



# SALEM Digest

Spring 2002 • Topics of interest to friends of Salem Christian Mental Health Association

## ATTENTION DEFICIT (AND HYPERACTIVITY) DISORDER

*Hilda E. Roukema in consultation with Wendy Vyfvinkel*

By the time Tony (not his real name) reached grade seven, everyone was at their wits' end. His teachers were frustrated because he could not focus on his tasks. He constantly asked for help and rarely completed his assignments. His classmates were frustrated because he was constantly distracting them and his parents were frustrated because he was not getting his school work done which made his report cards less than presentable.

Ever since Tony was in grade three, his teachers had suggested that their son be assessed for ADHD (Attention Deficit Hyperactivity Disorder). However, they had never consented to this

because they had heard that this ADHD stuff was just an excuse for teachers who were unable to handle a student. After all, at home he was no problem. He could watch TV for hours, play with his Lego, or read a book. No, it was not the child; it was something at school which made their son hyper and unable to do his work. Maybe his classmates were bugging him; or maybe he was bored. Whatever the case, their son was okay and no way were they going to put him on medication.

At least, that was their opinion until Tony himself asked for help. He became depressed and despondent, talked about how dumb he was and how much he hated school. But not until Tony said, "I wish someone would help me" and "I wish I were dead" did his folks take his comments seriously.

If you are the parent of a child suffering from ADHD or as in some cases ADD (Attention Deficit Disorder), the above scenario might not be all that unfamiliar to you. No doubt, you have been frustrated, perplexed and criticized about your child's behaviour. Or if you are an adult who has had to cope with ADD or ADHD all your life, then you have been misunderstood, misjudged and

possibly harassed because of your behavioural or learning difficulties.

### What is ADHD?

ADHD is a neurological condition, a chemical imbalance in the brain. This means that whatever is missing was already missing at birth. Therefore, ADHD cannot be cured; instead, through medication, modified education plans and some social skills training, the child can learn to live with and compensate for her/his disorder; but it will never be gone.

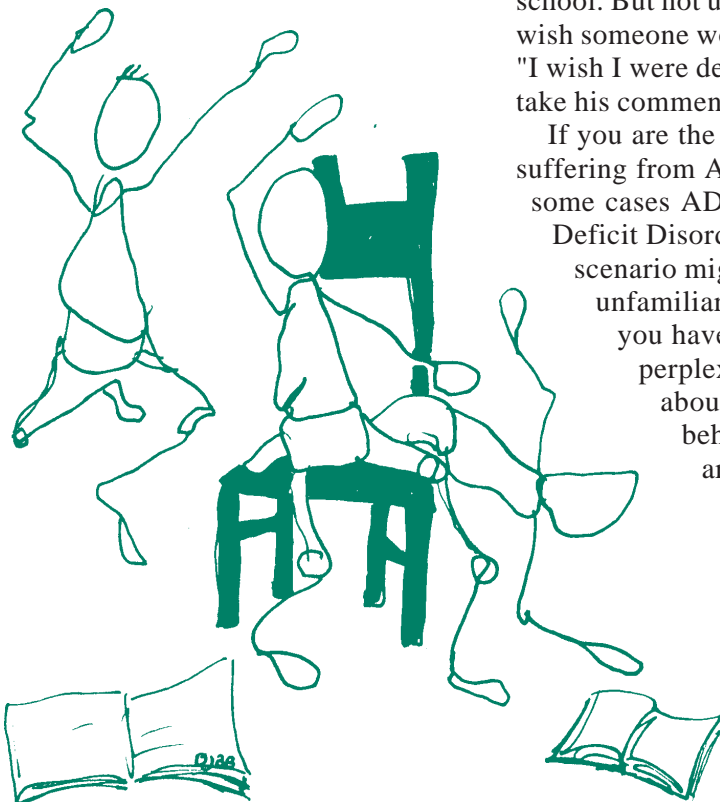
A person with an attention deficit disorder is:

- *distractible*, i.e. s/he sees and hears everything;
- *disinhibited*, i.e. speaks before thinking à la *on the mind and out of the mouth*;
- *impulsive*, i.e. ready, aim, fire!

Often, but not always, a child who has ADHD also has a learning disability, usually in the area of language arts—that is, reading, writing and spelling. This, along with their impulsive behaviour, distractibility and hyper activity makes them a challenge to teach.

### Characteristics of ADHD students

It goes without saying that *all* children find it difficult to sit still and focus on their work at times. And many blurt things out, or act impulsively. However, according to research done by Marilyn P. Dornbush, the following behaviours



## Executive Corner

Rev. Al Dreise

### Salem's Goals:

We anticipate that during the coming year Salem will give continued direction towards:

- Developing support for those affected by mental health issues.
- A web-based consulting, referral and information service.
- Church based support for families struggling with mental illness, etc.
- Maintaining and developing Partnerships.

### Attention Pastors, Teachers, Counsellors, Therapists and other Professionals

**Salem Requests Your Help** in updating its data for a *Web Based Directory*.

Please send us the names of Christian persons or agencies who provide Christian mental health services. The *Directory* will provide referral information for pastors, churches, Christian schools, therapists, and professionals.

The *Web Based Directory* will list Christian counselling, support services, group homes, adoption agencies, crisis centres, and general information on self-help, and support networks.

Send your information to:

**Salem Christian Mental Health Association**  
email: salem@salem.on.ca

See our Website for Salem's first regional listing: The Durham Area.



Rev. Al Dreise

“  
Once they find their niche in life, they become salt of the earth kind of people  
...  
”

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#### SALEM Digest

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## ATTENTION DEFICIT (AND HYPERACTIVITY) DISORDER

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are exhibited significantly more often by students with ADHD than by their classmates:

characteristic	%
short attention span	65
difficulty concentrating	62
daydreaming	58
difficulty sitting still	65
difficulty following directions	46
need for extra explanation from teacher	77
difficulty completing work on time	68
difficulty assuming responsibility for work	88
tension and anxiety	58
dislike for school	78

Dornbush & Pruitt, p. 46

Children who exhibit at least eight of these characteristics before age seven probably are ADHD children and need to be diagnosed. A good diagnosis includes a complete physical examination, clinical and classroom observations, a thorough parent interview, a teacher report and a psycho-educational assessment by a qualified educational psychologist. Once the diagnosis has been confirmed, some kind of medication is often prescribed and the special education teacher will write an Individual Educational Plan (IEP). An IEP focuses on positive teaching and learning strategies, and helps ADHD children cope so that they can do their work which, in turn, will make school more successful and enjoyable.

### How parents can help their ADHD children

There are many ways in which parents can help their ADHD children cope with the disorder and learn to compensate.

- Get an accurate assessment, learn the facts about ADHD and educate the family. While going through this learning process, family members will be able to handle an ADHD child in a more positive way if they have a better understanding of the situation.
- Make it clear that ADHD is nobody's fault nor an excuse for irresponsible behaviour.
- As a family, determine ways in which you can best deal with the ADHD behaviour at mealtime, on vacation, at family outings, etc.
- Support each other. It doesn't help anyone if family members speak negatively about their ADHD sibling.
- As a parent, make sure all the children get equal attention. Often the ADHD child receives more of his or her parents' attention than siblings do, to the point where he or she might even dominate the family scene. This imbalance may create resentment among the other children as well as deprive them of getting their needs met.

- Be open about your ADHD child. Keeping this a secret from the extended family helps no one. It is nothing to be ashamed of, and sharing your burden with your family creates community which, in turn, allows you to ask for help or relief — remember, we're here for each other. In fact, according to Galatians 6:2, we must *carry each other's burdens* because, *in this way [we] will fulfil the law of Christ*.
- Establish boundaries for your ADHD child. Make sure your child knows and understands the structure you have designed for him/her, and be consistent in maintaining this structure since this is one way in which he will learn to cope with the disorder. Included in this structure needs to be a set time and place for him to do his homework.
- Get involved with your child's teacher; connect, communicate, and collaborate.
- Encourage and assist your child to become an independent and responsible learner. There are books available to help ADHD kids cope.\*
- Join the local chapter of *The Learning Disabilities Association*. It costs less than \$100.00 per year and gives parents the support they need when dealing with an ADHD child, provides up-to-date resources, and organizes seminars with professional speakers.

Back to Tony. Once he had been diagnosed and medication had been prescribed, Tony became a different boy. He was able to

focus on his school work, experienced a great deal of success and enjoyed school. His report cards improved tremendously and his self-esteem grew. In short, Tony blossomed and became a likeable and delightful student. Indeed, he was a changed child, not only at school but also at home.

### Adults with ADHD\*

Since there is no cure for Attention Deficit Disorder, needless to say there are hundreds of adults with the disorder. No doubt their childhood and adolescent years were discouragingly painful; no doubt, they were terribly misunderstood by their teachers, parents and peers.

However, hopefully by the time they reached adulthood, they learned to cope and accept their condition as part of who they are. Although they might seem easily distracted, impulsive, restless and impatient, they are caring and compassionate people.

Many are successful business owners who are able to focus on their work very well. Once they find their niche in life, they become *salt of the earth* kind of people who go beyond the call of duty to reach out to others, especially those who might fall between the cracks.

My hunch is that, given the proper guidance and motivation early in life, they are able to direct, encourage and inspire others because, as the saying goes, *experience is the best teacher*.

Therefore, whether we are parents, teachers or co-workers, we need to step

## \*ADHD Resources

### Adult Books:

Dendy, Chris, *Teenagers with ADD: A Parents' Guide*. ADD Warehouse, 1-800-233-9273.

Dornbush, Marilyn P. & Sheryl K. Pruitt, *Teaching the Tiger: A Handbook for Individuals Involved in the Education of Students with Attention Deficit Disorders, Tourette Syndrome, or Obsessive-Compulsive Disorder*, Hope Press, Duarte, CA; 1995.

Feldman, William, *Learning and Attention Disorders: A Guide for Parents and Teachers*, Key Porter Books, Limited, Toronto, ON; 2000.

Fisher, Gary and Rhoda Cummings, *The Survival Guide for Kids with LD*, Free Spirit Publishing Inc., Minneapolis, MN 55401; 1990.

Hallowell, Edward M. & John J. Ratey, *Driven to Distraction: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood*, Simon & Schuster, New York; 1994.

### Children's Books:

Carlson, Nancy, *Sit Still*, Viking Press: Penguin Group Publisher. This book is about a boy who has difficulty sitting still until his mother comes up with a plan to help him.

Dewitt, M. Gordon, *My Brother's a World Class Pain*, New York: GSI 1992. This book explores ADHD from a sibling's perspective.

Gehret, Jeanne, *Eagle Eyes, A Child's Guide to Paying Attention*, Fairport, N.Y.: Verbal Images Press, C 1996.

Moss, Deborah, *Shelly the Hyper Active Turtle*, Kensington, MD: Woodbine House, C 1989.

### Other Resources:

To speak with a specialist about effective treatment for problems associated with attention deficit/hyperactivity disorder, contact **Dr. Cathy Smith**, C.M., at: Smith & Associates 905-844-4144 or visit: [www.dyslexiaprograms.ca](http://www.dyslexiaprograms.ca)

To browse for further resources: [www.addwarehouse.com](http://www.addwarehouse.com)

outside our comfort zone to be hands and feet to those who don't fit the status quo, those who challenge our conventional approach to life, school or work. Sometimes we need to deny ourselves and be advocates for others so that

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they, too, will be able to develop their talents in service to others. After all, it is in serving others that we serve God.

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### IF YOU ARE EXPERIENCING

burnout, loss of faith, sudden depression, or any other debilitating crisis...

### IF YOU ARE IN THE MIDDLE OF

couple unhappiness, family conflict, parenting dilemmas, or other relationship difficulties...

### IF YOU ARE STRUGGLING WITH

addictions, emotional, physical, or sexual abuse, or any deeply rooted psychic pain...

### SALEM CAN HELP

[www.salem.on.ca](http://www.salem.on.ca)

Counsellors:

Hamilton

Judy Cook, M.Ed.

Betty Brouwer, M.Sc.

Albert Dreise, M.Div.

Bowmanville

June Zwier, M.Div.

For further information or appointment:

**Hamilton:** 905-528-0353

**Bowmanville:** 905-623-9901

[junezwier@sympatico.ca](mailto:junezwier@sympatico.ca)

### BOOK REVIEW

## Parenting ADHD Children

*Taking Charge of ADHD: The complete, authoritative guide for parents*, Russell A. Barkley, Ph.D. The Guilford Press, New York, 1995.

*Reviewed by Betty J.B. Brouwer*

As its title suggests this book is designed to help parents gain a thorough understanding of ADHD and to equip and empower them in parenting their ADHD children.

There are four main sections in the book. The first section begins by discussing some of the theories, causes and manifestations of ADHD. Barkley suggests that ADHD is best understood as an impairment of the child's inhibition of behaviour, essentially deficits in self control and will power.

The next section focuses on ways parents can become empowered to help their children effectively deal with ADHD. Parental responsibility is seen as resting on a tripod comprised of 1) a principle-centred approach, 2) executive parenthood and 3) scientific thinking.

Barkley offers ten guiding principles to raising a child with ADHD. Parents are encouraged to care for themselves (e.g. schedule in breaks away from parenting) so they can have the necessary energy to care for their ADHD children.

The third section offers practical ways one can manage and cope with ADHD at home and at school. Common issues that families are likely to encounter along with differ-

ent ideas on how to handle these situations are raised in this section.

The final section looks at the medication used to deal with ADHD. The focus is on three commonly prescribed stimulants Ritalin, Dexedrine and Cylert, although there is also mention of some antidepressants that are also used to treat ADHD, e.g. Prozac, and Norpramin. Barkley offers parents a lot of questions to ask their doctor as well as issues to be aware of when medication is being used. An overview on the latest research on ADHD medication including their side effects is presented.

Overall, I found this book to be informative, comprehensive and easy to read. It offers a balanced approach to parenting ADHD children and is full of practical advice that can easily be implemented. I appreciate the importance given to fostering a healthy and positive relationship with one's child.

Barkley encourages parents not to sacrifice this relationship, for example, by making sure your child has excellent grades at the expense of everything else. I like the emphasis that is placed on parents viewing themselves as the case managers of their child's life.

Parents need to be pro-active and strong advocates for the needs of their child and Barkley gives them the tools to do so. This book is an excellent resource for parents, family members, and schools.