



MENTAL MINUTES

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ADHD: WHAT PARENTS SHOULD KNOW

WHAT ARE THE SYMPTOMS OF ADHD?

The child with ADHD who is inattentive will have 6 or more of the following symptoms:

- Has difficulty following instructions
- Has difficulty keeping attention on work or play activities at school and at home
- Loses things needed for activities at school and at home
- Appears not to listen
- Doesn't pay close attention to details
- Seems disorganized
- Has trouble with tasks that require planning ahead
- Forgets things
- Is easily distracted

The child with ADHD who is hyperactive/impulsive will have at least 6 of the following symptoms:

- Fidgety
- Runs or climbs inappropriately
- Can't play quietly
- Blurts out answers
- Interrupts people
- Can't stay in seat
- Talks too much
- Is always on the go
- Has trouble waiting his or her turn

Children who have ADHD have symptoms for at least 6 months.

Source: <http://familydoctor.org/online/famdocen/home/children/parents/behavior/118.html>

What is ADHD?

Attention-deficit hyperactivity disorder (ADHD) is the name of a group of behaviors found in many children and adults. People who have ADHD have trouble paying attention in school, at home or at work. They may be much more active and/or impulsive than what is usual for their age. These behaviors contribute to significant problems in relationships, learning and behavior. For this reason, children who have ADHD are sometimes seen as being "difficult" or as having behavior problems. ADHD is more common in boys than in girls. You may be more familiar with the term attention deficit disorder (ADD). This disorder was renamed in 1994 by the American Psychiatric Association (APA).

What causes ADHD?

Children who have ADHD do not make enough chemicals in key areas in the brain that are responsible for organizing thought. Without enough of these chemicals, the organizing centers of the brain don't work well. This causes the symptoms in children who have ADHD. Research shows that ADHD is more common in children who have close relatives with the disorder. Recent research also links smoking and other substance abuse during pregnancy to ADHD. Exposure to environmental toxins, such as lead, can also be a factor.

What else can I do to help my child?

A team effort, with parents, teachers and doctors working together, is the best way to help your child. Children who have ADHD may be difficult to parent. They may have trouble understanding directions, and their constant state of activity can be challenging for adults. Children who have ADHD also tend to need more structure and clearer expectations. You may need to change your home life a bit to help your child. Here are some things you can do to help:

- Make a schedule. Set specific times for waking up, eating, playing, doing homework, doing chores, watching TV or playing video games, and going to bed. Post the schedule where your child will always see it. Explain any changes to the routine in advance.

- Make simple house rules. It's important to explain what will happen when the rules are obeyed and when they are broken. Write down the rules and the results of not following them.
- Make sure your directions are understood. Get your child's attention and look directly into his or her eyes. Then tell your child in a clear, calm voice specifically what you want. Keep directions simple and short. Ask your child to repeat the directions back to you.
- Reward good behavior. Congratulate your child when he or she completes each step of a task.
- Make sure your child is supervised all the time. Because they are impulsive, children who have ADHD may need more adult supervision than other children their age.
- Watch your child around his or her friends. It's sometimes hard for children who have ADHD to learn social skills. Reward good play behaviors.
- Set a homework routine. Pick a regular place for doing homework, away from distractions such as other people, TV and video games. Break homework time into small parts and have breaks.
- Focus on effort, not grades. Reward your child when he or she tries to finish school work, not just for good grades. You can give extra rewards for earning better grades.
- Talk with your child's teachers. Find out how your child is doing at school--in class, at playtime, at lunchtime. Ask for daily or weekly progress notes from the teacher.

Some children benefit from counseling or from structured therapy. Families may benefit from talking with a specialist in managing ADHD-related behavior and learning problems. Studies have shown that certain food colorings and preservatives may cause or worsen hyperactive behavior in some children. Talk to your doctor about whether you need to make any changes to your child's diet.

See full article: <http://familydoctor.org/online/famdocen/home/children/parents/behavior/118.html>

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COMING THIS MONTH!!!

Our non-profit, Atlanta Center for Healing, will be releasing its quarterly newsletter, Healing Hearts, beginning January 14th, 2011.

In the meanwhile, take a look at our new website www.atlhealing.org



Helping Children Cope With Loss, Death, and Grief

Expressions of Grief

Talking to children about death must be geared to their developmental level, respectful of their cultural norms, and sensitive to their capacity to understand the situation. Children will be aware of the reactions of significant adults as they interpret and react to information about death and tragedy. In fact, for primary grade children adult reactions will play an especially important role in shaping their perceptions of the situation. The range of reactions that children display in response to the death of significant others may include:

- Emotional shock and at times an apparent lack of feelings, which serve to help the child detach from the pain of the moment;
- Regressive (immature) behaviors, such as needing to be rocked or held, difficulty separating from parents or significant others, needing to sleep in parent's bed or an apparent difficulty completing tasks well within the child's ability level;
- Explosive emotions and acting out behavior that reflect the child's internal feelings of anger, terror, frustration and helplessness. Acting out may reflect insecurity and a way to seek control over a situation for which they have little or no control;
- Asking the same questions over and over, not because they do not understand the facts, but rather because the information is so hard to believe or accept. Repeated questions can help listeners determine if the child is responding to misinformation or the real trauma of the event.

Helping Children Cope

The following tips will help teachers, parents, and other caregivers support children who have experienced the loss of parents, friends, or loved ones. Some of these recommendations come from Dr. Alan Wolfelt, Director of the Center for Loss and Life Transition in Fort Collins, Colorado.

- Allow children to be the teachers about their grief experiences: Give children the opportunity to tell their story and be a good listener.
- Don't assume that every child in a certain age group understands death in the same way or with the same feelings: All children are different and their view of the world is unique and shaped by different experiences. (Developmental information is provided below.)
- Grieving is a process, not an event: Parents and schools need to allow adequate time for each child to grieve in the manner that works for that child. Pressing children to resume "normal" activities without the chance to deal with their emotional pain may prompt additional problems or negative reactions.
- Don't lie or tell half-truths to children about the tragic event: Children are often bright and sensitive. They will see through false information and wonder why you do not trust them with the

truth. Lies do not help the child through the healing process or help develop effective coping strategies for life's future tragedies or losses.

- Help all children, regardless of age, to understand loss and death: Give the child information at the level that he/she can understand. Allow the child to guide adults as to the need for more information or clarification of the information presented. Loss and death are both part of the cycle of life that children need to understand.
- Encourage children to ask questions about loss and death: Adults need to be less anxious about not knowing all the answers. Treat questions with respect and a willingness to help the child find his or her own answers.
- Don't assume that children always grieve in an orderly or predictable way: We all grieve in different ways and there is no one "correct" way for people to move through the grieving process.
- Let children know that you really want to understand what they are feeling or what they need: Sometimes children are upset but they cannot tell you what will be helpful. Giving them the time and encouragement to share their feelings with you may enable them to sort out their feelings.
- Children will need long-lasting support: The more losses the child or adolescent suffers, the more difficult it will be to recover. This is especially true if they have lost a parent who was their major source of support. Try to develop multiple supports for children who suffer significant losses.
- Keep in mind that grief work is hard: It is hard work for adults and hard for children as well.
- Understand that grief work is complicated: Deaths that result from a terrorist act or war can bring forth many issues that are difficult, if not impossible, to comprehend. Grieving may also be complicated by a need for vengeance or justice and by the lack of resolution of the current situation: the conflict may continue and the nation may still feel at risk. The sudden or violent nature of the death or the fact that some individuals may be considered missing rather than dead can further complicate the grieving process.
- Be aware of your own need to grieve: Focusing on the children in your care is important, but not at the expense of your emotional needs. Adults who have lost a loved one will be far more able to help children work through their grief if they get help themselves. For some families, it may be important to seek family grief counseling, as well as individual sources of support.

Tips for Children and Teens with Grieving Friends and Classmates

Seeing a friend try to cope with a loss may scare or upset children who have had little or no experience with death and grieving. Following are some suggestions teachers and parents can provide to children and youth to deal with this "secondary" loss.

- Particularly with younger children, it will be important to help clarify their understanding of death. See tips above under "helping children cope."
- Seeing their classmates' reactions to loss may bring about some fears of losing their own parents or siblings, particularly for students who have family in the military or other risk related professions. Children need reassurance from caregivers and teachers that their own families are safe. For children who have experienced their own loss (previous death of a parent, grandparent, sibling), observing the grief of a friend can bring back painful memories. These children are at greater risk for developing more serious stress reactions and should be given extra support as needed.
- Children (and many adults) need help in communicating condolence or comfort messages. Provide children with age-appropriate guidance for supporting their peers. Help them decide what to say (e.g., "Steve, I am so sorry about your father. I know you will miss him very much. Let me know if I can help you with your paper route...") and what to expect (see "expressions of grief" above).
- Help children anticipate some changes in friends' behavior. It is important that children understand that their grieving friends may act differently, may withdraw from their friends for a while, might seem angry or very sad, etc., but that this does not mean a lasting change in their relationship.
- Explain to children that their "regular" friendship may be an important source of support for friends and classmates. Even normal social activities such as inviting a friend over to play, going to the park, playing sports, watching a movie, or a trip to the mall may offer a much needed distraction and sense of connection and normalcy.
- Children need to have some options for providing support—it will help them deal with their fears and concerns if they have some concrete actions that they can take to help. Suggest making cards, drawings, helping with chores or homework, etc. Older teens might offer to help the family with some shopping, cleaning, errands, etc., or with babysitting for younger children.
- Encourage children who are worried about a friend to talk to a caring adult. This can help alleviate their own concern or potential sense of responsibility for making their friend feel better. Children may also share important information about a friend who is at risk of more serious grief reactions.
- Parents and teachers need to be alert to children in their care who may be reacting to a friend's loss of a loved one. These children will need some extra support to help them deal with the sense of frustration and helplessness that many people are feeling at this time.

What is Oppositional Defiant Disorder (ODD)?

Oppositional defiant disorder (ODD) is a behavior disorder, usually diagnosed in childhood, that is characterized by uncooperative, defiant, negativistic, irritable, and annoying behaviors toward parents, peers, teachers, and other authority figures. Children and adolescents with ODD are more distressing or troubling to others than they are distressed or troubled themselves.

What causes oppositional defiant disorder?

While the cause of ODD is not known, there are two primary theories offered to explain the development of ODD. A developmental theory suggests that the problems begin when children are toddlers. Children and adolescents who develop ODD may have had a difficult time learning to separate from their primary attachment figure and developing autonomous skills. The bad attitudes characteristic of ODD are viewed as a continuation of the normal developmental issues that were not adequately resolved during the toddler years.

Learning theory suggests, however, that the negativistic characteristics of ODD are learned attitudes reflecting the effects of negative reinforcement techniques used by parents and authority figures. The use of negative reinforcers by parents is viewed as increasing the rate and intensity of oppositional behaviors in the child as it achieves the desired attention, time, concern, and interaction with parents or authority figures.

Symptoms of oppositional defiant disorder may include:

- frequent temper tantrums
- excessive arguments with adults
- refusal to comply with adult requests

- always questioning rules; refusal to follow rules
- behavior intended to annoy or upset others, including adults
- blaming others for his/her misbehaviors or mistakes
- easily annoyed by others
- frequently has an angry attitude
- speaking harshly, or unkind
- deliberately behaving in ways that seek revenge

The symptoms of ODD may resemble other medical conditions or behavior problems. Always consult your child's physician for a diagnosis.

How is oppositional defiant disorder diagnosed?

Parents, teachers, and other authority figures in child and adolescent settings often identify the child or adolescent with ODD. However, a child psychiatrist or a qualified mental health professional usually diagnoses ODD in children and adolescents. A detailed history of the child's behavior from parents and teachers, clinical observations of the child's behavior, and, sometimes, psychological testing contribute to the diagnosis.

Parents who note symptoms of ODD in their child or teen can help by seeking an evaluation and treatment early. Early treatment can often prevent future problems. Further, oppositional defiant disorder often coexists with other mental health disorders, including mood disorders, anxiety disorders, conduct disorder, and attention-deficit/hyperactivity disorder, increasing the need for early diagnosis and treatment. Consult your child's physician for more information.

Treatment for oppositional defiant disorder:

Specific treatment for children with oppositional defiant disorder will be determined by your child's

physician based on:

- your child's age, overall health, and medical history
- extent of your child's symptoms
- your child's tolerance for specific medications, procedures, or therapies
- expectations for the course of the condition
- your opinion or preference

Prevention of oppositional defiant disorder in childhood:

Some experts believe that a developmental sequence of experiences occurs in the development of oppositional defiant disorder. This sequence may start with ineffective parenting practices, followed by difficulty with other authority figures and poor peer interactions. As these experiences compound and continue, oppositional and defiant behaviors develop into a pattern of behavior.

Early detection and intervention into negative family and social experiences may be helpful in disrupting the sequence of experiences leading to more oppositional and defiant behaviors. Early detection and intervention with more effective communication skills, parenting skills, conflict resolution skills, and anger management skills can disrupt the pattern of negative behaviors and decrease the interference of oppositional and defiant behaviors in interpersonal relationships with adults and peers, and school and social adjustment. The goal of early intervention is to enhance the child's normal growth and developmental process, and improve the quality of life experienced by children or adolescents with oppositional defiant disorder.

See full article: <http://www.childrenshospital.org/az/Site1385/mainpageS1385P0.html>

Recipe Round-Up: Easy Cheesy Vegetable-Chicken Chowder

Ingredients

- 1 cup small broccoli flowerets
- 1 cup frozen loose-pack whole kernel corn
- 1/2 cup water
- 1/4 cup chopped onion
- 2 cups milk
- 1-1/2 cups chopped cooked chicken or turkey
- 1 10-3/4-ounce can condensed cream of potato soup
- 3/4 cup shredded cheddar cheese (3 ounces)
- Dash pepper
- 1/4 cup shredded cheddar cheese (1 ounce)
- 1-1/2 teaspoons snipped fresh thyme or 1/2 teaspoon dried thyme, crushed



Instructions

In a large saucepan combine broccoli, corn, water, onion, and thyme. Bring to boiling. Reduce heat and simmer, covered, for 8 to 10 minutes or until vegetables are tender. Do not drain.

Stir milk, chicken or turkey, potato soup, the 3/4 cup cheddar cheese, and pepper into vegetable mixture. Cook and stir over medium heat until cheese melts and mixture is heated through. Sprinkle each serving with the remaining cheddar cheese. Makes 4 servings.

Source: <http://www.recipe.com/easy-cheesy-vegetable-chicken-chowder/>

MENTAL MINUTE

Can you solve these brain teasing riddles???

1. I stay in a corner, but I go all over the place.
2. What is it? that goes through the wood and never touches a twig?
3. I'm a triangle. I'm good and tasty. What am I?
4. What is something that is yours but other people use it more than you do?
5. Forward I am heavy but backward I am not. What am I?
6. What is as big as you are and yet does not weigh anything?
7. What letter in the alphabet can make an old coin get very valuable?
8. I have a bark but don't bite and in the spring I catch kites. What am I?

Our sister agencies provide an extensive array of mental health services for both children and adults. "Our mission is to provide high-quality, easily accessible services for Georgians, focused on promoting mental and emotional well-being through personal and professional development, family preservation, resource coordination, and individualized treatment.

Self Care Corner: Five Easy Tips for Keeping Your New Year's Resolutions



It's the end of the year, so it makes sense that we discuss how to make those New Year's resolutions come true (for a change!). If you're serious about keeping those resolutions, then you'll appreciate this article. I've outlined five tips to help make you more successful when making those resolutions.

Improving your relationship with your family or significant other is a good goal, but you need to figure out how exactly you will do that. Is it by talking more often to them and opening up with what's going on in your life? Or is it by doing more things with them? You decide, then set up small but specific tasks to accomplish which you believe will help the relationship (such as calling them on the telephone more often, or setting aside more time each week to just talk to them).

means nothing more than a temporary setback. Putting such temporary setbacks into their proper perspective can help you move beyond them and put them behind you.

5. Enlist Additional Help or Support

Some people will find they just can't quit smoking on their own, or reduce their financial debt without additional help and support. Whether it's in the form of a professional, a family member, a friend, or some type of formal support group, consider enlisting someone's help. This shows that you are not only serious about keeping the resolution, but that you realize your own strengths and limitations.

For instance, a friend can help you practice communication skills, such as those you'd like to improve with your family or significant other. A financial manager can help you develop a realistic plan to get out of debt. A weight loss program or nutritionist can help a person lose weight and lead a more healthy lifestyle. Family members, friends, or even a professional can help you plan a career change, or a school advisor can help you decide whether to go back to school or not. Getting additional help or support in this manner is sensible way to help increase your success in maintaining your New Year's resolutions.

And remember...

Not every New Year's resolution was meant to be kept. Some are easier to keep than others. Sometimes it helps for a person to make a few *fun* resolutions you know are unrealistic and have no intentions of keeping. Since you'll break those right away, you will then have more time and energy to focus on the real ones. This may or may not work for everyone, so give it a try.

Keeping these few simple tips in mind this New Year may help to increase your chances of success. Consider that the new year is not only a time to make changes in your life, but also a time to be thankful for being alive and well for another year.

Source: http://psychcentral.com/archives/new_years.htm

1. Pick Realistic Goals

One of the biggest problems in keeping a resolution is that we simply aim too high. Resolving to look more like Cindy Crawford is an unrealistic resolution for anyone. Resolving to lose a few pounds or cut back on sweets are more realistic goals. Setting a goal of completely changing your life, your career, your family relations, etc. is too broad. Keep the goals small and simple. You'll find this tip alone will help you attain your goals. Educate yourself about realistic goals, too. There are dozens of reliable and informative online sources to help you learn how to reduce your financial debt, lose weight, quit smoking, and improve your relationships, among many other things. If you need more information, now is the time to read-up on the things of interest to you to help you keep your resolution.

2. Define Those Goals

Saying you'll lose weight, change your job, or go back to school isn't good enough. You need to write down how *specifically* you are going to move toward those goals. Want to lose a few pounds? Develop a weight loss plan which includes sensible eating with a *regular* exercise plan. Don't rely on magical solutions or weight loss pills to keep the weight off long-term. Develop specific, concrete ways to reach your goal, but keep each step along the way small. Deciding to quit your job tomorrow without having even begun a new job search is not realistic. Instead, find one or two job possibilities online, or in your local newspaper's classified ads section. Tailor your resume for each job possibility, and send one or two out. Keep the quantities small and easily manageable.

3. Set a Schedule

No goal is attainable without deciding when you're going to make the small changes needed to reach that goal. If you set no schedule for yourself, or -- as most people do -- set an unrealistic schedule, you are setting yourself up to fail. The schedule should be written down, just like your goal and the steps you will take to reach each goal. Losing a few pounds over a few months is realistic; losing a few pounds in a few days is not. Finding a new job within six months is realistic; finding one by the end of January is not. Improving your relationship with your significant other over the entire year is realistic; trying to do so overnight is impossible.

If your schedule involves things which need to be done daily or weekly, set specific times of the day or specific days of the week which you will use to work on it. Then do it, and keep written track of your keeping to that schedule. If you find a part of your schedule isn't working, don't be afraid to change it. The key is to stay flexible and adopt to changes needed to be successful in your goals.

4. Don't Be Upset by Setbacks

The old adage in therapy is two steps forward, one step back. The same could be said for New Year's Resolutions, which can often be the most difficult to keep. It may help, though, to remember that we're all human, we all make mistakes. It does no good to get depressed or disillusioned by setbacks in trying to reach your goals. In fact, if you know ahead of time that there are going to be times in which your resolve weakens or you don't live up to a certain step or schedule you've set, it can help when it does happen. It's a *part of the process* and

Mental Minute Solution

Solution

1. A Stamp
2. Sound
3. A Hershey's Kiss!
4. Your name
5. The word ton
6. Your shadow
7. The letter G. Add it to old and you get gold!
8. A tree

Source: <http://www.trickyriddles.com/>



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