we need to understand and help the adolescent to meet the demands and responsibilities of this developmental period.

As we discussed in our Education session, in a majority of cases, there will be some improvements in inattentiveness, impulsiveness and hyperactivity as the ADHD child matures. However, their ability to organise, plan and control their behaviour will still be



slower to emerge, and be less mature in ADHD children. This can create difficulties where

- \* Inattentive behaviour prevents ADHD teens from sticking to agreements made with parents (e.g. with curfews)
- \* Impulsive behaviour makes them moody, unable to tolerate frustration, or consider consequences, which can lead to explosive outbursts, frequent arguments, escalation of conflicts, and even physical confrontations with parents.
- \* Fidgeting/restlessness is interpreted as a sign of disrespect and disinterest, contributing to hostile and ineffective communication.

It is important that we attempt to fully understand adolescent development and the impact of ADHD on it. To help us do this, we can use those skills learned in our Cognitive Restructuring session to establish realistic expectations for our ADHD teens, and generate statements to help us cope with this transition from childhood to young adulthood.

## **2. DEVELOPING REALISTIC EXPECTATIONS**

- \* Try to set realistic expectations for your child (watch out for all-or-nothing thinking). Do we expect a perfect academic record, and complete obedience to parental requests? What is the worst that will happen if your child does not complete his homework? Does your adolescent's lack of obedience when you ask to him/her to clean his room, mean that they s/he will always defy authority, come into conflict with others, and end up in serious trouble?

- \* Try not to expect the worst in every instance. For example, if your child is allowed to go out late, or without supervision, this will not necessarily lead to a life of drug and alcohol abuse. We also need to be realistic about our fears, and try to project a sense of trust. Adolescents will pick up on any mistrust you may have, and feel compelled to do those things that you fear most, especially if they believe that you think they are being done anyway.
  
- \* Consider whether your child is purposely trying to annoy you, or whether they simply have not considered the consequences/impact of their behaviour on those around them (e.g. did your child come home beyond their curfew to deliberately defy you, or did they forget to attend to the time?). If we think back to our session on Cognitive Restructuring, we will remember that it is not just events/situations that cause us to feel stressed, but the way in which we think about them which influences our feelings and behaviours. If we think that we have been deliberately defied, we will likely be frustrated and angry. It will also be important here that we do not assume that we know why adolescents behave the way they do, but rather ask.

### **3. ESTABLISHING HOUSE RULES**

- \* Where possible involve your teenager in the decision making/problem solving process. If your adolescent sees and takes part in the decision making, they will be much more likely to adhere to the decisions made. This also teaches your teen an important skill for resolving difficulties later in life.

- \* This does not mean that all family issues are negotiable in this way (e.g. regarding alcohol or drug use, smoking, curfews, respect for others, etc). Constructing a list of family rules can be helpful. You should discuss these rules with your teen, and give reasons for them. These rules should then be posted some where (e.g. on the fridge) and the teen reminded of them often (e.g. before going out with friends).

#### **4. MONITORING AND ENFORCING RULES**

- \* Where there are two parents in the home, consistency between parents is of the utmost importance (especially if the adolescent thinks that s/he can overthrow a decision by appealing to the other parent). Communication between parents is particularly important here.
- \* Strike a balance between respecting your child's right for privacy and your right to monitor their behaviour.
- \* Positive and negative consequences can help here (e.g. for meeting curfews). These are similar to the techniques that we use with younger children, but will reflect the age of the child (e.g. privileges may include use of the family car with older teens).

#### **5. COMMUNICATION**

- \* Parents of teenagers may feel that they are constantly engaging in endless lectures with their teen, who often responds by switching off, giving the silent treatment, or behaving in a hostile or aggressive manner.

- \* Be aware of your own communication habits, and consider whether there is room for improvement. Discuss with your teen how ineffective these modes of communication are. Begin by sharing some of your own bad communication habits, and point out how you will try to change these the next time you discuss a problem together. Try to point out more positive alternatives (see Negative Communication Habits handout for some suggestions). Role play these new communication styles. It is important to note that you are not urging your teen to suppress his/her feelings or hide anger. We are trying to find ways to express feelings and concerns without offending/hurting others. Make a deal to work on one or two communication skills at a time. Praise your teen for his/her efforts.

## **6. PROBLEM SOLVING**

- \* Teach and involve your teen in the problem solving process.
- \* Choose your battles carefully. Decide what to take a stand on and what to ignore. Consider the impact of your child's inattentiveness, impulsivity and hyperactivity on their behaviour. Be realistic.
- \* Be aware if your teen is having problems paying attention to important parts of the discussion. Keep your teen involved by
  - \* Keeping comments brief and to the point
  - \* Asking for the teen's opinion wherever possible

- \* Discussing issues in a positive, constructive and enthusiastic manner
- \* Praising your teen for his/her involvement
  
- \* Some teens may not fully understand the problem solving process, nor will they be ready emotionally or developmentally to assume responsibility for coming up with options or negotiating solutions. In this case, you may wish to problem solve without your teen, and set aside time to discuss your decisions. Alternatively, you may wish to generate a list of solutions, evaluate and select the best ones, and have your child vote on the most preferred one.
  
- \* If you are having real difficulty problem solving with your child (e.g. where one parent also has ADHD), you may wish to enlist professional help (e.g. psychologist, social worker) to assist.

## **NEGATIVE COMMUNICATION HABITS**

### **Negative habits**

Calling each other names

Putting each other down

Interrupting

Criticising

Becoming defensive when attacked

Giving a lecture, using big words

Looking away from the speaker

Slouching, looking disinterested

Using sarcasm

Getting off the topic

Thinking the worst

Dredging up the past

Reading each other's mind

Commanding

Giving the silent treatment

Throwing tantrums

Making light of someone else's problem

Denying you did it

Nagging about small mistakes

### **Positive ways of saying it**

Expressing anger without hurtful words

"I feel angry that you ...."

Taking turns, keeping it short

Pointing out the good and the bad

Listening carefully and checking what you heard, then calmly disagreeing

Telling it straight

Maintaining eye contact

Sitting up and looking attentive

Using a normal, positive tone of voice

Finishing one topic before moving to the next

Try not to jump to conclusions, keep an open mind

Stick to the present

Ask what the other is thinking

Ask nicely

Say it if you feel it

Count to ten, leave the room, relax

Take it seriously, even if it is not important to you

Be honest, admit what you have done

No one is perfect, overlook those things that don't really matter

# **Session Eight: Parenting Skills**

## **Cheat Sheet**

### **REVIEW: Self Care Skills**

Attending to own needs makes you better able to attend to other's needs and reduces stress.

- Time Management
- Pleasant Events scheduling
- Relaxation
- Nutrition
- Exercise
- Sleep

### **Homework**

### **TODAY'S SESSION: Parenting Skills**

#### **Overview:**

- Behaviour Principles
- Behaviour Management Techniques for Young Children
  - Attending
  - Decreasing disruptive behaviour
  - Token systems of reward
  - Negative consequences for poor behaviour
  - Time out
- Behaviour Management Techniques for Older Children and Adolescents

- Understanding adolescent development and the impact of ADHD
- Developing realistic expectations
- Household rules
- Monitoring and enforcing rules
- Communication
- Problem solving

### **Behaviour Principles**

- Make consequences immediate, specific, consistent
- Give feedback frequently
- Provide incentives for good behaviour
- Anticipate and plan for poor behaviour
- Share the problem

### **Behaviour Management Techniques for Young Children**

These techniques work best with children aged 2 to 8. Not specifically designed for children with ADHD, but for children with disruptive/difficult behaviour. Will not solve all difficulties. May benefit from professional help.

Each suggestion takes at least one week to implement.

Behaviour management programmes take serious thought.



Several self - help books available.

Each suggestion builds on previous one. Encourage good behaviour first, then focus on punishments.

## **Attending**

Goal: groundwork for positive relationship through focusing on positive

Aim: "tune in" to child's positive behaviour

Why: A cycle of only noticing poor behaviour means child does not get enough positive feedback. Need to break cycle.

Plan: Special Time. Watch child, join in, describe child's behaviour. Avoid commands/questions. Praise child. Ignore bad behaviour

Initially, will need Special Time each day, this will decrease but continue indefinitely

Hints: Give immediate, frequent approval

Be specific, avoid backhanded compliments

Be patient

Reward yourself.

## **Decreasing Disruptiveness**

Goal: decrease disruptions by increasing child's independent play.

Aim: Extend attending skills to independent play.

Why: Parents inability to do things on their own. By encouraging independent play, will decrease disruptions

Plan: Choose task. Tell child 2 things (1) you're doing something on your own and give them something to do (2) you do not want to be interrupted. Start task, take time out to praise child for not interrupting. You will need to do this frequently at first, then less frequently. If child looks like they'll interrupt you, stop and praise them for not interrupting. Give child special praise when you have finished your task.

## **When Praise is Not Enough**

Goal: to increase compliance

Aim: Establish a formal system of rewards.

Why: Sometimes praise is not enough and token rewards are needed.

Plan: Find tokens and give them value. Explain reward system to child. Make a bank for child's tokens. You and child list privileges (10-15) for short-, mid-, long-term. You and child list jobs/chores/behaviours. Assign value to these. When command is complied with

first time, child receives token. To start with, be alert for opportunities to reward child.

Do not take tokens away for poor behaviours.

Hints: Be generous with chips in first week.

Chips given when task is completed and exchanged when amount specified is met.

Administer chips in a positive enthusiastic manner, be specific.

Involve both parents.

Reward all good behaviours

Review reward list with child every few weeks.

May introduce fines as punishment after a few weeks.

Plan: In fining, use same values for jobs/chores. Add poor behaviours. Avoid "punishment spiral", fine child once, then use other methods of punishment.

## **Negative Consequences**

Goal: Deal with problem behaviour and non-compliance

Aim: negative consequences as punishment

Why: Problem behaviours will arise and we need to be ready to deal with them.

Never give a command you won't follow up on. Be specific about target behaviours.

Deliver negative consequences early in sequence of behaviours. Consequence of behaviour will depend on nature, frequency and severity of behaviour.

Possible negative consequences.

- Withdrawing attention/planned ignoring.
- Reprimands.
- Response cost.

Use problem solving skills

## **Time Out**

For serious rule violations/non-compliance

Plan: Give first command. Count to five. If child has not complied give command again and threaten Time Out. Count to five. If child has not complied, take them to Time Out and say why. Wait until child is quiet and set timer. Once time is up, ask if child is ready to comply or explain to child why behaviour is wrong. If child is still non-compliant repeat Time Out. Praise child for next appropriate behaviour.

If child leaves chair without permission: time only when child is seated, response cost, remove privileges, ground.

Where should chair be: straight backed dinette style chair. In corner, far enough away from wall. No toys/TV. Parents can see child is safe.

What to expect: Child will be upset at first. Eventually, child becomes quieter quicker and will do as asked after Time Out. Frequency of Time Out will decrease.

## **Parenting Adolescents**

With adolescents with ADHD the normal challenges of adolescents are magnified.

### **UNDERSTANDING ADOLESCENT DEVELOPMENT AND ADHD**

Teens with ADHD may lack the emotional and social maturity of others and be less prepared to face the challenges of adolescence. But should not excuse their behaviour. Should show improvements but, may have problems with organising, planning and controlling behaviour. This can create problems. Need to understand adolescent development and set realistic expectations.

### **DEVELOPING REALISTIC EXPECTATIONS**

- Set realistic expectations for adolescent, avoid all or nothing thinking.
- Try not to expect worst in every situation.
- Is teen deliberately disobeying or have they not considered consequences of their behaviour.

### **ESTABLISHING HOUSE RULES**

- Involve teen in decision making/problem solving.
- However, may need list of family rules.

### **MONITORING AND ENFORCING RULES**

- Consistency between parents is essential
- Balance between respecting teen's right to privacy and your right to monitor their behaviour.

- Use age-appropriate positive and negative consequences.

## COMMUNICATION

- Parents feel they are giving endless lectures, teens don't respond.
- Consider communication habits and room for improvement, involve teen.

## PROBLEM SOLVING

- Teach/involve teen in problem solving process
- Choose battles carefully
- Is teen having problems attending to discussion?
- Some teens will not be able to problem. Problem solve for teen and discuss.

Problem solve and give teen vote for preferred option.

- Professional help is out there.

## **No Homework**

**Next Week:** Wrap Up