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101  
Classroom  
Interventions

FROM THE ADD ADHD INFORMATION LIBRARY  
AT NEWIDEAS.NET

# **101 Classroom Interventions Elementary School Edition**

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**The ADD ADHD Information Library**

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# 101 Elementary School Classroom Interventions from ADDinSchool.com

*Powerful insights from teachers, school psychologists, and Dr. Cowan*

The structured school classroom setting can be a tremendous challenge for individuals who have difficulty sitting still, being quiet, and paying attention to the right thing. We want your ADHD student to be successful in school! We hope that these ideas will be helpful to you.

We have collected these interventions for ADHD students from a number of sources over the past 20 years. We do not know who should get the credit for them. So we will simply say thank you to all of the professional educators, educational psychologists, and family therapists who patiently work to help students with Attention Deficit Disorder.

When you visit us at ADDinSchool.com, you will find over 500 classroom interventions for students with Attention Deficit Hyperactivity Disorder. These interventions are organized into two main sections:

- Classroom Interventions for Elementary School children, ages 5 to 12
- Classroom Interventions for Junior High School students and High School students, teenagers ages 12 to 18

We would also like to invite you, the professional educator, to share your experience with us. If you have any great ideas that you have seen help your students with attention deficit disorder, we would like to know about them, and we will add them to the web site. Share your experiences by emailing us at [staff@newideas.net](mailto:staff@newideas.net)

Feel free to use these interventions in any non-commercial way. If you belong to a support group, such as ChADD, or other ADHD Support Group, please feel free to share this information with others who might have ADHD students, but please share the ebook in its complete format without changes, including the proper citations, etc.

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## Using this eBook as a Resource

### *Elementary School and ADHD:*

Can you imagine the most difficult setting for a child who has difficulty sitting still, difficulty paying attention, and loves to talk to other children?

Imagine that this child has to go into this setting every day, and is expected to perform successfully in this environment.

When you think about it, it is the classroom that is this difficult setting for these kids. There are a lot of distractions, yet they are told to sit still, don't move, don't talk, to pay attention to boring worksheets, and keep on task until the work is finished. None of these things come easily to Attention Deficit Hyperactivity Disorder kids. But day by day, off to school they go.

Many children with Attention Deficit Hyperactivity Disorder "hit a wall" in elementary school as their school year progresses, often about ten or twelve weeks into the school year.

Every week they have gotten just a little farther and farther behind, until they're so far behind that it's impossible to catch up.

They lose their homework assignments, even after they have spent hours working on them (hint: it really is in their backpack!) And they study hard for tests only to perform poorly the next day. They just slip farther and farther behind with each passing week.

ADHD is most often recognized and referred for treatment in third grade. This is when elementary school kids most often first hit the "academic wall."

In third grade they are expected to do more work, and to work more on their own. They are given more homework to do as well.

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We also see many referrals for evaluations in the seventh grade, or when the child leaves Elementary School for Junior High School, with several classes and several teachers.

Many Attention Deficit Hyperactivity Disorder kids who found ways to compensate in Elementary School are totally lost in Junior High School.

How can we help these children to be more successful in elementary school?

That's what this little resource all about. This is a collection of classroom interventions that I have found from a variety of resources – teachers, parents, school psychologists, and even a few of my own from my twenty-something years as a family therapist working with ADHD kids.

Parents, just a note to you:

Please just look over these ideas, and then find one or two to discuss with your child's teacher. Please do not take the ebook and make some kind of demand for the teacher to implement all of the interventions. Relax, take a deep breath, and find one or two ideas that might really help your child with ADHD.

At our [ADDinSchool.com](http://ADDinSchool.com) website we have 500 classroom interventions for ADHD students, covering both elementary school ages, and teenagers.

Take the time to search our website to find even more interventions to help your child.



## Tips for the Classroom Teacher

Studies show that one out of twenty children have Attention Deficit Hyperactivity Disorder, making it very important for teachers to understand both the myths and realities of the disorder. Here are some brief thoughts that teachers should consider:

1. Don't buy into the line, "He'd behave if he wanted to." That may or may not be true. He may behave just fine from time to time, and if you encourage him, he may do well for long periods of time. But his problem is not that he does not want to behave, rather his problem has a medical basis that makes it hard for him to sustain self-control.
2. Understand that of all of the kids with ADHD, about 60% or so are hyperactive, and that 40% or so are not hyper at all. Also know that about 60% are male, and about 40% are female. Not all kids with ADD will cause problems. Many will just sit and stare. Only one out of three with the Attention Deficit Disorder will ever get help from a professional.
3. Don't dismiss the behaviors as either poor parenting, or poor classroom management.
4. Before talking to the parents, get a second opinion from another teacher, the school psychologist, etc. When you do meet with the parents, make a list of the behaviors that you are concerned about. Don't try to diagnose the child yourself, as this will simply make the parents defensive. Instead, just report the observed behaviors and ask the parents to get it checked out.
5. Invite the parents to come in to your class and observe. More than one visit will be required, as having the parent present the first time creates a "unique" situation which stimulates the child to do better than normal.

6. Be aware that the ADHD child often does very well in unique or novel situations, or in one-to-one situations. This would include his visit to a physician or a therapist to diagnose a problem. Also be aware that the hardest place for an ADHD child is in the classroom setting. There are dozens of distractions, pressures, and rules that can be difficult for the child. And teachers, please be sure to visit us at <http://www.ADDinSchool.com> to find over 500 classroom interventions to help children with ADHD be more successful in school.



## Identifying ADHD in Classrooms: Things Teachers Should Consider

You see certain kids in your classroom. There are two, maybe three of them. They act like "space cadets," paying attention to someone or something else when they should be paying attention to you. Or they are always out of their seat, sharpening their pencil or wanting a drink. They cannot sit still for very long, and they are disturbing others. Or worse.

Are these kids ADHD? Or are they just undisciplined? Here are some questions to ask yourself, and a bit of background information for you to consider.

Attention Deficit Hyperactivity Disorder (ADHD) is the phrase that is used to describe children who have significant problems with high levels of distractibility or inattention, impulsiveness, and often with excessive motor activity levels. There may be deficits in attention and impulse control without hyperactivity being present. In fact, recent studies indicate that as many as 40% of the ADHD kids may not be hyperactive.

Research shows that there are several things happening in the brain of the ADHD child that causes the disorder. The main problem is that certain parts of the Central Nervous System are under-stimulated, while other parts may be over-stimulated. In some hyperactive kids there is also an uneven flow of blood in the brain, with some parts of the brain getting too much blood flow, and other centers not getting as much. Certain medications, or other forms of treatment can be used to address these problems.

I know this all sounds pretty vague, but the brain is very complex. It is the subtle variations in the "causes" of the ADHD that account for the different types, or manifestations, of the disorder: some are hyperactive, some in a fog, some depressed, some anxious, and so on. You can read more about the different types of ADHD at [NewIdeas.net/add\\_types.htm](http://NewIdeas.net/add_types.htm).

Often the Attention Deficit Hyperactivity Disorder child has special educational needs, though not always. Most Attention Deficit Hyperactivity Disorder kids can be successful in the regular classroom with some help. Teachers can find over 500 classroom interventions to help children be successful in school at [ADDinSchool.com](http://ADDinSchool.com).

## As a teacher ask yourself these questions:

### 1. Can the child pay attention in class?

Some ADHD kids can pay attention for a while, but typically can't sustain it, unless they are really interested in the topic. Other ADHD kids cannot pay attention to just one thing at a time, such as not being able to pay attention to just you when you are trying to teach them something. There are many different aspects to "attention," and the ADHD child would have a deficit in at least one aspect of it.

### 2. Is the child impulsive? Does he call out in class? Does he bother other kids with his impulsivity?

These kids often cannot stop and think before they act, and they rarely think of the consequences of their actions first. Impulsivity tends to hurt peer relationships, especially in junior high school years.

### 3. Does he have trouble staying in his seat when he's supposed to? How is he on the playground? Can he wait in line, or does he run ahead of the rest of the class? Does he get in fights often?

### 4. Can he wait?

Emotionally, these children often cannot delay gratification. Combined with impulsivity, this often leads to difficulty waiting their turn in games, waiting in lines, waiting for anything.

5. Is he calm?

They are constantly looking for clues as to how they are doing. They may display a wide range of moods, which are often on the extremes: they act too sad, too angry, too excited, too whatever.

6. Is the child working at grade level? Is he working at his potential? Does he/she stay on task well? Does he fidget a lot? Does he have poor handwriting?

Most ADHD kids have trouble staying on task, staying seated, and many have terrible handwriting.

7. Does he have difficulty with rhythm? Or the use of his time? Does he lack awareness about "personal space" and what is appropriate regarding touching others? Does he seem unable to read facial expressions and know their meanings?

Many children with ADHD also have Sensory Integration Dysfunctions (as many as 10% to 20% of all children might have some degree of Sensory Integration Dysfunction). SID is simply the ineffective processing of information received through the senses. As a result these children have problems with learning, development, and behavior.

8. Does he seem to be immature developmentally, educationally, or socially?

It has been suggested by research that children and teens with Attention Deficit Hyperactivity Disorder may lag 20% to 40% behind children without ADHD developmentally. In other words, a ten year old with ADHD may behave, or learn, as you would expect a seven year old to behave or learn. A fifteen year old with ADHD may behave, or learn, as you would expect a ten year old to behave, or learn.

There is a lot to learn about ADHD. Both teachers and parents can learn more by visiting the ADHD Information Library's family of web sites, beginning with ADDinSchool.com for hundreds of classroom interventions to help our children succeed in school.

*The ADD ADHD Information Library's Family of websites include:*

NewIdeas.net – The most comprehensive resource on ADHD on the web.

ADDinSchool.com – Five Hundred classroom interventions.

ADD101.com – Basic ADHD information for parents.

ADDexpert.com – Dr. Cowan's blog on ADHD.

ADD411.com – One hundred recommended ADHD books and resources.

AttentionDeficitDisorder.ws – Links to hundreds of ADHD related websites.

ADD-Products.com – Researching the effectiveness of alternative treatments for ADHD.

## ADHD is Not Related to I.Q.

It's important to know that Attention Deficit Hyperactivity Disorder and Intelligence, as measured by I.Q., are two different things.

Some parents are convinced that if their child has ADD it means that they are retarded. On the other hand, other parents say, "I've heard that ADD kids are really very, very bright. I think my child must have ADD," as if they wanted to wear a button that said, "My child is smarter than your child because he has ADD." Both of these points of view are unfortunate, and are based on bad information.

Intelligence falls into a Bell Curve, even for those with ADHD.



Some Attention Deficit Hyperactivity Disorder kids are below average I.Q., and some are even retarded.

Other ADD ADHD kids are above average I.Q., and some are even quite brilliant.

But the awful truth for a parent to hear is that MOST children (about 2 out of 3) are AVERAGE I.Q. That's why they call it "average." And most Attention Deficit

Hyperactivity Disorder kids have average I.Q. as well.

Children with Attention Deficit Hyperactivity Disorder just have a very tough time in the classroom setting. We tend to see lower academic achievement than we would predict based on the child's I.Q.

If they are really smart and they ought to be A students, we are disappointed when they're getting C's instead. If they ought to be B students, they're getting D's instead. Their school performance is disappointing, but it probably is not due to a lack of intelligence.

Chapter  
5

## Setting Up the Classroom for ADHD Students

Right from day one, make clear rules and post them, with logical consequences and with rewards.

Move your ADD ADHD student's desk to where there are fewer distractions, close to the teacher to monitor and encourage, or near a well-focused child.

Privacy boards can work well, but should never embarrass a child.

Students with attention problems do better in classrooms with four walls than in an "open pod" arrangement. Open pods allow too many visual and auditory distracters throughout the day.

It is usually better to use rows for seating arrangement and to try to avoid tables with groups of students. Often the groups are too distracting for the ADHD child. In the ideal setting, provide tables for specific group projects, and traditional rows for independent work. Of course, we are rarely in an ideal setting.



Every once in a while, try arranging desks in a horseshoe shape to allow for appropriate discussion while permitting independent work.

Your ADD ADHD student's desk should be near the teacher (for prompting and redirection), away from other challenging students, and not touching others' desks. However, if you notice that your attention deficit student looks around a lot to see where noises are coming from, because he is very auditorily distractible, he may benefit from being seated near the rear of the classroom. Experiment with seat location in the front of the classroom (near the board) and instructional area if your student is more visually distracted.

It is important for the teacher to be able to move about the entire room and to have access to all students. Practice "Management By Walking Around" in the classroom. The more personal interaction, the better.

Have all of the ADHD students seated nearest to the place in the class where you will give directions or lectures - at least as close as possible without being punitive.

To minimize distractions, seat the ADHD student away from both the hallway and windows. Keep a portion of the room free of obvious visual and auditory distractions. Have at least a part of the room free from bright, loud, or distracting objects.

Use desk dividers and/or study carrels carefully. Make sure they are used as a "study area option" rather than as a punishment.

Your attention deficit student will do better when he is able to anticipate times requiring increased concentration. Make a copy of the day's schedule and post it for your students.

If your ADD ADHD student tends to lose focus, and his activity-level increases during the day, schedule the most demanding attentional tasks in the morning.

In our desire to provide an engaging classroom for students, try to be aware of the auditory and visual distractions present. Attempt to place your ADD ADHD student where these would have the least effect.

Seat those really smart and quiet girls next to the ADHD child.

Stand near the attention deficit student when giving directions or presenting the lesson.

Use the ADD ADHD student's worksheet as an example when possible.

We know that teachers are neither God to control the weather, nor the janitors to control the thermostats. But as best as you can, provide comfortable lighting and room temperature.

Use individual headphones to play white noise or soft music to block out other auditory distractions. Be sure the music is not too interesting so that it becomes a distraction.



## Presenting Your Lesson to ADHD Children

ADHD kids are easily bored, even by you. Try to increase the pace of lesson presentation. Include a variety of activities during each lesson appropriate to elementary school.

Use peer tutoring whenever possible with Attention Deficit students. Get older children to help the ADHD student, and perhaps allowing the ADD ADHD student to tutor a younger child.

Provide an outline to ADHD students with key concepts or vocabulary prior to lesson presentation.

Use multisensory presentations, but be careful with audio-visual aids to be sure that distractions are kept to a minimum. For example, be sure interesting pictures and or sounds relate directly to the material to be learned.

Make lessons brief or break longer presentations into discrete segments.

Actively involve the attention deficit student during the lesson presentation. Have the elementary school age ADHD student be the instructional aid who is to write key words or ideas on the board.

Encourage the ADD ADHD students to develop mental images of the concepts or information being presented. Ask them about their images to be sure they are visualizing the key material to be learned.

Allow your elementary school students to make frequent responses throughout the lesson by using choral responding, frequently calling on many individuals, having the class respond with hand signals.

Try role-playing activities to act out key concepts, historical events, etc. I have taught ADD ADHD students the history of the Revolutionary War in the parking lot of the school, using cars, trees, and other objects to represent events and places in history. This can work well.



## Worksheets and Tests:

Stress accuracy instead of quantity of work. This is really what you want as a teacher anyway.

The ADHD child may be easily overwhelmed and discouraged. Reduce the quantity of work on a page. Instead of giving 30 problems on a page, give only 10 or 15. Then the ADHD child won't be overwhelmed, and successes will build up his self-confidence.

Your ADHD student in elementary school may tend to want to be "the first one done" on assignments and rush through them. Set reasonable accuracy goals with him and collect the entire group's work at once to reduce time pressures.

Use larger type on your worksheets and tests. It is easier to read.

Keep your page format simple. Don't include unnecessary pictures or visual distractions that are unrelated to the problems to be solved.

Provide only one or two activities per page. Have more white space on each page. Use dark black print only.

Draw borders around parts of the page you want to emphasize.

Avoid handwritten worksheets or tests.

Use buff-colored paper rather than white if the room's lighting creates a glare on white paper.

Write clear, simple directions. Underline key direction words or vocabulary, or have the students underline these words as you read directions with them.

Divide the page into sections and use a system to cover up and hide sections not currently being used. If possible, use different colors on worksheets or tests for emphasis, particularly on those involving rote, potentially boring work. Have the students use colored pens or pencils.

Give frequent short quizzes and avoid long tests. Provide practice tests.

Provide alternative environments with fewer distractions for test taking.

Using a tape recorder, have the student record test answers and assignments or give the student oral examinations. Keep in mind that timed tests are very hard for ADHD kids.

Shorten assignments. If the child can demonstrate adequate concept mastery in 10 or 20 questions/problems, don't require 30-40 problems.

Chapter  
8

## Organization

Model an organized classroom, and model the strategies you use to cope with disorganization.

Establish a daily classroom routine and schedule. Show that you value organization by allowing 5 minutes each day for the children to organize their desks, folders, etc.

Reinforce organization by having a "desk fairy" that gives a daily award for the most organized row of desks.

Use individual assignment charts or pads that can go home with the child to be signed daily by parents if necessary.

Develop a clear system for keeping track of completed and uncompleted work such as having individual hanging files in which each child can place completed work and a special folder for uncompleted work.

Develop a color coding method for your room in which each subject is associated with a certain color that is the that subjects textbook cover and on the folder or workbook for that subject.

Develop a reward system for in-school work and homework completion. One example of a system that reinforces both work quality and work quantity involves translating points earned into "dollars" to be used for silent auction at the end of grading period.



For children needing more immediate reinforcement, each completed assignment could earn the child a "raffle ticket" with her/his name on it . Prizes or special privileges could be awarded on the basis of a random drawing held daily or weekly.

Write schedule and timelines on the board each day. Provide due dates for assignments each day.

Divide longer assignments into sections and provide due dates or times for the completion of each section.

Tape a checklist to the child's desk or put one in each subject folder/notebook that outlines the steps in following directions, or checking to be sure an assignment is complete.

Provide study guides or outlines of the content you want the child to learn, or let the child build her/his own study guide with worksheets that have been positively corrected.

Be clear about when student movement is permitted and when it is discouraged, such as during independent work times.

If the ADHD child maintains that he/she did the homework, but just cannot find it, it can be found within the “black hole of homework,” which is either the child’s desk or the child’s backpack. Make them really look, and they’ll find it.



## Behavioral Interventions

Keep the classroom behavior rules simple and clear.

Have the class agree on what the rules should be.

Define and review classroom rules each day.

Implement a classroom behavior management system. Actively reinforce and reward desired classroom behaviors. This will “pay-off” sooner, not later.

Use self-monitoring and self-reinforcement of on-task behavior during independent work time. Use a kitchen timer to indicate periods of intense independent work and reinforce the class for appropriate behavior during this period. Start with brief periods (5-10 minutes) and gradually increase the period as the class demonstrates success.

When necessary, develop contracts with an individual student and her/his parents to reinforce a few specific behaviors. Set hourly, daily, weekly, or monthly goals depending on the reinforcement needs of the specific student. Provide frequent feedback on the student's progress toward these goals.

Provide a changing array of backup rewards or privileges so that students do not "burn out" on a particular system. For example, students can earn tickets for a daily or weekly raffle for the display of positive behavior.

To improve out-of-the-classroom behavior, allow the class to earn a reward based on the compliments they receive on their behavior from other teachers, lunchroom staff, playground aides and principals.

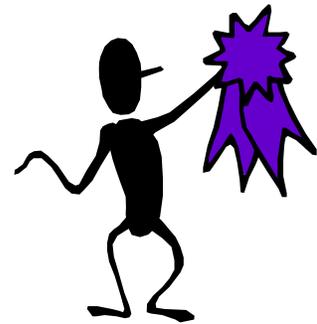
Avoid giving the whole class negative consequences based on the ADHD child's behavior.

The ADHD child, as well as the whole class, can benefit from implementation of social skills curriculum for the entire class.

Modeling, and requiring the children to use, a systematic method of talking through classroom conflicts and problems can be particularly valuable for the ADHD child. To implement this, teachers are referred to the literature on cognitive-behavioral approaches to developing the child's self-talk and problem solving.

Praise specific behaviors. For example, "I like how you wrote down all your assignments correctly," rather than "Good boy!"

Use visual and auditory cues as behavioral reminders. For example, have two large jars at the front of the room, with one filled with marbles or some other object. When the class is behaving appropriately, move some marbles to the other jar and let the students know that when the empty jar is filled they can earn a reward.



Frequently move about the room so that you can maximize your degree of proximity control.

When appropriate, give students choices about several different activities that could choose to work on one at a time.

With students who can be quite volatile and may initially refuse negative consequences (such as refusing to go to a time-out), set a kitchen timer for a brief period (1-2 minutes) after refusal has occurred. Explain to the child that the child can use the two minutes to decide if she/he will go to time out on her/his own or if more serious consequence must be imposed.

Several experienced teachers insist this method has successfully reduced the extent to which they have had to physically enforce certain negative consequences with students and seems to de-escalate the situation.

# Chapter 10

## Increasing "Time On Task"

Promote time on-task with attention deficit students, never time off-task. Reward the behaviors that you want the ADHD student in elementary school to do, not the one's that you don't want him to do. Pick and choose what behaviors you reward, and what you ignore.

Give a minute timer to keep on his desk. Ask the ADD ADHD child how long he thinks it would take to perform a certain task. Let him set his own time and race against the timer.

Most elementary school students with attention deficit disorder have difficulty with sustaining attention on tasks over time. Students with ADHD problems may need different levels of stimulation to keep them focused.

ADHD students will do better in elementary school classrooms with four walls than in an "open pod" arrangement, which will have a lot of distractions.

Break work up into smaller segments and sprints, and allow your ADHD student frequent breaks to move around inside and outside the classroom. This may vary from a daily outside walk, doing errands around the building, to classroom stretching exercises.

Schedule the most demanding tasks in the morning.

Your ADD ADHD student in elementary school may get overwhelmed with large assignments. His attention may wander after guided practice on similar tasks. Adjust the assignment down to smaller intervals. Give the assignment one sheet at a time.

Assign every third problem, rather than every one, for completion to reflect mastery level. Cut apart single worksheets into strips. Tailor guided practice to occur during those time periods. Schedule breaks after this optimum attention time period and then return to the assignment.

Seat work is often extremely difficult for students with attention deficit disorder. This can become compounded when the teacher is instructing another small group. Check on your ADD ADHD student as much as possible or have him check-in with the teacher at certain time intervals.



## Dealing with Impulsive Behaviors

"ADHD" children in elementary school tend to act without thinking first. Behaviorally, this shows itself in a lack of understanding of cause and effect. Attention Deficit students do things without thinking about the consequences of their actions. They say things without considering how others will respond.

Research also suggests that attention deficit students in elementary school can often verbalize the rules in place for behavior but have difficulty internalizing them and translating them into thoughtful behavior. Difficulties in delaying gratification also add to the impulsivity.

Some clinicians believe that this lack of self-control (poor regulation and inhibition of behavior), rather than their ability to pay attention, is the main problem with ADHD. How can you help these ADHD students with their self-control?

By having attention deficit students in elementary school think "out loud" when they are problem-solving, the teacher will gain insights into their reasoning style and the process will slow them down before they respond impulsively. Or ask the ADHD student your question, but ask him not to answer for 15 or 20 seconds, long enough to think about it first and not just respond impulsively.

Quite often, attention deficit students will continue to have difficulty with certain types of interactions on a regular basis; difficulty in taking turns, over-interpreting others' remarks as hostile, personalizing others' actions excessively, and misreading social cues. With the help of your ADHD student, his school teacher, and his trusted peers, problems that happen over and over again can be identified.

Role-play the problems, and possible solutions, ahead of time. Use his friends to help in the role-playing. Have your ADHD student practice these responses during the school day and have him and others give you feedback on their success.

Teach your attention deficit students in elementary school to "Stop and Think" before talking. This will help him to learn to slow down before talking. Encourage thoughtful responding and decrease impulsivity by waiting 10 to 15 seconds to receive responses during whole group instruction.

Keep the classroom behavior rules in elementary school simple and clear. Have the class agree on what the rules should be. Define and review classroom rules each day.

Implement a classroom behavior management system. Actively reward the behaviors that you want the students to do. Focus on the positive.

# Chapter 12

## Helping Students Stay Focused

ADD ADHD Students using medication to treat attentional problems will have their optimal attention effects for Methylphenidate (Ritalin) 45 minutes to 2 2 hours after taking the medication. Other medications differ, and it is best to check with the physician about the time of maximum medication effects. If possible, try to schedule the most attention-demanding tasks for the ADD ADHD student during this medication window. Work with parents to coordinate this.

An individualized plan that emphasizes stimulating reinforcers on a consistent basis has a good chance of success. Consequences and reinforcement should be as immediate as possible. Changing the reward periodically is usually necessary.

If your ADD ADHD students believe that you are on their side, and that you really want them to be successful, then your behavioral plans will probably succeed. If they believe that you are out to get them, then they will view your behavioral plans as punitive and manipulative. Same plan, different interpretation and results. You must be on the ADD ADHD child's side. You must convince the child with attention deficit disorder that you want him to succeed.

Rewards and verbal praise on a continual basis will change the attentional problem the most effectively. One suggested system is the "point system". Feedback that is delayed or variable is problematic in that your student may have difficulty in correlating delay and gratification. Your student may begin to make faulty behavioral connections in these situations.

ADD ADHD students respond well to rewards that they experience as highly-stimulating. Computer games, artistic media, and action-based play (sports or other physical activity), building sets, and activities outside of the school setting, can be effective.

Ask your attention deficit student what he would like to earn. Your ADHD student is the best source of identifying the reward.

Rewards should be changed frequently to maintain their "novelty power".

It is important in any behavioral system that your ADD ADHD student finds early success to "buy in" to the program.

One of the characteristics of attention deficit hyperactivity disorder is the variability of work performance across settings, tasks, and over time. In other words, ADD ADHD students have good days and bad days, good hours and bad hours. Rather than take high performance on some tasks as an indicator that low performance on other tasks is due to low motivation and willfulness, it is important to understand this as the nature of attentional problems. Your ADD ADHD student will do better on tasks he finds inherently interesting and stimulating. He will tend to do worse on tasks that required sustained attention and are boring.

If you bore your ADHD students, they will perform poorly. When they perform poorly, you might quietly ask yourself if your lesson was boring.

# Appendix

## About Us

Douglas Cowan, Psy.D., is a semi-retired Family Therapist, writer, hospital program administrator, and researcher who has helped over 1,000 ADHD children and their families be more successful since 1986.

He is the clinical director of the ADHD Information Library and ADD in School.com helping over 400,000 parents and teachers find answers for ADHD each year.

Douglas Cowan has the following educational background:

- \* Doctorate in Psychology;
- \* Masters of Science Degree in Marriage, Family, and Child Therapy;
- \* Bachelors Degree in Philosophy and Religion;

Dr. Cowan was in private practice from 1986 through 2002, with most of his work focused on ADHD. He has become very familiar with a variety of "alternative" or "additional treatments" for ADHD, including counseling interventions, diet interventions, amino acids, essential fatty acids, and eeg biofeedback training. He also is familiar with a variety of medications used in the treatment of ADHD, and has provided lectures to pediatricians and family practice physicians on best use standards for these medications.

In 1996 Dr. Cowan was approached by Gregory Young, Ph.D., Oxon., then President of VAXA International, then in San Diego, CA, to study the effectiveness of their current formula of Attend. Following that project, Dr. Young asked him to study the effectiveness of a new formula that was being considered for production, to replace the product formula on the market at that time. This study was completed in 1997. Dr. Cowan received no compensation for either study.

Impressed by the possibilities of the internet, and the new formula of Attend, Dr. Cowan approached VAXA in 1998 to market the product online. Up until then the product was only available in health food stores, health practitioners, or by sales agents. Dr. Cowan recommends VAXA products, along with other types of "alternative treatments" for ADHD, and receives a sales commission when someone purchases product through his web sites.

Dr. Cowan was influential in VAXA changing the money back guarantee on Attend from the industry standard 30 days, to a full 365 day satisfaction guarantee. This allows families to try Attend and its specific treatment strategies for several months to see if the products will work or not for their family, without concern for spending money on a treatment that might not be successful for their situation.

See [Newideas.net/add\\_types.htm](http://Newideas.net/add_types.htm) for the specific treatment strategies.

Dr. Cowan is currently serving, without compensation, on the following Boards:

- \* Member, Medical Advisory Board of VAXA International of Tampa, FL.
- \* President, Board of Directors for KAXL 88.3 FM radio in central California.
- \* Member, Board of Directors, Outpost Ministries, Pixabaj, Guatemala.

Now as Pastor of Family Ministries at a church in central California, Dr. Cowan continues to help married couples, families, teenagers, and children by strengthening their communication skills, providing valuable insights on how to solve problems, and by leading retreats and seminars.

His newest project is "Navigating in the New World," a six-week seminar series and digital workbook for parents and teenagers, helping both to focus on the skills needed for success in marriage, family, and careers.

Dr. Cowan also leads teams of construction and relief workers to various sites throughout the year. In 2007 Dr. Cowan will either send, or lead relief teams to:

- \* Winter, 2007 D'Iberville and Biloxi, MS, to work on homes damaged by Hurricane Katrina and help in rebuilding churches
- \* Winter, 2007: Pixabaj, Guatemala, building the roof for a school in this remote Mayan Indian village, and be there for opening day of the school!
- \* Spring, 2007: New Orleans, LA, to work on homes and churches damaged by Hurricane Katrina
- \* Summer, 2007: Tijuana, Mexico, to build a house or two (we've built 15 already with AMOR Ministries)

Be sure to visit the ADHD Information sites, and subscribe to Dr. Cowan's weekly ADHD Newsletter, delivered to you free via email. The newsletter provides over 100 articles each year for parents and teachers of ADHD children and related topics.

And, Dr. Cowan personally adds, "I would rather be coaching baseball. If you know of any openings at some small college somewhere in California, let me know..."

## Helpful Observations From Your Child's Classroom Teacher

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_ Subject: \_\_\_\_\_

As a Professional Educator, and as your child's teacher, I very much want to see your child be successful at school, at home, with friends, and into his future. Like you, I want your child to reach his or her full potential, and I count it a privilege to be your child's teacher at this stage in his or her life.

I work with, and observe, many students in my classroom each day. Here are some of my observations regarding your child that I thought to be important enough to bring to your attention.

<i>I observe that your child:</i>	<i>Sometimes</i>	<i>Often</i>	<i>Very Often</i>
Struggles to complete his/her assigned tasks	_____	_____	_____
Doesn't seem to listen or pay attention	_____	_____	_____
Has a hard time concentrating on difficult tasks	_____	_____	_____
Is easily distracted	_____	_____	_____
Is impulsive, or acts without thinking first	_____	_____	_____
Can't seem to organize schoolwork	_____	_____	_____
Interrupts or blurts out answers in class	_____	_____	_____
Is very restless and has difficulty staying seated	_____	_____	_____
Is always "on the go"	_____	_____	_____
Gets mad easily, or is easily frustrated	_____	_____	_____
Gets angry when told to do something	_____	_____	_____
Has trouble with reading or spelling tasks	_____	_____	_____
Has trouble with verbal directions	_____	_____	_____
Has poor handwriting	_____	_____	_____
Seems afraid of many things, or worries a lot	_____	_____	_____
Has trouble shifting from one task to the next	_____	_____	_____

As your child's teacher, I want to make you aware of these observations so that we can begin to help your child to be more successful in the classroom setting. It is not my intention to alarm you, or to discourage you. Let's work together to make this a great year for your child! On the reverse side of this form are some suggestions for you to consider that might help your child to be more successful here at school.

There are a number of reasons why your child might be having the problems reported on the front page. Take a minute to consider some of the following items, and see if some adjustments could be made at home that might help your child to be more successful at school.

*Is my child getting enough sleep?    Yes    No*

Many children and teenagers require from eight (8) to ten (10) hours of sleep every night, but few children get that much sleep. See if there are some changes that you could make in your daily routine to allow your child more hours of sleep.

*Is my child drinking enough water?    Yes    No*

Here is another easy remedy that can make a big difference. You, and your child, need to drink about six (6) to eight (8) glasses of water every day. Sodas, teas, and coffees don't count toward this requirement. If your child drinks less than this amount of water he or she could become dehydrated.

Since our brains are made up of over 75% water, a lack of water can cause us to be distracted, lose focus, and perform poorly at school, in sports, and around the house.

*Is my child eating right?    Yes    No*

Most children eat a low protein, high carbohydrate diet beginning at breakfast and continuing throughout the day. However, when it comes to helping your brain work at its very best, your child needs to be eating a higher (60%) protein, lower (40%) carbohydrate diet. This means no more breakfast cereal in the morning, and no more Pop Tarts either. Especially avoid foods that are high in carbohydrates and high in sugar content. Sugars paired with carbohydrates can make your child "hyper" and less focused at school. For more ideas to improve eating habits for greater success at school, visit our eating program web page at [www.newideas.net/adddiet.htm](http://www.newideas.net/adddiet.htm) .

*Is my child feeling well?    Yes    No*

Sometimes when children have these kinds of problems in a classroom it is because they are simply not feeling well, or they might be taking certain medications for allergies, or other medical conditions. Sometimes these behaviors are the result of certain conditions that make it hard for your child to pay attention to difficult tasks such as schoolwork or chores. Attention problems can be explained to you in greater detail by your physician, and you can read about them at home by visiting our website at [www.ADD101.com](http://www.ADD101.com).

*Is there more that I can do to help my child with his schoolwork?    Yes    No*

Life can be busy, and often parents can get distracted and forget to oversee their children as they do their schoolwork. Involved parents can be the biggest reason for a child's success in school. Let your child know that his education is important by being his mentor, coach, and cheerleader! Encourage your child to want to learn, and succeed.

There are a number of free resources on the internet with valuable information for parents and teachers. We would encourage you to visit these web sites at your earliest convenience and consider their weekly free newsletter on ADHD.

NewIdeas.Net - ADDinSchool.com - ADD101.com - ADDexpert.com



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# Free Parent Resources

From the ADD ADHD Information Library

[Newideas.net](http://Newideas.net) – Over 100 pages of ADHD information for parents and teachers

[ADD101.com](http://ADD101.com) – An introduction for parents to ADHD

[ADDinSchool.com](http://ADDinSchool.com) – Over 500 classroom interventions for teachers of ADHD students

[MyADDChild.com](http://MyADDChild.com) – Types of ADHD and treatment strategies

[ADDExpert.com](http://ADDExpert.com) – Old newsletter articles archive

[ADD-Products.com](http://ADD-Products.com) – Comparison of treatment approaches, research

[AttentionDeficitDisorder.ws](http://AttentionDeficitDisorder.ws) – The ADHD Links Project with over 100 ADHD web links

Included:

- The Different Types of ADHD and Specific Treatment Strategies
- Our Recommended ADHD Eating Program
- Copy of Our Attend Web Page

# Decision Tree for the Different Types of ADHD

## INATTENTION

No Yes



See other page

## DISTRACTIBLE DISORGANIZED

No Yes



See other page

## BOUNCY HYPERACTIVE RESTLESS ALWAYS "ON THE GO"

No Yes



If displays:

- INATTENTION
- DISTRACTIBLE
- DISORGANIZED
- "SPACE-CADET"
- and nice and kind...

Then consider Specific Strategy for **"Winnie the Pooh ADHD"** or "Inattentive ADHD"

If displays:

- INATTENTION
- DISTRACTABLE
- DISORGANIZED
- BOUNCY, RESTLESS
- HYPERACTIVE

Then use Specific Strategy for **"Tigger Type" ADHD** or "Classic ADHD"

Or with serious behavioral and social problems consider...



If displays:

- LOW ENERGY
- NEGATIVE THOUGHTS
- MILD DEPRESSION
- EASILY GIVES UP
- POOR SELF-ESTEEM

Then consider Specific Strategy for **"Eeyore ADHD"** or "Limbic System ADHD"

If displays:

- IRRITABLE or AGGRESSIVE
- IMPULSIVE
- DEFIANT or DISOBEDIENT
- VERY DISTRACTIBLE
- LEARNING DISABILITIES
- MOOD SWINGS

Then consider Specific Strategy for **"Troubled Type ADHD"** or "Ring of Fire" ADHD

# INATTENTION

No



See **OTHER PAGE**



# TROUBLE SHIFTING ATTENTION:

Lacks Flexibility

YES NO



Consider the possibility of an  
Alternative Diagnosis



If displays:

- EXCESSIVE WORRY
- EASILY STARTLED
- OBSESSIVE or
- INFLEXIBLE

Then use Treatment Strategy for  
“**Piglet Type**” or “Over-Focused” ADHD

If displays:

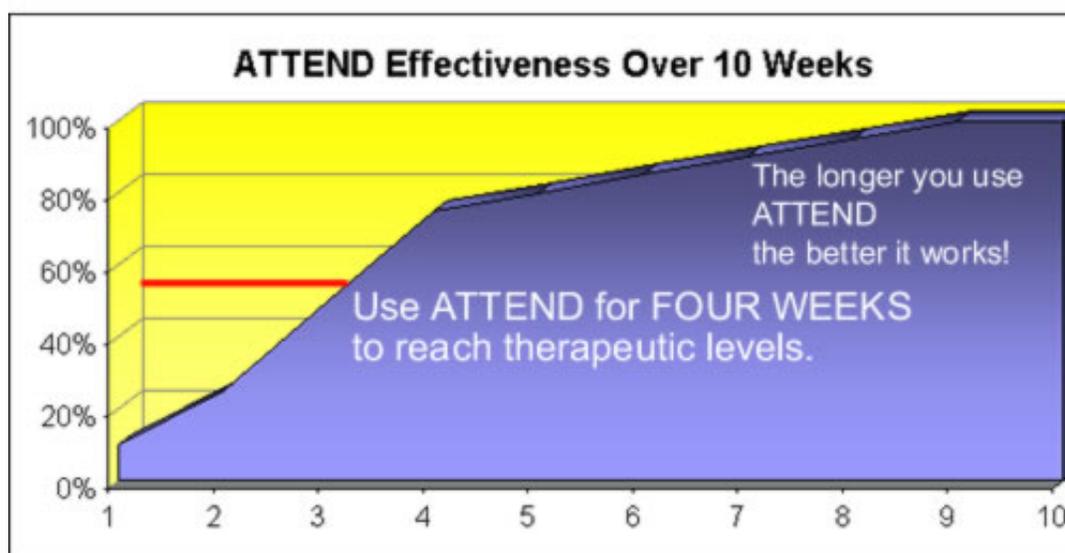
- INFLEXIBLE
- ARGUMENTATIVE
- NEVER GIVES UP
- CAN'T TAKE “NO” FOR AN ANSWER

Then use Treatment  
Strategy for “**Rabbit Style**” ADHD

## Five Steps – Treatment Strategies for Specific Types of ADHD:

- PRINT OUT all of this document and keep it.
- Step One: Using the “Decision Tree for the Different Types of ADHD” come as close as you can to determining what “type” or style of ADHD you are dealing with.
- Step Two: Read our recommendations for the Specific Treatment Strategy for that particular “type” of ADHD. Our recommendations are printed below on this document.
- Step Three: Become more familiar with each of the products that make the recommended Specific Treatment Strategies work so well in the section entitled: *“Recommended Products: Introduction and Description”* which is printed below.
- Step Four: Take action and purchase the recommended products that are needed to put the Specific Treatment Strategy to work for you. Products may be purchased at the ADD101.com web site 24 hours per day, or by calling VAXA International directly at (800) 248-8292 during East Coast USA business hours. Be sure to purchase enough products to last 30 to 45 days in your first order.
- Step Five: Find our ADHD Rating Scales below, and rate the target behaviors as you have observed them over the past week or so under the “BASELINE” column. Then, after the products arrive and you begin using them, rate behaviors every fifteen days and monitor improvements.

If you follow these FIVE STEPS you will see improvement in Attention, Impulse Control, Temper Control, and School Performance in just 30 to 45 days – or the products are FREE!



## **ATTEND Treatment Strategies: Parent Rating Scales**

Please rate your child's behaviors as directed below before beginning the use of Attend and/or other VAXA products. Place your first scores under the "Baseline" category. Then rate his or her behaviors every two weeks to track progress and improvements.

Rate the following behaviors on a scale from zero to five as follows:

- 0 – Over the past seven days I have not seen this with my child at all
- 1 – Over the past seven days I have seen this happen, but just a very a little
- 2 – Over the past seven days I have seen this sometimes, but not too often
- 3 – Over the past seven days my child has done this somewhat
- 4 – Over the past seven days my child has done this enough that it is a problem
- 5 – Over the past seven days this has been a really a big problem for my child

	Baseline	Week 2	Week 4	Week 6	Week 8
Struggles to complete his/her school work	_____	_____	_____	_____	_____
Does not seem to listen or pay attention	_____	_____	_____	_____	_____
Has a hard time concentrating on difficult tasks	_____	_____	_____	_____	_____
Is easily distracted	_____	_____	_____	_____	_____
Cannot organized his/her school work	_____	_____	_____	_____	_____
Interrupts others	_____	_____	_____	_____	_____
Is very restless or very fidgety	_____	_____	_____	_____	_____
Gets mad easily, or is easily frustrated	_____	_____	_____	_____	_____
Has trouble with reading or spelling tasks	_____	_____	_____	_____	_____
Has trouble with following directions	_____	_____	_____	_____	_____
Seems afraid of many things, worries a lot	_____	_____	_____	_____	_____
Has trouble shifting from one activity to another	_____	_____	_____	_____	_____

Now, please write down the exact number of times that the following behaviors have occurred in the past seven days...

	Baseline	Week 2	Week 4	Week 6	Week 8
Excessive Anxiety or Worry lasting more than 2 minutes	_____	_____	_____	_____	_____
Violent or Aggressive Outbursts, screaming or hitting	_____	_____	_____	_____	_____
Temper Tantrums lasting more than 2 minutes	_____	_____	_____	_____	_____
Crying episodes, unusual sadness for more than 2 minutes	_____	_____	_____	_____	_____

Dear Parents,

Before you begin, we want to encourage you to complete these rating scales on a regular basis so that you can track your child's progress over the next eight weeks. We truly believe that the use of specific VAXA products over a 45 to 60 day period of time will bring about considerable improvement in your child's behaviors and performance, especially when combined with our recommended eating program. We recommend the use of two to four Attend capsules per day. You may also want to consider a "loading dose" of four to six capsules per day for a period of three or four days early in the program. All of our clinical studies used four capsules per day, however smaller or younger children can still benefit from smaller doses of Attend.

If your child also has problems with temper tantrums, or is easily frustrated, or suffers from worry or anxiety problems, then we would strongly recommend Extress in addition to the Attend. Extress is highly reliable in reducing both the intensity and the frequency of these problems.

If your child has significant problems with short-term memory, or memorization, we would recommend Memorin in addition to the Attend formula.

If your child seems withdrawn, or unusually sad, he or she may be somewhat depressed. Please have this assessed by a physician. If the physician determines that it is not a serious depression, consider the use of VAXA's Deprex in addition to the Attend formula.

We have a detailed web page with free information for you on the various types of attention problems, and on specific treatment strategies for each. We believe that the use of targeted and specific treatment strategies will both improve your understanding of your child's condition, and improve the odds of success for you and your child. At this web site we discuss our observations about six different "styles" or "types" of ADHD that we describe as...

- Winnie the Pooh Type ADD - Inattentive, distractible, disorganized. Nice, but lives in a cloud.
- Tigger Type ADD - Inattentive, impulsive, hyperactive, restless, bouncy.
- Eeyore Type ADD - Inattentive, with chronic low-grade depression.
- Piglet Type ADD - Trouble shifting attention, excessive worry, easily startled.
- Rabbit Type ADD - Trouble shifting attention, inflexible, argumentative.
- Troubled Type ADD - Irritable, aggressive, impulsive, defiant, disobedient. Learning problems.

Each of these types of ADHD will have different treatment needs and approaches, so please visit our web page to learn more about each at [www.newideas.net/add\\_types.htm](http://www.newideas.net/add_types.htm) or [www.MyADDChild.com](http://www.MyADDChild.com).

Thank you for choosing VAXA products. We wish you and yours the best of success!

Sincerely,

Douglas L. Cowan, Psy.D., M.S.  
VAXA Medical Advisory Board  
VAXA International, Tampa, FL  
(800) 248-8292

## **Recommended Products: Introduction and Description**

**ATTEND** – to increase attention, self-control, processing speeding. Great for helping ADHD symptoms. ATTEND contains seventy (70) ingredients, including specific amino acid combinations, essential fatty acids, lipid complexes, homeopathic medicines, and more: L-Tyrosine, GABA, DL-Phenylalanylne, Ginko, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE and more.

**EXTRESS** – to decrease symptoms of anxiety, worry, temper, irritation, or stress related behaviors. Originally designed for people who suffer from panic or anxiety disorders, but works well for impulsivity, temper outbursts, and restlessness. Contains GABA, DL-Phenylalanylne, 5-HTP, and St. John's Wort.

**MEMORIN** – to increase focus, attention, concentration, and improve memory. Memorin contains Ginko, Phosphatidyl Serine and other phosphatidyls, and pregnenolone.

**DEPREX** – to increase a sense of well-being and decrease symptoms of sadness and worry. Contains GABA, DL-Phenylalanylne, 5-HTP, and St. John's Wort.

**NEURAN** – to increase neural function and stability, decrease mood swings. Originally designed to support seizure disorder patients and patients with head injuries. Many applications to certain types of ADHD. Contains GABA, DL-Phenylalanylne, but NO St. John's Wort.

**OUR EATING PROGRAM** is available for FREE on the web at: [ADD101.com/adddiet.htm](http://ADD101.com/adddiet.htm)

**ESSENTIAL FATTY ACID SUPPLEMENTS** are available at your local health food store, or use Flax Seed oils in your meals. You can also eat more fish, including Tuna Fish, to increase EFA levels.

## Tiggers Like to Bounce... Bouncin' is What Tiggers Do Best!

We call this type of ADHD "Tigger Type." Classic ADHD is characterized by **Inattention**, **Impulsivity**, **Hyperactivity**, **Restlessness**, and **Disorganization**. This type of ADHD reminds us of Tigger from the Winnie the Pooh stories. Dr. Daniel Amen refers to this type of ADHD as "Classic ADHD" for good reasons. When you think about someone who has Attention Deficit Hyperactivity Disorder, this is the "classic" picture that you think of.



**This type of ADHD is most often seen in males. Those with this type of ADHD are often seen as:**

- Being easily distracted
- Has a LOT of energy, and is perhaps Hyperactive
- Can't sit still very long
- Is fidgety
- Talks a LOT, and can be LOUD
- Is very impulsive, does not think before he acts
- Has trouble waiting his turn in line, or in games
- and more...

Tigger Type ADHD results from UNDERACTIVITY in the Prefrontal Cortex (in the front of the brain), both when at rest, and when performing concentration tasks. This results in a lack of self-control.

### Treatment Strategies for "Classic ADHD"

We recommend our Eating Program to start with. We believe that it is important to use the eating program even if you are using other interventions, such as medications, biofeedback training, or a combination of the nutraceuticals ATTEND, EXTRESS, and MEMORIN.

We also recommend at least a 30 to 60 day trial with these nutraceuticals...

- **ATTEND** for ADHD symptoms; 4 capsules per day in divided doses. The ATTEND contains L-Tyrosine, which increases dopamine production. ATTEND also contains GABA, DL-Phenylalanylne, Ginkgo, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE, and more.
- **EXTRESS** for symptoms of impulsivity, temper, restlessness; 4 capsules per day in divided doses. The EXTRESS contains GABA, DL-PA, 5-HTP, and St. John's Wort.
- **MEMORIN** for increased focus and concentration to task. 2 capsules per day in divided doses. The MEMORIN contains more ginkgo, plus lots of Phosphatidyl Serine and other phosphatidyls, and more pregnenolone.

An adult would take these in divided doses. A child could take half of these recommended doses. Consult your health care professional.

**To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:**

- **2 bottles of ATTEND; 2 bottles of EXTRESS; and 1 bottle of MEMORIN**

## Inattentive ADD: Just Like Winnie the Pooh

Winnie the Pooh is the classic picture of Inattentive ADHD. In other works we have called this "Space Cadet" style ADHD. Dr. Daniel Amen refers to this as "Inattentive ADD". These are people that suffer from "**brain fog**" as they go through their day. Although Pooh is very lovable and kind, he is also **inattentive, sluggish, slow-moving, unmotivated**. He is a classic **daydreamer**.



**Winnie the Pooh style inattention is seen mostly in girls. People with this type of ADHD are often seen as:**

- Easily distracted
- Having short attention spans to a task that is not interesting, or is hard
- Daydreams when others are talking to him/her
- A person who cannot find anything that they have just put down somewhere...
- A person who is always late
- Is easily bored

This type of ADHD is caused by the prefrontal cortex of the brain actually slowing down (instead of activity speeding up) when placed under a work load, such as reading or doing homework. This part of the brain looks normal when "at rest" but actually looks like it is starting to fall asleep when asked to "go to work." This makes it very hard to pay attention to school work, get homework done, listen to the teacher, clean your room, and so on.

We have actually observed this hundreds of times with subjects on an EEG. When at rest, the brainwave activity is pretty normal. But once the subject is asked to read, or to do a math worksheet, the subject's brainwave activity begins to look like the subject is falling asleep. This sure makes school hard for these students! Inattentive ADHD responds well to stimulants, such as Ritalin and Adderall, but other interventions, like our Specific Treatment Strategies, work well also.

### Treatment Strategies for "Inattentive" or Winnie the Pooh style ADHD

We recommend our Eating Program to start with. In addition, we recommend for Inattentive, or Winnie the Pooh style ADHD the following:

- ATTEND for ADHD symptoms, 4 capsules per day. The ATTEND contains L-Tyrosine, as Dr. Amen recommends in his protocols. It also contains GABA, DL-Phenylalanylne, Ginko, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE, and more. See the ATTEND ingredients list at [www.add101.com/attend.htm](http://www.add101.com/attend.htm).
- MEMORIN for increased focus and concentration to task, 2 capsules per day. The MEMORIN contains more Ginko, plus lots of Phosphatidyl Serine and other phosphatidyls, and more pregnenolone.

A child could take half of this recommended dosage, although many children will take up to four Attend per day. Consult your health care professional. For more information call 1.800.248.8292 during east coast business hours.

**To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:**

- **2 bottles of ATTEND, and 1 bottle of MEMORIN**

## Over-Focused ADHD: Rabbit Tends to His Garden... and don't bother him.

The least flexible character in all of the stories of Winnie the Pooh and Christopher Robin has got to be Rabbit. Oh, he can get a lot of things done, and he's the one character who will be prepared when winter comes, but he has a very hard time shifting from one activity to another. He is absolutely "task oriented" and is focused to whatever that task might be.

The person with "Over-Focused ADHD" is much the same. He has trouble shifting attention from one activity to another, and he frequently "**gets stuck**" in loops of negative thoughts. He can be **obsessive**, and very **inflexible**. He can also be **oppositional** and **argumentative** to parents. He may be like a "bull dog" and not give up until he gets his way, or until his worn-out parents finally say, "yes," to his 100th request for something. His parents are often worn-out, worn-down, fed-up, and ready to break. Parenting a child like this is hard.

### Someone with "Over-Focused ADHD" is like Rabbit, in that he:

- May worry a LOT, even over things that don't really matter much
- Can be very oppositional to parents
- May like to argue
- May be somewhat compulsive about the way things ought to be done
- Will have a very hard time shifting from one activity to another
- Always wants to have his way



The cause of this type of ADHD is an over-active Anterior Cingulate Gyrus. This part of the brain is over-active all of the time. And, to make things worse, when a "work load" is put on the brain, such as school work or a chore to be completed, there is the common ADHD symptom of decreased activity level in the Pre-Frontal Cortex.

*In this type of ADHD some stimulants, and too much use of L-Tyrosine to increase dopamine production can actually make the problem of over-focus worse. So be careful.*

### Treatment Strategies for Over-Focused ADHD

For best results, try our Eating Program to start with. In addition, some experts recommend 300 mg of St. John's Wort per day for children, or 600 mg per day for adults, 5-HTP, and B Vitamins.

We recommend for Over-Focused, or Rabbit style ADHD the following for adults. Children can take less.

- **ATTEND** for ADHD symptoms, take 2 capsules per day. The ATTEND contains GABA, DL-Phenylalanylne, Ginko, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE, and more. The EXTRESS contains GABA, DL-PA, 5-HTP, and St. John's Wort.
- **EXTRESS** for symptoms of impulsivity, temper, restlessness, and anxiety take 4 capsules per day
- **DEPREX** for symptoms of worry, take 2 capsules per day. The DEPREX contains more GABA, as well as lots more DL-Phenylalanylne, 5-HTP, and just 2 capsules of DEPREX contain 320 mg of St. John's Wort.

**To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:**

- **1 bottle of ATTEND, 2 bottles of EXTRESS, and 1 bottle of DEPREX.**

## Piglet is a great friend, but sure scares easily...

Piglet is that small, almost frail character from the Hundred Acre Wood. He is a great friend, and very loyal. But he is always worried, nervous, and startles easily. Sometimes he is so nervous that he stutters. So it is with some kids with ADHD.

This style of ADHD is very similar to the Rabbit style, except that with "Piglet style" the child's mid-brain is so over-aroused that the child is **hyper-vigilant** and very **easily startled**. He may be **talking** all of the time, and is probably **touching** everything in the room. And, this child is **nervous** or **worried**, or **anxious**. He has **trouble shifting attention** from one activity to another, and he frequently "gets stuck" in loops of **negative thoughts**. He can be **obsessive**, and very **inflexible**.

*In this type of ADHD some stimulants, and too much use of L-Tyrosine to increase dopamine production can actually make the problem of over-focus worse. So be careful.*

### Treatment Strategies for Piglet style ADHD

For best results, try our Eating Program to start with.

In addition, we recommend for Anxious, Piglet style ADHD the following for adults. Children can take less.

- **ATTEND** for ADHD symptoms, take 2 capsules per day. The ATTEND contains GABA, DL-Phenylalanylne, Ginko, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE, and more.
- **EXTRESS** for symptoms of impulsivity, temper, restlessness, and anxiety take 4 or more capsules per day. The EXTRESS contains GABA, DL-PA, 5-HTP, and St. John's Wort, and is great for helping with the these symptoms.



**To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:**

- **1 bottle of ATTEND, and 2 bottles of EXTRESS.**

## ADHD with Mild Depression

"Thanks for Noticin' Me" says Eeyore... He walks slowly. He looks sad. He doesn't accomplish much. He's just glad to be noticed. This is Eeyore, the stuffed donkey who is so often in need of his tail being pinned back on.

This type of ADHD is called "Limbic System ADHD" by Daniel Amen. And for good reason. SPECT scans show that when the brain is at rest, there is increased activity deep in the limbic system, in parts of the brain called the thalamus and hypothalamus. There is also a decreased level of activity in the underside of the pre-frontal cortex. When the brain is placed under a work load, as during a homework assignment, nothing changes. The over-active limbic system remains over-active, and the under-active pre-frontal cortex remains under-active.

This type of ADHD looks very much **like a combination of ADHD and Depression**. Some have suggested that up to 25% of children with ADHD are also depressed or suffer from a mild depression called Dysthymic disorder.

### Those with this type, or style of ADHD are often:

- Inattentive;
- Have a chronic sadness or low-grade depression;
- They seem to be negative, or apathetic;
- They have low energy levels;
- They just do not seem to care. They often feel worthless, or helpless, or hopeless.



### Treatment Strategies for Limbic System, or Eeyore style ADHD

For best results, try our Eating Program to start with (see [www.add101.com/adddiet.htm](http://www.add101.com/adddiet.htm)). In addition, experts recommend DL-Phenylalanylne (up to 600 mg per day for adults), 5-HTP, and B Vitamins and St. John's Wort (up to 600 mg per day for adults). We recommend for Limbic System, or Eeyore style ADHD the following for adults. Children can take less.

- **ATTEND** for ADHD symptoms, take 2 capsules per day. The ATTEND contains GABA, DL-Phenylalanylne, Ginko, Pycnogenol and Grape Seed Extracts, 5-HTP, pregnenolone, DMAE, and more.
- **EXTRESS** for symptoms of impulsivity, temper, restlessness, and anxiety take 2 capsules per day. The EXTRESS contains GABA, DL-PA, 5-HTP, and St. John's Wort.
- **DEPREX** for symptoms of worry and depression, take 2 capsules per day. The DEPREX contains more GABA, and just 2 capsules of DEPREX contain 320 mg of St. John's Wort and 420 mg of DL-Phenylalanylne.

**To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:**

- **1 bottle of ATTEND, 1 bottle of EXTRESS, and 1 bottle of DEPREX.**

## Other, More Difficult Kinds of ADHD: The Temporal Lobes and ADHD

There are other kinds, or types, of ADHD that you should be aware of. There are no Winnie the Pooh characters for these types, as the creator of these children's stories would never have created a character with these challenging, difficult traits. These distinct types of ADHD can be very severe. They require significant treatment, and great patience on the part of the parents.

Some people with ADHD can be very hard to live with. They can have gigantic mood swings, get very angry for almost no reason, and be nearly impossible to live with on a daily basis. The key to look for with this type of ADHD is anger outbursts for little or no reason. People with decreased activity in the left temporal lobes can especially have problems with temper outbursts, aggressive behaviors, and even violence toward animals or other people.

### Temporal Lobe ADHD is characterized by:

- Inattention, just like in other kinds of ADHD because during concentration there is a decrease in activity in the pre-frontal cortex;
- Being easily irritated or frustrated, and Aggressive behaviors;
- Dark moods, big mood swings;
- Impulsivity;
- Breaking rules, in trouble a lot, in fights a lot. Defiant toward authority, disobedient toward parents and others. Can't get along with others, can be anti-social or just in trouble a lot;
- Often has terrible handwriting and problems learning;
- You expect him to be arrested at any time...



Individuals with this type of ADHD are often treated with a combination of stimulants, like Ritalin, and anti-convulsants. For someone who wanted to try an alternative treatment approach, or an additional treatment approach, we would recommend

- GABA (an inhibitory neurotransmitter) to act as an anticonvulsant and anti-anxiety agent,
- Phosphatidyl Serine (and other phosphatidyls), DMAE, Pregnenolone, and Ginko as memory enhancers to help with the learning problems, and these people sometimes are helped by Ibuprofen in small doses.
- **no** St. John's Wort or Hypericum, as it could make things worse.

### Using the VAXA nutraceutical product line, our recommended protocol would look like this:

- **ATTEND**, 2 capsules per day. Two capsules of the ATTEND contain GABA (33mg), and DL-PA (16mg) for mood stabilization, plus L-Tyrosine (67mg), Ginko (33mg), Phosphatidyl Serine (0.5mg) and other phosphatidyls (200mg) and DMAE (33mg) and Pregnenolone (8mg) for learning enhancement. There are over 70 total ingredients in ATTEND to help with learning, performance, and mood.
- **NEURAN**, 4 capsules per day. Four capsules of NEURAN contain GABA (240mg), and DL-PA (32mg) for mood stabilization. Children might take less. Consult your healthcare professional.

As you can see, using the Neurane along with the Attend can enhance the mood stabilization components without adding either St. John's Wort or Hypericum, which can make the problem worse. These two products together can also enhance learning and memory, and therefore school performance or work performance.

### To last for 30 days, YOUR FIRST ORDER for this Specific Treatment Strategy would be:

- **1 bottle of ATTEND, 2 bottles of NEURAN.**



## **Our Recommended Eating Program for ADHD, and Improved Performance**

Below is a copy of our [recommended eating program](#) for ADD/ADHD kids. It is not a very strict program, unless you are used to having most meals at your local fast food restaurant. This program is recommended for every member of the family.

It's not just an ADHD program. It's the same program that we put professional athletes and business executives on for optimized performance, with only minor changes. We have found that it really helps about 20% of the kids that try it. The most common feedback that we get from parents is, "Well, it helped my kid somewhat, but I *really* feel great!"

Results fall into a "Bell Curve." A few people get great results. Some are completely unaffected. But most people do see fairly good improvement, although it is not enough to use as a stand-alone intervention. Have realistic expectations, but please do try it. It just may be a big help to your family.

### ***First, here is what NOT to eat for TWO WEEKS:***

- 1) NO DAIRY PRODUCTS, especially cow's milk. This is the single most important restriction. Instead try Almond milk, Rice milk, or Better Than Milk. Drink water instead of milk. In fact, drink lots of water. The brain is about 80% water, and increasing your water intake to 7 to 10 glasses per day might be helpful all by itself. Sodas, Gatorade, teas, ices, etc., do not count as water. Only water counts as water.
- 2) NO YELLOW FOODS. Especially Corn or Squash. Bananas are white, just don't eat the peel.
- 3) NO JUNK FOODS. If it comes in a cellophane wrapper, don't eat it.
- 4) NO FRUIT JUICES. They have too much sugar content. One small glass of apple juice has the sugar content of eight apples. Later on you can have juice, but dilute it with water 50/50.
- 5) CUT SUGAR INTAKE BY 90%. If you can, cut it down to zero. Sugar is in just about everything, but give it a try. Do your best without going crazy.
- 6) CUT CHOCOLATE BY 90%. No more than a single piece, once a week.
- 7) NO NUTRASWEET. None. Period.
- 8) NO PROCESSED MEATS and NO MSG. Only get meats with labels that say, "Turkey and Water," etc. If the meat has chemicals listed that you can't pronounce, don't buy it.
- 9) CUT FRIED FOODS BY 90%.
- 10) AVOID FOOD COLORINGS WHENEVER POSSIBLE. See if your child is sensitive to any particular colors, such as Reds, Yellows, etc. For now, though, avoid all food colorings if possible.

**SUMMARY:** Just eat foods that God made for a while. Eat like people did in the 1940's. Go to a used bookstore and get a Betty Crocker's Cook Book for recipe ideas. There really are about 10,000 meals that you CAN eat. Just not much in the way of "fast foods" or "convenience" foods.

**AFTER TWO WEEKS** begin adding these foods back into your diet, one food every other day. Eat A LOT of that food every day for four days. If you have a problem with one of the foods, you will see some kind of a "reaction" within those four days. The reaction can vary from big red splotches on the body to ears turning bright red to explosive temper outbursts. If there's a problem, you'll know. If there's no problem, enjoy the food.



## **GOOD THINGS TO EAT TO FEED THE BRAIN: Start these today!**

### **1) FOR BREAKFAST SERVE HIGH PROTEIN, LOW CARBOHYDRATE MEALS.**

Say, "Good-bye," to Breakfast cereals and milk, as they are high sugar, high carbohydrates, and 30% of kids are allergic to milk. Serve meals of 65% Protein and 35% Carbohydrates for Breakfast, such as eggs and toast. Other meals should be about a 50% / 50% mix of proteins and carbohydrates.

2) **PROTEIN SUPPLEMENTS** might be needed to get the added protein for Breakfast. They are often very helpful in the afternoon as well. Try using them twice each day for a week or so to see if they help. Here is our favorite recipe for a Protein Shake:

- a) Make a cup of coffee, using one of General Mills' International Coffees, or something like that, with a flavor that you or your child will like (yes, we know we are breaking our own rules here, as these coffees have dried milk and some sugar, but we are trying to get your kid to actually drink the thing, and also get some caffeine mixed in with the protein.). Pour the hot coffee into a blender with about 6 oz of ice. Turn on the blender for a bit.
- b) Add a good quality protein powder. There are many good ones available. If you can't find one that you like, ask at your local health food store. Get protein powders that are mostly protein and very little carbohydrate. Add between 15 and 20 grams of protein to the cold coffee in the blender.
- c) Turn on the blender again.
- d) Drink it up.

This protein shake is helpful for a lot of people. For many small kids, and many adults, this recipe works about as well as a small dose of Ritalin (100 mg of caffeine is roughly the same as 5 mg of Ritalin). So many who might just take a small dose of Ritalin might get away with just doing this. Don't forget, though, that even caffeine can have some side effects.

Every once in a while we find someone that has problems with the caffeine in the coffee. Usually, though, the caffeine in the coffee helps the person to focus better. The protein helps to feed the brain. If you find this helpful, have one with Breakfast, and one around 3 pm. If it is not helpful, then don't bother with it.

3) **MINERAL SUPPLEMENTS** may be helpful. Colloidal Minerals or fully chelated minerals are the best. We like the MinPac from [VAXA](#), but there are several good choices. Don't buy minerals in the grocery store. Use only high quality supplements. Check out [VAXA's](#) new chewable for children.

4) **ATTEND, EXTRESS, or MEMORIN** from VAXA. We strongly recommend [Attend](#), a homeopathic nutraceutical medicine with essential fatty acids, lipid complexes, and specific amino acids.. "Extress" is recommended in addition for those with problems with hyperactivity and temper, and "Memorin," in addition to the "Attend," for those with poor concentration or memory. See some specific treatment strategies at [http://www.newideas.net/add\\_types.htm](http://www.newideas.net/add_types.htm).

5) **FLAX SEED or PRIMROSE OIL**. These are good sources of Omega oils, and essential fatty acids. Borage oils and some fish oils are good as well. Mix about a spoonful a day into foods as you prepare them, or add to salad dressings, etc. This is very important as many individuals with ADHD have essential fatty acid deficiencies, which impair both immune function and neurological function.

6) **EAT SOME FRUITS AND LOTS OF VEGETABLES**. And avoid Aluminum exposure (don't wrap food in aluminum foil or cook foods in aluminum foil). Just do your best to eat in a healthy manner. Try it out and let us know what you think.