

Improving treatments for ADHD

ADHD is one of the more common problems addressed by therapists, pediatricians and schools. The Society of Pediatric Psychology focused its July journal on treatment and outcomes with this disorder. Overall, research shows we have a great deal more work to do in learning how to best serve children with ADHD. Despite many medical and behavioral treatments, many children with ADHD still have more difficulties socially and academically than their peers. In recent years, the trend in treatment has been shifting more toward use of stimulant medications alone, which may have contributed to this achievement gap. Research has shown that the best available approach to helping children with ADHD is to combine medications with behavioral interventions such as parenting strategies, school support, and social skills training. This is particularly true for children from less advantaged backgrounds, or for children with both ADHD and anxiety. Early diagnosis and intervention may also be important, as children can receive help before they become discouraged or before their impulsive social behaviors alienate peers.

Society of Pediatric Psychology, 2007. *Journal of Pediatric Psychology- Special Issue on Attention-Deficit-Hyperactivity Disorder*, 32:6.

Is early ADHD diagnosis reliable?

Recent literature has pointed toward a need for early diagnosis and early intervention for childhood difficulties such as ADHD. However, some clinicians are concerned that the symptoms of ADHD cannot be reliably differentiated from normal child activity levels and normal child inattention in younger children. Dr. Lahey and colleagues examined this question, looking at both how well clinicians can diagnose early signs of ADHD, as well as the problems children with ADHD may develop later in life. They followed a group of children ages 4-6 over a period of 8 years (until ages 12-14). Overall, the found that for both girls and boys, children who were diagnosed as having ADHD at ages 4, 5 or 6 were very likely to still meet criteria for the diagnosis at ages 12, 13 and 14. 65% of girls and 77% of boys still met criteria 8 years later. Only 5% of girls and 15% of boys without significant ADHD symptoms at ages 4-6 had significant symptoms at ages 12-14. Overall, Dr. Lahey and colleagues concluded that while early diagnosis was not perfect, it was highly reliable in that most children who had significant attention difficulties early in childhood continued to struggle through early adolescence. They also found that for both boys and girls, ADHD in early childhood predicted later difficulties with both behaviors and with emotions such as sadness and anxiety. Boys and girls with early ADHD symptoms were equally likely to have behavior difficulties, while older girls in the last 2 years of the study were more likely than boys to have difficulty with depression and anxiety. Authors conclude that early assessment of ADHD is both practical and reliable.

Lahey, B.B. et al (2007). Are there sex differences in the predictive validity of DSM-IV ADHD among younger children? *Journal of Clinical Child and Adolescent Psychology*, 36:2, 113-126.

Television viewing and attention

Although ADHD is widely acknowledged to be a physiological problem with links to genetics and neurology, psychologists also note some links between children's activities and their ability to attend. Dr. Miller and colleagues sought to replicate a previous, larger study conducted in 2004, showing a correlation between amount of time young children spend watching TV and problems with inattention and activity level. Children in Miller et al's study were 2-5 years old, and watched from 0 to 8.5 hours of TV each day. Researchers found a small but highly significant relationship between amount of TV watched by each child and attention problems reported by teachers, as well as activity level observed in the lab.

Dr. Miller and colleagues suggest several reasons for this connection. On one hand, the researchers feel that passive entertainment may have a negative impact on the developing brain. When watching TV, children do not have to interact and monitor their levels of attention, so they might learn these skills slower. On the other hand Dr. Miller and colleagues acknowledge that parents may allow very active or inattentive children to watch more TV because they find them hard to discipline during more active play. The effect was clearly not large enough to be seen as a cause of ADHD, but may be a small contributing factor to children's inattention.

Miller, CJ et al (2007) Television viewing and risk for attention problems in preschool children. *Journal of Pediatric Psychology*, 32:4, 448-452.

Parent's active coping reduces distress for learning disabled children.

Past research has shown that children with learning disabilities experience more loneliness, poorer self confidence, and higher rates of emotional and behavioral problems than children with no learning differences. This article focused on how parents actions can protect children from these possible negative outcomes. Al-Yagon found that there is a great deal of variability in the level of emotional problems children with learning disabilities experience – while some children with learning differences have emotional and behavioral difficulties, many do not. He found that parent's coping styles could reduce children's risk of these additional difficulties. Parent's coping styles were more important for children with learning disabilities than for those without. Parents who generally coped with difficulties by avoiding the problem and distracting themselves from negative emotions had children with more emotional and behavioral difficulties. Those that took an active role in coping, for example seeking information, advocating for services, and actively taking steps to address problems were able to help their children more, had closer relationships with their children, and their children had far fewer emotional difficulties. Parents' active coping is essential for every child, but far more important for children with learning difficulties.

Al-Yagon, M. (2007). Socioemotional and behavioral adjustment among school-aged children with learning disabilities. *The Journal of Special Education*, 40:4, 205-217.

Peer victimization of overweight children

Childhood obesity has become a major concern in both medical and psychological settings in recent years. Despite widespread knowledge of the problem and clear instructions from professionals on steps needed for weight management, many families continue to struggle with weight and are unable to comply with diet and exercise regimens. Dr. Storch and colleagues examined one factor they believed likely to be related to increased difficulties in children who are overweight - peer victimization. Previous research has linked peer victimization to a wide range of psychological difficulties, such as depression, anxiety and loneliness. Research has also shown that peer victimization is quite commonly experienced by children who are overweight. Dr. Storch and colleagues examined how the experience of victimization might relate to both psychological suffering and to activity level in a group of overweight children.

Dr. Storch and colleagues found that there is a strong relationship between peer victimization and emotional suffering in overweight children. They also found that children who reported the most victimization, depression and loneliness also tended to be less physically active. They hypothesized that victimization may cause depression, which could in turn lead to decreased activity. When they tested this hypothesis in their sample, they found that even when children's reports of depression were statistically removed, there was still a significant relationship between peer victimization and decreased activity level. They recommend that clinicians need to consider the impact of victimization when helping families plan for weight management. They recommend that some social skills training and emotion coping skills be included in regimens for pediatric weight management, as children who are able to successfully manage peer relationships will have both more opportunity and more interest in joining physical activities.

Storch, E. A. et al (2007). Peer victimization, psychosocial adjustment, and physical activity in overweight and at-risk-for-overweight youth. *Journal of Pediatric Psychology*, 32:1, 80-89.

Baby DVD's may hinder vocabulary growth

Dr. Zimmerman and colleagues examined the usefulness of infant educational videos. They found that, contrary to advertisers claims, watching educational videos geared towards increasing infants' and toddlers' vocabulary actually had the opposite effect. On average, for every hour per day infants under 17 months of age spent watching these videos, they learned 6-8 less words than children who did not watch the videos. Researchers believe this is because babies learn language best through interactions and conversations. They maintain that parents and caretakers are the first and best educators a child has, and that quality time with an infant is the best way to encourage learning.

Zimmerman, F., Christakis, D. & Meltzoff, A. (in press). Associations between media viewing and language development in children under age 2 years. *Journal of Pediatrics*.



Advancing Minds Research Review Quarterly is a free publication to promote awareness of psychological research in professionals that work with children. All articles are written by Susan Arvin., Ph.D. For additional copies or information, please call (408) 294-9903.

Advancing Minds is a child and adolescent mental health clinic in San Jose, CA. Our team of psychologists provides in depth evaluations of children's academic and emotional functioning. Evaluations help clarify diagnoses, qualify children for services, and provide parents and professionals with a detailed plan to help a child achieve their potential. Our psychologists also provide a full range of therapy and consultation services, helping families manage difficulties such as depression, anxiety, disruptive behaviors, inattention, relationships and troubling life events.

Back-to-School Evaluation Discount

Start off your child's school year on the right foot - with full knowledge of their learning needs and style. From now through the end of December, Advancing Minds is offering a 20% discount to all families seeking Educational and ADHD Evaluations. Understand how your child learns and reasons, what areas are difficult for them, and how to help them focus and achieve in school. Call us at (408) 294-9903 for more information or to set up an appointment for your child..

Changing children's thoughts on aggression

Children's aggressive behaviors are a major concern in schools and community. The Metropolitan Area Child Study Research Group examined the effectiveness of a school-based program designed to reduce childhood aggression. They trained teachers in a problem solving curriculum, teaching students how to generate pro-social solutions to conflict. Teachers were also trained to reward prosocial behavior when they observed it outside of these lessons. After 2 years of weekly lessons (20 weeks per year), students in communities with sufficient resources to implement the weekly lessons not only reported less intent to use aggressive behaviors than comparison children, but were less likely to report fantasies of aggression and were less likely to believe that aggression is a natural or normal response to situations. The study group concludes that schools can play a vital role in reducing aggression by including social problem solving skills in a regular academic curriculum.

The Metropolitan Area Child Study Research Group (2007). Changing the way children "think" about aggression: Social-cognitive effects of a preventive intervention. *Journal of Consulting and Clinical Psychology*, 75:1, 160-167.

Rumination and Adolescent Depression

Rumination, or focusing on one's problems and the reasons for those problems, is frequently associated with depression in adults. Drs. Burwell and Shirk examined this process in adolescents, looking for links between this negative self focus and depression, and exploring for possible subtypes of rumination. They found that, as seen with adults, adolescents who reported ruminating more also reported more symptoms of depression. They then looked for patterns in adolescents responses to questions about rumination, and found that there were two main types of rumination. The first, which they called "brooding" consisted primarily of thinking about negative feelings and events. The second, which they called "reflection" consisted of trying to understand the reasons behind a negative emotion. Several rumination items did not fit into either of these types, including items about isolating oneself and items about feeling tired or having trouble concentrating.

Burwell and Shirk then examined the connection between these 2 types of rumination, depression, and adolescents efforts to cope with their feelings. They found that high amounts of brooding were associated with depression, whereas reflection was not significantly related to depression. They also found that adolescents who reported more brooding became more depressed over time. Finally, they found that adolescents who reported a great deal of brooding tended to cope by disengaging and avoiding painful events. Adolescents who engaged in a great deal of reflection tended to cope by active problem solving and by positive thinking. Authors conclude that not all adolescent rumination is a cause for concern. Some self-focus leads to positive coping, while intense focus on negative emotions decreases coping and increases depression.

Burwell, R. A & Shirk, S. R. (2007). Subtypes of rumination in adolescence: Associations between brooding, reflection, depressive symptoms, and coping. *Journal of Clinical Child and Adolescent Psychology*, 36:1, 56-65.