

Non-pharmacologic Management of ADHD

Home

- Have a well-established routine in the home.
- Behaviour modification program emphasizing rewards for positive actions.
- Ensure the child is making eye contact prior to giving instructions.
- KISS give instructions in simple terms for single tasks.
- Utilize poster reminders if necessary.
- Ensure a good breakfast
- Limit screen time to one hour per day (beyond that necessary for homework.)
- At least one hour of vigorous aerobic activity per day.
- Do homework in the late afternoon/early evening.
- Break work into modules with rest periods.
- Check backpacks/lockers for assignments not turned in.
- Eliminate electronics from the bedroom.
- Remove cell phones from the bedroom during sleep.
- Ensure 8-10 hours of sleep per night.
- Melatonin 3 mg if sleep initiation is problematic.
- +/- Omega 3,6 fish oils 1-2 gm daily.

School

- Preferential seating in the classroom.
- Use of agenda book to record unfinished work and assignments.
- Close communication between parent and teacher-notes, telephone calls or e-mail.
- Advance information regarding assignments to the parents to allow them to assist with organization.
- Allow the use of the study choral when an assignment has been given.
- Behavioural modification program which, hopefully, can be generalized to home.
- IPP
- Depending upon comorbidities
 - * Keyboarding
 - * Oral testing
 - * Increased time for examinations
 - * Scribe
 - * Decrease the number of questions, enough to document competency but Not overwhelm the child.

Also these resources; www.aap.org www.chadd.org www.caddra.ca

Russell Barkley - Take Charge of ADHD

September 10,2012

What is ADHD?

Attention Deficit Hyperactivity Disorder is a neurodevelopmental condition with symptoms existing along a continuum from mild to severe. It occurs across the life span.

How is ADHD Treated?

Treatment should be **multimodal**. Incorporating different interventions, such as education, medication, and behavioral modifications/motivational interviewing/psychotherapy, produces a better outcome.

Treatment must be collaborative among the physician, the patient, and the family. It should be targeted to each individual's needs and goals, which may change over time.

Two important components of a multimodal approach:

PSYCHOEDUCATION

Psychoeducation should be the first intervention. Educating the family/patient about ADHD (symptoms, functional impairment, possible comorbidities and treatment) will ensure a more successful outcome.

PSYCHOSOCIAL INTERVENTIONS

Psychosocial interventions can reduce impairments associated with ADHD symptoms and improve overall quality of life. Interventions can be **cognitive or behavioral**.

PSYCHOEDUCATION

Discover

- ◆ What does the individual/family know about ADHD?

Demystify

- ◆ Myths about ADHD
- ◆ Diagnosis and assessment processes

Instill Hope

- ◆ Evidence-based treatments and interventions **do** exist and will promote a positive outcome

Educate

- ◆ Importance of combining pharmacological and psychosocial interventions
- ◆ Risks and benefits

Empathize

- ◆ Acknowledge feelings of discouragement, grief, and frustration.

Encourage

- ◆ A strength-based approach
- ◆ Make more positive than negative comments
- ◆ Discourage criticisms

Recognize

- ◆ Appropriate behavior, whether observed or reported
- ◆ Goals achieved

Be Sensitive

- ◆ Ethnic, cultural and gender issues may shape the perception and beliefs about ADHD and its treatment

Motivate

- ◆ Nurture strengths and talents
- ◆ Encourage skills

Promote

- ◆ Regular exercise
- ◆ Consistent sleep hygiene
- ◆ Healthy nutrition routine

Humour



Humour can defuse awkward, tense situations and avoid or reduce conflict

Give Resources

- ◆ Websites
- ◆ Local community resources
- ◆ Book lists

GUIDE TO ADHD PSYCHOSOCIAL INTERVENTIONS

At Home

Instructional

- ♦ Make eye and/or gentle physical contact before giving one or two clear instructions. Have instructions repeated back, or confirm they were understood, before proceeding

Behavioral

- ♦ Use a positive approach and calm tone of voice. Teach calming techniques to de-escalate conflict
- ♦ Use praise, catch them being good (playing nicely)
- ♦ Set clear attainable goals and limits (homework and bedtime routines, chores) and connect them to earning privileges, special outings etc.
- ♦ Use positive incentives and natural consequences: *When you... then you may...*
- ♦ Empathy statements can be useful, such as *I understand*
- ♦ Adults should model emotional self-regulation and a balanced lifestyle (good eating and sleep habits, exercise and hobbies)
- ♦ Choices should be limited to two or three options

Environmental

- ♦ Structure and routine are essential. Parents/partners must be united, consistent, firm, fair and follow through
- ♦ Encourage prioritizing instead of procrastination
- ♦ Post visual reminders (rules, lists, sticky notes, calendars) in prominent locations
- ♦ Use timers/apps for reminders (homework, chores, limiting electronics, paying bills)
- ♦ Keep labeled, different coloured folders or containers in prominent locations for items (keys, electronics)
- ♦ Find the work area best suited to the individual (dining table, quiet area)
- ♦ Break down tasks
- ♦ Allow movement breaks
- ♦ Allow white noise (fan, background music) during homework or at bedtime

Other referrals may be needed:

- ♦ Psychologist
- ♦ Tutor, Family Therapist
- ♦ Parenting Programs
- ♦ Social Skills Program
- ♦ Organizational Skill Course
- ♦ Occupational Therapist
- ♦ Speech and Language

At School

Instructional

- ♦ Keep directions clear and precise
- ♦ Get student's attention before giving instructions
- ♦ Check understanding and provide clarification as needed
- ♦ Actively engage the student by providing work at the appropriate academic level

Behavioral

- ♦ Provide immediate and frequent feedback
- ♦ Use direct requests – *when...then*
- ♦ Visual cues for transitions
- ♦ Allow for acceptable opportunities for movement – “walking passes”

Environmental

- ♦ Preferential seating
- ♦ Quiet place for calming down

Accommodations

- ♦ Chunk and break down steps to initiate tasks
- ♦ Provide visual supports to instruction
- ♦ Reduce the amount of work required to show knowledge
- ♦ Allow extended time on tests and exams
- ♦ Provide note taker or access to assistive technology
- ♦ Supports can include the CADDRA psychoeducational and accommodations template
- ♦ Request school support services

At Work

Accommodations

- ♦ Identify accommodation needs
- ♦ Provide CADDRA workplace accommodations template

Counsel

- ♦ Suggest regular and frequent meetings with manager and support collaborative approach
- ♦ Set goals, learn to prioritize, review progress regularly
- ♦ Identify time management techniques that work for the client, e.g. using a planner, apps
- ♦ Declutter and create a work-friendly environment

Tools

- ♦ Organizational apps and/or productivity websites caddra.ca/medical-resources/psychosocial-information

Relationships

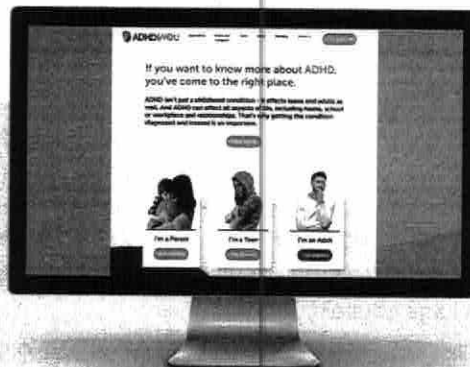
- ♦ Understand the impact ADHD can have on relationships with partners, family, friends, teachers, peers and co-workers.
- ♦ Recognize and accept ADHD can cause unintended friction and frustration between parent and child as well as between partners (e.g. difficulties with self-regulation, time management difficulties)
- ♦ Learn how to listen and communicate effectively
- ♦ Organize frequent time to communicate (don't just talk) to discuss goals and plans (what works, what doesn't) within home, educational and work environments
- ♦ Schedule regular fun with family, partner, friends
- ♦ Practice relaxation and mindfulness techniques caddra.ca/medical-resources/psychosocial-information
- ♦ Stay calm, be positive, recognize/validate and celebrate strengths!



For further information, please refer to the Psychosocial Interventions and Treatments chapter, Canadian ADHD Practice Guidelines at caddra.ca

ADHD - What do I need to know?

- What causes ADHD?
- What are the symptoms?
- How can I help a family member with ADHD?
- How can I manage the challenges of high school, college or university?
- Does adult ADHD really exist?
- What strategies can I use to get organized?
- How can my doctor help?
- What resources are available to help manage ADHD at different ages?



**For additional information, please consult
your healthcare professional.**

For answers to these questions and more, visit ADHDandYou.ca today!

ADHDandYou.ca: Designed to give you the tools to manage ADHD and help you achieve your goals

FACING

BACK TO SCHOOL

WITH ADHD

Take on the challenges of a new school year

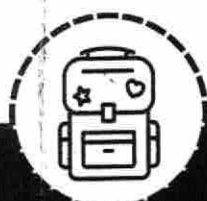
ADHD is one of the most common psychiatric disorders diagnosed in children. It is estimated that 5-9% of children and adolescents have ADHD. If untreated, ADHD can have serious consequences on the lives of those suffering from it. However, it is highly treatable condition.

An individualized treatment approach that combines behavioural interventions together with medication is recommended for patients with ADHD.



TALK TO YOUR CHILD'S DOCTOR IF YOU HAVE CONCERNS OR ARE CONSIDERING CHANGING ANY PART OF THEIR TREATMENT PLAN.

Back-to-school tips and tricks for a child diagnosed with ADHD



SCHOOL

- Get to know your child's teacher and stay in touch with them throughout the school year with phone calls, emails or meetings.
- Before the first day of school, review your child's individual education plan (IEP).
- Work with your child to set their goals for the school year. For example, what areas do they want to improve, what are they looking forward to?



AFTER SCHOOL

- Keep an extra set of school supplies at home, in case your child loses or forgets them at school.
- Lend a hand with homework or consider getting a tutor to help your child.
- Plan afterschool activities to build your child's strengths or work on their weaknesses.
- Spend time talking to your child about their day. Be encouraging and supportive.



FAMILY/HOME

- Set up a morning routine for school days: when to get up, what to wear, weekly breakfast menu and route to school.
- Get ready for the school day the night before: set out clothes and backpack and pack lunch.
- Schedule an appointment with your child's doctor to review their treatment plan.



PREPARATION, ROUTINES AND COMMUNICATION CAN HELP WITH THE TRANSITION BACK TO SCHOOL.

SCHOOL DAY SYMPTOM TRACKER FOR A CHILD DIAGNOSED WITH ADHD

Starting Date: _____

Name: _____

- ☒ Identify behaviours that caused impairment or difficulties today while your child was at school this week. You may find that speaking with your child's teacher can help you with this.
- ☐ Low attention span
 - ☐ Behavioural difficulties (during class and/or recess)
 - ☐ Difficulty finishing tasks
 - ☐ Difficulty organizing tasks and activities
 - ☐ Disruptive in the classroom
 - ☐ Trouble following rules and instructions
 - ☐ Difficulty making friends
 - ☐ Difficulty keeping friends
 - ☐ Problems getting along with others: with whom? _____
 - ☐ Difficulty completing homework
- Describe any other challenges your child experienced today (for example, while getting ready for school or after school).
 - What were some positives you observed today?
 - Any other notes for today?

DAY	WEEK 1	WEEK 2	WEEK 3	WEEK 4
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				



TO HELP EVALUATE TREATMENT GOALS, MAINTAIN REGULAR
AND FREQUENT FOLLOW-UPS WITH YOUR CHILD'S DOCTOR.



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PRMCA/CA/ADH/0071 125838/07/2023-E

