



**Back to School
for Adults with AD/HD**

**Getting it Right
the Second Time Around**

by Peter Jaksa, Ph.D.

MMANY ADULTS WITH attention-deficit/hyperactivity disorder (AD/HD) find that at some point in their lives they need to continue their education. The reasons may involve a career change, advanced training or finally completing that long-delayed degree. While it can certainly be a challenge to juggle work responsibilities, school-work and family life, the challenges are compounded when one has AD/HD.

Many of the same academic problems faced by children with AD/HD also apply to the adult with the disorder returning to school years later. With the exception of hyperactivity, most core symptoms of AD/HD do not improve significantly with age. Children and adults with AD/HD have similar struggles with tasks that require planning, organizing and prioritizing; time management; establishing and maintaining routines; and keeping track of things.

AD/HD symptoms can't be cured, but they *can* be managed.

The good news for adults with AD/HD returning to school is that our understanding of AD/HD has increased tremendously over the past 15 to 20 years. It is indeed possible to do it differently and get it "right" the second time around. Learning to manage your AD/HD more effectively starts with having a thorough understanding of how the AD/HD affects you. This understanding leads to developing a comprehensive treatment plan that may include medication, counseling or therapy, and getting the right academic accommodations. It also includes relying on a support system of family and friends and learning self-help strategies to take better care of yourself.

Get The Treatment Plan In Place

If you have not done so already, get a thorough AD/HD evaluation. Understand how, and to what degree, your AD/HD affects your behavior. Be aware

of any co-existing conditions such as depression, anxiety or learning disabilities and how these affect you in combination with the AD/HD. Work with a qualified professional who is knowledgeable about AD/HD to design an individualized treatment plan that addresses your specific needs, build on your strengths and compensates for areas of weakness.

A comprehensive treatment plan might involve medical, psychosocial and academic interventions. There is a biological ceiling to how much attention, concentration, restlessness, impulsivity and other AD/HD symptoms can be controlled through sheer effort and will power. Most people with AD/HD can benefit from treatment with medication. It is essential to work with your physician in finding the right medication, at the right dosage, which provides the benefits you need. Response to medication type and dosage level varies greatly from person to person. Find what works for you.

Ask for appropriate academic accommodations if you need them. Learn about disability legislation and rights covered under Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. These laws prohibit discrimination on the basis of disability and provide access to programs and facilities. Submit documentation of your AD/HD diagnosis with the student services office at your school, whether you request accommodations initially or might need to ask for accommodations later.

Master the Essentials of Organization

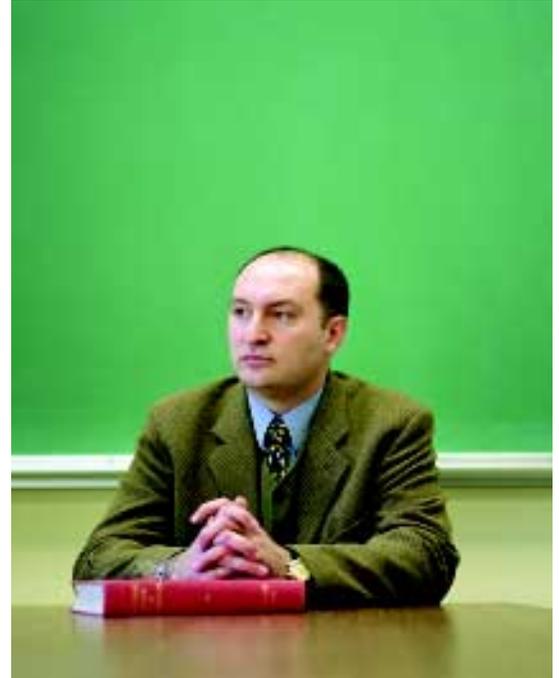
There are three areas of daily living where disorganization causes havoc for many people with AD/HD: organizing things, organizing time and organizing tasks. Organizing things—your physical environment—is crucial to avoid the piles of clutter that swallow homework papers and credit card bills, for example. If possible set up a work area in your home that is reserved for doing schoolwork, where you keep all school-related materials and minimize external distractions.

There is no way around it. If you have AD/HD, and you want to plan, prioritize, schedule and give yourself reminders, you *must* use some type of organizing system such as a daily planner. Although they sound like such basic skills, looking ahead, anticipating and planning what needs to be done, prioritizing, and keeping track of all the details that need to be remembered, are *not* skills that come naturally or easily with AD/HD. No one system works for everyone, and indeed the best system for you will be one that you're going to use consistently. Don't think of it as organization—think lifestyle change.

Understand your learning style (visual, auditory, kinesthetic, mixed) and design study strategies that make it work for you.

Take Care of Your Physical Health

As our mothers and doctors keep reminding us, eating a healthy diet, getting enough sleep and regular exer-



cise is indeed very good for you. If you're an adult with AD/HD, ignoring those needs may be absolutely disastrous in trying to manage the disorder. Sleep deprivation is a guaranteed method to wreck attention and concentration. Lack of nutrition from a poor diet, or low blood sugar levels due to skipping meals, make concentration more difficult and leave you feeling more fatigued and sluggish. Maintaining a regular schedule of aerobic exercise improves mental alertness and concentration, elevates mood, decreases restlessness and increases energy level. Although these activities are beneficial for everyone, they are even more important for individuals with AD/HD.

Jill, Sally and Harry are three adults with AD/HD who returned to school for various reasons. Although their names and personal information have been changed to protect confidentiality, these three individuals demonstrate the concerns of many other adults with AD/HD and some of the strategies they find helpful.

Jill is a happily married 26-year-old mother of two young children. Growing up, she struggled through school with undiagnosed AD/HD, a nonverbal learning disability and a low-level but chronic depression. In her senior year of high school, failing most of her classes, frustrated and demoralized, she dropped out of school. Jill is still very distractible, disorganized and forgetful. When asked how long she is able to read before her mind wanders, she laughs and replies, "One word!"



15 Keys to AD/HD Management and School Success

1. Get a thorough evaluation to help you understand how AD/HD affects you specifically. Types and severity of symptoms can vary greatly from person to person.
2. Design a treatment plan that includes learning strategies, behavioral routines, and professional and academic interventions as needed.
3. Treat any co-existing conditions (such as depression, anxiety, learning disabilities, substance abuse) as well as treating the AD/HD.
4. If you use AD/HD medications, work with your physician to find the right medication and dosage levels. Some trial and error may be necessary to get it right. Some people may require a combination of medications.
5. Work with the student services office at your school to obtain accommodations that fit your needs, for example extended time testing, priority registration, taping lectures, note-taking service and tutoring services.
6. Understand your learning style (visual, auditory, kinesthetic, mixed) and design study strategies that make it work for you. Don't just work harder, work smarter.
7. Use a planner or other organizing system. Take it with you everywhere you go. Write down anything you need to remember. Make it part of your lifestyle—or accept being disorganized as your lifestyle.
8. Remember to check your day planner. Remind yourself—often. It takes several weeks to develop a routine, months or years to develop a strong habit.
9. Use a separate task list in combination with the daily planner. Place the top most important tasks at the top of the list and stay focused on those. Replace a completed top-three task with another task from the list.
10. Create a workspace that is reserved for doing your schoolwork. Eliminate all unnecessary distractions. Treat study hours as work hours and let others (family, friends) know that you are not to be interrupted.
11. Schedule a weekly workout routine. Aerobic workouts three to five times per week can help reduce AD/HD symptoms. Use external structure such as signing up for a regularly scheduled exercise class. Get a workout buddy. Work with a personal trainer.
12. Get enough sleep. Sleep deprivation makes AD/HD symptoms such as distractibility and forgetfulness worse.
13. Don't forget to eat. Low blood sugar levels worsen distractibility and reduce energy levels.
14. Enlist your support system of family and friends. Let them know what your goals are and ask for help or support when needed.
15. Have confidence in your knowledge, resources and skills in managing your AD/HD. Expect to succeed! ■

Recently Jill started taking classes at the nearby community college to obtain her GED (high school equivalency diploma). Like many other adults with AD/HD, the first obstacle she had to overcome before returning to school was what she describes as “an extreme fear of failure.” Throughout all her years in school, Jill says sadly, “I felt so stupid.” Her memories of school are mostly negative and painful, and she continues to work in therapy to overcome the internalized feelings of shame and inferiority.

Jill is currently taking a combination of a stimulant medication and an antidepressant medication. The stimulant helps improve concentration and attention, and the antidepressant helps to elevate her moods and prevent sinking into a deeper depression. She sees her therapist two times per month, to work on behavioral

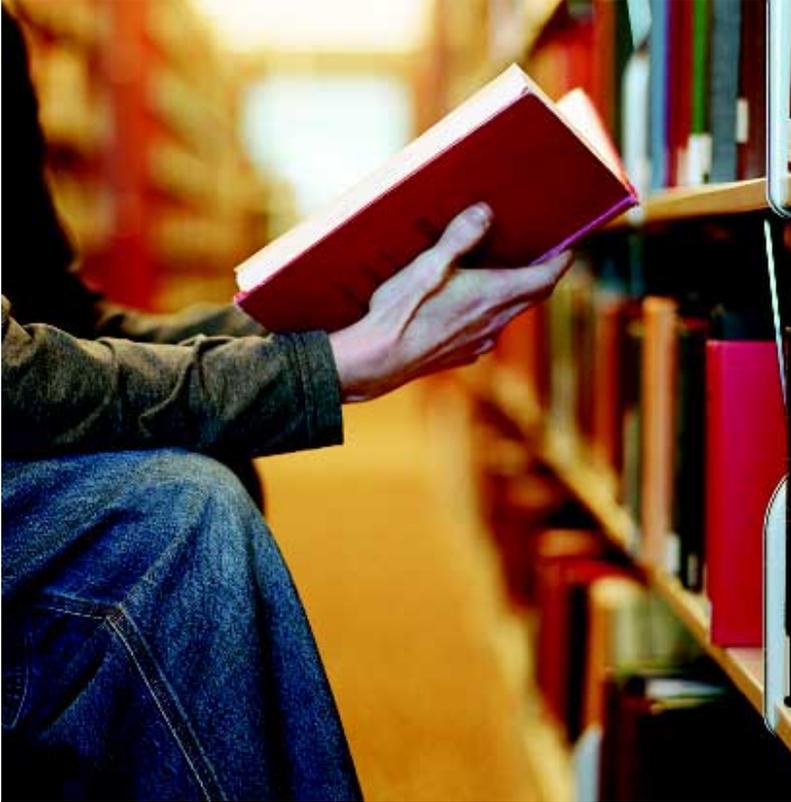
routines, discuss fears and current stressors and for support. Jill requested an academic accommodation to get extended time for tests and quizzes, which helps her complete all the test items despite her high level of distractibility.

Jill's study strategies are built around the fact that she is an auditory learner. It's easier for her to stay focused, process information and remember better when she can hear the information. She records her class notes, then listens to herself on the tape whenever she has a chance: while washing dishes, going for a long walk, even while taking a shower. She participates in class discussions whenever she can, and enjoys talking about the class work with her husband. Jill discovered early on that it's impossible to study in the house until the children are put to bed. She studies



Conference Notes

Peter Jaksa, Ph.D., will be presenting a workshop on “Get Moving! Understanding and Using Cardio Respiratory Exercise to Help Modulate AD/HD Symptoms” at the CHADD Annual Conference in Chicago, Ill., Oct. 26–28, 2006. Visit www.chadd.org for more information.



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best in the library where it's totally quiet. Even with the help of medication, too many distractions make it impossible for her to concentrate well enough to study.

Sally is 42, divorced for five years, and the mother of three daughters. After struggling for years to support the family financially, she quit her job in retail sales and entered a graduate program in school psychology. It takes every ounce of her boundless energy and natural optimism to take care of her family responsibilities, keep up with the academic work and occasionally "try to have a life!"

Sally was not physically hyperactive growing up, but states, "In class I was always talking." Sally joined the swim team in high school and remembers getting her best grades during the swim competition season. That was certainly not a coincidence, since the high impact workouts in daily swim practice very likely improved her mental clarity, improved concentration and focusing ability and reduced physical restlessness.

Sally has been prescribed a number of medications, however none of them has been very effective in her

case in reducing distractibility. Regular aerobic exercise works better for her in that department. She follows a set workout routine of swimming or running four days a week and says, "I can definitely feel the difference if I miss a few workouts."

According to Sally, "I've always been disorganized, since like forever." She underestimates how much time she needs to complete projects and is chronically late. She compensates by working hard at using her planner on a daily basis, for planning and time management and also as a reminder system. Sally has "a terrible memory" and learned that she must, must, *must* write down anything in her planner that she needs to remember. She frequently repeats her mantra, "If it's worth remembering, it's worth writing down!"

Sally's study and learning strategies are based on her being a visual learner. She takes detailed notes during lectures and copies everything on the board. She has learned to highlight important facts in her textbooks and then writes a one or two page outline that summarizes the information. The information makes more sense and is easier to recall when it's outlined—it helps her to literally "see" the big picture of how information fits together. In classes that require memorizing detailed information, she uses flash cards. Sally studies best in a quiet environment with soft music playing in the background, which is usually in her apartment when her daughters are at school.

Harry is a single 30 year old who had been employed in the investment services industry since he graduated from college. He realized this was a bad career choice for him, but only after years of being chronically late for work, inconsistent with paperwork and changing jobs three times in the past five years. Deciding that he needed a career change, and soon, Harry went back to college to get a degree in education and become an elementary school teacher.

Harry's second college career is not without its apprehensions. Although he was diagnosed with AD/HD at age 16, Harry says, "I struggled all my life in school." His parents and teachers provided a great deal of structure and support, which helped him get through high school. Unfortunately when he arrived at college all that external structure was gone, and he lacked the skills and resources to set up his own struc-

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ture and strategies. Making things worse, he started drinking heavily with friends on weekends and eventually once or twice on school nights. Although usually disorganized and terribly inconsistent, Harry worked hard to complete his degree in five years.

This time around Harry realizes that he must manage his AD/HD better to avoid falling into the same old traps. He is mentally and physically restless, easily distracted and easily bored. Medication helps to reduce but does not eliminate these symptoms. Harry has a strong addiction to roaming the Internet for hours at a time, even when more important matters need his attention. His study routines are designed, in part, to take him away from home and the beckoning glow of the computer screen.

Harry is most productive when he's doing "hands on" learning. He wants to teach at the elementary school level because he can use more active methods of teaching, rather than standing in front of the class delivering a lecture. He gets bored easily when studying and finds that he can actually concentrate better with music or the TV playing in the background. When Harry feels particularly restless he walks over to Starbucks and reads or studies over a latte. The people

and commotion in the coffee shop don't distract him; on the contrary, they energize him and help him concentrate better.

Expect success!

Henry Ford once said, "Whether you think you can or you think you can't, you're right." He was right, of course, in that we all tend to live up to (or down to) our expectations of ourselves. The danger for many adults with AD/HD is that a long history of academic struggles in childhood creates expectations of more of the same problems in adulthood. Fortunately, the past repeats itself only if we keep doing what we have always done. With new knowledge and understanding about AD/HD, medical and academic interventions, and learning new coping skills, there is every reason to feel confident about making changes and achieving success. ■

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