

TODAY'S CHILDREN WITH AD/HD HAVE UNPRECEDENTED SUPPORT. Schools provide accommodations to level the academic playing field, physicians prescribe an ever-widening array of medications to enhance brain function, laws protect the rights of students with the disorder, and classroom teachers routinely apply behavior modification programs to keep students on track. All of these **external** supports increase a child's ability to meet academic responsibilities, but none actually teach children how to apply **internal** resources to minimize the negative effects of AD/HD.

Behavior modification, for example, provides specific behavioral targets and incentives for self-control, but it does not focus on the strategies children might use to engage their own attention. Medication has proven effective in bolstering attention and reducing hyperactivity and impulsivity symptoms, but few parents would readily embrace a lifetime of medication for their children. Yet, AD/HD is often a lifetime disorder. Given these limitations, clinicians need to develop interventions that foster attitudes of ownership and empowerment to manage AD/HD. This article, based on years of clinical experience with preteen students who have AD/HD, will provide some examples of an "inside-out" approach. These interventions are not intended to replace those already used but rather to complement them by emphasizing students' understanding of AD/HD and developing their inner resources to manage it—skills and information that will last a lifetime.

Ownership refers to an attitude of personal accountability over AD/HD. Individuals with the disorder must come to acknowledge that their minds are theirs alone to manage (and no one else's). It takes a great deal of maturity to grasp that the buck stops with

them. We can start by teaching young students attention enhancement strategies that they can apply to small, manageable tasks. In this way we hope to increase their awareness of the crucial role these strategies play in task success. Too many children feel helpless in managing their attention and do not know what they can do to bolster their attention.

Aden A. Burka, PhD, specializes in child and adolescent psychology, including psychoeducational evaluation, cognitive behavior modification, school consultation, learning disabilities, attention-deficit/hyperactivity disorder, and parental counseling. He is based at the Ochsner Clinic in New Orleans. More than 27 years ago, Burka founded the Challenges Summer Program, which teaches resiliency skills to elementary school children, and which he continues to direct today. He also started the O-YES program at Metairie Park Country Day, a program that teaches high school students with learning disabilities how to take ownership of their disabilities and overcome them.

Catherine Aden Burka, LMSW, works with Communities in Schools, a nonprofit housed in the public school system, which aims to reduce the dropout rate of students in Texas. She currently works with elementary school children with a mental health diagnosis.

An unacceptable outcome is for children to use the AD/HD label as a crutch or excuse to relinquish responsibility. For adults trying to help children with AD/HD, one of the most difficult challenges is to walk the fine line between explanation and excuse. Even though we know these students have difficulty managing their attention and behavior, we cannot teach responsibility by lowering the bar. Our goal is to help children develop success strategies while still holding them accountable: No excuses.

Empowerment over AD/HD comes from knowledge about AD/HD. How children understand the disorder has a great deal to do with how they manage it. Teenagers' knowledge about AD/HD is most often scant and consists of a few words such as "short attention span." Yet by the time students with AD/HD are in high school, they are capable of understanding how it affects their reading, writing, and mathematics abilities; interferes with being responsible; and impedes their social interaction. Professionals are not doing enough to educate and demystify this disorder for teenagers. For preteens, AD/HD may simply mean that it's hard to pay attention or think before acting or that one gets "hyper" sometimes. Empowerment for this age group has more to do with learning behavioral strategies that can combat AD/HD's interference with learning and behavior.

Activities to promote ownership and empowerment

We know, thanks to Jean Piaget's research, that thought and understanding in elementary school children are tied to concrete action. So, too, must our efforts at fostering students' ownership of their AD/HD and their

Enhancing Ownership in Preteen

empowerment. This approach uses short, fun activities to build children's concrete awareness of the resources they possess to **engage** and then **hold on** to their attention. This attention "two step" underpins the success of many academic challenges, whether they are completing homework, studying, following directions, or learning new information in class. Fun activities, such as the game *Simon Says*, rest on

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the same strategy-oriented fun, but in this model activities are used to help children discover their executive skills in a nonintimidating way.

A+ Attention

We begin this activity by challenging children to pay their best attention for one minute, explaining that during that time new information to be learned will be presented. Children are



and Empowerment

Children with AD/HD

urged to give it “all they have” for the entire minute and see how much new information they can learn.

Before beginning, they are encouraged to get themselves ready; then, the activity begins. We often tell the child about our family, including names, ages, and where they live. Once we are finished, children are quizzed in a supportive way to see how many facts they can remember. More often than not, they recall a great many details. Then, they are debriefed to find out the strategies they used. When asked, most children say something along the lines of “I paid attention,” showing little awareness of what went into their success. We offer observations such as “I could tell you were looking at me the whole time” or “I saw you take a calming breath when asked to get yourself ready.” Other strategies children have come up with are, “I kept my mind on you,” “I told myself to pay attention,” or “I repeated the information in my mind.” Generally, at least five strategies are identified, and then children are asked to draw a picture of themselves using the *A+ attention* they had just identified (Figure 1).

The fun and momentary understanding



Figure 1: A+ Attention

would be lost quickly but for two things. First, the picture helps children remember the attention strategies they used; secondly, a parent is in the room, watching and par-

icipating when asked. Parental presence is helpful for many reasons but most importantly to help cross-fertilize the roots of attention know-how to home and school as well as therapy. Children cannot be expected independently to apply these skills and strategies to their academic challenges. For the time being, this transfer must be fostered by adults. Parents are most often amazed at their child’s focus and can use the strategies and vocabulary of effortful attention to prompt and reinforce focus at home. They can also take the picture to school and ask the teacher to talk with the child about

how the attention strategies can be used in the classroom.

The main tools parents and teachers can use to strengthen effortful attention are prompting and reinforcing. Parents bring the picture home and use it to remind their child how helpful attention skills can be. Prompting children to use their *A+ attention* when they begin homework helps them to remember to “turn on” their resources. Children like the feeling of independence and getting their work done more efficiently; parents support those goals too. Teachers also respond very positively to

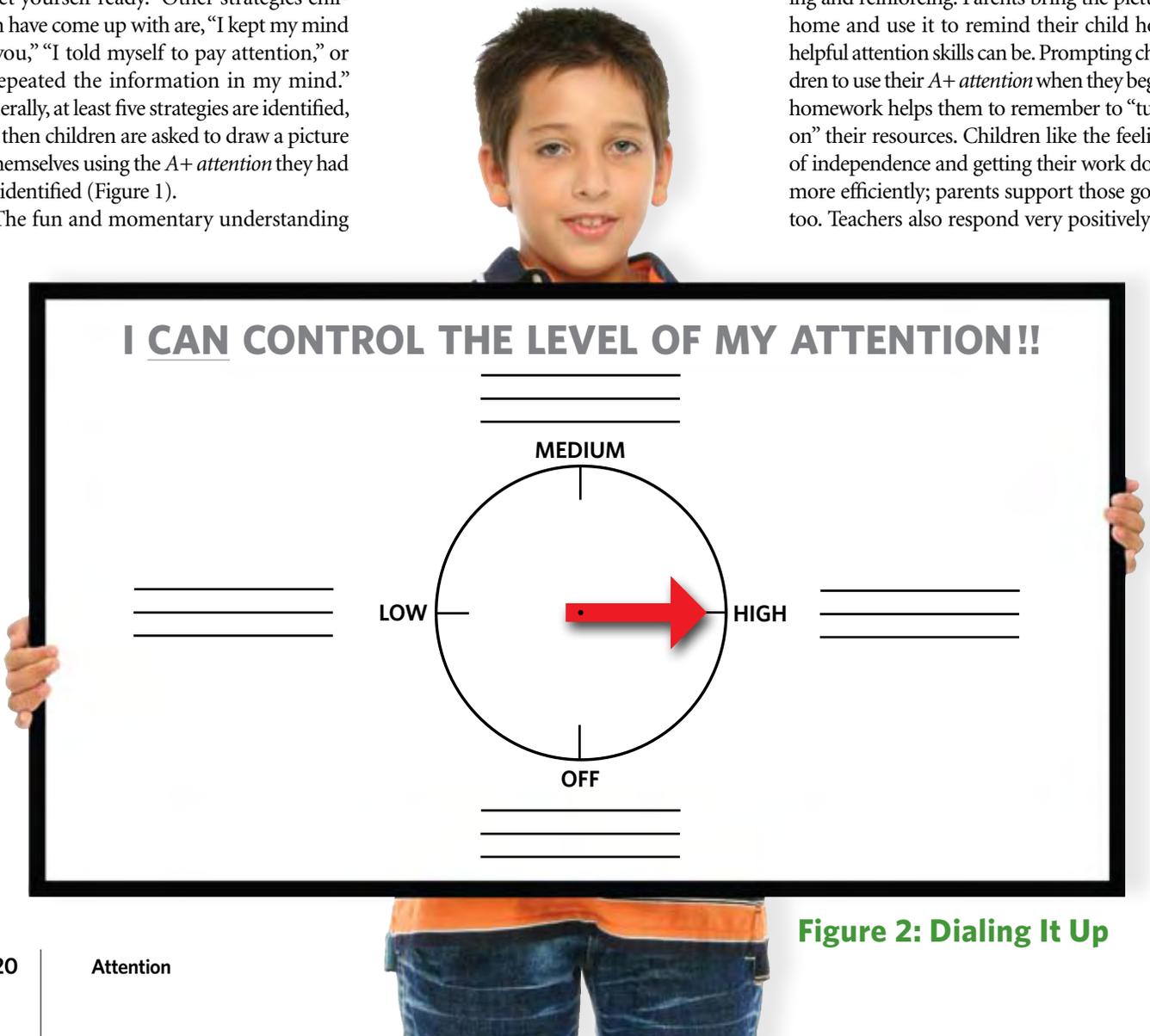


Figure 2: Dialing It Up

their students using their attention resources. Parents can give the teacher a copy of the picture and ask the teacher to prompt and reinforce those skills in the classroom. Parents and teacher are working collaboratively to support the child's use of *A+ attention*.

Even if only for a minute, children begin to see the connection between paying attention to new information and the retention of that information, a skill vital for school success. They also take small steps toward ownership and empowerment. These attention strategies give them something over which they have responsibility and for which they have accountability. Their *A+ attention* is a tool at their disposal if they make a conscious and determined effort. In the same way, the attention skills foster a sense of empowerment because children know what to do to engage their best attention.

Dialing It Up

Once children understand that they have resources to bolster their attention, it is helpful for them to think about when and how to apply those resources. We like to use an attention dial (Figure 2) that shows settings of High, Medium, Low, and Off. A discussion involving the therapist, parents, and the child will help clarify that different situations need different types of attention.

We use a large poster board to create the attention dial, which has a movable arrow in the middle. Children enjoy using the pointer to discuss dialing up their attention in different situations. For example, activities such as listening to directions, working independently, or taking tests call for high attention, but playing at recess, eating lunch, and watching TV do not. Knowing that all activities do not require high attention empowers children to turn their attention skills to High only when needed.

Parents and teachers can incorporate this vocabulary into their interactions with children: They can prompt *A+ attention* when needed and reinforce it when used, which activates and strengthens children's skills.

My Reaction to Distraction

We give elementary school children a list of possible classroom distractions (Figure 3)



Figure 3: My Reaction to Distractions

- Surprise visitors
- Talking
- Fidgeting
- Strange noises
- Air conditioner
- Computer sounds
- Teacher helping other students
- Sneezing/coughing
- Doors opening/closing
- Birds/airplanes
- Clocks/watches

and ask them to circle the ones that occur most frequently. We then role play those situations and practice how to ask for help from the teacher. Called *My Reaction to Distraction*, the activity empowers children to do something constructive about distractions.

Most adults underestimate the difficulty children have with self-advocacy, especially with adults. Often, children do not realize they can do something to help themselves nor do they know what to do. Role-playing how to ask for help gives them something concrete to model and fosters their efforts to help themselves. Rather than putting the responsibility for distracted attention on the shoulders of the teacher, children need to shoulder some of that responsibility themselves.

Fostering mastery and self-reliance

In general, the ownership and empowerment model emphasizes active mastery rather than passive acquiescence, self-reliance to manage the problem rather than reliance solely on adults. This model is not meant to supplant but rather supplement proven interventions such as medication, accommodations, and behavior modification. It suggests ways to foster attitudes

of ownership and empowerment in combating this lifelong disorder.

Like other AD/HD interventions, the ownership model must be adapted to the age and circumstances of the child. Helping a seven-year-old child arrange his classroom cubbie would be different than working with a twelve-year-old who has multiple classrooms and a distant locker. AD/HD is a moving target as development proceeds. The specific vocabulary and interventions may change, but the same fundamentals can be emphasized: ownership and empowerment.

Too many people assume that all one has to do is take a pill and the problem will be fixed. The "fix" is fiction. The fact that medication works so quickly in many cases may mislead parents and teachers into assuming their jobs are done.

The model demonstrated here spurs children's ability to help themselves in age-appropriate ways. Ownership and empowerment take years of fostered maturation to develop. By adulthood, individuals with AD/HD should not only understand that their minds are theirs to manage but also possess the tools to manage that mind so that they can reach their potential. ●