

Talking About My Child's ADHD

One of the things that I'm asked frequently is how do I talk to others about my child's ADHD. I have to emphasize that it's different for every child and every family, but I have some distinct impressions that others may not agree with, but I found works well for the families that I meet with.

The first thing I want to be careful about is not telling the child that they have something wrong with them, that they have a disorder or an illness or their brains are different. I think that leads to a lot of pathologizing and children identifying deficits as coming from ADHD and all sorts of learned helplessness. All sorts of excuses for why they didn't behave well in a certain situation and why they didn't get a task done. You know the drill. Yes, there are lots of books, you can find them on the internet about talking with your child about their ADHD and there are all sorts of turtle analogies and kangaroo pouch analogies and race car analogies.

There are all sorts of ways to explain it to a child, but I like to keep it simple. I usually keep it very concrete and talk about examples. You know those times when we're getting ready in the morning and you get distracted and we're reminding you multiple times to get ready for school? It looks to us like you have trouble keeping your mind and efforts on your mission, doing what you set out to do. And you know those times when you get carried away and you get too loud or too silly or you have trouble waiting for what you want? Those are times when you have trouble putting on the brakes, and there are some people who have more trouble keeping their mind and thoughts on their efforts, keeping their eyes on the prize. There are some children who have more trouble putting on the brakes and controlling their behavior than others. What we're going to do is we're going to work on how to build those skills.

If you're talking about medication, you might say one of the things we're going to do is try and give your attention, your self-control, your brakes a boost, and we're going to do it through this pill that should make it easier to stop and think and wait and handle distractions. We will see. Remember though, that those pills don't teach skills. You're not going to do well unless you try, and you work and unless you have good teaching. We're just trying to give your attention and self-control a boost.

Now, if you want to call it ADHD, certainly it's far be it from me, to say that you shouldn't. I just want to be careful about it. Don't buy the t-shirts and the banners and join the clubs and overuse that term in a way that children will think there's something wrong with me.

I'm very careful about sharing information about ADHD with other people. For example, if you say to your coach, I should tell you before the season starts that my son has ADHD, I think you're making a mistake. When you do it that way, you're invoking the stereotype. You do not know what that coach's experience with other ADHD children, and by the way, your child is likely to be distinctly different from the child that that coach is thinking about.

Instead, what I say is something positive. Matthew loves baseball. He's passionate about the game. But he does better stay focused when he's involved in the action. Last year when he played catcher and first base, he was spot on. In the outfield, not so much. Or I might say to a teacher, Billy has a great sense of humor. He loves telling stories and jokes. Sometimes he has a hard time knowing when to wait to tell the joke and knowing when the joke is funny to other people. We're working on building his sense of humor and building his awareness of when's the right time to tell the joke. You might say to a teacher, Steven's

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really good at math. He loves math. Sometimes he goes too quickly and makes what looks like careless errors. We find that it's better to check in with him as he's doing the work to make sure that what he's doing follows the directions and is accurate. When you're talking about your child you don't lead with oh my goodness, he has ADHD and he's taking medication. You lead with your child's strengths and how the weaknesses of the ADHD are impacting the child, and what we can do about it.

I'm also very careful with schools. I know that many schools "need a formal diagnosis" to develop an education plan. I understand that. But it's not clear to me that in all cases that's beneficial. Sometimes what happens is the plan you get isn't worth stereotyping your son or daughter. Sometimes it's better to talk specifically with a given teacher about their sense of your child's strengths and weaknesses and how it fits with yours.

I also have some concerns about parents that are providing teachers and schools clinical information that they have not seen. If you're going to share information from your psychologist or pediatrician, if I were mom or dad, I'd want to see it first. I think you should always see what information is going to a school. I once polled teachers when I was doing a late summer training about whether they want to hear about their student before the year begins, as if the information will help them work with the student, or whether they wanted to wait to get the information until after they got to know that boy or girl in the class. Interestingly, each time I've asked that question it's been divided. Some teachers want a fresh slate to form their own opinions and impressions. Other teachers feel like having the news ahead of time is helpful. What I tend to do, is I tend to encourage parents to ask the teacher. Would you like us to share information about Max's strengths and weaknesses and the work we've done with other people, or would you like to get to know him first. Your teacher can take the lead then. I'm also very, very careful about the format in which I share information. Often what happens is parents and teachers are emailing back and forth, or pre-pandemic, talking in the hallways or after school, and what happens I think is the topics don't get the time and attention they deserve. I'm always talking about supporting a teacher's efforts, and to do so, it's important to hear more about the situations and the context in which the struggles are occurring, to hear more about how we can help them in the classroom, and to schedule a time to discuss that in detail. If I'm going to share information about a diagnosis, I want to understand when is the best time to share that information, I don't want to center on the diagnosis, I want to talk about strengths and weaknesses and strategies. One more thing that I think is important.

When you develop the plan for a child, the 504 plan is the most commonly named plan, I think it's important along with that 504 plan, to have a paragraph or two paragraph summary of your child's strengths and weaknesses. The things that you've done thus far that you know have worked and your goals for the coming year. Sometimes the 504 plans have some very specific accommodations and modifications, but it doesn't include a lot of clarification beyond the diagnosis about the child. You can share information through a 504 plan as well, but most important thing is to stay away from the diagnosis as the vehicle for sharing information, and more about your son or daughter.