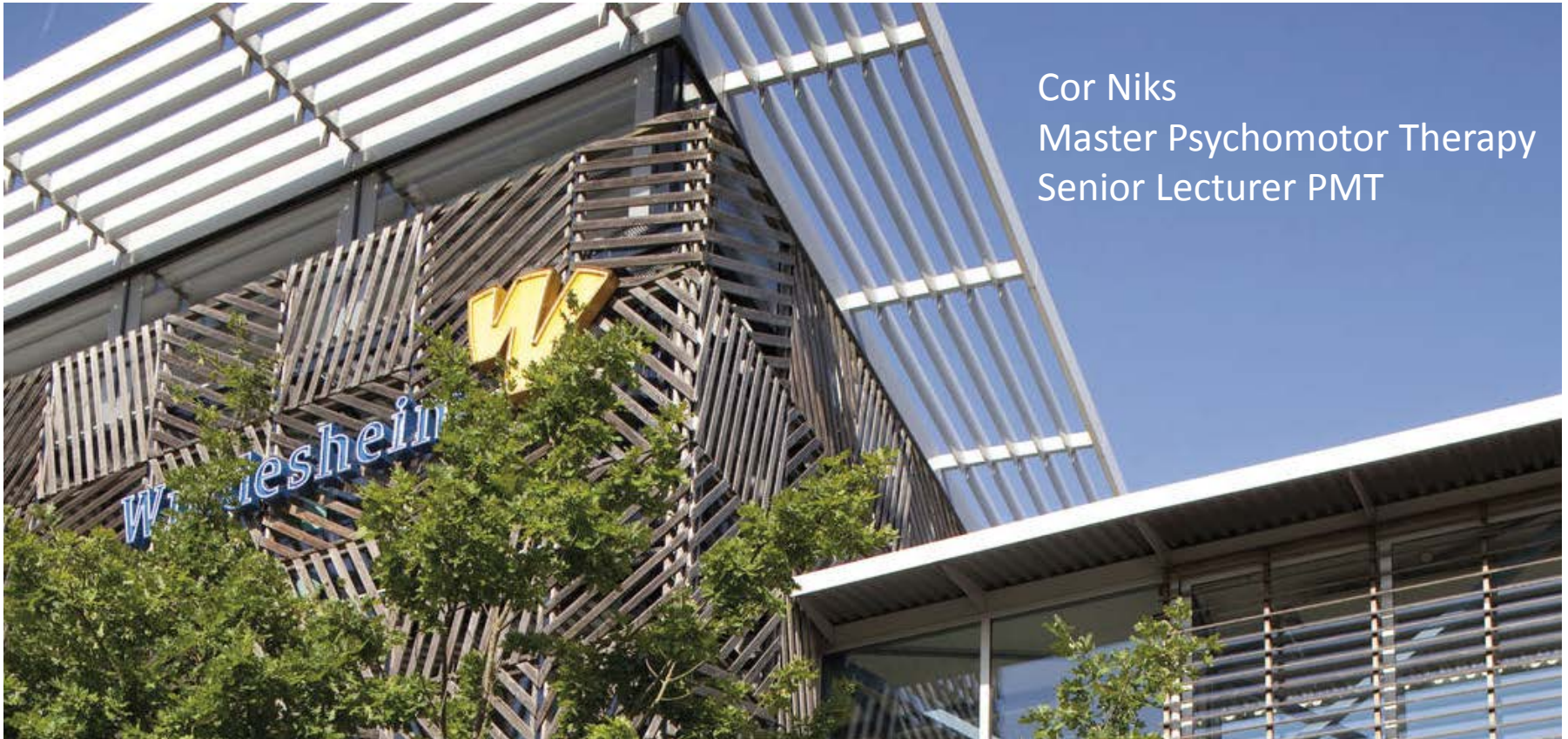


Impulse regulation and Attention Deficit Hyper Disorder



Cor Niks
Master Psychomotor Therapy
Senior Lecturer PMT

Summerschool Randers.

24 august 2017

Welcome

- Introduction
- Some short theory
- Video observation and discussion
- Practical part



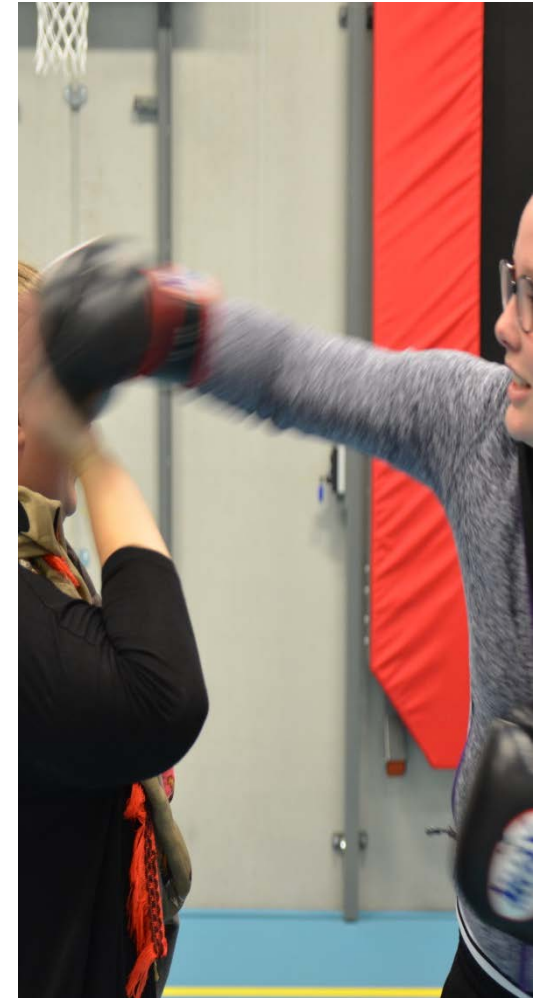
Who's the teacher?

- Study:
 - APA Sports teacher, Pedagogy (Special Needs), Psychomotor therapy, Master study PMT
- Work experience:
 - APA sports teacher, Manager PMT-APA, Psychomotor therapist
(special needs, intellectual disabled persons and psychiatric persons),
 - Lecturer University Windesheim



Who are you?

- Short:
 - Your name?
 - Your education?
 - Your learning goals/expectations?



Statistic information ADHD

Some statistic information (Bachmann et al., 2017)

- ADHD, psychiatric disorder
- > Male (and younger children)
- Worldwide prevalence estimate of 3.4% in childhood and adolescence
- Other studies 5,29% (Döpfner, Breuer, Wille, Erhart, & Ravens-Sieberer, 2008)
- European studies reporting lower prevalence's
- 70-80% is a genetic disorder

General treatment information

School-age children stepwise approach to treatment

- Starting with non-pharmacological interventions (Thapar and Cooper, 2016)
- Individual treatment, including pharmacotherapy, behavioral therapy and/or psychosocial interventions → group
- Preschool children parent training prescription of ADHD medication is not encouraged

General treatment information

ADHD medication use prevalence increased from

- 1.8% to 3.9% in the Netherlands (+111.9%)
- 1.3% to 2.2% in German (+62.4%)
- 0.4% to 1.5% in Denmark (+302.7%),

(Bachmann et al., 2017)

For example this kind of medicine is regular used:

- | | | |
|---------------|-----------------------------------|------------|
| • Ritalin | ethylphenidate HCL | 3-4 hours |
| • Focalin XR | Dexmethylophenidate HCL | 6-10 hours |
| • Adderall XR | Dextroamphetamine Sulf-Saccharate | 8-12 hours |
| • Strattera | Atomoxetine HCL | 24 hours |

(Strattera with a lot of risk like: Sleep problems, anxiety etc, Increased risk of suicide in adults aged 18-24)



Look “inside someone” with ADHD

ADHD

- 3 keywords:
 - Inattention
 - Hyperactivity
 - Impulsivity



Inattention

- Fails to give close attention to details
- Difficulty sustaining attention in tasks
- Does not seem to listen when spoken to directly

Often:

- does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace
- has difficulty organizing tasks and activities
- loses things necessary for tasks or activities
- easily distracted
- forgetful in daily activities



Hyperactivity

Often:

- fidgets with hands or feet or squirms in seat
- leaves seat in classroom or in other situations in which remaining seated is expected
- runs about or climbs excessively.
- has difficulty playing or engaging in leisure activities
- is “on the go” or as if “driven by a motor”.
- Talks excessively



Impulsivity

- Often blurts out answers before questions are completed
- Has difficulty awaiting turn
- Interrupts or intrudes on others

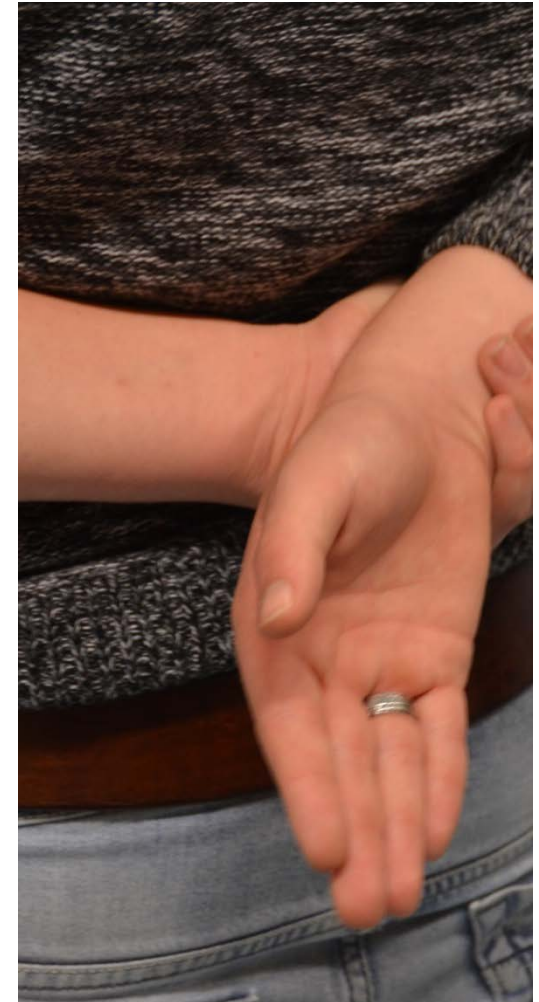




And now the child at the gym

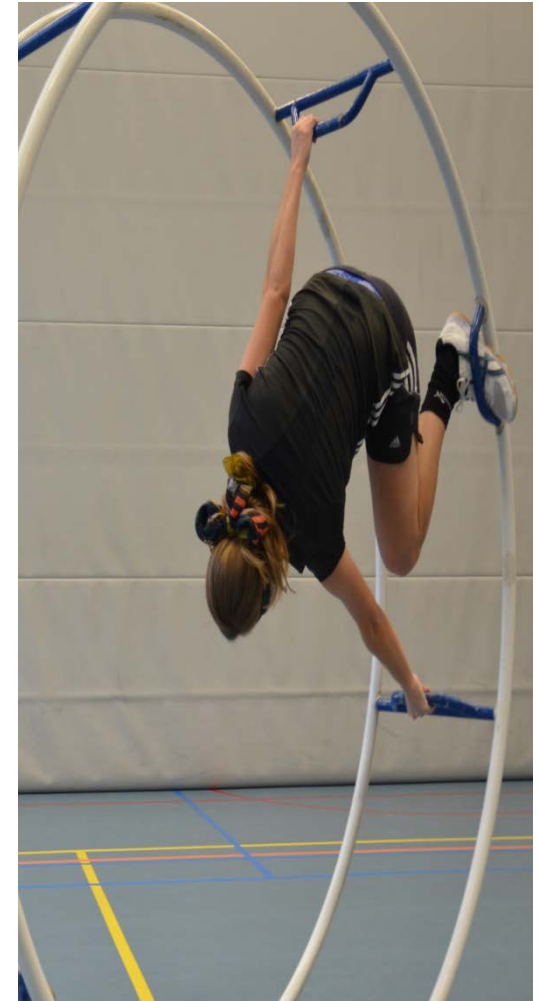
Reasons ADHD children Misbehave

1. Frustration because they have a different perception of the situation
2. Lack of structure
3. They act the role of being “bad”
4. They don’t know how to ask to get what they need so they act out
5. The classroom is full of distractions
6. The child feels misunderstood
7. Hunger
8. They feel overwhelmed with tasks assigned
9. They feel criticized
10. They are stuck in the “victim cycle”



Solutions To Helping The ADHD Child

- Make lessons very clear
- Use lots of visuals
- Instructions repeat them often
- Make the rules clear
- Pair children together to complete assignments
- Provide hand signals
- Play beat the clock
- Use behavioral contracts
- Use sticker charts
- Allow children to move around
- Allow more time for test
- **Important: the child is not a bad child, you have tell him, his behavior is not ok**



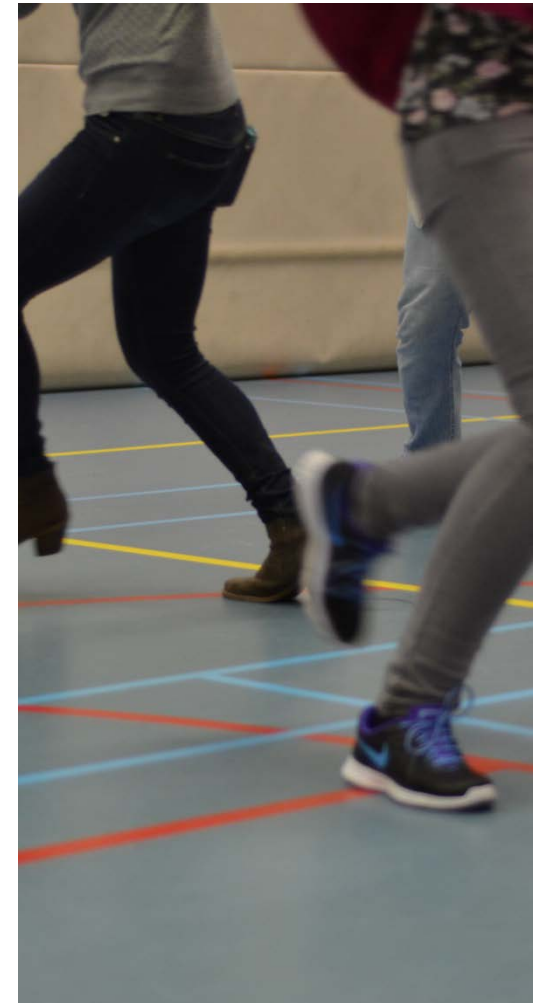
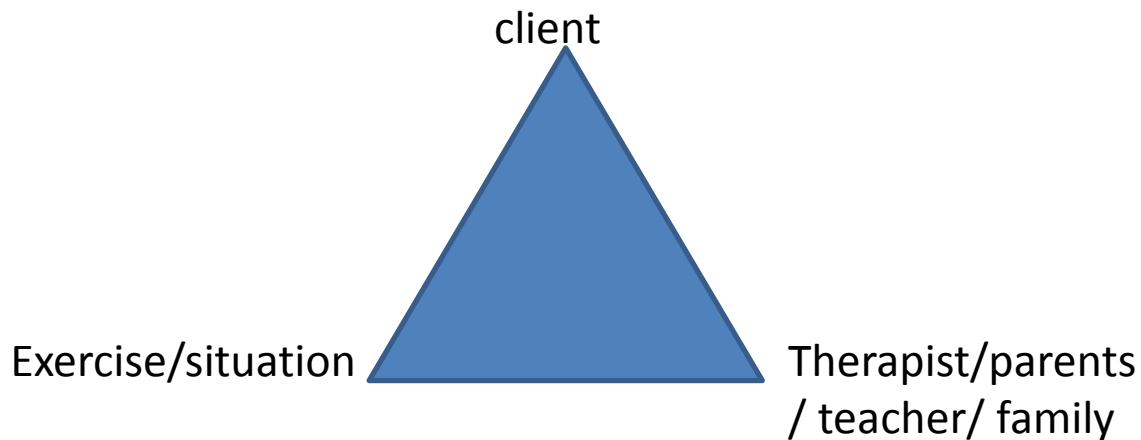
The don'ts

- Putt in a lot of materials at the gym
- Give a long assignment/exercise
- Many rules and assignments
- Long waiting moments
- Get angry at the child
- Go for a discussion



The therapeutic part

- Treatment to individual child
- Treatment child in a group
- Treatment / training family and others



References

- Albaret, J.-M., Marquet-Doléac, J., & Soppelsa, R. Psychomotor approach of ADHD: between inhibitory control and problem solving.
- Applebaum Training Institute. (2005). *How to Handle the Hard-to-Handle Student Resource Handbook*.
- Bachmann, C. J., Wijlaars, L. P., Kalverdijk, L. J., Burcu, M., Glaeske, G., Schuiling-Veninga, C. C. M., . . . Zito, J. M. (2017). Trends in ADHD medication use in children and adolescents in five western countries, 2005–2012. *European Neuropsychopharmacology*, 27(5), 484-493. doi:<http://dx.doi.org/10.1016/j.euroneuro.2017.03.002>
- Buitelaar, J., & Paternotte, A. (2013). *Dit is ADHD*. Houten: Terra-Lanno.
- Giant, N. (2014). *Life Coaching for Kids: A Practical Manual to Coach Children and Young People to Success, Well-being and Fulfilment*. Jessica Kingsley Publishers.
- Kat, F., Beenackers, M., & Brugge ter.W. (2009). *Leven met ADHD*. Houten: BohnStfleu van Lochum.
- Niks, C., & van den Dool, P. (2014). *Handreiking voor moeilijk verstaanbaar gedrag binnen beweegsituaties*: Stichting Onbeperkt Sportief.
- Prins, P., & van der Oord, S. (2008). Stoornissen in de aandacht en impulsregulatie. In P. Prins & C. Braet (Eds.), *Handboek klinische ontwikkelingspsychologie* (pp. 325-351): Bohn Stafleu van Loghum.
- Simons, J. (2014). *Themata uit de psychomotorische therapie. Boek 22*.
- van Mullekom, M. (2012). Analyse van adaptieve vaardigheden bij adolescenten met ADHD.
- Wierzema, K., & Jansen, P. (2011). *Basisprincipes van cummunicatie*. Amsterdam: Pearson.