

## **Attention Deficit Disorder In the Single Parent Home**

Grant L. Martin, Ph.D.

“I stopped taking Adam shopping or out in public months ago. I spent all of my time pacing the isles looking for him, getting him down off of anything climbable, or telling him to take his hands off the merchandise. He’s always going 90 miles an hour. With only myself to look after him I never got anything accomplished.”

Some children such as Adam can’t sit still. They are distracted by everything and don’t seem to learn from their mistakes. They continue to disobey even when they are punished repeatedly. They also tend to act without thinking. Sometimes called “hyperactive” these children who have difficulties with attention, impulse control and overarousal can have a problem called Attention Deficit/Hyperactivity Disorder. These children are a challenge to any family, but can be very problematic to a single parent.

Amy is quite different from Adam. She daydreams constantly. Amy is seldom in trouble at school for things like disobedience or talking too much. She is bright and a talented young artist, yet she gets consistently low grades. These low marks result from not completing or turning in her homework.

Her father tells us, “Recently I spent several hours struggling with Amy to get her homework done. At first she told me she didn’t have any homework. I checked her notebook and found her assignment sheet which showed she had several pages of math and language arts work to complete. Amy cried off and on for the entire two hours. You would have thought I was asking the impossible from her. Yet we finally got the work done.”

“I was exhausted after working all day, stopping at the store for groceries before picking Amy up at day care and then preparing dinner. After cleaning up from dinner, I washed a couple loads of clothes and spent the two hours with Amy on her homework.”

“Imagine my frustration the next afternoon when Amy’s teacher called to say Amy had not turned in any assignments for the week. This included the math and language arts worksheets we had labored over so hard the night before. As a single dad, I have already had my dreams for family unity crushed by a messy divorce. Now my hopes are being further eroded by Amy’s difficulties. What shall I do next?”

Adam and Amy represent the two major categories of Attention Deficit/Hyperactivity disorder (ADHD) that affects three to five percent (1.46 to 2.46 million) of all children. Adam appears to have features of hyperactivity and impulsivity, while Amy is displaying more of the inattentive and distractible characteristics of ADHD.

ADHD children who are primarily impulsive and hyperactive can behave in a bizarre and aggressive manner. They often seem guiltless, are unpopular, and perform poorly at school. They seem to have little self-control and are very explosive, noisy and disruptive, messy, irresponsible, and immature for their age.

One day I was interviewing a five year old girl suspected of being hyperactive and impulsive. I asked her name and she replied with, “Sally No.” I knew her last name was not “No” so I inquired further. I discovered Sally had been reprimanded and told, “Sally, no. Don’t do that,” so often over her first five years of life, she

thought “No” was her real last name. Imagine the pain and heartache of her divorced mom who was at her wits end in trying to parent this difficult child.

ADHD children who are primarily inattentive tend to be anxious, shy, socially withdrawn and out of step with their classmates. They tend to perform poorly in sports and in school, often because they are daydreaming, staring into space or “marching to a different drum beat.” They forget daily activities and seem sluggish and drowsy. These inattentive children might be called “space cadets” or “air heads.” However, they are less aggressive, impulsive and hyperactive than other ADHD children, and have fewer relationship problems.

Many children can be impulsive, “hyper” or inattentive on some occasions. However, ADHD children usually exhibit these characteristics all the time. They misbehave everywhere—at school, church, grandparent’s house, the grocery store, and home.

## **Causes and Sources of ADHD**

In spite of the fact ADHD is one of the most thoroughly researched conditions of childhood, its exact cause is still not known. Research suggests ADHD does have a biological basis. Many ADHD children seem to arrive in the world with temperaments that leave them difficult to manage.

This research suggests ADHD may be caused by an imbalance of neurotransmitters, which are chemicals used by the brain to control behavior. Recently researchers at the University of Chicago found a marker—a stretch of DNA—that, when inherited with the dopamine transporter gene, confers susceptibility to ADHD. This dopamine transporter is a kind of pump that moves

the chemical dopamine, which mediates attention and arousal, in and out of cells. More research is needed, but it appears that ADHD is an inherited biological condition.

Some people claim that ADHD is caused by food additives, sugar, yeast, vitamin deficiency, lead poisoning, fluorescent lighting, or faulty parenting. However, there is no reliable evidence to support these assertions. It is true that parental frustration and negative reactions toward your child can aggravate the problem, but it does not actually cause ADHD.

## **Diagnosis of ADHD**

There is a big difference between suspecting your child might be impulsive and distractible and actually confirming your child has some type of attention disorder. A thorough and accurate diagnosis and treatment by a competent professional is important for the long term well being of your child and your family.

There is no simple test that determines a child has ADHD. Diagnosis is a complicated process that requires the skill of a psychologist, psychiatrist, pediatrician, pediatric neurologist or other mental health professional that specializes in special needs of children. A proper diagnosis orients the child, parents, and caregivers to the exact nature of the child's difficulties by providing information about strengths and weakness. It also should clarify the specific problems with attention, overarousal, and impulsivity. A diagnosis should also reveal a student's learning style and academic capabilities with direction and recommendations for parents and teachers.

A thorough diagnosis should also determine the presence of other problems, such as learning disabilities, conduct disorder, history of abuse, poor socialization skills, or disruptive family relationships. Understanding of all these factors allows you and your professional team to design and implement a more effective intervention program.

Your local school district can be a resource for obtaining a diagnosis and prescription for classroom help. Contact your neighborhood school and ask the principal or school counselor about conducting an assessment for your child. You may also be able to obtain diagnostic help through a Christian counseling center in

your area, other mental health agencies, university clinics, or home school associations.

Another resource is Children & Adults with Attention Deficit Disorders (CH.A.D.D.). Through family support and advocacy, public and professional education, and encouragement of scientific and educational research, CH.A.D.D. works to ensure that those with attention deficits reach their inherent potential. Local chapters of CH.A.D.D. can help you locate resources in your area for both diagnosis and multi-modal treatment. If you need help in locating a local chapter of CH.A.D.D., contact the national office in Plantation, Florida at (800) 233-4050 or (305) 587-3700.

## **How to Help the ADHD Child**

I have often said that if raising a child is worth a college education, then parenting an ADHD child should be worth a Ph.D. It follows, then, that a single parent raising an ADHD child should qualify for the Nobel Prize. I know single parenting is a demanding and unrelenting task. Furthermore, there are no quick fixes or patented formulas for ensuring success for children with ADHD. Yet, we do know a great deal about the needs of these children. In the following section, I will highlight some key components of raising a child with attention deficits within a single parent family.

♣ Once a diagnosis of ADHD is confirmed, a multi-modal treatment plan needs to be implemented that will draw on five areas of intervention. The first component is **parent education, support and counseling**. The goal here is to increase your understanding of the nature of ADHD and how to best cope with your child's

behavior. Books, tapes, seminars, support groups, educators and mental health professionals are resources for expanding your awareness of how ADHD affects your child.

The second component of a multi-modal treatment program is **educational intervention, accommodation and remediation**. Here you work with the school and/or daycare to implement the best combination of classroom structure, learning aids, tutoring, and curriculum modification that matches your child's educational strengths and weaknesses.

The child and **self-control** issues becomes the third part of the intervention effort. Instruction and practice on problem-solving, conflict resolution, anger management, organization, time management, and social skills are examples of areas of need for many ADHD children.

**Medication** can be a possible fourth component of the treatment strategy for ADHD. Medication is not a cure and should not be used as the only treatment for attention disorders. The short term benefits of medication include a decrease in impulsive behavior, as well as reduced hyperactivity and aggressive behavior. Inappropriate social behaviors may improve, along with an increase in concentration, academic performance, and ability to work on long term goals or projects.

Research does show the one most effective element in the treatment for ADHD is medication. Yet, you need to enter into this aspect of treatment with caution and full understanding of the potential benefit and liabilities. It is also important to

remember that without working on the other aspects of treatment mentioned in this section, the long-term benefits of medication may be limited.

The fifth component of a multi-modal or whole-person approach to treatment, is the **spiritual** dimension. Here a Christian parent can draw on God's strength and wisdom in dealing with your child. You present Godly principles for coping with life through your own example and by the daily instruction you provide on decision making and morality. In addition, you influence your child by the use of consequences, both positive and negative, to direct your child in making healthy choices. You also petition God through prayer on behalf of your child. And you ask God for strength to maintain your own sanity through the difficult task of fulfilling many roles for your child.

¶ The next important principle for raising a ADHD child in a single parent family is to strive for **consistency**. Consistency means three important things. First, you need to be consistent over time. This means that the manner in which you react to the ADHD behavior today is also how you should seek to respond to it over the next few days and weeks.

Consistency also means you try to respond in the same fashion across different places and settings. It is common to respond to behaviors one way at home but an entirely different way in public places like stores and restaurants. Your child needs to know that rules and consequences which operate at home will also apply away from home.

The third aspect to consistency means that each parent should strive to manage the behavior in as similar fashion as possible to the other parent. In two household



situations, this means making sure each household responds in similar fashion. Suppose your child has an arrangement that a school progress report is to be brought home every Friday. Also, any recreational time on the weekend is dependent upon all work being current on the progress report. If your child goes to his or her other parent's home for the weekend, it is crucial the other parent cooperate and enforce the "no work, no play" rule.

① In general, punishing an ADHD child is not as effective as using **praise and rewards**. Rather than focusing on weakness, catch the child being good and encourage that behavior. Do all you can to assist your child in developing personal strengths that can help compensate for ADHD symptoms and enhance personal strengths. Once you identify your child's strengths, you can use them to build your child's self-esteem and help to provide the confidence your child needs to tackle whatever s/he finds difficult.

ADHD children respond well to a structured system of rewards for good behavior. This system encourages the child to work in order to earn privileges or rewards s/he wants by accumulating points for desired behaviors and removing points for undesirable behaviors. You can make charts or use tokens or stickers to show your child the consequences of good behavior. You should only work on a few behaviors at one time and add additional behaviors as others are learned.

④ Avoid **emotional reactions** such as anger, sarcasm, and ridicule. Remember your child has problems with control, and it only makes him or her feel worse to be told a task is easy or anyone can do it. Short, mild reprimands, however, can remind children to focus their attention.

Discipline can best be maintained by establishing a few consistent rules with immediate consequences whenever each rule is broken. Rules should be phrased positively in terms of what your child should do. Praise your child and reward him or her for good behavior

⑤ One of the finest gifts a parent can give to a child is a safe harbor. The best way to give an ADHD child a feeling of safety is through consistent **structure**. Because you are competing with a distractible and inattentive nature, you should make your instructions clear and simple. When you tell your child “No”, you should act accordingly. It only makes the problem worse if an ADHD child learns that if s/he can badger mom or dad long enough, s/he will eventually give in. Make your rules and stick to them unless there is clear evidence to change.

Another aspect of structure is to avoid making promises you aren't sure you can keep. For a child with attention deficit it may be better not to say anything about a future event if you aren't sure it will happen. For example, you may want to take your child to the indoor playground that just opened near the shopping center. If you don't have to work overtime this coming Saturday, you can probably go. It's better to wait until you know for sure you can be available before telling your child. Otherwise you will have to deal with the overreactive outburst of feelings when your boss says you have to work Saturday and you have to tell your child.

⑥ The next crucial principle is to practice forgiveness on a daily basis. I am indebted to Dr. Russell A. Barkley, a noted authority on ADHD, who articulated the application of this principle to parenting an ADHD child in a recent ADHD publication.

This may be the most difficult guideline to implement on a daily basis. At the end of each day, take a moment to review the day and to forgive your child all their transgressions. Acknowledge the anger, resentment, disappointment and other negative emotions that have arisen throughout the day due to the child's misconduct or disruptions. Your child needs forgiven because you need released from the bondage of resentment. The child needs released from the accumulate affects of your frustrations. In addition, God asks that we forgive others just as He has forgiven us (Ephesians 4:32).

Forgive your ADHD child for s/he is disabled and cannot always control what s/he does. The child should still be held accountable for his or her misdeeds and taught to make amends to others that they have harmed. This cycle of misbehavior, repentance, forgiveness, and restitution may need repeated numerous times. Yet God has also forgiven His children more times than we can ever count (1 John 1:9).

Second, you should concentrate on forgiving others that day who may have misunderstood your child's inappropriate behavior or acted in ways that were offensive to you and your child. Someone may have dismissed your child as lazy, stupid or without conscience. This can include the extended family, siblings and strangers, as well as caregivers or staff who should know better. This in no way means you should continue permitting others to mistreat your ADHD child. However, it does mean you have to learn to go beyond the hurt, anger and resentment brought on by such instances.

Finally, parents must learn the practice of forgiving yourself for your own mistakes in the management of the attention deficit child that day. You still need to

improve your parenting skills and evaluate how successfully you have approached and managed your child's problem behaviors. Forgiveness does not mean granting yourself license to repeatedly make the same errors without conscience. However, it does mean letting go of the self-depreciation, shame, humiliation and resentment or anger that accompanies such acts of self-evaluation. You can then replace them with a frank evaluation of your performance as a caregiver that day, identify errors to improve and make a personal commitment to strive to get it right the next day.

Forgiveness is a tall order for most people. Your status as a single parent often means there has been heartache, rejection and loss in your life, making the job even harder. You may find this principle the hardest to implement consistently. However, forgiveness is most fundamental of all the principles reviewed here which helps bring about the effective and peaceful management of your ADHD child.

Single parenting of an ADHD child can be difficult and demanding. However, along with the burdens come the blessings and joys from seeing your child grow up to achieve the full potential that God created within that special person. Most ADHD children have some exceptional talents with which to accommodate their weaker areas. You can be a vital component in drawing out those gifts. May God bless.

Dr. Grant L. Martin is a child psychologist associated with CRISTA Counseling Service in Seattle, WA. He is the author of *The Hyperactive Child: What You Need to Know About Attention Deficit Disorder—Fact, Myths, and Treatment*.