Behavior Management Principles For the ADHD Child

What I would like to talk about in the last part of this presentation is on the behavior management principles for the ADHD child. In order to get specific strategies on how best to manage ADHD behavior in the home or classroom, it is essential to get the most up-to-date research possible in order to know what ADHD is, and perhaps even more importantly, what it is not. Caregivers of ADHD children cannot even begin to consider the proper approaches to management of the disorder until they have sufficient knowledge about the disorder, which researchers now believe is essentially a developmental delay in the neurological functioning in that part of the brain which is responsible for what is referred to as executive functioning, which relates to problem solving, attention, reasoning and planning. I hope earlier parts of this presentation help further your understanding ADHD.

As mentioned earlier, ADHD children live in the moment. They don’t internalize lessons from the past and they don’t delay gratification for something in the future. Because of this, addressing their behavior when it happens is key. The sooner the behaviors of an ADHD child can be addressed and impacted by a consequence, whether it’s a positive or negative consequence, the more impact it will have. Delaying a response to their behavior loses the impact you want it to have.

Also related to living in the moment is that ADHD children don’t maintain their effort towards rules and work when the consequences for how they’re performing are weak, delayed, or just not there. Not only does a reward (or punishment) at the end of the week seem like an eternity away, but so too can going to bed after dinner, or staying in at the next recess. That’s all in the future. They live in the moment.

If a caregiver is going to effectively manage the behaviors of an ADHD child, the pattern, the timing, and the power of their response is crucial to the impact such a response will make. Without question, research indicates that the procedures that are developed through behavior modification plans most clearly are the procedures of choice. Although praise or a form of physical affection might be effective, when the child’s behavior must
be altered quickly, artificial reward programs utilizing tokens, points, or chip systems should to be systematically introduced and maintained for several months.

Although behavior modification plans can vary as to what works best, perhaps what is most important to remember is to keep them simple enough that the amount of work necessary to implement them doesn’t keep them from being used. Remember though, you’re already putting in lots of time and energy into managing the behaviors now, perhaps with little chance in changing them in the future. Although there’s development work in establishing a behavior plan, the chances are likely that the overall time and energy put into managing challenging behaviors will be much less than what you’re putting in now.

Whatever the specifics of a plan may be, the following are key principles to make the plan most effective:

The first point is to provide more Immediate Feedback and Rewards/Punishments. This is directly related to the ADHD child living in the moment. Although it’s true that with any child the impact of a response is reduced the further away the response is to the concerning behavior, it’s especially true with an ADHD child. The feedback must be clear and specific, and must occur as soon after the behavior as possible.

The second point is to provide More Frequent Feedback and Rewards/Punishments. ADHD children require feedback much more frequently than do non-ADHD children. Although if it is done too often it can be irritating and intrusive to the children and time demanding for the parent, in order for children to get maximum control over their own behavior, frequent feedback is essential. Possible ways of doing this are by reminding oneself in the following ways:

- Place small stickers with smiley faces around the house where you frequently look each day. Whenever you see a sticker, comment on what the child is doing that you like.
• Another way is to set a cooking timer for brief and varied intervals throughout the day. When it rings, be reminded to let the child know how he or she is doing.

• Another system for prompting one to attend and monitor is to place 10 or so poker chips in the left pocket that must be moved to the right pocket whenever positive attention has been given to the child. The goal is to eventually move all ten chips to the right pocket by a certain time.

The third point is to provide More Powerful and Substantial Responses. For neurological reasons it is simply harder for ADHD children to regulate their behavior than it is for the non-ADHD child. Because of this, it is often necessary to have more powerful consequences (positive or negative) to motivate them for sustained work performance, to follow rules, and to behave well. Since ADHD children seem to have a reduced sensitivity to rewards, it makes sense that larger, more important, or powerful rewards need to be used. This also explains why positive praise or comments are rarely sufficient, by themselves, to motivate them to do well. More powerful rewards might include physical affection, privileges, tokens or points, or material rewards like small toys or collectable items. As I mentioned earlier, ADHD children have a much more difficult time than non-ADHD children to intrinsically motivate themselves. It’s the nature of the disability that they need more external and powerful rewards to motivate.

These first three principles indicate that caregivers should act, not yack, in dealing with the behavior of the child with ADHD. ADHD is not a disorder of reasoning, knowledge, or skill. Not even close. It’s not a problem of knowing what to do; it’s a problem of doing what you know. Continuing to talk, reason, repeat commands, cajole, yell or scream at the child does not help. Instead, acting quickly, predictably, and in a business-like fashion in delivering consequences to these children for good or bad behavior is the best means of managing them.

The fourth point is to provide Positives Before Negatives. In changing a particular behavior pattern in ADHD children, it is critical that parents avoid the all-too-common
tactic of trying punishment first to stop unwanted behavior. It is crucial for parents to redefine the problem behavior to what the behavior is that is wanted or desirable. In other words, it's not saying what you don't want to see, it's telling the child what you DO want to see. This will help allow the parent to better see the behavior when it’s happening, and then praise or reward it. Only after this new behavior has been rewarded for at least one week should parents begin punishing the undesired, opposite behavior. Even then, there should only be mild punishment and it should be done consistently but selectively, only for the occurrence of the particular negative behavior—not for everything else the child may be doing wrong. Mild punishment, when connected with a reward program, and when kept in balance where there is not more than one punishment being given out for every two or three instances of praise and reward, can be a very effective way of making behavior change.

The fifth principle of critical importance is consistency, which means three important things. Caregivers need to be consistent over time. This means that what it is that they do on the first day of implementing a behavior-change strategy is how they should attempt to respond to it each time it occurs over the next few days or weeks. Inconsistency or unpredictability in this respect is one of the biggest causes of a failed behavior-change program.

Related to this rule is not to give up too soon when you are just starting. It can take time before a therapeutic impact is made. Try your program when it is consistent with these principles for at least a week or two before deciding it isn’t working.

Consistency also means to respond in the same way across different places and settings. The ADHD child needs to know that the rules and consequences expected to occur at one place in school will also apply, whenever possible, in other places.

Anticipating Problems. The sixth principle for caregivers to remember is to try to anticipate the situation. It is likely that certain patterns of behavior develop quickly and predictably. Oftentimes problem situations occur at times of transitions, such as going to
bed, or having dinner. Problems are most evident when these children are leaving something they want to be doing or are going to something that has a different structure. Although parents are able to identify these potential problem times, often they have not put the knowledge to good use in heading off the disruptive behaviors. Their best response is to anticipate problems, consider ahead of time how best to deal with them, develop their plan, share it with the child just beforehand, and then use a plan should a problem arise.

Parents can approach predictable behavior problems, or any other for that matter, by following four simple steps before entering any transition time:

1: Stop before entering the transition time.
2: Review two or three rules with the child that the child has trouble following, then have the student repeat the rules back.
3: Review with the child what rewards may be able to be earned by following the rules.
4: Review the punishment that may have to be used.

Whichever punishment is used, the key to effective management is the quickness of responding when the problem arises, as discussed earlier. When these four steps have been followed, the caregiver and child may begin the transition to the next activity with the caregiver immediately giving the child frequent feedback and occasional rewards or tokens for good behavior.

Keeping Perspective. The last principle I’d like to mention relates to keeping perspective. It is so easy, when faced with a difficult to manage ADHD child, to lose all perspective on the immediate problem, become angry, embarrassed, or at the very least highly frustrated when the initial attempts at management don’t work. It’s easy to lose one’s cool, but that will likely only make the problems worse. Therefore, try to maintain some psychological distance, focusing on your own ability to stay as calm as possible, and by all means try to follow the other principles that were earlier discussed. Above all, remember that you are dealing with a child who has handicapped behavior. This child cannot always help behaving in the ways that he or she does. You are the adult; you are
the child’s caregiver and coach. The treatment of ADHD often requires a team approach that includes the mental health, educational and medical professions at various points. Treatment should be provided over an extended time to help those in the ongoing management of their disorder. And in doing so, many with the disorder can lead highly satisfactory, adjusted, and productive lives.