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This column focuses on counseling, clinical issues, and psychotherapy, including innovative strategies for aiding clients. Potential contributors are encouraged to submit manuscripts to Paul R. Rasmussen, Department of Psychology, Furman University, 3300 Poinsett Hwy, Greenville, SC 29613 USA.

Understanding and Helping Children Who Manifest Symptoms That Meet the Criteria for the Attention-Deficit Hyperactivity Disorder Diagnosis

Francis X. Walton

Attention-Deficit Hyperactivity Disorder (ADHD) is the most commonly diagnosed childhood disorder of our time, yet Adlerian therapists often underestimate the power Individual Psychology provides to help such children. Russell A. Barkley (1994), who is among the more prominent and prolific writers with regard to ADHD, has defined the condition as follows: "ADHD really can be described by one symptom, an impairment in inhibiting behavior and delaying a response. It is this problem with behavior inhibition that is the hallmark symptom of ADHD" (p. 1). Barkley's definition makes sense and is useful; however, the following explanation of the etiology of ADHD is very important for the therapist to question: "For most children, ADHD is a biologically based, inborn temperamental style that predisposes them to be inattentive, impulsive, and physically restless as well as deficient in their capacity for rule governed behavior" (p. 416). In contrast to this view, let us give consideration to Pulitzer Prize finalist Robert Whitaker's (2006) conclusion based on an extensive review of the research:
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While there have been claims made that ADHD is due to a chemical imbalance, there is no scientific evidence that shows that to be true. There is no biological test for ADHD, the diagnosis, of course, is based on an observation of a child's behavior. Thus, all science today can tell us is this: There is no *known* biological abnormality in children diagnosed with ADHD. (p. 1)

If the critical factor is not biological abnormality, then where should therapists and other helpers look to understand the child's behavior? Consider the following approaches that have proved their value in practice.

As he or she makes use of Adlerian principles when looking into the family life of the child, the therapist, more often than not, will become aware of a greatly underdeveloped sense of social interest in the child, a greatly underdeveloped sense of concern for fellow human beings. Adler taught that the most important role of a parent is to spread the interest of a child from the child to mother, to father, to other members of the family, and finally to members of the community at large. If the therapist looks at the pattern of transaction between the child and members of his or her family, the therapist can usually observe how a child who is learning about life in such a milieu can have very few opportunities to develop socially caring guides as part of his or her belief system. Such a child sees little or no value in delaying a response to stimuli in order to ever so briefly consider behavior-guiding inhibitions because there is little in the private logic that the child could use to guide himself or herself toward caring and responsible behavior. In fact, it is likely that the belief system of the child contains the premise, "People are in the world to be concerned about me, not for me to be concerned about them." The second most common premise is very much like this: "Adults will control your life if you give them half a chance. You can bet they are not going to control me." Neither of these common components of the belief system of children manifesting ADHD symptoms is conjunctive in nature. Neither stimulates the child to move toward fellow human beings with a view toward considering the welfare of others. Contrarily, the beliefs noted are beliefs that dispose the child to self-absorbed behavior. The therapist's job is now clear.

The importance of a connection to and a concern for fellow human beings cannot be overemphasized. Indeed, an accurate definition of sound mental health must include concern for others. Mental health involves taking responsibility to move toward the problems that life presents in an effort to deal with these problems in a manner that is a help to oneself as well as to others who are involved or affected.

The atmosphere in the house of the child manifesting ADHD symptoms very commonly falls into one of the following three patterns:

1. *The child is the center of the universe.* In these homes there are few if any limits. The child's rights are placed ahead of those of others.

for the rights and welfare of others is not introduced to the world of the child. The child learns to believe that he or she should have what he or she wants when he or she wants it. The child has not learned to inhibit the self from behavior that violates the welfare of others.

Remediation. Essentially what is required is for this child to encounter the order of life. Parents need to set limits and maintain them firmly. Because it is more difficult to control others than to control themselves, these parents can learn to identify limits that are under their control and steadfastly stick to them, despite complaints or temper tantrums. These children need to learn to help others and in other ways learn to contribute to the welfare of the group.

2. Parent talks but does not act. As in pattern number 1, the child does not have the opportunity to be exposed to limits or to learn to respect the welfare of others because limits and respect for others are not introduced into his or her life. In addition, parental criticisms that are not coupled by a willingness to follow through with limits and consequences leads to selfishness in the child, disrespect of adults, and disregard of authority.

Remediation. To remedy the above circumstance, the parent must avoid the criticisms and empty directives. Essentially, the parents need to say less but mean what they say. Again, the teaching of socially interested behavior is of utmost importance.

3. Parent is extremely controlling. In this pattern, the parent is usually highly critical and verbally and/or physically punitive. In this environment, the child lives under a constant threat of severe punishment. In these homes, parents are frequently perfectionists. If consequences are used as a method of discipline, the consequences are overly severe. When a child lives in such a controlling atmosphere, he or she misses out on learning about the give and take of cooperative relationships. The child learns to see others as enemies, or, at least, as adversaries, and subsequently he or she is in various ways resistant to any concern for the welfare or feelings of others.

Remediation. In this circumstance, the best advice to the parents is "back off use of power and vindictiveness!" When a parent "backs off," that parent communicates to the child that the parent has made a mistake. By backing off, the parent is saying, in essence, "I have acted as though you could not possibly make good decisions unless I stayed on your back (about school, friends, dress, etc.), and I am not going to do that any longer." It is valuable for the parent to convey the following message to a child: "You have what it takes to handle these decisions." When a parent acknowledges that he or she has been too controlling, that parent can take ownership of the mistake and convey the following type of message: "I truly am going to work at treating you more respectfully and avoid trying to make so many decisions for you. If we can help you, let us know, but right now we're going to work at not being into your business so much."

Teaching Concern for Others

Whether the child has failed to develop a sense of caring about fellow human beings by virtue of the above three patterns, or through other patterns, teaching concern for others is paramount for the therapist, the parent, and the teacher. Therapeutic intervention with such a parent can be advanced substantially if the therapist learns to make use of the "most memorable observation" with each parent as a means of helping the parent come to an accurate and encouraging understanding of the manner in which their belief system influences their choice of parenting style (Walton, 1996, 1998). The therapist must understand that in addition to helping parents understand the use or purpose of their child's behavior, it is at least equally important to help each parent understand the use or purpose of their own mistaken approaches to parenting.

Our Adlerian mentors have taught us the most powerful thing we can do for our clients is to help them see more clearly what they are up to. Within the confines of this essay, the principles and techniques involved in use of the most memorable observation will not be delineated; however, the sources cited will provide a comprehensive approach to the use of this powerful technique. The point of this exercise is to help parents understand what it is they find most critical in evaluating their children and their parenting.

Finally the therapist must become adept at explaining social interest, its importance in life, its relevance to the child's specific symptoms, and specific means for parents to help the child learn to respect and care about the welfare of fellow human beings. Some specific means to help accomplish this vital task in the home are as follows:

- Draw a firm line when behavior infringes upon rights of others.
- Do not allow yourself to be interrupted.
- Do not allow the child to command your attention when your rights or the rights of others are being infringed upon.
- Give opportunities to children to be a help to others, especially by inviting the child to be involved in a task that is appealing to him or her.

A few examples of such tasks in the home with young children would be vacuuming a carpet, placing napkins or silverware on the table, bringing in the newspaper or mail, agreeing to let the television be switched from a program of interest to the child to one of interest to others, putting clothes in a hamper, helping Mom or Dad tidy up a room, making a salad, and helping with cooking. The parents should remark positively on the child's helpfulness, perhaps mentioning the opportunity it provides for Mom or Dad to relax. Adapt such invitations to help older children by inviting them to perform some task that seems mature or even adult-like (e.g., selecting a birthday gift for a relative or purchasing some of the family groceries).

- Empathize with the difficulties of human beings in the presence of the child.
- Have children call a grandparent or other family member for the purpose of putting some cheer into that person's life.
- Invite child to make or purchase a surprise gift for family members or other loved ones or simply surprise someone with an act of kindness.
- Write a note of thanks or love to the child.
- Mention something you would like to do but that you cannot do alone or you do not have time to do. Invite the help of the child to do it or help with it.
- Talk about the challenge of being a teacher. Invite the child to do something caring for the teacher (e.g., a word of thanks to a teacher, an act of kindness, offering a drawing of a teacher pictured in some positive way).
- Comment upon the cooperation shown in simple ways in daily life (e.g., newspaper stories showing charitable responses of human beings to the needs of others, courtesy of drivers, the kindness of a clerk in a store, a kind word from one human being to another).
- Model kind and caring behavior (e.g., make kind and helpful statements). Do kind and helpful things for family members, model caring behavior toward your own siblings, and invite the child to do the same.
- Note occasional thoughtless or unkind acts observed in society. Mention alternatives for dealing with the situation.
- Show affection to the child and other family members.
- Smile when you can. Smiles invite connections among human beings.

The point of these examples is to get the child to stop to think beyond the self and to engage in useful social interaction. Children earning the ADHD label can be a handful. Promotion of the development of social interest can be challenging, but it must be given high priority to bring these children to a higher level of cooperative and productive behavior.

Summary

This essay directs professionals to focus upon family atmosphere and choice of parental style as influences upon the significant underdevelopment of social interest that I believe is observable in children whose behavior meets criteria for the ADHD diagnosis. Specific techniques for identifying the mistaken parenting styles are cited, examples of private logic used by such children are noted, and a variety of remedial steps that have proved their value in practice are recommended.

References

- Barkley, R. A., (1990). *Attention Deficit Hyperactivity Disorder*. New York: The Guilford Press
- Barkley, R. A. (1994). More on the New Theory of ADHD. *The ADHD Report*, 2(2), 1-4.
- Walton, F. X. (Producer). (1996). *The use of the most memorable observation in counseling and parent consultation* [DVD]. Adlerian Child Care Books, P.O. Box 210206, Columbia, SC 29211.
- Walton, F. X. (1998). Use of the most memorable observation as a technique for understanding choice of parent style. *The Journal of Individual Psychology*, 54(4), 487-494.
- Whitaker, R. (2006, fall). Science and drugs for ADHD. *The Florida Adlerian Society Newsletter*, Tampa, FL.