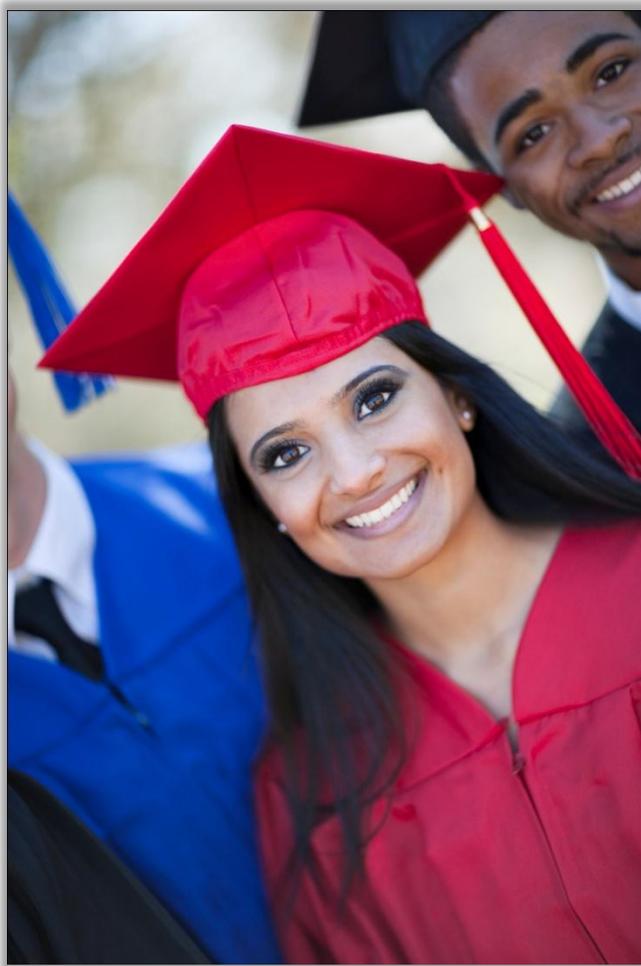


An ADHD Parent Care Package

*Support and
Encouragement for
Parents of Teens and
Young Adults with
ADHD*



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Abstract:

ADHD can be a challenging condition for your child.

Fortunately, there are resources available that can help make your job easier as a parent of a teen or college student with ADHD.

In this guide you'll learn

- vital facts about ADHD to share with family and friends
- information about executive functioning and how it impacts your child's ability to learn
- legal information about student rights and responsibilities
- how to mitigate the risks of an ADHD teens
- how coaching provides a non-medicated method proven to work with ADHD

Welcome!

It's not easy being the parent of a child who has ADHD. Seems like everyone has an opinion of what you're doing wrong or why your child's behavior is your fault.

"Everybody knows how to raise children, except the people who have them." — P. J. O'Rourke

Helping your child learn to manage his own ADHD symptoms is a lifelong journey. And parents of "normal" children have no idea of how much time, energy and resources you've put into your child.

Undoubtedly you've already sifted through tons of information about ADHD. And you've read countless debates of the risks and merits of ADHD medication. The information out there is at times disputed, sometimes discouraging and often downright mean.

We know you're here because you're convinced that your child is capable of standing on her own but needs something more – perhaps a push – in the right direction.

"Your kids require you most of all to love them for who they are, not to spend your whole time trying to correct them." — Bill Ayers

At its core, self-control and self-regulation are the greatest challenges of ADHD. You've most likely spent more time than the average parent watching over your child's shoulder to make sure lunch boxes are remembered, homework gets turned in and chores are accomplished. You're ready for her to start taking on the responsibilities of life as her own.

"Parents can only give good advice or put them on the right paths, but the final forming of a person's character lies in their own hands." — Anne Frank

Does this sound like your student?

"I do my homework but forget to hand it in."

"Sometimes class is so boring I can hardly pay attention."

"I keep promising myself I won't procrastinate, but I keep finding myself doing it all at the last minute, *again*."

"Sometimes an assignment seems so huge, I just can't figure out how to get started on it. "

"It's so hard to get out of the door on time."

There is help!

You don't have to be stuck in the role of navigator or nag. We believe coaching is one of the best tools to help ADHD students learn the skills they need to succeed in life and at school – and we have solid, independent research that proves it. *(All data sources used in this guide can be found at the end of the Appendix.)*

Not only does coaching help students learn skills that last them a lifetime, but having an ADHD coach lets you turn over the reins to your child, **reducing the conflicts between the two of you.**

This guide explains how coaching works as well as providing you with tools to address common parenting issues – like teen driving – that are more difficult for parents of ADHD teens to navigate.

“I get by with a little help from my friends.”

– John Lennon

And just in case your friends and family need a little help from you to understand ADHD, we've included facts and resources to share with them.

Let's get started with an overview of the life cycle of ADHD.

“Where did we ever get the crazy idea that in order to make children do better, first we have to make them feel worse? Think of the last time you felt humiliated or treated unfairly. Did you feel like cooperating or doing better?” — Jane Nelsen

Parenting the ADHD Teen and Young Adult

The challenges of parenting a child with ADHD change as she grows. High school and college are pivotal years for all children. Young people with ADHD face more challenges than the typical teen.

ADHD in Adolescence

For teenagers with ADHD, the typical challenges of adolescence can be even harder. Problems of identity, increased independence, and social and academic pressure can be heightened by the symptoms of ADHD. Teens with ADHD are six times more likely to experiment with drugs and alcohol. And according to the National Institute of Mental Health, ADHD teens have nearly four times as many car accidents and three times as many speeding tickets as teen drivers without ADHD.

ADHD in College

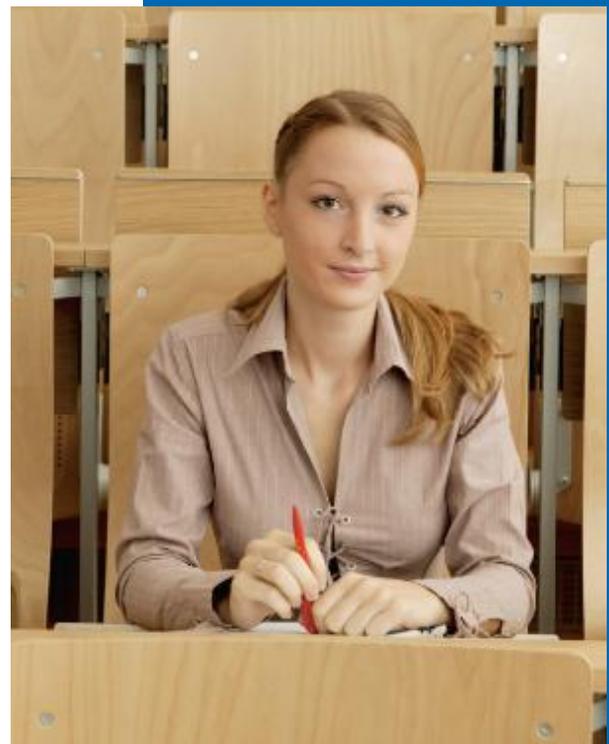
When students begin college, they are suddenly without the structure of high school and the support system of home. The demands for organized, self-directed study are greater than ever before.

College students don't get regular feedback on their progress like in high school. College students won't know where they stand until midterms or finals, when it is often too late.

Being on your own in college can be particularly challenging for those with ADHD, who have inordinate difficulty focusing, staying on task, organizing their time, and interacting with professors and peers. For these reasons, some students may discover they have ADHD for the first time in college. They may find that their old academic and social coping mechanisms are no longer adequate for the rigors of college.

In short, they desperately need an intervention that provides the structure, support and accountability that this new environment lacks.

As high as 70% of young people with ADHD have a co-occurring condition such as a learning disability, substance abuse, or a psychiatric disorder.



ADHD-Related Conditions Increase Student Risk

ADHD is commonly accompanied by other disorders, which can magnify its symptoms. The National Institute of Mental Health identifies the following disorders that can accompany ADHD:

- **Learning Disabilities** Twenty to 30 percent of children with ADHD also have learning disabilities. In the preschool years, these children may have trouble understanding or expressing themselves in words. As they get older, they can have difficulty writing, reading, spelling, and doing arithmetic.
- **Oppositional Defiant Disorder** Approximately 30 to 50 percent of children with ADHD, mostly boys, have oppositional defiant disorder. This is characterized by defiance, belligerence, outbursts, stubbornness, and a refusal to obey.
- **Conduct Disorder** About 20 to 40 percent of ADHD children may develop conduct disorder as older children or teenagers. These young people lie, steal, fight, and commit crimes. They are also more likely to become substance abusers.
- **Tourette Syndrome** is an uncommon neurological disorder that typically occurs in people with ADHD. People with this syndrome have nervous tics such as blinking, twitching, grimacing, throat-clearing, sniffing, snorting, or barking out words.
- **Anxiety and Depression** can accompany ADHD and can be worsened by the personal, social, academic, and/or professional problems of ADHD.
- **Bipolar Disorder** It is not clear how many children with ADHD also have bipolar disorder, and it can be difficult to distinguish between the two conditions among children. Bipolar disorder in children is characterized by erratic moods and a combination of elation, irritability, and depression.
- **Substance Abuse** People with ADHD are six times more likely than other people to have a substance abuse problem.

ADHD students are at-risk students.

They are more likely to be:

- Suspended (60%)
- Held back (42%)

And ***less likely*** to:

- Enter college (22%)
- Graduate from college (5%)



Your student needs more than willpower to overcome the symptoms of ADHD.

How ADHD Impacts Your Child in School

When you receive an ADHD diagnosis, you need to learn a whole new world of terminology. Perhaps **the most important term** to understand is “executive functioning.”



You’ll hear “executive function” frequently used by educators, physicians and other professionals concerned with helping people with ADHD. Most of the definitions for executive functions are scientific and complex.

Think of executive functioning as an aircraft controller for your brain and body.

Some scientists believe that the single greatest predictor of academic success is executive function. Even more important than IQ! And ADHD impacts many or all of the above areas. Turns out that the way ADHD affects the executive functions of the brain can be one of the most challenging parts of living with it.

Still students who struggle with ADHD are able to be extremely successfully in school and in life. Why?

ADHD is not a one-size-fits-all disability. Each person has their own, unique set of strengths and weaknesses. The key is to be introspective and understand yourself — know your strengths, your challenges, your passions, your aversions.

Executive Function:

The executive functions are a set of processes that all have to do with managing oneself and one’s resources in order to achieve a goal.

It is an umbrella term for the neurologically-based skills involving mental control and self-regulation.

Help for Parents of Struggling ADHD Students

Parents of young adults with ADHD have to walk a fine line between trying to motivate their children to seek assistance, while at the same time respecting their independence and letting them stand on their own.

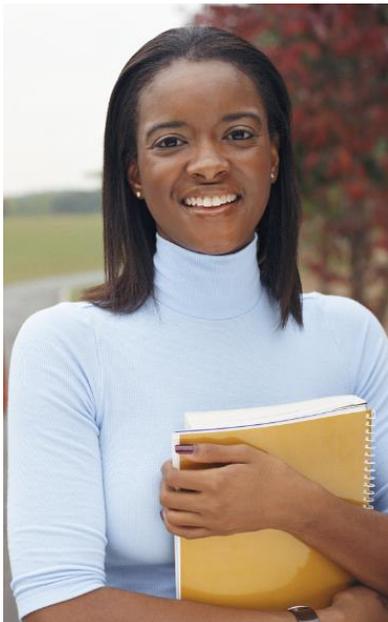
We often hear frustration from parents who are at their wit's end trying to help their child. A parent recently told us:

*“If my boy gets his butt moving at all, if he shows any spark of interest, I’m there to help him, but **he’s got to show that he cares first.**”*

Medication is only part of the answer, and tutoring doesn't teach life skills.

ADHD coaching is an intervention that has been receiving growing attention because recent studies have shown that students who received ADHD coaching services show significant

improvement in their ability to organize, direct and manage cognitive activities, emotional responses and overt behaviors.



ADHD coaches empower students to develop structure, support and accountability on their own terms and take charge of their own lives.

Unfortunately in many cases, students often reject coaching merely because it is introduced by their parent. And coaching

will not work unless the student steps up and owns his or her disability and is willing to partner with a coach.

Medication improves focus...

Tutoring teaches academic skills...

Coaching develops life skills that will serve her the rest of her life:

- *Organization*
- *Time management*
- *Goal setting*
- *Focusing*
- *Persistence*
- *Problem solving*

Young Adults with ADHD: the Ultimate Parenting Challenge?

You know how frustrating it can be to watch your child struggle. Even if they are bright and well meaning, they just can't seem to keep it together -- at least not without a lot of help. Watching them fail is heartbreaking. And those failures add up -- for both of you.

ADHD coaching works the same way as an athletic coach, only the game is life.

5 Ways ADHD Coaching Helps Students Learn, Succeed and Thrive!

Raising a child with ADHD is tough on parents. Children with ADHD often struggle in school, with friendships and at work. Getting your child a coach can do more than help your child succeed, it can help you too. An ADHD coach can:

1. End the homework wars. When a coach is working with your still-at-home child, you won't have to spend so much time riding herd on the homework and making sure it gets done.
2. Help your student learn to manage time and learn skills to overcome procrastination and better manage her time. This is especially important as they prepare to enter the workforce.
3. Help your student learn important life skills such as how to navigate social situations, personal conflicts or even manage his money.
4. Help your student succeed at college. A failed college course is a financial waste, but dropping out is potential lost.
5. Put your child in the driver's seat so he is taking charge of his life and you can stop needing to be a helicopter parent.

Coaching is particularly well-suited to helping people with ADHD live better with the challenges of this disorder. When self management, time management, and organization don't come naturally, an ADHD coach can help students develop these skills.

Parent/child relationships often improve when an ADHD coach is added to the mix.

Professional ADHD coaching is not a substitute for traditional treatment for ADHD such as medication and therapy. But at the Edge Foundation our research has shown it is a *critical and highly effective* part of a multi-modal approach to managing ADHD symptoms and learning the necessary life skills for young people to learn to live well with the challenges of ADHD.

In addition, the focused and personalized one-on-one approach of coaching works really well for young people with ADHD.

You Can't Sign Up Your Student for Coaching

An ADHD Coach helps students learn life-long skills which will allow your student to accentuate her strengths and compensate for her weaknesses. Students with ADHD also need:

- Awareness about ADHD and an understanding of how it impacts their lives
- Willingness to ask for help and
- Support to help develop a plan that works for them.

Your student has to take ownership of her ADHD and the unique challenges she faces. So you can't sign her up for coaching. But you can tell her how it will help and show her where to get more information.

Our coaches know how to help students discover their strengths and talents and bring them into the forefront. We are passionate about making a positive difference in the lives of students and young adults with ADHD. And most of all, we are ready to help you help your child.



A coach can help your child find her own answers.

“My coach didn't give me answers. She made me ask questions. She made me get my own answers.”

–Alicia B.

But What If My Child Doesn't Want a Coach?

What is a parent to do when they see their son or daughter struggling, but know that they have to step back and let them stand on their own? While there is no magic answer the following are some guidelines that may help.

- **Motivate, but don't dictate** – A coach should never be a punishment for a student who is not performing. If a student is indifferent about something, parental pressure will often prejudice and polarize them.
- **Educate yourself about coaching** and how it works. Speak with a coach and understand the process and benefits sufficiently so that you can motivate and encourage your child.
- **Seek assistance from a coach** – Many coaches specialize in working with parents to help their child develop self awareness and maturity so that the child will be able to participate in coaching. A coach can empower a parent to address the situation in a productive way that won't polarize her son or daughter. Edge Foundation has coaches available to work with parents and provide the support and guidance that parents often need.
- **A coach can be the key to promote your independence and theirs** – Explain to your son or daughter that a coach is resource for them. Using a coach can ease the parent/child tensions because a parent knows her child is getting the support he needs to accomplish his responsibilities.
- **Encourage them to find out for themselves** – The best way for parents to do this is to encourage their son or daughter to speak with a coach about the process and how it works.
- **Don't push it** -- If your child is not ready to accept this on their own, pushing the issue can often make things worse. In these circumstances, parents may need to step back and revisit the idea later on.

*Remember,
you are not alone. Don't give up.*

Often students think an ADHD coach is just one more person that will nag them about school, their room, etc.

This is far from the case.

A coach address whatever the student (not you) thinks is important.

Take the Coaching Readiness Quiz

Is your child ready for ADHD coaching? This quiz can help him find out.

Instructions: Start by selecting the number that comes closest to representing how true the statement is for you right now. Then, check your coaching readiness score.

	1=NO and 5=YES				
1. I have goals to strive for and I'm ready and eager to tackle them	1	2	3	4	5
2. I could use an honest, outside perspective. I can handle honest feedback.	1	2	3	4	5
3. I need some additional support in reaching my goals. I am ready to look at things differently and learn new skills and habits.	1	2	3	4	5
4. I will do the things I say I will do. If something is difficult for me, I will discuss this with my coach so that we can work around it.	1	2	3	4	5
5. I could use someone to help me focus, challenge me, and hold me accountable to my commitments.	1	2	3	4	5
6. I will be open and truthful with my coach.	1	2	3	4	5
7. My work and personal life are out of balance and I don't like the consequences.	1	2	3	4	5
8. I'm willing to make changes to have the life I want.	1	2	3	4	5
9. I will honestly commit to the time needed for appointments and can be relied upon to be on time and ready for all of my appointments.	1	2	3	4	5
10. I understand that achieving goals takes time; Rome was not built in one day. I am willing to invest all of the time required to achieve my goals.	1	2	3	4	5
11. I am flexible and willing to look at things differently and learn new skills and habits.	1	2	3	4	5
12. I am fully willing to do the work required and understand that the success of coaching is up to me.	1	2	3	4	5
Add up the total of all of your scores and enter it here →					

Thanks to Edge ADHD Coach, Ann Imrie-Howlett, for developing this fantastic tool!

Scoring

- 48 – 60 Very ready, ask the coach to ask a lot from you!
- 36 – 47 Ready for coaching.
- 24 – 35 Ready, but make sure the ground rules are honored!
- 12 – 23 This may not be right time for you to be coached.

Research Proves Coaching Builds Life Skills Crucial to Academic Success

- ✓ Students who received ADHD coaching showed substantial gains in their overall approach to learning.
- ✓ ADHD students demonstrated statistically significant, higher executive functioning than ADHD students who did not receive coaching.
- ✓ Specifically, the magnitude of the “effect size” for self regulation was more than double the typical educational intervention.
- ✓ The improvement of executive functioning was quadruple. **Findings with “effect sizes” that large are rare.**

Frequently Asked Questions

How does an ADHD coach help?

When self management, time management, and organization don't come naturally, an ADHD coach can help students develop these skills. Coaching works as a student-driven partnership with students in the driver's seat.

The focused and personalized one-on-one approach of coaching empowers young people with ADHD to take charge of their lives.

ADHD coaching works the same way as an athletic coach, only the game is life.

Professional ADHD coaching is not a substitute for traditional treatment for ADHD such as medication and therapy. But independent research has shown it is a *critical and highly effective* part of a multi-modal approach to managing ADHD symptoms and learning the necessary life skills for young people to learn to live well with the challenges of ADHD.

What happens in an ADHD coaching session?

Getting started: The coach match process starts with a individual conversations between you and the Program Administrator and then one with your child. This when we learn about each other and help your child get a clear idea of what is required from him in coaching. If your child believes he is ready to begin working with a coach, we will match him with three coaches who potentially match his particular needs and personality. Then he'll have an opportunity to interview each coach. These **free**, preliminary interviews are an opportunity to get a feel for the coach's style and decide which coach feels best. Intake begins after the student informs us of his selection and signs the coaching contract.

Intake session: The first session is a lengthy one that usually lasts about two hours. The student and coach talk about what's working and what's not, what's frustrating, and where they would like to see progress. If they are under 18 years of age, their parents will participate in some of it. By the end of this session the student and coach will map out goals and begin discussing a plan for success.



Weekly coaching session: Coaching sessions are weekly and are 30-minutes on the phone or with Skype.

Weekly check-ins: Check-ins are usually preplanned and can happen as often as daily (up to 4 per week, in addition to the regular weekly coaching session) to keep students on track. Most students choose to suspend ADHD coaching during exams and holidays, but we strongly encourage not to going more than two weeks without a session or at least a check-in.

How long do I need an ADHD coach?

The Edge program is designed to last for up to 36 weeks, basically one 30-minute session for every week of a nine month academic school year.

Although the coaching contracts are month-to-month, we strongly **recommend staying with coaching for two full school years**. The first year, focuses on learning the skills. The second year builds on those skills by learning how to apply them with the support of an ADHD coach. By the end of the second school year, most students have internalized what they've learned and are ready to start working on their own, however, some continue to check back less frequently to stay connected. The important thing to know is that it is the student who makes that decision.

How old do you have to be to have an ADHD coach?

Coaching readiness is not based solely on chronological age.

Most children under the age of 14, especially those with ADHD and learning issues, are not emotionally ready to take on the responsibility and accountability required in a coaching relationship without parental assistance. At Edge, our coaches are trained to coach youth who are ready to develop skills and strategies for life, **independent from their parents**.

Elementary and middle school children need to be coached in person and the parents are an integral part of the coaching process. Edge coaches typically work by phone and parents are not involved. For this reason we recommend that you start with your pediatrician or school to get referrals for a behavior specialist or an academic coach who works in person with a child who is not ready for independent coaching. However, if there is a coach local to the student, our coaches are willing to see the student in person, face-to-face at the coach's office.

A coach can help your child figure out her priorities:

Each week, my coach and I made lists of tasks and named the positives and negatives of each task. That helped me figure out what was important to me. I love coaching!

– Kymberly G.

What is the difference between an organizational coach and ADHD coach?

Organizational and ADHD coaches do have a lot in common. Yes, organizational issues are a hallmark of ADHD, however, there are many other executive functions affected by ADHD. For example, an ADHD coach also can address scheduling, goal setting, focusing, time management, self-advocacy, prioritizing, sticking with it when it gets tough (a.k.a. persistence) and impulsiveness.

Not all organizing challenges come from ADHD, and not all ADHD challenges are organizing.

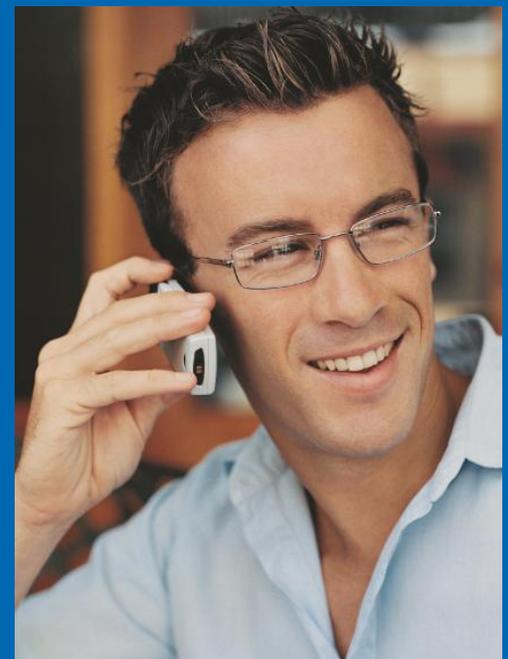
An ADHD coach helps people with ADHD build strategies to work with their strengths to counter their weaknesses. You can't organize yourself into focusing or being less impulsive. But most people with ADHD do need help getting organized.

Why do ADHD coaches work by phone?

For many people the idea of working on the phone, instead of meeting in an office, is just strange. Although there is no prohibition against meeting in person, all of Edge ADHD coaches are trained to work on the phone. We do this for several reasons:

- Using the phone takes transportation issues right out of the equation. When a time-crunched student gets to his appointment by picking up the phone – it's a lot easier to be on time!
- Rapport is critical to building a strong partnership with a coach. By working on the phone or Skype, your child is not limited to selecting from the ADHD coaches in your community. And, she can take her coach wherever she goes in life – even off to college.
- A 30-minute appointment takes exactly 30 minutes. No commuting to and from the appointment, or waiting in the waiting room. Coaching appointments are therefore easy to fit into a busy schedule.
- A coach and client can stay in much closer touch through phoning, texting or emailing than they can if they only connected in an office. It is this extra contact that very often makes the difference in being able to stay on task and follow through.

Coaches even use Skype and Facetime to make it easier for your child to be on time!



Appendix

Defining ADHD

Attention-Deficit/Hyperactivity Disorder, (ADHD), is a neuro-biological disorder characterized by inattention and/or hyperactivity and impulsivity, and often results in problems with organization, attention and working memory. People with ADHD often have difficulties functioning in interpersonal, social, academic, and professional realms. Depending upon the severity of the symptoms, ADHD can provide significant impairments in school, at work, in relationships and all other aspects of life.

Centers for Disease Control estimates that nearly 1 in 10 children in the U.S. have ADHD. ADHD is prevalent at all socio-economic levels, in all ethnic groups, and at all IQ levels. It affects girls in the same proportion that it affects boys.

Diagnosing ADHD

Is It ADHD?

Attention-Deficit/Hyperactivity Disorder can be difficult to diagnose. Since most children exhibit behavior characteristic of ADHD at times and to varying degrees, diagnosis should be approached thoughtfully. Stressful situations in a child's life, such as loss or strife at home, can also bring about behavior that resembles ADHD. A comprehensive assessment of a child's circumstances as well as behavior should therefore be undertaken before a diagnosis is given.

Children develop at different rates. But overall the developmental level of children with ADHD is below that of most children of the same age in terms of attentiveness and/or self-control.

A specialist such as a social worker, psychiatrist, neurologist or psychologist can assess whether a child has ADHD by interviewing parents and teachers and evaluating the child. He or she must first rule out possible alternative causes of behavior that resembles ADHD. The specialist should talk with and observe the child in different contexts to create a balanced and detailed profile of the child before reaching a diagnosis.

Three types of ADHD have been identified:

- Predominantly inattentive type (frequently referred to as ADD)
- Predominantly hyperactive-impulsive type
- Combined inattentive and hyperactive-impulsive type

More resources

5 books about ADHD and parenting you'll want to read!

Most parents we know are hungry for more information about ADHD. These are four books our coaches have found to be most helpful for parents to read. If you have a favorite book not on the list, please drop us a note at info@edgefoundation.org. We are always interested in finding out what you have found helpful.

- [Delivered from Distraction: Getting the Most out of Life with Attention Deficit Disorder](#), Hallowell
- [Parenting With Love And Logic](#), Cline
- [Empowering Youth with ADHD: Your Guide to Coaching Adolescents and Young Adults for Coaches, Parents, and Professionals](#), Sleeper-Triplet (the woman behind the ADHD coaching model)
- [From Chaos to Calm: Effective Parenting for Challenging Children with ADHD and other Behavior Problems](#), Weiss
- [Buzz, A Year of Paying Attention](#), Ellison

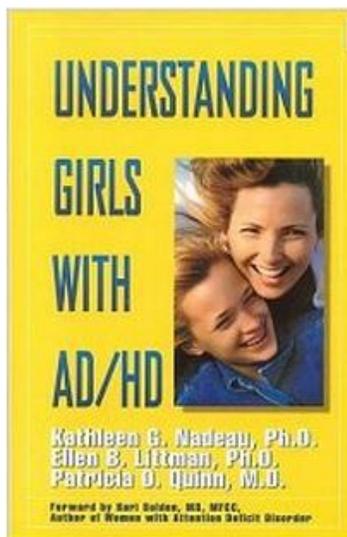
ADHD Links

- [Children and Adults with Attention Deficit Hyperactivity Disorder \(CHADD\)](#)
- [National Resource Center on ADHD](#)
- [The Association on Higher Education and Disability, \(AHEAD\)](#)
- [National Center for Girls and Women with ADHD](#)
- [Answers to Your Questions About ADHD](#)
- [Attention Deficit Disorder Association, \(ADDA\)](#)
- [ADD Resources](#)
- [HEATH Resource Center](#) (clearinghouse on postsecondary education for individuals with disabilities)
- [Social Worker Help Starts Here](#)
- [The National Association of Special Education Teachers](#)
- [ADHD College Survival Guide](#)
- [A Mom's \(and dad's\) View of ADHD: everyday life with our ADHD kids](#)

Gender & ADHD

Under Diagnosis of ADHD in Girls

Until recently it was believed that ADHD was more prevalent in males than in females. Because most ADHD studies focused on boys, the symptoms of ADHD in girls traditionally went unrecognized. It is estimated that the disorder is diagnosed three to nine times more often in boys than in girls. Yet in adults the disorder occurs with the same frequency among men and women, suggesting that ADHD may be as common in girls as it is in boys.



[Understanding Girls with ADHD](#) was written by Edge founding board member, Patricia Quinn MD

Gender Differences in ADHD Childhood Symptoms

Recent studies of girls with ADHD suggest that the higher rate of ADHD diagnosis in boys may be largely because they tend to exhibit more noticeable symptoms such as disruptive or oppositional behavior. Current findings on ADHD in girls indicate that girls with the condition more typically suffer from inattention and distractibility rather than hyperactivity and aggression. For this reason, their symptoms are often overlooked,

and they remain undiagnosed or misdiagnosed. Whereas boys with ADHD often blurt out, interrupt, and show disruptive or aggressive behavior, girls with ADHD are more likely to be forgetful, timid, distracted, easily defeated, anxious, and depressed.

Gender Trends in Adults with ADHD

Among adults diagnosed with ADHD, women tend to show more pronounced long-term psychological problems stemming from their condition, including depression and anxiety. This may be because they are typically diagnosed later in life than boys are and therefore miss opportunities for early intervention.

Girls' ADHD symptoms are often overlooked, and they remain undiagnosed or misdiagnosed.

Teen drivers at risk

Did you know that you're child's brain is not fully developed until she is 25?

That's right! Your child's brain keeps growing well past the time she reaches her full height. Studies by the [National Institute of Health](#) and UCLA show that the risk assessment area of the brain isn't fully developed until age 25.

So it shouldn't be a surprise then, teen drivers are at risk when driving.

According to the National Highway Traffic Safety Administration, teens are only 7% of licensed drivers, yet they account for 14% of fatal collisions. In 2003, 3,657 teen drivers were killed, and an additional 308,000 were injured in crashes (Source: AAA Foundation of Traffic Safety). Put another way, that means a **16 year old is twice as likely to have an accident as someone in their 80s!**

The property damage costs of teen driver accidents is staggering – over \$31 billion each year.

Should I prevent my ADHD teen from driving?

Of course not! Driving is an important rite of passage in this country. It gives freedom and responsibility to our young adults and helps families manage complicated schedules. BUT...

Three family rules to help your teen be a safer driver:

1. No cell phones for the driver. Turn OFF your cell phone. If it's off you won't be tempted to answer it or text while at a light.
2. Teens drive alone. Friends are fun, but they are distracting for the young driver.
3. Don't play with the music. Tune in the station before you turn on the car. Fiddling with radio and climate controls takes focus away from the road.

When compared to other teens, teen drivers who have ADHD are:

- *seven times as likely to have been in 2 or more accidents*
- *four times as likely to have been at fault for that accident*
- *four times as likely to have been in an injury accident*
- *five times as likely to have a traffic citation*

Keeping your child's medication safe

34 percent of students polled admitted to taking stimulant medications without a prescription; in juniors and seniors, the percentage can be as high as 80 percent.

Possessing stimulant medications without a prescription is essentially the same as possessing any other controlled substance. Illegal!

What do parents need to keep in mind to keep their child's ADHD medication safe from diversion?

- Get the facts and avoid the myths associated with ADHD medication from your doctor.
- Educate your child about his or her medication, the laws that govern its use, and how it can interact with other substances.
- Speak with your child about respecting the purpose of the medication and using it only for its prescribed and intended purpose.
- Stress the importance of reporting any side effects to you and your treating physician.
- Consult with your child's doctor and develop a solid medication plan that will work at home and school. Revisit that plan if and when your child goes away to college.
- Make sure your child understands that he or she is taking what is considered a controlled substance that is illegal to all others.
- Make sure that the school is aware of the medication that your child is taking, even if it is not dispensed by school medical personnel. This is especially important if your child is away at college.
- Make sure your child understands the need to keep medication safeguarded inside its prescription container at all times.
- Provide your prescribing physician's contact information to the school along with the prescription information itself in the event that any emergencies arise.

Possessing stimulant medications without a prescription is essentially the same as possessing any other controlled substance. Illegal!

What you need to know about your child's legal rights at 18

Becoming independent is difficult for *everyone*. There's so much to be learned about being out on one's own. Most kids are pretty excited to turn 18 and are eager to take on a new level of responsibility. If your child has ADHD there are two very important legal changes to pay special attention:

- IDEA disability protections change
- FERPA (Family Education Rights and Privacy Act) transfers privacy rights from your parent to you

Legal protections and disabilities in college

The laws that protect students with disabilities are not the same when in college and graduate school as they were in high school. In high school your child is protected under the Individuals with Disabilities Education Improvement Act (IDEA). He is also protected under section 504 of the Rehabilitation Act of 1973 (Section 504). IDEA includes a concept known as "Child Find". Child Find makes school districts responsible to seek out, evaluate and provide services for students with special needs.

When your child turn 18 (or leaves high school), the only protections that remain are those found in Section 504 and the Americans with Disabilities Act (ADA). IDEA and Child Find no longer applies. While still guaranteeing that he can't be discriminated against based upon his disabilities, it is now up to *your child* to come forward, provide documentation of his disability, and request appropriate accommodations.

In college, therefore, your child needs a working knowledge of the law, an understanding of his disability and an ability to communicate his needs to his school and instructors is crucial.

FERPA and Privacy Rights

Another legal area that changes with the move to college is your right to privacy. The Family Education Rights and Privacy Act (FERPA) was enacted to ensure that parents have access to their children's educational records and to protect the privacy of students by limiting access to these records without parental consent. Both the access to your child's records and the restriction of that access is controlled by you, the parent, while your child is underage. The privacy rights conferred by FERPA,

When your child turn 18 (or leaves high school), it is now up to him to come forward, provide documentation of his disability, and request appropriate accommodations.

however, automatically transfer to your child when he turns 18 or begins attending a post secondary institution, at any age.

When your child becomes 18 (or leaves high school), he has control over the access to his educational records – not you.

If you have been in charge of advocating for your child with his school, you will no longer be able to help him without his permission and being directly involved. And unless he's already been involved with advocating for himself he may not know where to start or even which records to access. You may decide to ask your child to sign a FERPA Waiver at his college via its disabilities services office.

What can you do now to help your child become a better advocate for himself?

- Educate yourself on the law. A great site to find out more about the American Disabilities Act and Section 504 and their impact is [Wright's Law](#).
- Review with your child the disability terms found in the glossary of this publication.
- Get your high school student involved in his IEP and 504 planning. Teach him what you've learned as his advocate so he can be a stronger one for himself.
- Pay attention to the mandatory Transition Plan required under IDEA and be sure your student is present and actively participates.
- Parents should look at the disability services offices at the colleges they look at with their child. Ask questions about the school's position on prior IEP's and 504 plans. Ask if the school has a specific form for the student to sign as a waiver to allow parents to remain in the loop under FERPA.
- Review with your child copies of his evaluations before he heads off to college so he has documentation ready when he needs it.
- You may also want to consider what other community support services are available, such as physicians or therapists.
- Find out who the contact person in your school is before your child begins to attend.

When your child becomes an adult or leaves high school, he has control over the access to his educational records – not you.

A coach can be a great resource for helping your child figure out how to navigate the system and to learn to advocate himself.

Glossary of Terms

504 Plan

A plan setting forth services and/or Special Accommodations for a child with a disability, pursuant to Section 504 of the Rehabilitation Act of Counterpart of an Individualized Education Plan (IEP) under the Individuals with Disabilities Education Act (IDEA).

Americans with Disabilities Act (ADA)

A Federal anti-discrimination Statute that can be used to protect students with disabilities from discrimination in pursuit of a major life activity (i.e. Education). The Act prohibits disability based discrimination by agencies receiving Federal funding.

Assistive Technology

An external device or functionality that seeks to remediate a learning disability, or other disorder, or to provide equal access to educational services to children with disabilities.

Attention Deficit/ Hyperactivity Disorder (AD/HD, ADHD and ADD)

This general term encompasses Attention Deficit Disorder (ADD), hyperactive, inattentive or combined types.

Behavior Intervention Plan (BIP)

A plan of positive behavioral interventions, made a part of the IEP of a child whose behaviors interfere with that child's learning or their peers.

Code of Federal Regulations (CFR)

Set of administrative regulations established by the United States Department of Education to interpret IDEA.

Committee for Special Education (CSE)

Sometimes referred to as the special education team, CSE is required by the Individuals with Disabilities Education Act (IDEA) to provide an Individualized Education Program (IEP) to address the needs of children from Kindergarten through High School Graduation, or the age of 21, who qualify for Special Education Services pursuant to the statute.

Co-Morbid Disorder

A disorder, or Specific Learning Disability (SLA) that is present along with another functional disability.

DSM IV

Diagnostic and Statistical Manual of Mental Disorders (Fourth Edition) published by the American Psychiatric Association. It is the main diagnostic reference for mental health professionals in the United States.

Due Process Hearing (Impartial Due Process Hearing)

An impartial hearing which commences upon a formal request by either parents or LEA. The hearing is conducted before an Independent Hearing

Officer (IHO) or Administrative Law Judge (ALJ) who takes testimony under oath and presides. The hearing is recorded and a written decision is required to resolve the dispute between the parties. Either party can appeal the decision of an IHO to a State Review Officer (SRO).

Family Educational Rights and Privacy Act (FERPA)

Federal Statute that ensures both the right to privacy and access of a student's educational records. It is important to note that the protection of this law for children under 18 belongs to the parent and/or legal guardian, while that protection switches to the child at age 18, subject to a few limited exceptions schools and parents must obtain written consent of the student to share educational information.

Free Appropriate Public Education (FAPE)

See IDEA

Independent Hearing Officer (IHO)

An officer appointed by a State Department of Education to hear disputes between parents and school districts at a Due Process Hearing. Depending upon the testimonial record, an IHO has the authority to subpoena documents, and/or order either side to comply with his or her directive.

Individuals with Disabilities Education Act (IDEA)

An Educational Statute enacted by the Federal Government and codified under 20 USC 1400. IDEA governs children up to the age of 21 or up to achieving their high school diploma. The statute, now referred to as the Individuals with Disabilities Education Improvement Act, ensures that children with qualifying disabilities receive a Free Appropriate Public Education (FAPE).

Individual Education Program (IEP)

An education program required by the Individuals with Disabilities Education Improvement Act, to be designed to meet the specific needs of a disabled child who qualifies for Special Education. The IEP must contain annual goals and be reviewed on an annual basis.

Learning Disability (LD) or Specific Learning Disability (SLD)

A disability category under IDEA which includes disorders that affect the ability to understand and/or use spoken or written language, or which may be manifested by difficulties with listening, thinking, speaking, reading, writing, spelling and/or performing mathematical calculations. LD or SLD also includes minimal brain Dysfunction (AD/HD), dyslexia, dysgraphia developmental aphasia and other disorders.

Least Restrictive Environment (LRO)

A requirement under IDEA is that special education and/or related services are provided in, or as close to a main stream environment as is possible or practicable under the circumstances.

Local Educational Agency (LEA)

The local school district responsible for providing services to a student or group of students.

Mediation

A procedural safeguard under IDEA to resolve disputes between parents and LEA's. Mediation is a voluntary alternative to a due process hearing and may not be used to deny or delay a due process hearing. The mediation must be conducted by a qualified and impartial mediator who is trained in effective mediation techniques. The decision of the mediator is non-binding and a disagreement between the parties can still be the basis for a due process hearing.

Obsessive Compulsive Disorder (OCD)

is classified, in DSM IV as an anxiety disorder characterized by distressing intrusive thoughts and/or repetitive actions that interfere with the individual's daily functioning.

Occupational Therapy (OT)

is a related service used to remediate deficits or developmental problems with sensory integration and fine motor skills.

Oppositional Defiant Disorder (ODD)

refers to a recurrent pattern of negative, defiant, disobedient and hostile behavior toward authority figures lasting at least six months.

Section 504 of the Rehabilitation Act of 1973 (504 Plan)

A Civil rights statute prohibiting recipients of Federal funding from discrimination on the basis of a disability.

Special Education PTA (SEPTA) – Branch of the local Parent Teacher Association specializing in issues concerning children with special needs.

State Review Officer (SRO)

An officer appointed by the State to review the decision, on appeal, of an Independent Hearing Officer (IHO) after a Due Process Hearing.

Traumatic Brain Injury (TBI)

is a disability category under IDEA which includes acquired injury caused by external physical force and open or closed head injuries that result in impairments. It does not include congenital or degenerative brain injuries or injuries caused by birth trauma.

Data Sources

- [Quantifying the Effectiveness of Coaching for College Students with Attention Deficit/Hyperactivity Disorder](#)
- [Self-Control in Postsecondary Settings: Students' Perceptions of ADHD College Coaching, *Journal of Attention Disorders*](#)
- [UC Davis Study: Dropout risks: ADHD, conduct disorder, smoking](#)
- [ADHD and Executive Functioning](#)
- [Executive Function, ADHD and Academic Outcomes](#)
- [Major Life Activity and Health Outcomes Associated with Attention Deficit/Hyperactivity Disorder](#)
- [A coach to help with ADHD, CNN Headline News, 1/26/2011 and ADHD kids benefit from coaching, CNN, The Chart, 11/12/10](#)
- [7 Facts You Need To Know About ADHD](#)

7 Facts about ADHD to Share with Family & Friends

ADHD is Real

Nearly every mainstream medical, psychological, and educational organization in the United States long ago concluded that Attention-Deficit/Hyperactivity Disorder (ADHD) is a real, brain-based medical disorder. These organizations also concluded that children and adults with ADHD benefit from appropriate treatment.

ADHD is Nobody's FAULT

ADHD is NOT caused by moral failure, poor parenting, family problems, poor teachers or schools, too much TV, food allergies, or excess sugar. Instead, research shows that ADHD is both highly genetic (with the majority of ADHD cases having a genetic component), and a brain-based disorder (with the symptoms of ADHD linked to many specific brain areas). The factors that appear to increase a child's likelihood of having the disorder include:

- gender
- family history
- prenatal risks
- environmental toxins
- physical differences in the brain.

ADHD is a Common, Non-Discriminatory Disorder

ADHD is a non-discriminatory disorder affecting people of every age, gender, IQ, and religious and socio-economic background. In 2011, the Centers for Disease Control and Prevention reported that the percentage of children in the United States who have ever been diagnosed with ADHD is now 9.5%. Boys are diagnosed two to three times as often as girls. ADHD, AD/HD, and ADD all refer to the same disorder. The only difference is that some people have hyperactivity and some people don't.

Other Mental Health Conditions Frequently Co-Occur With ADHD

- Up to 30% of children and 25-40% of adults with ADHD have a co-existing anxiety disorder.
- Experts claim that up to 70% of those with ADHD will be treated for depression at some point in their lives.
- Sleep disorders affect people with ADHD two to three times as often as those without it.

ADHD is Not Benign

ADHD is not benign. Particularly when it is undiagnosed and untreated, ADHD contributes to:

- Problems succeeding in school and successfully graduating
- Problems at work, lost productivity, and reduced earning power
- Problems with relationships
- More driving citations and accidents
- Problems with overeating and obesity
- Problems with the law

Diagnosing ADHD is a Complex Process

In order for a diagnosis of ADHD to be considered, the person must

- exhibit a large number of symptoms,
- demonstrate significant problems with daily life in several major life areas (work, school, or friends), and
- have had the symptoms for a minimum of six months.

To complicate the diagnostic process, many of the symptoms look like extreme forms of normal behavior. Additionally, a number of other conditions resemble ADHD. Therefore, other possible causes of the symptoms must be taken into consideration before reaching a diagnosis of ADHD. What makes ADHD different from other conditions is that the symptoms are excessive, pervasive, and persistent. That is, behaviors are more extreme, show up in multiple settings, and continue showing up throughout life. No single test will confirm that a person has ADHD. Instead, diagnosticians rely on a variety of tools, the most important of which is information about the person and his or her behavior and environment. If the person meets all of the criteria for ADHD, he or she will be diagnosed with the disorder.

ADHD Treatment is Multi-Faceted

Currently, available treatments focus on reducing the symptoms of ADHD and improving functioning. Treatments include medication, coaching, various types of psychotherapy, behavioral interventions, education or training, and educational support. Usually a person with ADHD receives a combination of treatments.

Source: <http://www.adhdawarenessweek.org/adhd-facts/>

