

ADHD news

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Challenging Disability Discrimination

By Lorraine Entecott

I am the mother of Grace, an 18 year old college student. Grace was not diagnosed with ADHD until she was 15 years of age.

Despite having school reports with reference to poor behaviour and severe attitude problems while in her lower years, Grace was perceived as an intelligent and able student. Her reputable secondary school was aware of her condition and I assumed, as a trusting mother, that they were confident and capable in dealing with Grace and the "problems" associated with her ADHD.

It appeared not.

In November 2010 Grace was in her second year of sixth form and was, once again, excluded. Up until this point I had supported the school's decisions around exclusion. This is an important sanction that they need to be able to apply. However, on this occasion Grace had been confronted by the Head of Sixth Form about her appearance, and was told to go home and change. Grace questioned this, as she was dressed no differently to other students. She was then excluded for a fixed period of 3 days for 'refusing to follow instructions and being rude and disrespectful towards staff.'

Grace, in common with many children or young people with ADHD, felt a deep sense of

discomfort and embarrassment at the teacher's unfairness – and voiced it. Girls with ADHD can be emotionally over-reactive and Grace was upset and angry. Injustice, as in this case, can lead to an escalation of anger.

The Head of Sixth Form did not take Grace's ADHD into account, and interpreted her questioning and distress as challenging his authority.

No child should experience this type of discrimination, especially from professionals whose role is to support behaviour modification and education.

Having supported the school in the past, this time we felt that excluding Grace was an over-reaction. I started by exploring the school's uniform policy, and also their behaviour and equal opportunities policies.

It was clear to me that the school had failed to act in line with some of the Government Guidance on Exclusions without good reason; had the school dealt with this 'incident' more appropriately, taking into account Grace's ADHD, this 'conflict' would not have led to her exclusion.



We knew that, as parents, we had the right to challenge the exclusion, and so we started searching the Internet for advice. ACE, The Advisory Centre for Education, was particularly helpful. They confirmed that the school had not taken account of Grace's disability, or made any reasonable adjustments to compensate for her condition. They sent their 'advice leaflets' and were readily available to speak on the phone.

The next step was to make representations to the Board of Governors with regard to the school's SEN policy, their lack of support and guidance, and the indifferent attitude of some of the teachers towards my daughter and her mental health disability.

Over 18 years as a parent to my daughter I have learnt a lot –

through personal experience, and also through extensive research. ADHD is a significant educational, social and emotional disability. ADHD is a hidden developmental disability. People with ADHD are considered as disabled under the Equality Act 2010. This means that they cannot be treated less favourably than someone else. This is disability discrimination.

It is against the law to discriminate against a disabled pupil by excluding her from school because of her disability. We strongly felt the exclusion was due to her behaviour, which is linked to her disability, therefore the Equality Act applied. Reasonable adjustments should have been

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made to take Grace's disability into account.

Following advice from ACE, I went through the three stages of appeal to the school's Governing Body to try to resolve the matter. But partly due to the dismissive attitude the Chair of the Governing Body took, we felt that we had to appeal to SENDIST (Special Educational Needs and Disability Tribunal). We also contacted The Department of Education to report the inadequate support of the Chair.

An able young girl who already had low self-esteem, and day-to-day difficulties living with ADHD, was punished by the way the school treated her. The school's discrimination was yet another blow.

I believe the school and the Chair of the Governing Body failed in their duties. They missed the point of their school policy and did not make reasonable adjustments in my daughter's case. Going to tribunal was intended to make all the teachers aware of ADHD and the effect it has on teenagers; also, to ensure that the Governing Body understands that the school is accountable for its actions. 1 in 20 children are affected by ADHD and other pupils should not experience what Grace did.

The forms for SENDIST were registered as: Less favourable

treatment (s13), Unfavourable treatment (s15), Discrimination arising from disability and failure to make reasonable adjustments (s21(2)) of the 2010 Equality Act. We went to tribunal in April 2011.

ADDISS supported us, and were able to confirm aspects of ADHD and its impact on a child to the panel of 3 judges. It was an emotional and daunting experience, but with a good outcome. In May, the Order was returned and the Claim was allowed.

This means that disability discrimination was found to have occurred.

The Order was that the school Governors were to arrange training, within the coming school year, for all staff in respect of the condition of ADHD and the variety of ways it may manifest itself, including atypical ADHD.

This whole experience left me angry, disappointed and let down. I accept that I am accountable for my daughter's behaviour – and so is the school accountable for its policies and staff.

I was one parent voicing my concerns and I wonder how many other parents face similar difficulties. I firmly believe that with a child's determination - and with a school's cooperation, positive reinforcement, praise,

understanding and compassion - they can and will achieve their true potential. If the school is unwilling or unable to become part of the solution then, regrettably, they become part of the problem.

Comment from ADDISS

I was delighted to be able to support Lorraine at tribunal and be part of the process that overturned Grace's unfair exclusion. The tribunal itself was daunting but very straightforward. The judges understood ADHD and were able to ask the family questions to clarify their answers. I gave evidence that supported Lorraine's case and outlined how I would have expected the school to act, given Grace's diagnosis. I was able to challenge the school's understanding of ADHD, and from an independent perspective show how they had not made reasonable adjustments to compensate for Grace's disability.

The case was hard work and I have no doubt that Lorraine spent many hours compiling the paperwork, but the process was straightforward and they won. Grace was able to continue her education and sit her A-levels.

If we can help represent anyone at tribunal to overturn unjust school exclusions please get in touch.

Holly Evans

The many faces of ADHD



In November 2011 ADDISS held a conference in London for parents and carers to explore the Many Faces of ADHD. This was a well attended conference and we were delighted that funding enabled us to reduce the fees.

Dr Paramala Santosh, from Great Ormond Street Hospital for Children, spoke to us of the very complex cases that he deals with in his clinics. These often feature ADHD alongside a number of other conditions. Very few clinics have expertise in co-morbidity and Dr Santosh's insights into effective treatment were heartening for all of us.

Professor Loretta Giorcelli shared her experiences of establishing specialist educational provision in Australia – with particular relevance to pupils with ADHD. One parent commented – “we could have had a whole day of Santosh or Loretta and it would have been worth it for that alone”.

We also welcomed Zara Harris, exploring issues around parenting teenagers with ADHD. “Fantastic – great facts and some really useful simple strategies” – said one parent. Dr Nikos Myttas ran a session exploring ADHD in girls and a second one to cover sleep problems. “Very interesting – common sense but very knowledgeable. Made me think out of the box” – commented one parent.

We plan to run more conferences and events for parents, so watch this space!

The Chain of Success: Awareness + Skills + Desire = Success

By Ari Tuckman, PsyD, MBA

The pursuit of success is like a chain - it's only as good as its weakest link. To be successful, all the links need to be strong enough, whereas failure requires only one link to be weak. So when you do fail at something, the trick is to figure out which of those links is responsible. This is especially important for folks with ADHD, since it may not initially be clear which links gave way. So let's identify the three links of success:

- **Awareness.** The first link is simply being aware of the desired task. Obviously, if you forget about a project, you can't work on it. Sometimes the problem is remembering something at the wrong moments. For example, it doesn't help much to remember while at work that you need to pay the bills at home. These timing issues are big ones for ADHD folks.

- **Skills.** If you remember a task at the right time and place, you then need to have the ability to do what is required. This is usually not the problem for ADHD folks, since they instead tend to run into trouble with not reliably doing what they know.

- **Desire.** No amount of awareness and skill is enough if you don't put forth the necessary effort. Other people often mistakenly assume that ADHD folks lack the desire to do the required tasks - that they are lazy or irresponsible, or have a bad attitude. This is especially true before they are diagnosed. Unfortunately, over time, the ADHD person can begin to believe this himself, making him even less likely to give something his best effort, which then becomes a self-fulfilling prophecy.

It's helpful to think about these

three links, since different strategies will be necessary depending on which link is breaking down. Strategies from one link probably won't help much in the others. So if something didn't work out, take a moment to figure out where things broke down. Depending on which link it is, you may want to try strategies along these lines:

- **Awareness.** If you're not remembering something at the right times or places, then set up something to remind yourself. For example, use a schedule book or calendar to keep track of commitments and deadlines. Use an alarm clock or smartphone to remind you that it's time to do something else. Send an email from home to your work address to remind you to do something there. The trick is to set things up when you are thinking about it so that you can remind yourself at the times that you may not be thinking about it. Medication can also help with this.

- **Skills.** If part of the breakdown or avoidance comes out of not knowing how to do something, then seek help in learning how to do it better or faster. It's almost always preferable to ask for help than to show by your failure that you can't do something.

More Attention, Less Deficit

Success Strategies for Adults with **ADHD**



Ari Tuckman, PsyD, MBA

- **Desire.** Your desire to do something is related to the first two links. We all tend to be more aware of those things that we want to do, but this may be even more true for ADHD folks. We also tend to prefer to do those things that we are good at. Sometimes, though, we need to do things that we don't really want to, or aren't good at. Try to remind yourself of the rewards for doing it, or the cost of not doing it. If you have ADHD, accept that it may take extra force of will to make yourself do these sorts of things. There are plenty of successful people with ADHD out there. But, whether someone has ADHD or not, one of the keys to success is good self-knowledge. The better you know yourself in terms of how you do

your best work, how you need to approach certain tasks, and how you can work around the hardest tasks, the more successful you will be.

This was excerpted from "More Attention, Less Deficit: Success Strategies for Adults with ADHD" by Ari Tuckman, PsyD, MBA. He is the author of two other books: "Understand Your Brain, Get More Done: The ADHD Executive Functions Workbook" and "Integrative Treatment for Adult ADHD: A Practical, Easy-to-Use Guide for Clinicians". You can find more information about Dr. Tuckman's books, podcast, and presentations at <http://adultADHDbook.com>.

What's New in ADHD research?

By Professor Chris Hollis Director, Centre for ADHD and Neurodevelopmental Disorders Across the Lifespan (CANDAL), University of Nottingham



In this edition of ADHD News, we look at some of the exciting new ADHD research being undertaken at the University of Nottingham's Centre for ADHD and Neurodevelopmental Disorders Across the Lifespan (CANDAL).

Medication or behavioural training for ADHD?

John Krystal, a professor at the Yale School of Medicine USA, likens the role of medication to heating a horseshoe before hammering it into shape. Like metal, the brain is "plastic" – it physically alters as it is trained and used. This means that if we can find ways of re-sculpting brain networks that are working inefficiently – using both training as "hammer" and medication as "heat" – better outcomes in mental disorders may be possible.

Researchers at the University of Nottingham's Centre for ADHD and Neurodevelopmental Disorders Across the Lifespan (CANDAL) have recently been awarded a grant from the Medical Research Council (MRC) to study the effect of cognitive training in the presence of a medication designed to boost long-range transmission within the brain circuits that are engaged and disengaged during attention-demanding tasks. The research team will use Nottingham's state-of-the-art brain imaging equipment to examine the combined effects of the medicine and the cognitive training on brain circuits. Volunteers will be tested for mild symptoms of ADHD as well as for "schizotypy" (experiences that are very mild versions of those of people with schizophrenia). Then, using a 7-Tesla Magnetic

Resonance scanner, the team will use Magnetic Resonance Spectroscopy (MRS) to measure the effects of medication or placebo on levels of long-range neurotransmitter molecules in key brain regions. In addition, they will also undergo magnetoencephalography (MEG), which will measure the tiny magnetic fields produced while they perform a training task. This task will require them to learn to respond to a visual signal as rapidly as possible, but to restrain themselves if there is a signal to "stop". Using new analysis techniques developed at the University of Nottingham, these measurements will allow researchers to observe how brain networks interact over time. The images are similar to those produced using functional Magnetic Resonance Imaging (fMRI), but whereas fMRI only takes images every two or three seconds, MEG allows us to track network activity from millisecond to millisecond.

This study will allow us to observe the effects of both training and medication on brain networks. Future research will apply the findings to patients with ADHD and schizophrenia, and focus on finding medication that best enhances the effects of training, and on training programmes that make best use of medication.

'Mind-wandering' in ADHD: the eyes have it!

Most of the time, we look at the thing we are paying attention to. When we cease to pay attention our "eyes wander". Tracking gaze is therefore a good way of understanding the attentional problems experienced by people with ADHD. Even more importantly, discovering how people learn to control their gaze direction may offer us important clues as to how we can train children with ADHD to

inhibit the kind of mind-wandering and fidgeting that is such a disabling part of the condition. Peter Collins, a PhD student at the University of Nottingham, will be working with Dr Elizabeth Liddle and Professor Georgina Jackson on a research program using a video eye tracker and EEG (electroencephalography), to find out more about how we exercise gaze control and the factors that contribute to acquiring better control over our visual attention.

Contact: Dr Elizabeth Liddle, Lecturer, CANDAL, University of Nottingham
<http://www.nottingham.ac.uk/chs/divisions/psychiatry/people/staff/elizabeth.liddle>

Self-Help Parenting book may help when used alongside medication to treat ADHD

Providing parents with behavioural strategies is an effective way of reducing difficult behaviours in children with Attention Deficit Hyperactivity Disorder (ADHD). However, parenting programmes are often therapist led and can be costly and impractical for parents. A self-help parenting book has been developed and initial results have shown it can reduce ADHD symptoms, but may not be sufficient to treat ADHD alone. This study aims to test

the effectiveness of the self-help book when used alongside other treatments. We will be recruiting children aged 6-10 years who have received a diagnosis of ADHD, and comparing families who have completed the self-help intervention, with families who have not. It is hoped that self-help will benefit families that receive it, and prove to be an effective and practical way of teaching parents behavioural strategies that can be used alongside other prescribed treatments.

Laver-Bradbury, C., Thompson, M., Weeks, A., Daley, D. & Sonuga-Barke, EJS. (2010). *Step by Step Help for Children with ADHD: A Self-help Manual for Parents*. London: Jessica Kingsley.

Contact: Professor David Daley, CANDAL, University of Nottingham, UK. E-Mail david.daley@nottingham.ac.uk

Equality Act 2010 -

What does it mean for ADHD?

By Holly Evans

The Equality Act 2010 is the UK law that bans unfair treatment and helps to achieve equal opportunities in the workplace, schools and in wider society. The act replaces previous anti-discrimination laws (e.g. Sex Discrimination Act 1975, Race Relations Act 1976 and the Disability Discrimination Act 1995) with a single act, making the law simpler. It makes the legislation easier for people to understand and to comply with. The act also strengthens protection in some situations, especially in disability discrimination.

The Equality Act covers nine protected characteristics, which cannot be used as a reason to treat people unfairly. Every person has one or more of the protected characteristics, so the act protects everyone against unfair treatment. The protected characteristics are:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

For the purpose of this article we are focusing on the ways that the act protects people with a disability, such as ADHD. The Equality Act sets out the different ways in which it is unlawful to treat someone, such as direct and indirect discrimination, harassment and failing to make a reasonable adjustment for a disabled person. The act prohibits unfair treatment in the workplace, when providing goods, facilities and services (e.g. shops, restaurants, doctor's surgeries), when exercising public functions (e.g. voting), in education and by associations (such as private golf clubs).

The majority of the Act came into

force in October 2010, but there are some parts affecting schools that, although outlined in the act, are not yet in force.

The Equality Act defines disability as "a physical or mental impairment that has a substantial and long term adverse effect on the person's ability to carry out day to day duties". Therefore, for the purpose of this act, people diagnosed with ADHD are considered to be disabled.

Special provisions for disability

The law on disability discrimination is different from the rest of the Act in a number of ways. In particular, it works in only one direction – that is to say, it protects disabled people but not people who are not disabled. This means that schools and workplaces are allowed to treat disabled pupils/employees more favourably than non-disabled pupils/employees, and in some cases are required to do so, by making reasonable adjustments to put them on a more level footing with others without disabilities.

The overriding principle of equality legislation is generally one of equal treatment - i.e. that you must treat a black person no less well than a white person, or a man as favourably as a woman. However, the provisions relating to disability discrimination are different in that you may, and often must, treat a disabled person more favourably than a person who is not disabled and may have to make changes to your practices to ensure, as far as is reasonably possible, that a disabled person can benefit from what you offer to the same extent that a person without that disability can.

In a school setting, the general principle is that you have to treat male and female, black and white, gay and straight pupils equally - but you may be required to treat disabled pupils differently so that

they have the same opportunities as others. This can also be called a positive action.

The duty to make reasonable adjustments applies only to disabled students. Reasonable adjustments are necessary when something a school does places a disabled pupil at a disadvantage compared to other pupils. The school must take steps to try to avoid that disadvantage by making reasonable adjustments. The Act does not set out what a reasonable adjustment is, as it expects them to be made on a case-by-case basis. Failure to make a reasonable adjustment cannot be justified. Schools must act to try to ensure that disabled students are not at a disadvantage compared to non-disabled students.

However, when deciding if an adjustment is reasonable, a school will consider financial implications and the effectiveness of the adjustment in addressing the disadvantage.

Discrimination is a bit more complicated. The act outlines three types of "unlawful behaviour".

- Direct discrimination occurs when one person treats another less favourably, because of a protected characteristic, than they treat – or would treat – other people. This describes the most clear-cut and obvious examples of discrimination – for example, if a school were to punish a student with ADHD for fidgeting or calling out in class.

- Indirect discrimination occurs when a "practice" is applied generally across a group, e.g. a school, but has the effect of putting people with a particular characteristic at a disadvantage. For example, if a school implemented a detention policy for students forgetting their equipment or diary and used this policy, without making any adjustments, for a student with ADHD. One defence against a claim of indirect discrimination is if it can be shown to be "a proportionate means of achieving a legitimate aim". This means that both the reason for the rule or practice is legitimate, and that it could not reasonably be achieved in a different way that does not discriminate. This would apply to blanket policies about bringing weapons into school etc.

- Harassment has a specific legal definition in the Act - it is "unwanted conduct, related to a relevant protected characteristic, which has the purpose or effect of

violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person". This covers unpleasant and bullying behaviour, but potentially extends also to actions that, whether intentionally or unintentionally, cause offence to a person because of a protected characteristic. Thus, if a teacher belittles a pupil and holds them up to ridicule in class because of their disability, this could lead to a court case alleging unlawful harassment.

The Equalities Act 2010 does not really offer any more protection for those with ADHD, but does set out a bit more clearly the responsibility of schools and workplaces in ensuring that those with ADHD have the same opportunities as their non-disabled peers.

References

Department of Education
Equality Act
<http://www.education.gov.uk/aboutdfe/policiesandprocedures/equalityanddiversity/a0064570/the-equality-act-2010>

Home office Equality Act guidance
<http://www.homeoffice.gov.uk/publications/equalities/equality-act-publications/equality-act-guidance/>

Legislation.gov.uk
<http://www.legislation.gov.uk/ukpga/2010/15/schedule/27>

Holly led a workshop on the Equality Act at ADDISS' Many Faces of ADHD Conference in November 2011. Here are a few comments from parents who attended:

"Very empowering – down to earth and great for parents."

"Gave us the nub of the necessary information and addressed individual concerns well – also very encouraging."

"Excellent, practical advice."

"Very knowledgeable and helpful."

"Delivered with enthusiasm – liked her upbeat attitude."

"Learned something I didn't know!"

ADHD and the need for adequate guardians By Phil Anderton PhD

My work with Steve Brown on ADHD and its heightened risks for criminal behaviour has recently examined the need for structure and help to get more successful results for people with ADHD. Our overriding impression is that effective guardianship is one key to success.

A dictionary definition of 'guardian' describes 'someone who watches over or protects'. And that is what we have set out to do, to assist you to watch over and protect your children. This article introduces you to some of the common guardianship requirements and points you towards simple but effective solutions that can help you.

The hereditary nature of ADHD inevitably means that some parents have ADHD, whether diagnosed or not. You guys often talk to us about the way your child's diagnosis has helped you understand yourself. I find it interesting that people I meet who do know their diagnosis are generally much more self-aware than the rest of our society. Having ADHD and caring for someone with ADHD is a double whammy, and I am in little doubt that this can and always will cause difficulties around the home and daily life. It's tough, but there are things we can do to reduce that impact.

ADHD is complex and hidden. It's a real stretch for many clinicians to truly understand the workings of the brain that cause behavioural difficulties. So why would we expect a non-medical mum or dad, grandparent or foster parent to understand this? Explaining it is tough. Even tougher if you have ADHD yourself - you may be impulsive and say the wrong thing, you may not manage frustrations too well and be angry when called upon to explain your child's actions.

Imagine the very common scenario where your child has apparently misbehaved in class - and you meet the teacher for the first time. What if your Guardian Angel provided you with a pre-formatted letter to send to the

teacher, outlining your child's strengths and deficits and pointing out what they could do to minimise conflict in the classroom? What if your Guardian Angel encouraged you to meet the teacher before any conflict arose? What about the clinic visits - how tough are they? What if our Guardian Angel could automatically send the clinic some information on your child's behaviour or mood before the appointment? That would really help to manage an effective flow of information in a constrained time frame.

How about a situation where your child is taken to the police station? My experience suggests that parents struggle to convince the police that their child has special needs. Your Guardian Angel could help you to explain the issues around the taking of meds, scheduling interviews around meds and the need for someone appropriate to look after them. A robust, objective and informed conversation is needed, to influence the police and focus on the needs of the child. But can you the parent, stressed and often worried, best provide that input?

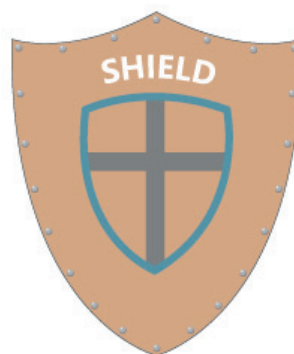
This is how Steve and I found ourselves developing the Guardian Angel toolkit. It started as a website publicising our work with ADHD and criminal behaviour, and it has grown into a package of solutions to help you to care, and provide Guardian Angel oversight. BADGE, SHIELD and ADHD Angel are the three component parts of our Guardianship package.



BADGE

There is room in the ADHD world for resources that are beyond medication. BADGE is aimed at providing some of those resources. It currently targets police and criminal justice agencies and provides guidance on safe custody, road safety and the links between ADHD and unlawful (and dangerous) drug use. BADGE stands for 'Behaviour And Development, Getting Effective'. Parents and carers can share this, and also use it themselves. For example - making it safer for your child to drive a car for the first time? Consider the following (there's more on the website):

- Curfew times for weekdays and weekends in line with medication
- Discuss what times of day they can drive
- Discuss the consequences of an accident
- Restrict passengers totally if possible



SHIELD

Imagine you are in a lift and someone important to you asks - what's ADHD then? Can you answer in a succinct manner in the time you have got to travel from the ground floor to the eighth? Why not have your Guardian Angel provide your elevator pitch for you. Here's what we have written: "ADHD is a disorder of the brain. It is as simple as it is complex to explain. Due to chemical imbalances in the brain nerve pathways people with ADHD struggle with many aspects of life that "normal" people take for granted. This can range from

paying attention to what is being discussed, through to sitting still and behaving impulsively. ADHD is a real problem..." Other guardianship tools provided relate to starting a support group, letters to teachers and engaging with college.



ADHD Angel

And finally, Steve and I thought about ways that a Guardian could take up the 'app' challenge. The result, an iPhone app with android to follow - ADHD Angel. ADHD Angel prompts the phone user to take their meds, and records that they have. The app asks about your mood at random times and uses a recognised rating scale to assess behaviour. Crucially, the app can email all of these results to the clinic ahead of your visit, in a simple set of button presses all promoted by the app.

The information section of the app explains ADHD, and you can hand your iPhone to teachers and others to read. It explains the effects of ADHD on the individual's behaviour and also links to BADGE and SHIELD through the website www.adhdandjustice.co.uk. So there you are, BADGE, SHIELD and ADHD Angel together make up your Guardian Angel. We want you to use these resources and tell us what else we can provide. All this and more is available at our website www.adhdandjustice.co.uk and everything is free! After all, to be an effective guardian you need the knowledge to provide the best support and advice.

Support in Harrow for ADHD & Autism

By Therese Glynn

Thinking of setting up a support group?

ADHD & Autism Support Harrow is based in North West London, and is a local registered charity offering a range of services for anyone affected by these two conditions.

We started out in the autumn of 1996, at the suggestion of the local Schools Nurse and the Head of CAMHS (Child and Adolescent Mental Health Service). A small group of proactive parents were provided with a room to meet up and share experiences of living with ADHD.

Sixteen years later, and with several of those original parents still involved, including our chairperson, the group has flourished and grown to provide a range of services and support to those with the condition, and for people in a caring role.

What helped this small group to develop and grow was the personal journey so many of us shared. We could see the lack of provision out there as children grew to become teenagers, and then into adulthood. Many of us personally experienced the poor understanding of the condition and lack of help for children as they reached different stages of development. We knew this needed to change.

In 2002 our charity was offered a building in Pinner, which proved too big for us to take on. Our chairperson Julie Browne had a vision to provide a centre for children with special needs to access if excluded from school, or

unable to manage a full school day. The charity "Kids Can Achieve" evolved and we continue to work alongside them, providing full family support.

We started by offering a drop-in coffee morning once a week, which quickly became two mornings as demand increased. These groups have become a feature of the work we do and are well known within the community, encouraging new parents to attend and meet others while exploring services to support them.

A key focus is to educate everyone. Not just the parents, but to welcome extended family as well as professionals, including those in education. For me, it meant learning fast on my feet. As demand grew, it was evident that there was a serious lack of services to help families living with ADHD. I soon learnt to network in the community, write funding bids and learn new skills so that we could provide more services.

Our work with CAMHS is still central to what we do – particularly, providing support to parents during diagnosis, and in the early weeks afterwards. Parents often struggle at this stage, and value support around the decisions that need to be made.

We have developed a parenting course called "Living with ADHD/ASD" to help parents gain a full understanding of the conditions, and to develop the skills needed to support their child. The course aims to empower parents to let go of the blame and guilt. We



particularly concentrate on the things that parents are doing well, and offer a toolbox of skills and practical strategies for daily life. In our experience, evidence based parenting programmes that many of us have been trained in were not effective enough for parents to deal with many challenging behaviours that our children present with. The Living with ADHD/ASD course addresses these needs.

Our work does not end there. Parents can access the "123 Magic Course", one-to-one support sessions, specialist ADHD/ASD Coaching and Adult ADHD groups. Children and teens are offered drama therapy, the "WhyTry" programme, anger management support and social events. Our young adults even have a film group that meets monthly.

We have never worked in isolation, and enjoyed our partnership with the National Autistic Society in Harrow (NASH) as many of our service users have a dual diagnosis. Sadly, NASH closed in 2010 and so the decision was made to include autism in the work we do. This widened our objectives and, with the help of an Autism Manager, we continue the great work that NASH started.

And what's next...

In January of 2012 we moved into our new premises, together with Kids can Achieve. The rebuild has meant a lot of blood, sweat and tears, but enables us to offer more help for our young people and adults. We hope that we will continue to provide something for everyone.

We will soon be launching a new project to equip people with ADHD and Autism to deliver training to the community. The training will explore what it's like living with these conditions and highlight the things that would help them.

All of us involved in our charity have learnt through personal experience, and while on the job. It took just a bit of courage and a helping hand from ADDISS, who provided us with training and development and are always around to offer help and advice.

All too often we receive calls from families around the UK who are looking to access support groups like ours. If there is nothing in your area then be brave and go for it – you could end up doing something so worthwhile.

For more information contact

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Important Dates for your diary

The ADDISS 10th international conference – 18th to 20th October 2012, in London. This conference will cover topics around current research as well as lots of practical presentations to help both parents and professionals. We can confirm that Professor Loretta Giorcelli will be here from Australia and is our first confirmed guest presenter.

Practical Responses to Adult ADHD – Saturday 24th October 2012, in Leicester. Following on from the very successful event in October 2011, this is a day just for adults with ADHD, their parents/carers, their clinicians and anyone else involved in their care and treatment. With guest presenter Gina Pera, author of "Is is you me or adult ADHD - Stopping the rollercoaster when someone you love has Attention Deficit Disorder"

123 Magic Workshops for Parents – 20th March and 7th June 2012, in Central London. These one day workshops are a response to requests from parents who have been unable to access this programme locally.

Everything you need to know about ADHD – 27th March and 9th May 2012, in Central London.

These are half day workshops for those who are new to ADHD, or need to refresh their knowledge. They are designed to empower parents and give them the confidence to advocate for their child at home and at school.

For more information, and to book your place, check the ADDISS website www.addiss.co.uk or ring us at the ADDISS office 020 8952 1515

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