

Sign of the times



Your child won't sit still long enough at the table to get a couple of forkfuls of food into her mouth. Her teacher has also mentioned that she has trouble focusing on tasks. Is there something wrong with her?

A psychologist told me recently that children are being expelled from nursery school for unruly and disruptive behaviour and there's a child in my son's class who, if seen hitting another child, will be kicked out of the school. It's shocking to hear that this is the only 'solution' teachers are choosing to deal with the problem. Are these children hyperactive (overactive) or are there other issues or contributing factors that neither parents nor teachers have considered?

The 21st century has given birth to so much negative hype about doctors over-diagnosing illness and over-prescribing medication. However, experts say that while only 4 to 8% of children have attention deficit hyperactivity disorder (ADHD), only 10% of these children receive treatment.

First we need a few facts: ADHD refers to a set of behaviours caused by problems with how the brain functions. The three different types of ADHD are the inattentive, the hyperactive-impulsive and the combined type. Until recent years, it was believed that children outgrew ADHD in adolescence. Hyperactivity and impulsivity do diminish, while inattention worsens during the teen years. In fact, up to 70% of children with ADHD will continue to exhibit symptoms in adulthood.

Dr Shabeer Jeeva, a Johannesburg-based psychiatrist who specialises in ADHD in children and adults, says new evidence shows that there is early onset of ADHD at the age of 4 years and late onset at the age of 14. "Twenty to 26% of kids with ADHD are the dreamy, 'spaced out', 'lazy' type – the inattentive type who are mostly female and tend not to be diagnosed at all. Only 10% of all ADHD cases manifest hyperactivity, the most noticeable type, because of the child's 'naughtiness', 'defiance' and impulsive behaviour. Sixty to 64% of ADHD cases, however, are the combined type, so picking up problems in a pre-school child requires knowledge and awareness of the subtle ways in which ADHD shows itself."

WHAT CAUSES ADHD?

ADHD is caused by differences in patterns of chemicals (called neurotransmitters) in certain parts of the brain. In individuals with ADHD there are lower-than-normal levels of some neurotransmitters, especially dopamine, necessary for attention and focus, and noradrenaline, which controls impulsivity. Unfortunately, Jeeva explains, "If a parent had difficulties with attentiveness and impulsivity as a child or teenager, there is an 82% chance that his or her child will have a variation of ADHD."

SYMPTOMS OF ADHD

1. Inattentive type – inability to pay attention to details or a tendency to make careless errors in schoolwork or other activities; difficulty with paying sustained attention to tasks or play activities; apparent listening problems; difficulty following instructions; problems with organisation; avoidance or dislike of tasks that require mental effort; tendency to lose things like toys, notebooks or homework; distractibility; forgetfulness in daily activities.
2. Hyperactive-impulsive type – fidgeting or squirming; difficulty remaining seated; excessive running or climbing; difficulty playing quietly; always seeming to be 'on the go'; excessive talking; blurting out answers before hearing the full question; difficulty waiting for a turn or in line; problems with interrupting or intruding.
3. Combined – involves a combination of the other two types and is the most common form of ADHD. ➤

[Sourced from 'What is ADHD?' on kidshealth.com]

IS THERE ADHD-TYPE BEHAVIOUR?

"Many children who present as ADHD are really suffering from other deficits. For instance, they are often malnourished, don't get enough sleep and don't spend enough time with their parents – often a result of the pressures of two-income households," says Anita Decaires-Wagner, an educational psychologist based in Johannesburg. "ADHD might also take a longer time to manifest if a child is in a good school and living in a consistent home environment in which consequences of problematic behaviour are made clear."

You often find other causes of unacceptable behaviour, such as inadequate parenting. "You might, for instance, find that a child expelled for hitting other kids at school has been hit repeatedly at home. Little children are more impulsive as their frontal lobes are underdeveloped. This means it's very difficult for them to be aware of consequences. It's up to the adults in the child's life to say things like, 'We don't hit other people when we want something; we ask them for it politely.' We give other options

with which to deal with these situations."

There are other potential causes of difficult behaviour in preschoolers, such as sensory difficulties. "For example, an overreactive child will hit a child who comes too close to her. This looks like pure aggression but has a different cause," explains Decaires-Wagner. "There could also be physical problems. Pain from an ear infection may cause a child to scream uncontrollably or a child may cry a great deal over a scratch to get the attention she is missing."

Decaires-Wagner believes that our children suffer because our world "is a bit ADHD; it's full of stimuli moving at a frantic pace. Children of preschool age ought to be bored sometimes. It's good for them because it teaches them how to modulate their levels of input. Our world and lifestyle aren't geared for children who need to process stimuli at their own pace. Watching TV often creates ADHD-type behaviour: watching fast and aggressive cartoons is toxic because little children can't process those images and act them out instead," she explains.

HOW DO WE HELP CHILDREN WITH ADHD?

"One of the most important ways parents can help their kids is to help themselves, which is where the Attention Deficit Hyperactivity Support Group of Southern Africa (ADHASA) is so valuable. We provide a whole library of books, advice on healthy eating, annual seminars for parents, teachers and medical professionals. There is so much that can be gained from making contact with other parents in the same situation," says Heather Picton, a founder member of ADHASA. "We even help therapists who deal with ADHD children and their parents. I mostly work with parents who have to travel the ADHD road by supporting, advising and dealing with difficult emotions," says Decaires-Wagner. "I tell parents that our job is to love our children and give them what they need within the limits of our resources. I help parents move beyond guilt. After all, parents can be powerful advocates for their children. If a dad had ADHD, we can learn from his experiences and ask what kind of help he would have wanted."

DEALING WITH POSSIBLE ADHD IN PRESCHOOLERS

Decaires-Wagner says research shows that there are alternatives to medication when treating ADHD. "I teach children social skills and I always try to improve self-esteem, as low self-esteem is a chronic problem with ADHD children." Movement and exercise also help tremendously. "Researchers have done studies comparing the effects of medication and going for a walk in the park," she continues, "and exercise has been found to be as effective." Jeeva agrees and adds that exercise is the main treatment used worldwide at present, as it raises the levels of the neurotransmitters dopamine, noradrenaline and serotonin in the brain. "Exercise," he says, "needs to be done about five times a day, at 80 to 90% of the maximum heart rate for 45 minutes, three to four times a week." He explains that a child following this programme may not need medication at all, but if it's too difficult to rigidly stick

to this programme, exercise combined with medication may be suitable in moderate and severe cases of ADHD.

ADHASA lobbies for healthy eating as a means of controlling the symptoms of ADHD. "My son had extreme behavioural problems as a result of ADHD and when I cut artificial flavourants and colourants, synthetic preservatives, as well as sugar and caffeine in particular out of his diet, his behaviour and academic performance improved tremendously. Supplements, Omega 3-6-9 fatty acids and maintaining stable blood sugar levels are so important. Children with ADHD should only eat slow-burning carbohydrates with a small portion of protein," Picton says.

Jeeva proposes treating ADHD in small children holistically, targeting their nutritional, physical and psychological needs.

"Parents need to make sure that their children get enough exercise and follow a nutritious diet; supplements are good because they boost nutrition and brain functioning. Parents must teach their kids good habits like getting enough sleep, handling problems with a sense of humour and showing them the importance of touch. Even teaching soothing prayer and meditation can help children with ADHD.

"If a child seems to have behavioural problems or is depressed, it's critical for her parents to take her for therapy. Feeling contained and connected in a family structure is also crucial as it teaches rules and routines. It's important for children to have friends and support structures in place," Jeeva advises. "And it is very important to avoid confrontation with an ADHD child who is hungry, angry, lonely or tired." ➤

TERMS AND CONDITIONS FOR COMPETITION

(See competition details on page 119)

1 Five (5) entrants in this competition each stand a chance to win R50 000 (fifty thousand rand) to be credited into a Standard Bank account. Please note that if the winning entrants do not hold a Standard Bank account, they will need to open a Standard Bank account subject to Standard Bank's standard account-opening procedures and conditions.

2 The Promoters of this competition are CTP Limited t/a Caxton Magazines and The Standard Bank of South Africa Limited ("the Promoters").

3 The Promoters, their directors, members, partners, employees, agents or consultants and their spouses, life partners, parents, children, siblings, business partners or associates are not eligible to participate in or enter this competition.

4 All information relating to this competition and published on any advertising material forms part of these terms and conditions of entry.

5 No entries will be considered valid unless completed in full and until a validation process has taken place. All entries must reach the Promoters on or before 1pm on Friday, 23 October 2009.

6 Entries will be judged null and void if stolen, mutilated, altered, misprinted, defaced or tampered with in any way. The Promoters will not be responsible for any lost, stolen, damaged or destroyed application forms.

7 The winners of the competition will be selected by means of an evaluation process whereby all valid entries will be adjudicated upon by a panel of expert judges ("the Judging Process"). The Judging Process will take place on Wednesday, 25 November 2009 at the Premises of The Standard Bank of South Africa Limited situated at number 5 Simmonds Street, Johannesburg.

8 The winners will be notified telephonically by the Promoters within seven (7) days from the start of the Judging Process.

9 In the event of a dispute, the decision of the Promoters and judges will be final and binding on all aspects of the competition and no correspondence will be entered into.

10 The Promoters, their directors, members, partners, employees, agents, consultants, suppliers, contractors and sponsors assume no liability whatsoever for any direct or indirect loss or damage arising from an entrant's participation in the competition or for any loss or damage, howsoever arising. The prize winners indemnify the Promoters and hold the Promoters harmless for any loss, damage, harm or injury which the prize winner may sustain as a result of any claim which may be made against it by any third party, while participating in this competition.

11 If required by the Minister for Trade and Industry, the Lotteries Board or for whatever other reason, the Promoters shall have the right to terminate this competition with immediate effect and without notice of such termination. In such an event, all entrants hereby waive any rights, which they may have against the Promoters and hereby acknowledge that they will have no recourse or claim of any nature whatsoever against the Promoters, their directors, members, partners, employees, sponsors, agents or consultants.

12 All entrants, by entering this competition, agree to be bound by these terms and conditions.

13 The Promoters reserve the right to substitute the prize with another prize of similar commercial value.

What does ADHD look like in preschool children?

Anita Decaires-Wagner says that it's very difficult to talk about ADHD in preschoolers. "In children under 5, distractibility and inattentiveness – chopping and changing toys and focusing for only brief periods of time – is normal. The important question for parents and teachers to ask is whether the attention span improves with age.

"Preschoolers are too immature to be adequately assessed, which means they shouldn't ever, except in extreme cases, be on medication for ADHD. The exceptions could be medical difficulties, low IQ [intelligence quotient] or extremely aggressive children who would really benefit from medication," Decaires-Wagner explains. "I prefer to look at why a child is behaving in a certain way and to ask how we can help that child to change that behaviour if features of impulsivity or inattentiveness are present. Parents and teachers therefore need to monitor and watch the child very carefully and to offer therapy or lifestyle changes that might relieve the problems."

Jeeva agrees: "If teachers and parents notice problems in children under 6, I would mostly not prescribe stimulant medication but would give other medication for behaviour, if necessary. I tell parents that they must make sure their child is functioning at a reasonable level at school – socialising and able to learn. Prior to diagnosing any psychiatric condition in a child, including ADHD, we have to rule out ADHD-like behaviour caused by stress – a death in the family, divorce or parental separation, changing schools, moving house, a new sibling or a depressed mother."

Jeeva says: "The most important factor is educating the parents; the second is that ADHD is not over-diagnosed." Of course, it's frightening and shocking to be told that one's child has or might have ADHD, so it's important that parents seek the right help at the right time.

For Jeeva, true ADHD that is ignored can potentially become a serious psychological or behavioural problem. "Untreated ADHD in children can affect schoolwork and relationships, making it much harder or even impossible to succeed at work and in life." The upside, however, is that children who are diagnosed and treated are able to be successful and go on to lead fulfilling and happy lives. •

Resources

- 'What is ADHD?' on kidshealth.com
- adhdclinicjeeva.com
- 'ADD/ADHD and Diet' (ADHASA handout)
- *Hyperactivity and ADD: Caring and Coping* by Heather Picton (Third edition), Wits University Press, 2005