Parenting Children With ADHD: 10 Lessons That Medicine Cannot Teach

Reviewed by Lynda Thompson, PhD, CPsych, BCIAC-EEG

Vince Monastra has given another gift to the field of interventions for attention deficit/hyperactivity disorder (ADHD). Not only was he the lead author on two papers reporting on a multisite study that established norms for theta/beta power ratios for ADHD, he next published a paper showing that combining neurofeedback with medication, appropriate school programming, and parent training worked; furthermore, he showed that the group receiving neurofeedback had results that lasted once medications were withdrawn, whereas the group without neurofeedback relapsed as soon as the drugs were discontinued. In this new book, published with the imprimatur of the American Psychological Association (APA), Monastra has provided a practical compendium of tips for the management of ADHD symptoms that parents can implement. It is a hopeful and helpful small volume with a reasonable price tag ($14.95) that should be on the shelf of every parent or practitioner who deals with ADHD.

It has long been known that good parents who have effective behavior management techniques can still “lose it” with this group of children, as they are so demanding and persistent and do not seem to learn from experience. Monastra empathizes and then steers parents in the right direction while being realistic about the degree of change that can be expected. The format of this guidebook, which is based on years of doing family therapy and running parenting classes, is that each chapter is a lesson that parents can apply.

He first covers the criteria for an ADHD diagnosis, including mention that there is no age limit for diagnosing ADHD and that 4% of people with the symptoms actually have a medical condition (e.g., sleep apnea, thyroid disorder) that is responsible. Next is a discussion of genetics and neurotransmitters, with the message that ADHD is brain-based. Tacked onto this technical material (explained in a nontechnical way) is “homework” (every lesson comes with a homework assignment for parents) concerning what you want your child to learn and a description of Monastra’s parent-child nonaggression pact. This pact says that family members should not behave aggressively, but if they do, they must later apologize and do something to make amends. Next comes a thorough chapter on medications, followed by one on nutrition. The nutritional advice is very practical, with encouragement to be creative about getting protein into every meal (especially breakfast) and to avoid battles. The fifth chapter is on school interventions. It underscores the right to modifications under the 1998 Individuals with Disabilities Education Act (IDEA) act and includes Monastra’s copyrighted Functional Assessment Checklist for Teachers (FACT). This is just one of many helpful checklists found in the book that facilitate the homework parents are expected to do.

Chapter 6, “Kids Need a Reason to Learn,” is about motivation. Monastra discusses, among other tips, the need for external rewards and the power of treating children who have ADHD with respect. The next chapter builds on this and discusses three good tactics: charts that track expectations and points earned; work-for-play plans (which most of us grew up by and still live by, although those with ADHD resist this work ethic and go for immediate pleasure); and time-stands-still (the child’s privileges are on hold till they comply with the parent’s request). Monastra is very practical and discusses what to do when the child throws a fit about restrictions. Appropriately, the next chapter focuses on helping children gain emotional control. Feelings of anger, depression, and anxiety are discussed. A practical plan for getting a child to overcome nighttime fears and sleep in his or her own bed is especially helpful because this is a very common problem with youngsters who have ADHD. Chapter 9 focuses on teaching problem-solving skills and covers how to help the child develop empathy so that he or she can negotiate appropriately while keeping other people’s needs (especially the parent’s) in mind. This lesson recognizes that the usual development of maturity in those with ADHD is delayed and needs conscious teaching. With his usual positive approach, Monastra notes that “conflicts with your child can become teaching moments.” Then he proceeds with examples of how the parent can replace the child’s whining and yelling with respectful requests. The final lesson, “Parents are People, Too!,” encourages parents to take care of their own needs as well as those of their children.
In addition to the 10 chapters that are "lessons," there is a final chapter entitled "It Don't Come Easy," which encourages parents to be persistent in their efforts. That ungrammatical phrase says everything about the approach this book takes. Monstra's advice is down-to-earth and delivered in a straightforward manner, almost like he is having an informal chat with the parent. He is very much a colleague of the parents, making them feel that they have a knowledgeable and sympathetic expert to guide them as they face the very real frustrations and roadblocks encountered when parenting children who have ADHD.

This book will not raise the hackles of physicians and those who promote pharmaceutical approaches to management. On page 198, it states, "There is no extra credit given for parenting without medicine." And among recommended readings, Russell Barkley's (1990) ADHY: A Handbook for Diagnosis and Treatment is listed, whereas The ADD Book by pediatrician William Sears and myself (1998), which was the first book for parents to include a chapter on neurofeedback, is absent. Nevertheless, Parenting Children With ADHD evinces the same quality of helpful support, encompassing a multimodal approach to family success, school success, diet, and medication that is found in my book. We both promote judicious use of drugs but also educate, and thus empower, parents to use better management techniques and to pay attention to nutrition, education, and even neurofeedback. In writing Parenting Children With ADHD, there seems to have been a decision made not to offend the promedication camps, but to slip interventions like neurofeedback in through the back door. This doubtless reflects the reality of current management of ADHD in North America, where pills rather than skills are promoted.

What of neurofeedback for ADHD? It does get a mention, but it is a very soft sell. First, quantitative electroencephalograph (QEEG) is mentioned as being helpful in making the diagnosis and in predicting response to medication. Monstra mentions that if the frontal lobes do not show underactivation, which is true for about 10%-15% of those with ADHD, a stimulant drug probably will not be effective. Electroencephalograph (EEG) biofeedback also appears among a list of helpful interventions, along with family therapy and social skills groups, in the second chapter. There is the notation that the book will not deal with these (other than brief descriptions) because the focus of the author's lessons is on what parents can do, not on what others can do for the child with ADHD. The brief description that eventually comes in chapter 4 (25 pages in this 261-page paperback, compared with 20 pages concerning various medications) is, of course, favorable and phone numbers for the Association for Applied Psychophysiology and Biofeedback (AAPB) and the International Society for Neurological Regulation (ISNR) are provided. The back cover also mentions Monstra as being internationally recognized for research on parenting style, school intervention, nutrition, and EEG biofeedback. Thus, the careful reader is going to have his or her interest peaked and may further investigate biofeedback and neurofeedback.

In this book, Monstra shares his experience with over 10,000 patients, and there is a lot of distilled wisdom served up in a very palatable fashion. He is ever practical. The frequent stories and real-life examples make the book an easy read while also getting the message to the limbic system, not just the frontal lobes.

References