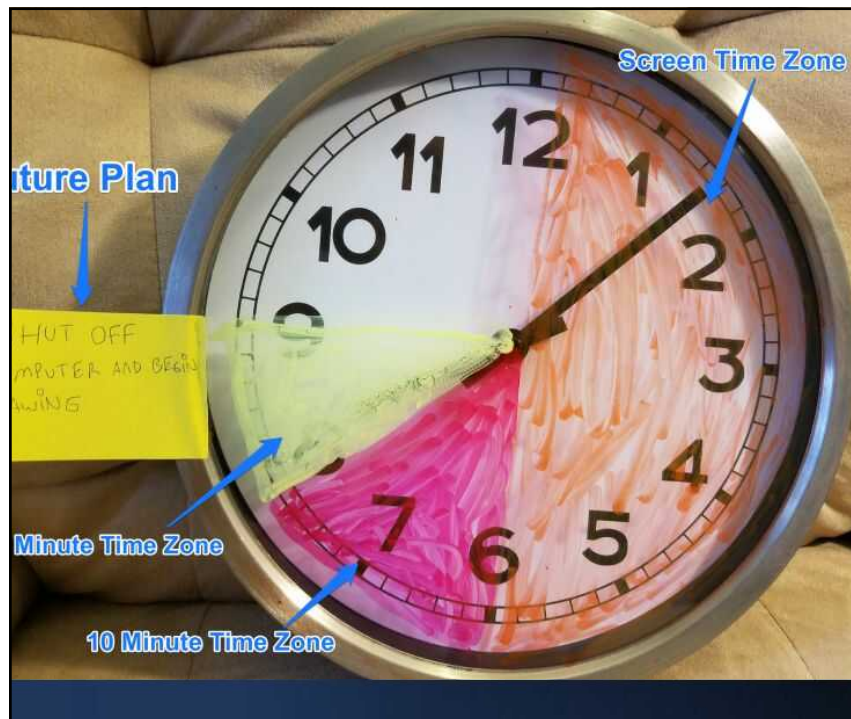


ADHD in plain language

Ryan Wexelblatt, LCSW, ADHD-CCSP



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What I hope you'll take from this presentation:

- Develop a practical understanding of ADHD, that you haven't heard before.
- Learn what helps to build skills, and what does not work.
- Learn some practical strategies you can begin implementing immediately.

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About me and how I got into this work

- Licensed Clinical Social Worker, School Social Worker, ADHD-Certified Clinical Services Provider and father to a son with ADHD.
- Founder of ADHD Dude & Trip Camp.
- ADHD Dude YouTube channel and Facebook group.
- I am originally from Narberth, lived in Narberth most of my life and now live in Ventnor, NJ.
- You can read about my specific training at adhdude.com



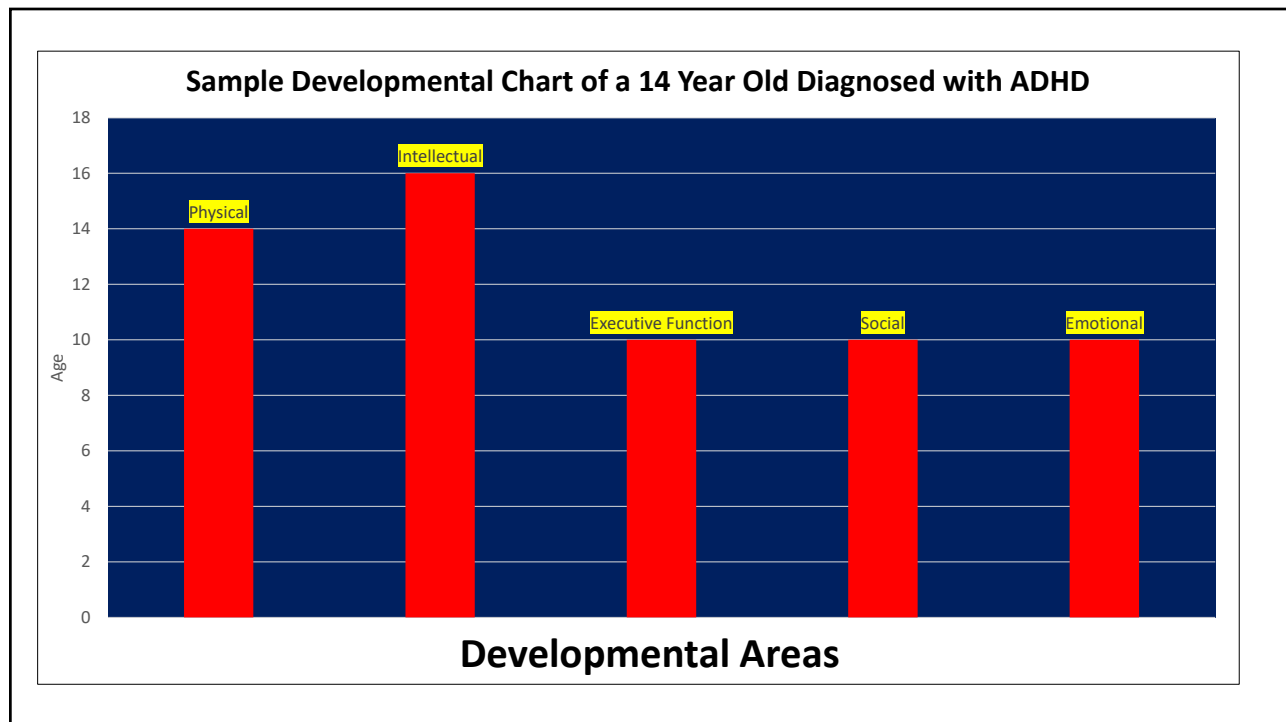
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ADHD is an executive function developmental delay.

- A delay in the development of pre-frontal cortex (frontal lobe) results in executive functioning delays.
- Kids with ADHD have a 2–3-year gap between their chronological age and “executive functioning age”.
- There is no such thing as “executive dysfunction” or “executive function disorder”, those terms are not formal diagnoses.



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Executive Function challenges can be summarized as:

- Lagging future thinking skills
- Difficulty with episodic memory
- Lagging self-directed talk (“Brain Coach”)
- Lack of resiliency/sustaining attention to non-preferred tasks & subjects.
- “Feeling time” as a concrete concept
- Difficulty “getting the bigger picture” (situational awareness, reading comprehension)
- Cognitive flexibility, ability to make adjustments as-needed




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ADHD “disconnects” verbal working memory from non-verbal working memory



(At home)


Verbal Working Memory
(Self-Talk & Stated Intentions)



(At school)

Non-Verbal Working Memory:
(Picturing yourself doing something in the future)

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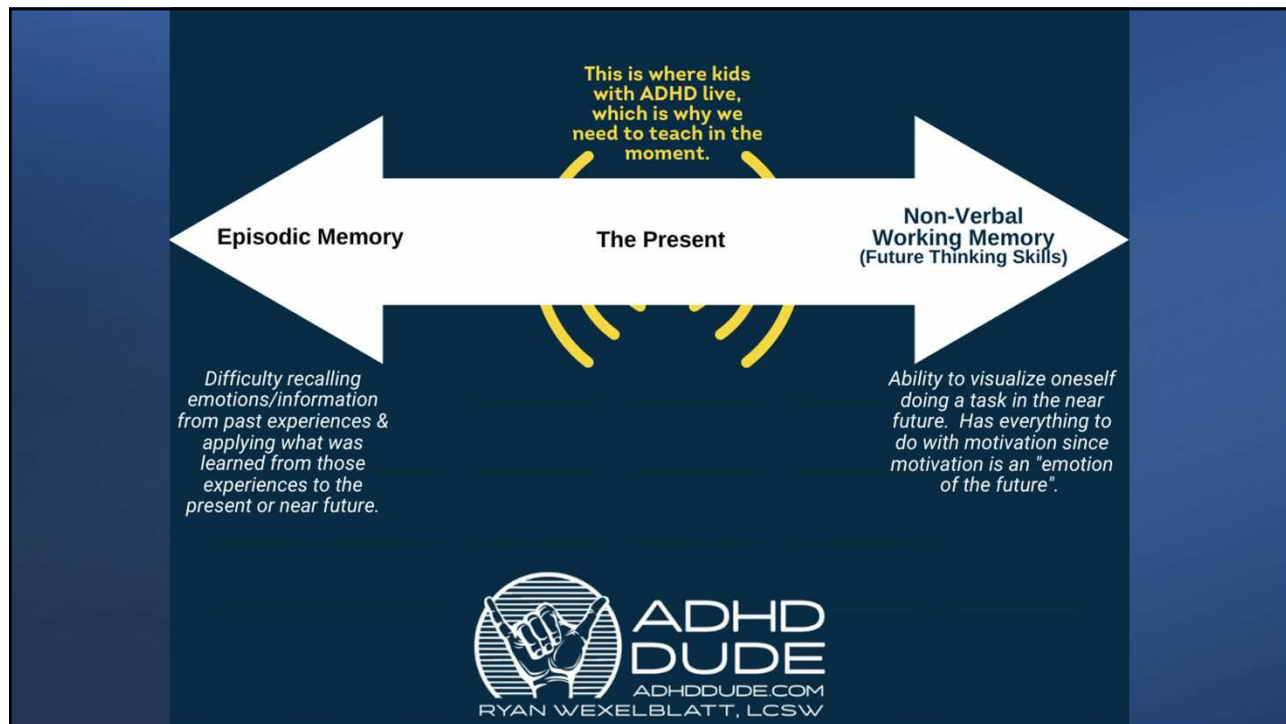


Development of time horizon

children with ADHD have a 25% reduction

- 2 year olds - now
- 3-5 5 -20 min
- K to 2nd grade - several hours
- 3-6 grade - 8-12 hours
- 6th to 12 grade - 2-3 days
- 17-23 years - 2-3 weeks
- 23 - 35 - 3-5 weeks

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What do lagging executive function skills look like at school?

- Does homework but doesn't hand it in.
- Unnecessary papers & trash in backpack/binders.
- Reading comprehension/getting the "bigger picture".
- Difficulty with writing assignments.
- Waiting until the last minute for bigger assignments.
- Thinks assignments will take much longer or shorter than they will take.
- Difficulty in unstructured social situations



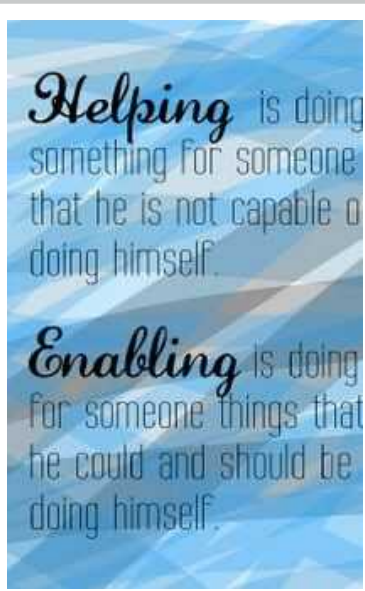
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What do lagging executive function skills look like at home?

- “Prompt Dependence”
- Difficulty sustaining attention to non-preferred subjects/tasks
- Difficulty with “future thinking skills”
- “Feeling” time
- Lack of situational awareness (reading a room)
- Recalling past information and applying it to the present/future (episodic memory)
- Transitioning from preferred tasks to non-preferred tasks (getting off video games)
- Spending more time arguing about a task, than the task will actually take



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What inhibits and builds executive function skills?

Inhibits

- Doing tasks for your child they are capable of learning to do independently (enabling overdependence)
- Constant prompting/directing (prompt dependence)
- Solving problems for them (Denying the opportunity to build independent problem-solving skills)
- Micromanaging academic performance at the expense of developing independence and building executive functioning (telling them what they have for homework, making sure assignments get handed in, etc.)

Builds

- Free play/spending time with friends without adult direction/“hovering”
- Participating in any type of art/music/martial arts
- Providing “scaffolding” instead of prompting
- Teaching visual strategies to help build non-verbal working memory
- The use of declarative, visual language instead of prompting

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Tipping Points: What can happen when executive function challenges are not addressed?

Parents reach their *independence tipping point*: Parents decide they no longer want to act as their child's executive functioning and are resentful of their child's overdependence and lack of independence


If you go to college prompt-dependent, your parents are going to need to go with you or it may be a very short trip.

When inflexibility is accommodated, the *inflexibility tipping point* often begins around 14-15. This is when kids become resistant to accepting help yet are still over-dependent on parents to act as their executive functioning. I have seen kids become extremely resistant to accepting help when they pass this tipping point.

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Have you tried any of these without success?

Trust me, it's not your fault. They don't work for most kids with ADHD.




Which of the above will help your child with ADHD:

- Learn to feel the passage of time
- Move from being prompt-dependent to independent
- Help to get off video games without fights or nagging
- Develop resiliency to get through non-preferred tasks
- Help to transition from preferred to non-preferred tasks without arguments or blow-ups
- Get through daily routines without constant supervision & reminders
- Keep track of assignments and remember to turn in completed homework
- **Learn how to use his/her executive functioning instead of you constantly acting as his/her executive functioning**

Answer: None, because they do not teach skills

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What does work

- Teaching how to “feel time” in unit volume
- Visual scaffolding to build future thinking skills
- Incentivizing getting through non-preferred tasks
- Using visual, declarative language
- Applying “if-then” thinking to teachable moments
- Previewing or “frontloading”
- You making a commitment to stop acting as his executive functioning, with the understanding that he will experience some natural consequences.

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This is what visual scaffolding looks like

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Language is the foundation to improving executive functioning

- Kids with ADHD are lagging in the development of their self-directed talk or an internal dialogue (what I refer to as "Brain Coach"). We need to help them develop this "inner voice".

READ THE FIELD FOR TODAY

Beach: Watch for cars, cross as a group,
No singing, yelling, walking on people's lawns,
Keeping our distance from other people, watch
where you shake towels, no kicking sand on others

Fishing trip: Mind others' personal space, watch
the hook, be aware of where other
people are, no running around
on the boat, think about
People's +

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Strategy: Using language to improve self-directed talk

Use visual, declarative language
instead of prompts:

"Look around the kitchen and
figure out what needs to happen."

"Do you look like you're ready to
leave for school?"

"Picture having YouTube time
when you're done math."

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Strategy: Frontloading

“Here’s what today is going to look like. We’re going to Giant and will leave here around 10:00. After that, we’re running some errands. We will not be going into Game Stop while we’re in the shopping center.

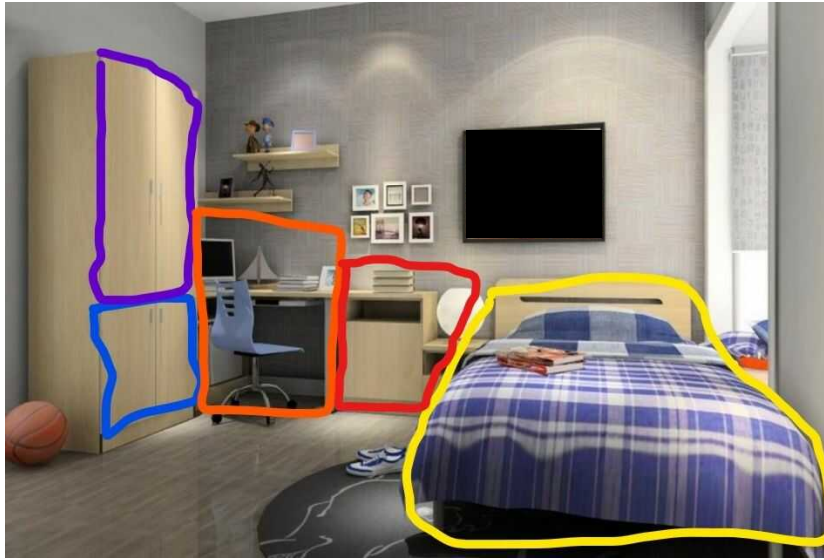
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Have you ever said, “*Clean your room*” and expect it to go from this to this yet it never happens?



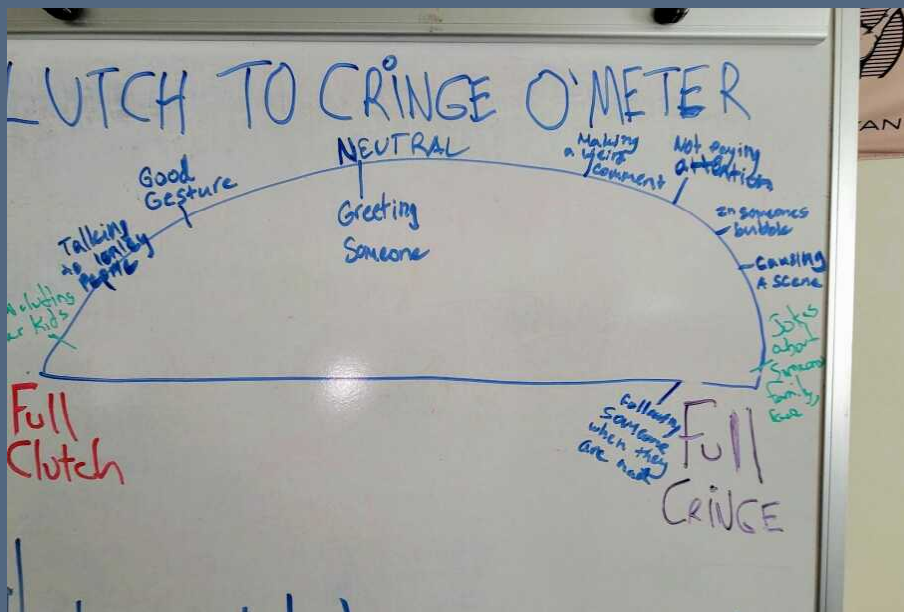
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Here's why..



- Because he can't visualize what the space should look like when it's clean, regardless of how many times you may have prompted him to clean it.
- Because she doesn't know where to start or in what sequence to clean.
- Because he has no concept of how long it will take so he presumes it will take much longer than it will.

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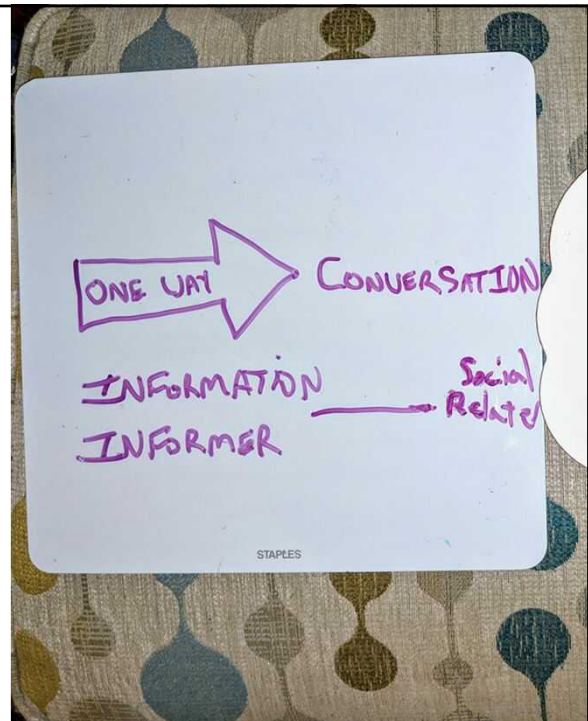
Social Skills

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Social Learning Challenges & Social Executive Function Skills

Social Learning Challenges: When someone does not learn social information intuitively from a young age, to the same extent of their peers.

Social Executive Function Skills: The set of skills required to make behavioral adaptations in social situations in order to keep other people feeling comfortable around us.



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Clutch: When you feel comfortable around people and people feel comfortable around you.

Neutral: When people are being normal in a certain situation.

Cringe: When people do something unusual and people feel uncomfortable in a situation.

For kids with ADHD the social learning challenges that are most noticeable

- Perspective taking
- "Getting the bigger picture"/Situational awareness
- Using humor appropriately and relating to others' emotional experiences
- (To a lesser extent) Initiation of language/self-advocacy

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What *does not* help build social executive function skills

“Positive peer role models”- You cannot pick up social skills by osmosis.

Role playing scripted, socially appropriate behaviors.

Social skills groups

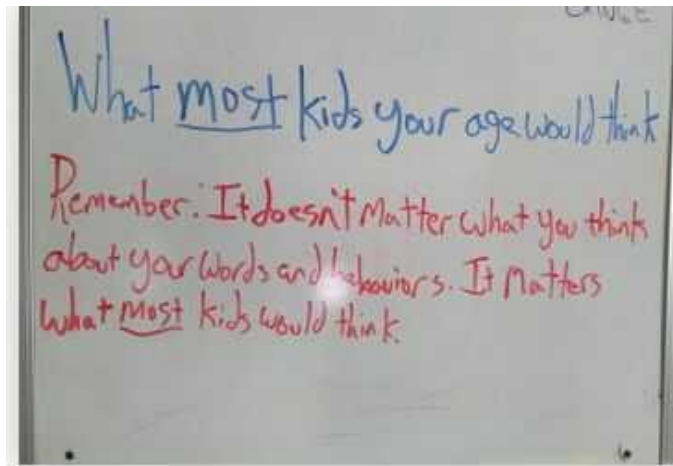
“Although social skills training (SST) is a **common intervention approach**, **evidence to date suggests that SST has limited efficacy, at least when provided in traditional, clinic-based settings.**”

Mikami, A.Y., Smit, S. & Khalis, A. Social Skills Training and ADHD—What Works?. *Curr Psychiatry Rep* 19, 93 (2017). <https://doi.org/10.1007/s11920-017-0850-2>

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What I often find with the kids I work with

- “2nd grade is when other kids start to notice social learning challenges however most parents do not see this as an issue until about 5th grade (age 10-11).
- 5th grade: Social expectations increase, greater desire to be part of a same-gender peer group. This is when the guys I work with often start to become more socially isolated.
- 9-10th Boys develop better self-regulation, which may sometimes lead to social anxiety around similar-age peers.



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American Academy of Pediatrics ADHD treatment recommendations

The American Academy of Pediatrics treatment recommendations for ADHD in children over 6: Medication management in conjunction with Parent Behavior Training.

For under 6: Parent Behavior training first, followed by medication management

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American Academy of Pediatrics ADHD treatment recommendations

Therapy might help for other conditions, but there's no consistent evidence these treatments are effective for the symptoms of ADHD. -Dr. Stephen Hinshaw

In my experience, most people are unfamiliar with the AAP treatment recommendations thus they recommend ineffective treatments such as individual therapy for kids.

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Risks of unmedicated ADHD

- The results of the present study show that the long-term outcomes for participants with ADHD when left untreated were poor compared with non-ADHD controls, and that treatment of ADHD improved long-term outcomes, but usually not to the point of normalization.
[https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3520745/...](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3520745/)
- “If you look at the four biggest health risks in the U.S.—poor diet, insufficient exercise, obesity, and smoking—ADHD presents a greater risk than all four of these concerns combined,” explains Dr. Barkley.
[https://chadd.org/.../new-research-suggests-untreated.../...](https://chadd.org/.../new-research-suggests-untreated.../)
- Pharmacotherapy for attention-deficit/hyperactivity disorder (ADHD) decreases the risk for substance abuse: findings from a longitudinal follow-up of youths with and without ADHD.
<https://scholar.google.com/scholar...>
- If left untreated, adolescents will self-medicate. There is a 100% increased risk of substance abuse among this group of teens.
- The epidemic of traffic fatalities has also been linked to untreated ADHD.
- Those with untreated ADHD are twice as likely to divorce as their treated or typical peers.
<https://www.smartkidswithld.org/.../untreated-adhd.../>

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What I explain to families

- Parent Training & Medication Management
- Parent Training Programs: ADHD Dude Membership Site, PCIT, PMT
- Stimulants are the safest medications in the psychiatry field and among the safest.
- I encourage families to only take medical advice from licensed medical professionals.

Biggest sources of misinformation about ADHD & medication I hear:

1. Facebook groups
2. Therapists
3. Family members

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ADHD Dude Facebook group



@theadhddude



Type in "ADHD Dude"



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