

Understanding ADHD

Strategies for Successfully Parenting Neurodivergent Kids

A prestation for St. Anne's Ministry
St. Margaret Mary Catholic Church

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Agenda

Introduction

What is ADHD

What are Executive Function Skills

Diagnosis and Co-occurring conditions

Parenting a child with ADHD

Getting help

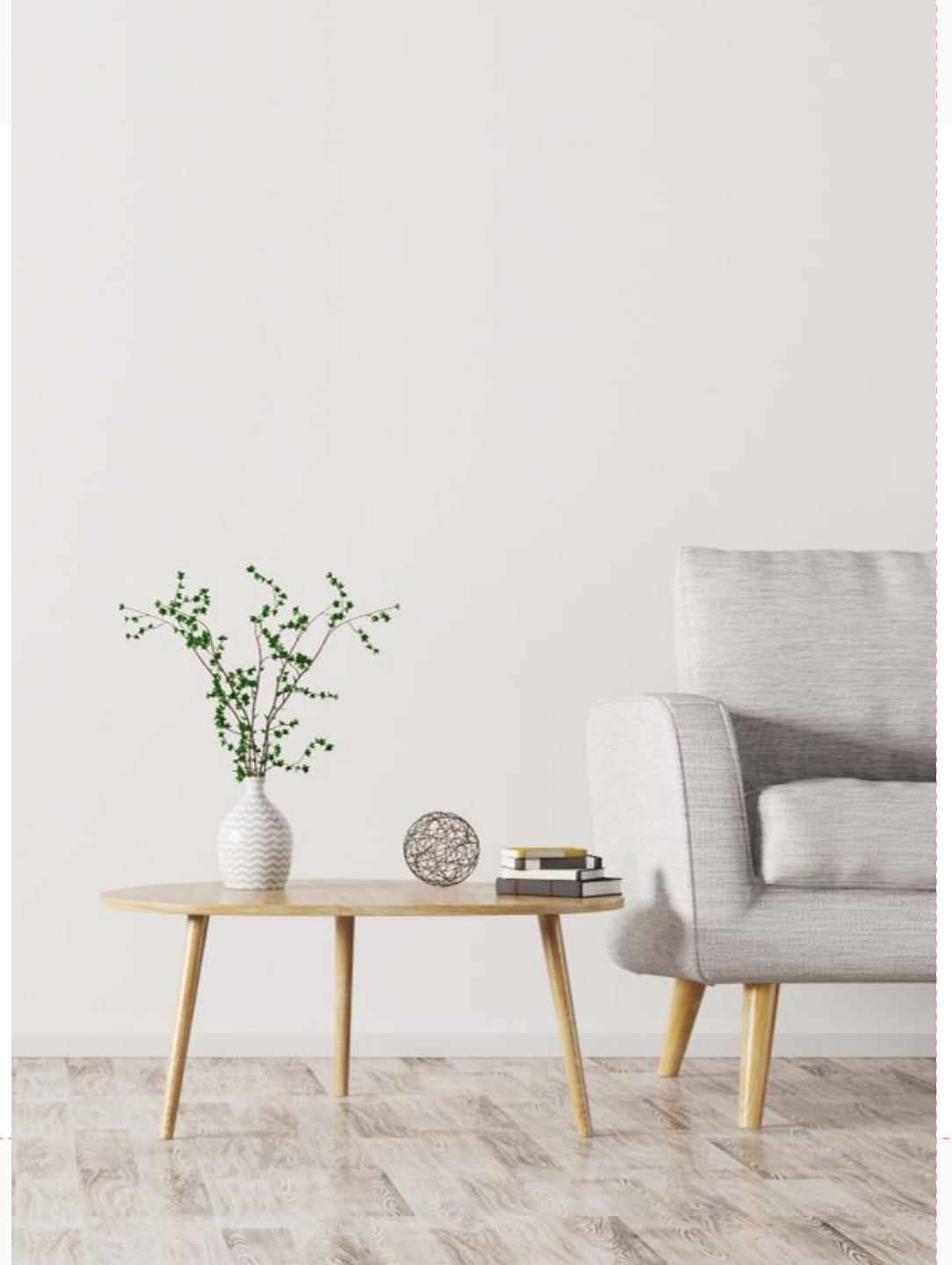
Q & A session



The power of knowledge

When we take the stigma out and work together as a team, we can achieve miracles.

Start with learning, diagnosing, finding resources.

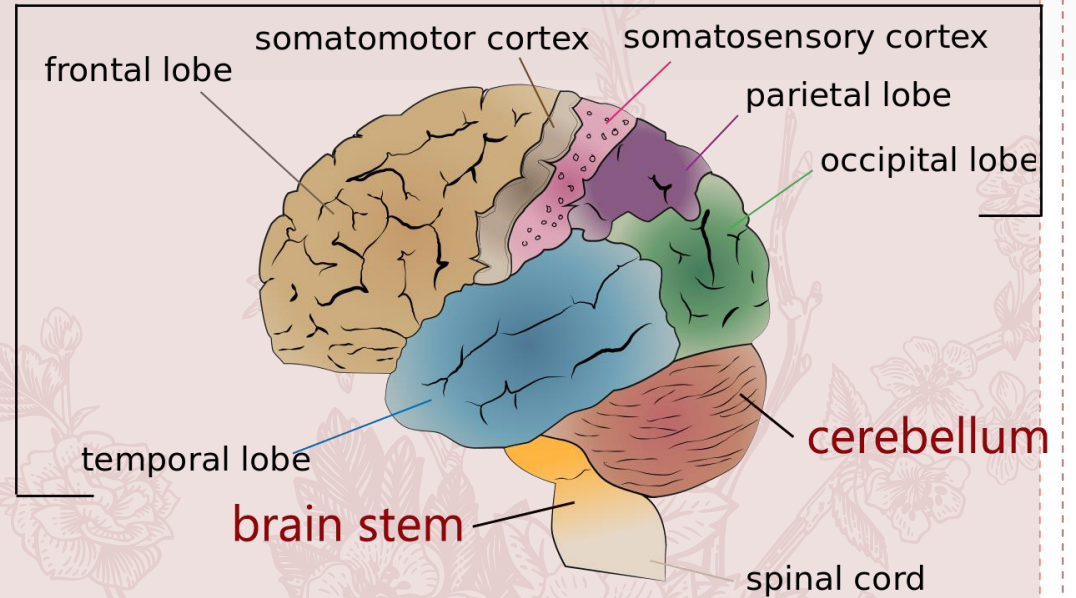


What is ADHD

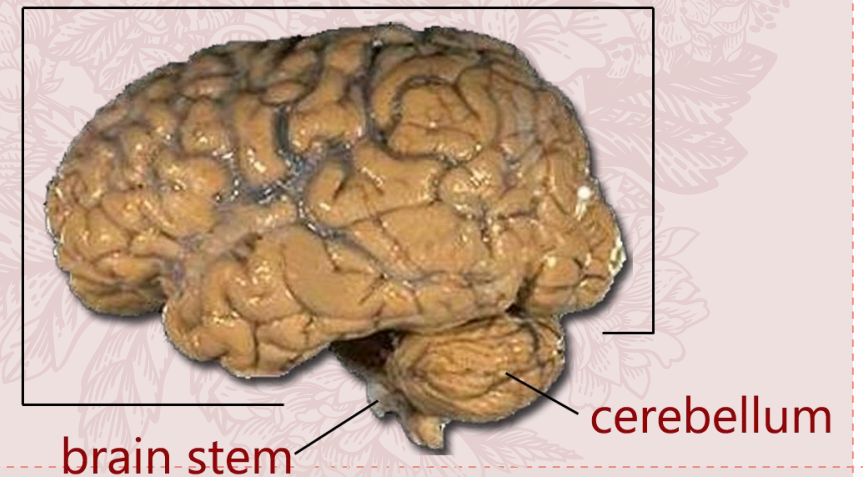
Neurogenetic Disorder
Delayed Neurodevelopment

Not learned, not caused by outside forces,
genetic in nature. Highly hereditary. Skills are
achieved in a 3-5 year lag. 30% lag

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Types of ADHD

ADHD- Hyperactive/ Impulsive Type	Difficulty with constant movement, do things without thinking first. Constantly interrupting, talking or fidgeting.		
ADHD-Inattentive Type	Former ADD. Loses attention to tasks, poor concentration and organization often daydreaming.		
ADHD-Combined Type	Has to have 7 from each category		

Neurotransmitters

(messengers of the brain)

Dopamine- released in response to pleasure, helps the brain focus and rewards behavior.

Serotonin- helps regulate mood and anxiety, works with dopamine.

Epinephrine / Norepinephrine: adrenaline, increases heart rate triggers fight / flight.



What we need to regulate:

Sleep. Food. Exercise. Routine.

ADHD medications seek to regulate the activity of the brain.

Medication doesn't fix the difficulties, it only makes it easier to focus and participate.



What are Executive Functioning Skills

Set of skills that are housed in our prefrontal cortex (last area to develop) that help us in daily life. Frontal lobe has to do with behavior, emotions, and carrying out tasks. Should be fully mature between 18-20. (3% delay with ADHD).

ADHD is a disorder of Executive Functioning skills.

Can have EF deficits without ADHD, you cannot have ADHD without EF deficits.

Executive Functioning Skills

1. **Response Inhibition**---think before you act (impulsivity)
2. Working Memory—hold information while you work
3. Emotional Control—managing emotions
4. **Sustained Attention**—keeping attention even with distraction
5. Task Initiation—actually getting started
6. Planning/Prioritization—deciding what’s important/planning
7. Organization—systems to keep track of information or tasks
8. **Time Management**—estimating time
9. Goal-directed Persistence—finishing a task to the end
10. Flexibility—changing course when needed
11. Metacognition—looking within “how am I doing”



Peg Dawson

Getting a Diagnosis

What: Diagnose disorder **and** co-occurring conditions

Who: Not just the Pediatrician. Psychiatrist, Psychologist, Neurologist, Licensed Counselors and Social Workers.

Why: To get proper care and understanding. Look in to co-occurring conditions and rule out other diagnosis.

What's next: Referrals to therapies, counseling, support groups, medication, diet

Multidisciplinary Approach

Medication

Parent education

Therapies

Lifestyle Change

Skill Training

School Plan

Getting a Diagnosis

Maintaining composure during the Q&A session is essential for projecting confidence and authority. Consider the following tips for staying composed:

- ♦ Stay calm
- ♦ Actively listen
- ♦ Pause and reflect
- ♦ Maintain eye contact
- ♦ Know your material in advance
- ♦ Anticipate common questions
- ♦ Rehearse your responses

Outside factors that affect ADHD (Diet 10)

1. Sleep
2. Exercise
3. Nutrition
4. Supplements
5. Schedule
6. Therapies
7. Screens
8. Outdoor Time
9. Mindfulness
10. Support Network



Knowledge and communication

The more you know about what is happening, the better you can advocate for and help your child.

The more you are able to understand the reasons behind the behaviors, the more capable you are to prevent them and change them for the better.

The more you encourage positive change rather than enable behavior, the better prepared your child will be for the future.



Questions and Discussion



Thank You

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