

**ADDA, CHADD and ADDITUDE MAGAZINE JOIN FORCES FOR AD/HD
AWARENESS WEEK (SEPT. 14-20)
“FIRST YEARS TO GOLDEN YEARS: AD/HD AND LIFE’S RELATIONSHIPS”**

While people think of attention-deficit/hyperactivity disorder (AD/HD) as a condition that only affects children, and primarily impacts school and learning. Individuals and professionals active with ADDA know that AD/HD can persist throughout a person’s lifetime, and can affect every aspect of one’s efforts to build and sustain relationships.

In recognition of AD/HD Awareness Week (September 14- 20 ADDA, Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD), and ADDitude Magazine have joined forces to raise the public’s understanding of the impact that AD/HD can have on personal relationships throughout an individual’s lifetime. This year’s theme- **“From First Years to Golden Years: AD/HD and Life’s Relationships”** – focuses on the key times in one’s life that AD/HD poses relationship challenges and provides resources and recommendations for addressing them. Areas addressed through this year’s awareness campaign include childhood, college, workplace interactions, romantic relationships and adulthood.

“There is so much the public does not understand about AD/HD that the stigma, myths and misinformation surrounding this disorder are rampant,” stressed Linda Anderson, ADDA president. “Education via awareness-building is the key to providing understanding and hope.”

The parent-child connection

It all starts in childhood, with the relationship between parent and child. The average onset of AD/HD is age three, and this is also the time when parents begin seriously working on expectations and discipline. But due to the impulsivity, inattentiveness and over-activity of the child, behavior problems and conflicts often ensue, and the parent-child relationship may suffer.

Once your child is diagnosed, CHADD recommends that you always work closely with a treatment professional. The best in research shows that the most effective treatment includes:

- Parent training
- Behavioral intervention strategies
- An appropriate educational program
- Education regarding AD/HD
- Medication, when necessary

Parents may try a variety of strategies to help engender and maintain a healthy parent-child connection, including the following:

- **Give unconditional love** – It starts with letting your child know that you love and support him or her unconditionally, his or her good times and bad.
- **Be clear about expectations** – Provide clear, consistent expectations, directions and limits. You cannot be wishy-washy or ambiguous with a child who has AD/HD.
- **Establish a proactive discipline system** – Don't just react to bad behavior. Instead, give rewards for good behavior and specific consequences for misbehavior, such as time out or loss of privileges. Then get all the child's caregivers on the same page, so the system is consistent everywhere.
- **Identify and build upon strengths** – Many children with AD/HD have strengths in the areas of athletics, art, computers or mechanical ability. Recognize these abilities, and give your child opportunities to build upon them.
- **Seek help as needed** – Whether you join a support group, talk to a professional or take parent-training courses, don't be afraid to ask for help, especially if you are feeling stressed.

Interacting with childhood peers

Children with AD/HD may appear shy and withdrawn or overly aggressive, depending upon their behaviors, which may lead their peers to stay away. Additionally, AD/HD children may not have picked up social skills that are usually acquired through incidental learning. In these and other ways, AD/HD often has a negative impact on childhood relationships with peers, which are important to a child's happiness and long-term development. Research indicates that children with peer problems may also be at higher risk for anxiety, behavioral and mood disorders, substance abuse and delinquency as teenagers.

CHADD suggests that parents help their children with AD/HD develop healthy peer relationships by:

- **Recognizing** the importance of positive peer relationships for your child, and commit to finding ways for your child to develop them.
- **Communicating** with those who play an important role in your child's life, such as teachers, counselors, and coaches, to stay abreast of your child's social interactions and development.
- **Involving** your child in a variety of activities where he has the opportunity to interact with his peers in a positive way, doing things he or she likes to do. In some cases, an intensive behavior intervention such as a specialized summer

camp program for social skills development can provide your child with the social structure that is needed as well a controlled outlet for physical activity.

The teen years – difficult for any child

Almost no child comes through adolescence unscathed, and these years can be particularly painful for Children with AD/HD as they become more self-aware and the acceptance of their peers becomes paramount. Continuing the strategies started in childhood, while keeping a close lookout for depression, anxiety and other mental health strategies can help your teen through these difficult years.

Parents need to keep adequate structure and supervision for their adolescent, while encouraging appropriate independence-seeking. Enforce key rules consistently, but be open to negotiation on issues that may be flexible. The idea is to help your teen more toward responsibility for him or herself while providing a supportive, encouraging, positive environment.

Additionally, check into peer advising programs that may be offered at your school or in your community, which can be particularly helpful for teenagers.

Off to college

When students leaves the parental nest and head off to college, they have to take a lot more responsibility for themselves. While academic issues might be expected, there are also relationship issues that often arise. High frustration levels can lead to poor self-esteem and isolation, while lack of social skills can lead to inappropriate behavior, such as spending too much time socializing.

According to ADDA, supportive strategies such as practicing good self-care, getting enough exercise and rest, and learning ways to reduce stress can help keep academics and relationships on target. Additionally, working with a coach (see sidebar) or peer study group can keep the student with AD/HD on an even keel, providing a steadying influence in the free-for-all of college life.

College students also often embark on their first serious romantic relationships, which can be negatively impacted by their AD/HD. (See Affairs of the Heart, below.)

Workplace interactions

While the Americans with Disabilities Act protects employees with AD/HD from discrimination in most job settings, the disorder can lead to problems in the workplace. Blurting out inappropriately can compromise the ambience and energy of a work team or relationship with a boss. Disorganization can cause friction between team members. Lost items and missed meetings can lead to loss of professionalism. And lack of good social skills can interfere with client interactions and effective networking opportunities.

ADDA recommends some simple, effective interventions that can lead to relationship (and professional) success on the job, including:

- **Written agendas** before meetings and written minutes afterward to keep assignments straight.
- **Frequent communication and accountability** by email, phone and face-to-face meetings.
- **Written assignments** rather than quick hallway discussions.
- **Clear job descriptions** with specific deadlines.

Affairs of the heart

Romantic relationships – already complex – are commonly made more difficult when one individual has AD/HD. The AD/HD partner may be forgetful, disorganized, distracted, seem irresponsible, and communicate poorly according to ADDA. Often these behaviors can be misconstrued by the partner who doesn't have AD/HD that he or she is unloved. Both can draw negative conclusions about each other's motives and behaviors, which leads to endless conflict, shutting down of the lines of communication, and ineffective methods of conflict resolution. The relationship may be on the road to breakup.

Some of the AD/HD behaviors with the greatest impact on relationships include forgetfulness, saying things without thinking first, inattentiveness in conversations, difficulty dealing with frustration, not cleaning up after oneself, and failing to finish household projects.

Addressing financial issues within the household can become an additional source of relationship strain, especially if the AD/HD partner has taken on bill-paying responsibilities and is having trouble staying on schedule with this responsibility.

According to ADDA, the key to avoiding these pitfalls is effective communication and organizational systems from the start. Both partners must be cognizant of the AD/HD diagnosis, and try to keep the disorder separate from the individual. Getting treatment is key, whether it's therapy, medication or both.

AD/HD in adulthood and beyond

The majority of adults who now know they have AD/HD were not diagnosed until they were adults. This means they have had to suffer through much of their lives without knowing the reason for the difficulties they have had. Without having the advantage of understanding their disability, most have developed strategies on their own to help them cope with their AD/HD-related problems. The pressure of

dealing with these issues can lead to depression, anxiety, feeling overwhelmed and a loss of confidence. Some become isolated and withdrawn.

Once they have a diagnosis, however, adults have the opportunity to examine their lives and open the door to change. Through treatment and therapy, adults have the opportunity to realize their strengths and weaknesses, and decide what they want to do in order to grow and become the person they want to be.

For more information and access to resources on AD/HD, visit www.add.org.



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