"FLASHERS of BRILLIANCE"

An update on ADD/ADHD

Miriam Z. Weingast, Ph.D.

attes Weingast is a successful member of the Jewish community. He’s even achieved some degree of celebrity. An original producer and frequent guest host of the acclaimed WFMU radio program “JM in the AM,” he lives in Passaic with his wife and two children and is the principal of the Fair Lawn Jewish Center’s congregational school. Eight years ago, Weingast discovered that he had ADD, attention deficit disorder.

He gathered his first clues while listening to WFMU radio host Nachum Segal interview two ADD experts, psychiatrist Dr. Barry Holzer and social worker Ann Julian.

“I began to realize that I was hearing a description of myself,” Weingast said. “I realized then that some of the things I considered abnormal childhood experiences might fall under the category of ADD.”

Weingast says that ADD — or AD/HD, Attention Deficit Hyperactivity Disorder, as it is also commonly known — probably was behind much of his childhood behavior, which he describes as a series of ups and downs. But he learned how to deal with his quirks on his own.

“It manifests itself in such a way that you have to work with it and live with it,” he compensated. I came up with my own systems and ways of doing things.”
Dealing with ADD

The trouble with ADD is that it doesn’t travel alone.

Oppositional defiant disorder, which may include inattention, temper and overactivity, is found in nearly half of all children with ADD, according to Dr. Judith Gaeddel, director of the neuropsychology unit at Shriners Children’s Medical Center in Jacksonville and the hospital’s senior medical psychologist. In addition, ADD is often attached to learning disabilities, anxiety, depression, and, in some ADD children, Tourette’s syndrome.

A few decades ago, children who misbehaved in class or did not perform well academically were often singled out and subjected to embarrassing punishments such as being forced to stand in the corner of the classroom, being sent to the principal’s office, or being forced to write endless repetitions of sentences on the blackboard or for homework.

Now that ADD is better understood, parents and professionals are using more positive approaches to help affected children succeed in school and at home.

Most ADD children have been diagnosed with ADHD/ADD as children. While Tamar was diagnosed by a school psychologist and did not exhibit disruptive symptoms, Dahlak, she said, was hyperactive in class, but the two children have been able to deal with their disorders.

"Once teachers understood there was a medical issue, they became very understanding," Gold said. "No one was pushing medication.

Once they hit high school, behavioral issues were no longer a problem, but when Tamar entered her junior year, she was overwhelmed again.

"She came to me and said she thought she needed medication," recalled Gold. "She had trouble concentrating on her work. She felt it helped. It’s not like any teacher or doctor had a knee-jerk reaction to medicate her."

What is ADD?

According to the American Psychiatric Association, ADD, also commonly known as ADHD, attention deficit hyperactivity disorder, is comprised of two distinct conditions: inattention and/or hyperactivity/impulsivity. ADD is diagnosed with the combination of ADD if he or she exhibits six or more symptoms of inattention for at least six months, if that inattentiveness interferes with normal functioning, and if it is inappropriate to the age level. The behaviors are considered symptoms of ADD only if they are exhibited on a regular basis. For instance, if the child (ADD) fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities.

Other symptoms include difficulty paying attention to tasks, not listening when spoken to directly, not following through on instructions, failing to finish tasks, having difficulty organizing tasks, often losing things needed for activities or tasks, being easily distracted, and often being forgetful in daily activities.

The key to dealing with an ADD child, said Gold, is patience.

"For me, it’s a matter of being patient and not blaming them. If they need to be told something more than once, don’t do it in an angry voice. Get them back on track," she said. "You have to understand that the times she’s interrupting you, you ask her to do something and she doesn’t — it’s not her fault," Gold continued. "Don’t punish her. Don’t restrict her other activities, since she knows what she can handle. The psychologist’s advice on how to cope with it, how to look at it, was very helpful and sympathetic."

Elaine Keigher has a son, now in his 20s, who was diagnosed with ADD/ADHD as a child.

"He is exceptionally bright," she said, but "he found it hard to sit still for school, movies, shows. Keigher, who was an elementary school learning specialist for many years and is now the associate principal at the Ethical School in Paramus, said that her son had to learn how to work with ADHD and use it to reinforce his strengths.

"I made sure to pick a profession he could adapt to very well. He’s a musician — a percussionist and a trained lyric tenor who can sing anything from opera to Jewish music to pop and jazz," said Keigher.

He now works as a political consultant — a job that offers great flexibility and draws on his creative strength.

As the parent of an ADHD child, Keigher said that it is important to pay attention to how such children develop social skills. "They don’t always read social cues (and) they have to learn how to pick up on them," she said. "It’s important not to harm their self-esteem and not to generalize, because every child is different."

Dealing with students

Dr. Joel Lachman, who serves as head of the Special Education Department for the New York City Board of Education, is in charge of setting up some of the teacher training programs for Jewish schools in the New York area.

While many parents have their children tested for ADD on their own, he said, "there’s no central (Jewish) school system and there’s no requirement to have children evaluated."

Between 10 and 15 percent of all children in the general population have learning disabilities, he said, and five percent of the population has some form of ADHD. The Jewish community, he said, "has no reason to suspect that there’s any difference from the general population."

But, said Lachman, a former professor of special education at the College of Staten Island, there is no central repository of data on children in Jewish schools.

Keigher said that the general numbers are probably mirrored at Frisch, but she cautioned that ADHD can be misdiagnosed.

For example, children who have hearing problems or issues involving auditory processing may behave the same way as those with ADHD, she said, adding that girls are more likely to go undiagnosed for ADD "because they may be inattentive, but not be noticed in the classroom."

In addition to his own personal issues with ADD, Weingast has to deal with students with special needs at the Fair Lawn Jewish Center’s congregational school.

His after-school and Sunday programs for first- through seventh-graders provide Jewish studies classes and daycare for the children of working parents. He has the resources to test students on its own, but he may suggest that parents have their children tested if they exhibit symptoms.

It’s important that we know about the educational issues for each child," said Weingast.

Gayle Chacek, a social worker at Yavneh Academy in Paramus, works with early childhood through fifth-grade children.

"We treat all children as individuals," she said. "Children with ADD/ADHD need more activity. They need to go to the bathroom. If we can accommodate that, we’re doing them a great service rather than punishing them."

Chacek describes a program of unique activities Yavneh provides for children with special needs. In the "Lunch Bunch Group," children meet with her at lunchtime and "talk about different strategies we can use for everyday life activities, including academics."

It also involves children with ADHD by taking advantage of their particular talents. "I feel that’s very important to recognize each child’s individual needs and see how to work with their strengths. They are often more creative; they have a lot of energy and are willing to try things. We try to be positive. Their emotional intelligence is very important to us."

Chacek recruits some of the children to help out with projects such as the annual Newcomers’ Fair held for new children, staff, and teachers.

"Kids organize the entertainment, some play in the band — some are on the refreshment committee, decorations, or instantiated committees. Some interview newcomers and put together a booklet," she said. "The leaders of these activities are kids who in other situations may have difficulty staying on task."

Treating ADD

Mental health experts generally recommend three basic approaches to treating children with ADD. First, they may suggest classroom strategies such as putting a child into a smaller class, positioning the child’s desk next to that of the teacher, and carefully structuring classroom activities to help the child cope and improve academically.
Coping and succeeding

Over the past few decades, ADHD has gone from being termed "minimal brain dysfunction" at a 1978 conference chaired by Dr. Leopold Bellak, to being described by criteria that include "often creative, intuitive, highly intelligent" in Hallward and Rater's landmark 1994 book about ADD, "Driven to Distraction."

Recent studies have shown a biological basis for the disorder and have documented that it is genetically transmitted. Many children and adults with ADD who were stigmatized in the past have become aware of their unique strengths and have learned strategies to minimize disabling symptoms and capitalize on their abilities.

One novel approach for coping with the disorder involves using an ADD "coach," such as Keren Bellak Adams of Englewood. Adams, who is the daughter of the ADHD research pioneer Bellak, was diagnosed with the disorder when she was a child. She wants to help others with strategies she has found effective. The "coach approach" incorporates three steps, "encourage, strategize, track," or E.S.T.

How can I learn more?

The Board of Jewish Education of New York is sponsoring a half-day workshop, "Real Solutions for Real Students Using Cognitive Social Integration Therapy." Designed for educators and parents, it will address techniques useful for children with Asperger's syndrome, high-functioning autism, and ADD/ADHD. It is scheduled for Nov. 27, from 9 a.m. to 1 p.m. (admission, $50, or $35 for members of the Association of Jewish Special Educators.) Contact Phyllis Miller at (646) 472-5341.

The BJE is sponsoring a full-day workshop, "ADD, Anxiety, and Depression in Students." For elementary and high school teachers and guidance counselors, to be held Nov. 29 from 9 a.m. to 5 p.m. The free workshop will feature Dr. Steven Kurtz of the NYU Child Study Center. Contact Jenette Sassoon in the Department of Health Services at (646) 472-5336.

Both workshops will take place at the BJE headquarters, 520 8th Ave., 15th floor, New York, N.Y. For more information about these and other programs scheduled for 2006, visit www.bjeny.org.

For more information about ADD, visit the Web site of the advocacy group Children and Adults with ADD, www.chadd.org.

Information about Keren Adams' 'Coach Approach' can be found at www.MeetKerenandADD.com.

The National Sleep Foundation can be reached at 800-278-2500. The American Sleep Disorders Association can be reached at 507-287-6066.

In "Driven to Distraction," Hallowell and Ratey describe both negative and positive facets of ADHD. "In the midst of their disorganization and distractibility, they show flashes of brilliance," they wrote. Their recently published sequel, "Delivered from Distraction: Getting the Most Out of Life with Attention Deficit Disorder," projects even more hope that people with ADD can succeed.

"I tell parents of my clients that I have ADD. Many are relieved to discover that a person with ADD can accomplish anything," said Weisgatt. "I look at it as a positive thing. It's not something to be looked at as a disorder. It has to be worked with, identified, and put to good use. Many creative people have ADHD."