

## **Risk, Resilience and AD/HD: *Improving the Future of Children at Risk***

**All parents worry about their children's futures. Concern about the future quality of life is heightened when parents observe their children struggling behaviorally at home, academically in school and socially on the playground. When children are successful in these areas of their lives, parents are confident that their future will be bright. When children with AD/HD struggle in these areas, parents worry.**

### **The Helping Professional/Futurist**

Parents bring their worries to helping professionals—physicians, psychologists, social workers and educators. They arrive at our offices with a list of immediate problems, apprehensive that these problems, rather than representing stages of childhood, may be prophecies predicting significant future problems extending into the adult years. Helping professionals are asked to play the role of futurists. We evaluate children examining not only their current problems, but also the risks these problems pose for adult life. Increasingly, parents expect helping professionals to provide estimates of the child's future functioning as well. These estimates often fall under the term prognosis. Further, if the prognosis is adverse, parents request and hope that helping professionals can, through the prescription of medical, psychological, behavioral and educational inter-ventions, improve the child's future.

In general, helping professionals have been trained to undertake the role of futurists using a deficit or weakness based model. That is, we are trained to measure symptoms, evaluate problems, determine diagnoses, and set about to improve future outcome. Traditionally, improving outcome has been equated with reducing symptoms. This is the essence of a deficit model. If I identify what is wrong, I can better understand an individual's functioning and future risks. I can then set out to fix the symptoms and in the process improve the future. Although this model has served well both in identifying what is wrong and in prescribing deficit-based interventions resulting in a relief of symptoms, unfortunately it has not been found to positively affect the future of children with AD/HD.



In this article we will briefly examine the emerging literature on future risks children with AD/HD face as they enter their adult lives. We will then briefly explain the importance of developing a strength-based model and offer a number of suggestions for parents of children with AD/HD. The importance of balancing your approach between symptom relief and long-term outcome is emphasized in our model. We will suggest that a balanced approach affords equal attention to what is right and what is wrong. The logic of this model is inescapable. Keep in mind that when children leave school and prepare to enter their adult lives, they are not lined up and asked their worst subject and most annoying behavior, then promptly provided a job

requiring the two. It is just the opposite. In life we tend to find happiness and success by learning to make the most of our strengths or islands of competence. In fact, our strengths can serve as powerful forces, often minimizing the negative impact of problems.

## **AD/HD in the Adult Years**

An emerging body of research literature focusing upon symptoms and problems experienced by individuals with AD/HD reveals alarming trends. Though a significant group of individuals with AD/HD progress reasonably well into their adult lives, at least half, if not more, experience personality, psychiatric, educational, vocational and personal problems at a rate much higher than the general population. Though slightly different in outcome male or female, the inattentive or combined type adults with AD/HD face greater adversity and problems in their lives than individuals without AD/HD. They are more prone to experience depression and anxiety; less likely to graduate from high school, enter college, graduate from college or be successful in the work force; more likely to not be promoted at work and remain at lower paying jobs; more likely to experience problems with substance use and abuse as well as difficulty in their marriages; and more likely to develop a rather pessimistic view of the world and a helpless perception of their ability to be successful in every day life.

The deficit model in longitudinal studies has very well demonstrated that the worries parents experience about the future of children with AD/HD are well founded. Unfortunately, the deficit model finding out what is wrong and setting out to fix it has not yielded long-term research to suggest significant positive change in the future.

No single treatment or combination of treatments for AD/HD has demonstrated the power to lead to a markedly better life outcome. There is no doubt that these treatments have yielded significant improvement in daily functioning, yet researchers have yet to demonstrate a long-term positive impact. We believe that although this lack of positive impact could simply be the result of poorly designed research, it could also be a function of an unbalanced approach focusing on deficits while under-emphasizing assets or strengths.

## **Resilience and the "Resilient Mindset"**

The focus upon strengths in helping to overcome adversity has been referred to in research literature as resilience. Resilience is the capacity to deal successfully with the obstacles that confront us on life's road, while maintaining a straight and true path toward our goals.

Resilience factors have been demonstrated to increase the probability that children facing a host of adversity in their lives can persevere and experience future life successfully and with satisfaction. Such children have developed what we refer to as a resilient mindset. They view the world in an optimistic and hopeful way; feel special and appreciated in the eyes of significant others; have learned to set realistic goals and expectations for themselves; and believe that they have the ability to solve problems and make decisions. Thus, they are more likely to view mistakes, hardships, and

obstacles as challenges to confront rather than as stressors to avoid. They rely on growth fostering coping strategies. Though aware of their weaknesses and vulnerabilities, they also recognize their strengths and talents.

Resilient children are empathic and possess the skills to develop satisfying interpersonal skills and are able to seek out assistance and nurturance in a comfortable manner. A very important skill is their ability to define the aspects of their lives they can control and to focus their energy and attention on these, rather than on factors they cannot influence.

It is beyond the scope of this article to review in depth the research literature focusing on resilience, but there is emerging evidence that parents exert a significant, positive impact in helping their at-risk children develop a resilient mindset. This mindset has an impact not only upon their children's current functioning, but ultimately on their future success and happiness. In the remainder of this article, we will offer five strategies to guide families to help children with AD/HD become more resilient.

## **Five Resilience Strategies**

**1. Teach empathy by practicing empathy.** If our children are to communicate effectively and develop satisfying interpersonal relationships, it is essential that we help them to develop empathy. Empathy is viewed as one of the cornerstones of emotional intelligence as described by Dr. Daniel Goleman. Empathy may be understood as the ability to put oneself inside the shoes of another person and to see the world through that person's eyes.

Although empathy is an essential interpersonal skill operating in all relationships, it is far more difficult to achieve than most of us realize. This is especially true when we are upset, angry or disappointed with another person. When we are empathic we not only ask ourselves what we hope to accomplish when we say or do things, but as important, we consider the following question, "Are we saying or doing things in a way that our child will be most responsive to hearing us?"

We teach our children empathy when we listen closely to what they have to say; when we validate their statements; and when we say and do things in a way in which they will be most responsive to learning from us. We avoid preaching, lecturing or offering comments that our children may take to be judgmental and accusatory. Guiding questions we must pose for ourselves include, "Would we want anyone to speak with us the way we are speaking with our children?" "How would our children describe us at this moment?" "How would we hope they described us?"

As an example, a parent may want to motivate a child with AD/HD to work more diligently and attempt to achieve this goal by exhorting the child to "try harder." While the parent may be well-intentioned, the comment "try harder" is frequently experienced as accusatory. Consequently, the parent's remark may actually backfire, leading to further resentment. An empathic statement might be, "I know that you are having trouble

with your math homework. Many kids do, so maybe together we can figure out what will help." We must remember that the development of empathy provides the foundation for effective communication and interpersonal skills. These are vital features of a resilient mindset.

**2. Teach responsibility by encouraging contributions.** If children are to develop a feeling of accomplishment and pride, we must provide them with ample opportunities for assuming responsibilities, especially responsibilities that strengthen their belief that they are contributing to their home, school or community.

We have found that enlisting youngsters with AD/HD to use their islands of competence in pursuits such as tutoring younger children, painting murals on the wall of the school, watering plants, bringing messages to the office or going on walks for hunger, helps them to feel that they are making a positive difference. This serves to reinforce their motivation and self-esteem as they witness concrete examples of their achievements.

**3. Teach decision-making and problem-solving skills that reinforce self-discipline.**

An essential component of resilience and high self-esteem is the belief that one possesses some control over one's life. To acquire this attitude of ownership, children require experiences from which they can learn and apply decision-making and problem-solving skills. We can encourage them to articulate problem areas, to think of possible solutions, to consider what solution might work best, and to attempt that solution and assess the results. This can be accomplished by involving children in discussions of how best to solve particular problems such as issues with friends; when and in what order to do their homework; ways to solve problems with a sibling; or asking them to do research on a particular project.

The use of problem solving skills can also be enlisted in the important process of discipline with the goal of promoting self-discipline. Because one of the main characteristics of children with AD/HD is their limited use of self-discipline or self-control, these are skills that we must focus on and strengthen. One way we can accomplish this goal is to obtain the input of children in the development of rules and consequences that affect their lives at home and at school (children are often more likely to remember and follow rules and develop self-control when they are involved, within reason, in participating in the creation of these rules and consequences). These kinds of activities empower children by reinforcing a sense of ownership, commitment, accountability and self-discipline.

**4. Offer encouragement and positive feedback.** Resilience is nurtured when we convey realistic appreciation to children and help them to feel they are very special and important to us. By doing so, we become what Dr. Julius Segal calls the charismatic adults in their lives, that is, adults from whom children gather strength. Spending special time alone with our children, writing them a brief note of love or appreciation or hugging them are examples of this strategy.

Youngsters with learning and attention problems are frequently given the label special needs. Although we recognize the importance of this label in securing services and funding, we also believe that we could use similar words on a banner that would appear on all of our homes and schools, namely, every child who enters these doors needs to feel special.

**5. Help children deal with mistakes.** The fear of making mistakes and looking foolish is one of the strongest roadblocks to developing high self-esteem and resilience. Children with AD/HD are often vulnerable to feelings of defeat and are likely to retreat from tasks that may lead to failure. We must help our children realize that mistakes are an important ingredient in the process of learning. We can do this in a variety of ways, such as responding to children's mistakes by showing them the correct way to solve a problem and by not saying such demeaning comments such as, "Do you have any brains?" or "You never do anything right!"

At the very beginning of the school year before teachers have taught any lessons or given any work, they can introduce the topic of mistakes in the learning process. In the discussion, teachers can share memories of their own anxieties about making mistakes when they were students and involve the class in a discussion about the best ways to insure that students not worry about making a mistake. Placing the issue about the fear of making mistakes out in the open typically serves to lessen its potency, thereby increasing opportunities for learning.

**Our Legacy to the Next Generation** The worries of parents raising children with AD/HD are well founded. The goal of raising resilient children is important to insure future success for those with AD/HD. Resilience is linked to a sense of optimism, ownership and personal control. We have learned from both personal and professional experience that we can all serve as the charismatic adults in children's lives believing in them, providing them with opportunities that reinforce their islands of competence and feelings of self-worth. This is not only a wonderful gift to our children, but also an essential ingredient to improve the future of children with AD/HD. It is part of our legacy to the next generation.

*Contemporary Publishers will publish Drs. Brooks and Goldstein's text, Raising Resilient Children, this year. They can be reached on their web sites at: [www.drrobertbrooks.com](http://www.drrobertbrooks.com) and [www.samgoldstein.com](http://www.samgoldstein.com).*

Attention!® Magazine Volume 6, Number 3, Page 31