

Adult ADHD Treatment Group

Santa Clara Department of Adult Psychiatry

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This group is scheduled to meet every **Monday 5:30pm-7pm**

Program Overview:

Attendance:

All referred members are welcome to attend this 8 class series for education, skills training, and peer support for adult ADHD symptoms. The 8 topics are rotated through approximately every two months. There is open enrollment; therefore members can start the group on any Monday of the month and are welcome to return on an as needed basis for ongoing support in successful application of the skills, goal setting, accountability and material review.

Cancellations:

On rare occasions, the class may be cancelled due to clinic closure or dates in which the group facilitator is absent from the clinic. If you are pre-registered for the group on a date which group has been cancelled, the clinic will attempt to contact you to inform you of the cancellation. Given the drop-in nature of the class, it will be difficult to notify all potential members if the group is cancelled; as a result, if you have not been in attendance recently, we encourage you to call the clinic ahead of time at 408-366-4400 to ensure the class is being held that evening.

Group Expectations:

- Please do your best to come on time.
- Maintain confidentiality of other group members.
- Be supportive and respectful of each other.
- Take a break if you need one. Exit through the reception area for restrooms.
- Bring your folder to each class.
- Each time you check-in for the group you will be given a brief assessment (AOQ) to complete by the front desk staff. Please submit these to group leader by the end of each group.


GROUP STRUCTURE

Research outcomes suggest that routines and external structure are helpful to those with ADHD, therefore, we will follow a similar format each group session.

Check-in: This is your opportunity to briefly get to know group members; and, for returning members, an opportunity to discuss progress or barriers in application of the skills.

Core Concepts: Although we introduce a new topic each group, we will consistently include the following core concepts so that everyone has a foundational understanding of the ADHD brain and how these skills can help.

- **Cognitive-Behavioral Therapy Model:** The CBT model (Page 4) is a visual reminder of how each session targets an important aspect of ADHD treatment.

This helps answer the question:  *“Why is this important for me to know?”**

- **Brain-based Differences:** We will also highlight a particular aspect of neuro-cognitive functioning that is impacted by ADHD to provide a rationale for why the ADHD brain performs differently, and where additional support is needed in skills training.

This helps answer the question:  *“Why is this so hard for me to do?”*

- **Skills Training:** Although understanding your brain and behavior is important, chances are you sought out treatment in order to make some changes. At this time, we discuss specific, evidence based strategies related to the session topic (1-8).

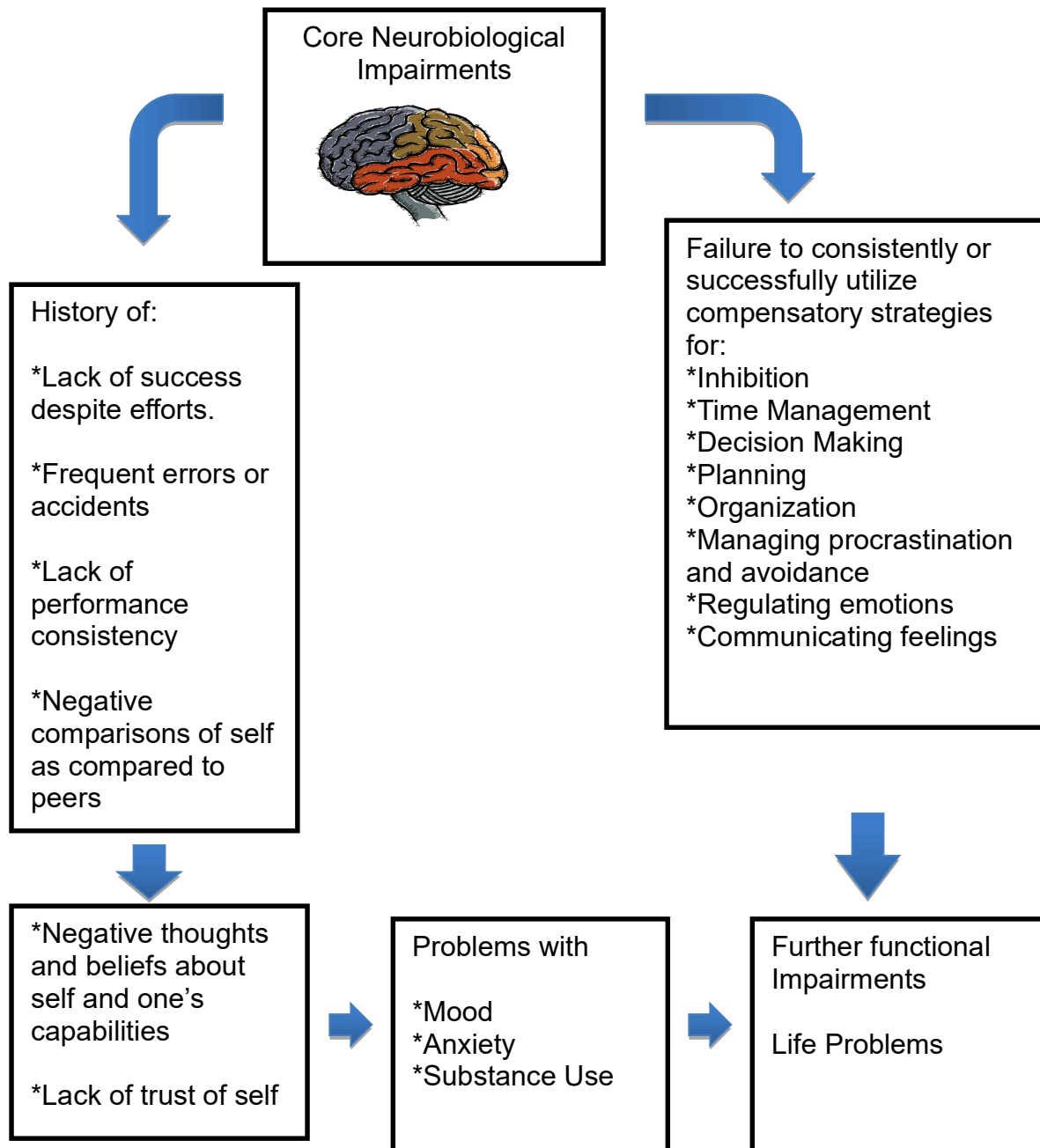
This helps answer the question:  *“What strategies can I use?”*

- **Goal Setting:** Positive changes will not occur unless you take an active role in your treatment. This doesn't mean just showing up to group every week. Little will change unless you repeatedly follow through with application of these skills in your day to day life. This requires some commitment and planning. There is also a take home activity at the end of each session.

This helps answer the question:  *“What am I willing to do?”*

*Look for these symbols and questions as a guidepost in each session.

Cognitive Behavioral Therapy Model of ADHD



Although there is no “cure” for ADHD, many adults notice significant improvements in the quality of life through treatment. The most effective treatment of ADHD includes a combination of Cognitive Behavioral Psychotherapy & medication management of symptoms (as appropriate).

ADHD Basics: What is Attention Deficit Hyperactivity Disorder (ADHD)?

ADHD is a neurobiological disorder which begins in childhood and often continues into adulthood. ADHD consists of a persistent problem with inattention and/or hyperactivity and impulsivity that interferes with functioning or development.

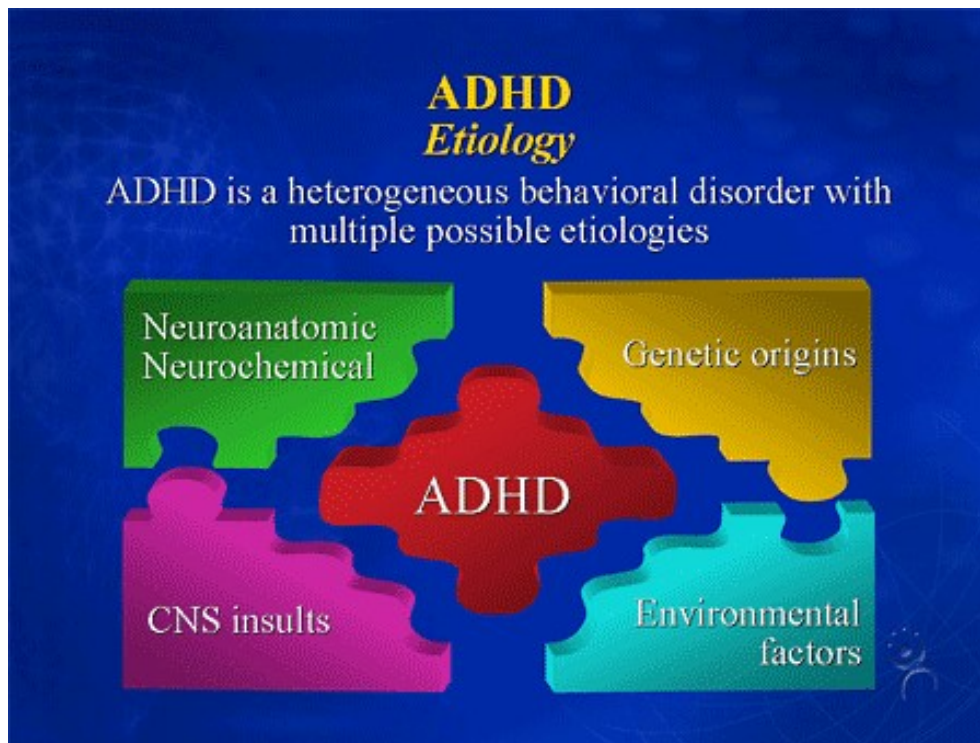
Individuals with ADHD have some combination of the following symptoms:

Inattention:

- Difficulty Sustaining Attention,
- Easily Distracted
- Failure to give close attention to details
- Chronic Procrastination
- Difficulty following through on instructions
- Difficulty organizing tasks and activities
- Poor Time Management
- Frequently misplaces items
- Forgetfulness

Hyperactivity and Impulsivity:

- Often fidgety
- Difficulty sitting still
- Restlessness
- Difficulty engaging in leisure activities quietly
- Often "on the go" or acts as if "driven by a motor"
- Has difficulty waiting his/her turn
- Interrupts or intrudes on others
- Impulsive: Acts before thinking and often does things one later regrets.
- Emotional Regulation Difficulties (this is not included in the current diagnostic criteria, but is widely supported in research regarding ADHD symptoms)



Brain-based Differences:

What cognitive differences are responsible for these symptoms?

Executive Functioning Deficits: ADHD can be described as a disorder of Executive Functioning (EF). Executive Functioning is an umbrella term used to describe the brain's ability to self-manage or self-regulate (also known as cognitive control or supervisory attentional system).

We can think of EF as like the "Executive or CEO of our brain." It is responsible for the following:

- Attention
- Inhibition/Impulse Control
- Activation and Motivation
- Judgment and Decision Making
- Organization and Project Planning
- Regulation of Emotions

Let's suppose that the CEO in charge of the ADHD brain could use some additional support and training in these areas.



Session 3: Time Management

How to prioritize, schedule, and execute tasks



Why is this important for me to know?

Oftentimes, problematic behaviors symptomatic of ADHD can be traced back to difficulties with time perception and time management. For example:

- Chronic Procrastination
- Missing Deadlines
- “Hyperfocusing” on tasks for hours at the expense of other tasks
- Underestimating the time needed for tasks or trips
- Executing steps in an ineffective or inefficient order

Can you add to this list any ways in which time management presents as a problem for you?



Why is this so hard for me to do?

Individuals with ADHD have a fundamentally different sense of and approach to time than most other people. More specifically, a growing body of research suggests that people with ADHD have difficulty with time perception and reaction time.

Non- ADHD individuals see events in a more linear format which, when visualized can be depicted in neat lines and grids that connect events in an organized manner.

ADHD individuals organize experiences into “clusters” out of time and order resulting in them being less like a “sequence of events” and more like a diffuse collection of events which are viscerally connected to the people, activities and emotions that fill them. The ADHD person then focuses intensely on all of the related details, experiencing these events with all of their interconnectedness. Slotting events into their proper place in time is then a challenge. Retrieval of information pertaining to a specific space in time can also be more difficult.

In the ADHD individual, ones sense of “proportionality” is often skewed- a week from now and a month from now may seem further apart, or closer together than for someone with a more linear time scheme. This may also be quite inconsistent as a perception from moment to moment.



What strategies can I use?

STRATEGIES for better time management:



- **Externalize time cues!** Wear a watch, have clocks clearly visible at all times.
- **Strengthen time awareness.** (Use activity sheets provided to track and gather data about your current relationship to time)
- **Schedule tasks that repeat** for the same time each day: structure works best! If you are resistant to the idea of structure, schedule in unstructured time too.
- **Shift to-do items into less rushed times** for example, fill your gas tank up in the evening when you don't have any immediate time demands instead of the morning. Pack your lunch the night before.
- **Schedule** appointments to work on things that are important to you, and honor them as much as you would an appointment with someone else, like a doctor's visit.
- **Plan** to do the more difficult things when you will be the most motivated. Relatedly, If you find you have a lot of energy now, do the most difficult thing first.
- **Don't wait** for a good time to present itself. There will always be something else to do, some new distraction that seems more appealing. Decide ahead of time when the best time will be and then keep the commitment to yourself.
- **Plan to arrive early.** Give yourself a time buffer of at least 10-15 min. If it horrifies you to arrive early because of fears of boredom or "wasted time" identify an alternative activity you can fit into that wait period (review to-do list, reschedule incomplete items)
- **Don't say YES out of habit or guilt.** Do you have a tendency to over-commit? Respond with "I'd like to but let me check my schedule" to give you time to complete a realistic assessment of your capacity to follow through.
- **Eliminate unnecessary stressors.** Delegate or delete that which is not necessary.

- **Watch out for “One-more-thing-itis”** A product of distractibility. Plan and think through the steps you will take to get out of the home/office, say aloud your intended goal at the time “I’m heading to the car now, I’m headed to the car now.”
- **Use a timer! Set more than one alert/alarm.** Use the first as a cue to get moving. Race against the clock as a game to add stimulation.
- **“Gamify things”** The more you can make a task stimulating, novel, or playful, the better.
- **Use a planner** and follow the 4 Commandments of Planner Use
- **Prioritize your To-Do list** using a system/structure that works for you

Mary Solanto's 4 Commandments of Planner Use:

1). *Thou may have only one planner and one planner only.* You must choose one planner; commit to it and stick with it.

2). *Thou must carry thy planner with thee at all times.* The planner must be portable and you must have it with you at all times to check appointment times, enter items to do and so on.

3). *Thou shalt enter every appointment and task into thy planner.* This makes the commitment to completing the appointment or task.

Mantra: “If it's not in the planner, it doesn't exist!”

4). *Thou shalt consult thy planner every morning, every midday and every night!* In other words, you may not start your day without a plan. What is in the planner will not have an impact on your life unless you consult it regularly. Set a cue for yourself to remember to check your planner at various times throughout the day. For example, when eating breakfast in the morning, during lunch break and when setting an alarm clock at night. At least once a day update the planner and reschedule the incomplete items.

Examples of Prioritization Systems:

Importance/Urgency Grid

	URGENT	NON URGENT
IMPORTANT	I. Important and Urgent	II. Important but not urgent
NOT IMPORTANT	III. Not important but urgent	IV. Not important and not urgent

(From Stephen Covey's (1989) book, *The Seven Habits of Highly Effective People*)

Levels:

- I.** These have highest priority- These can't be put off and are of great importance.
Your child is sick and you have to come home from work. You have to prepare a work report for the boss that has a firm deadline.
- II.** These are items that are ongoing- important to our personal goals or nurturing our relationships, relate to long term career success, personal well-being and development. Unfortunately because the lack of urgency these often get neglected or pushed aside by daily demands of quadrants I and III. *Regular exercise, creative hobbies, connect w/partner, play w/kids etc.*
- III.** Without conscious effort not to do so, people with ADHD could easily spend the majority of the day on these items. They are most salient and catch your attention- *phone calls, interruptions, emails etc. This could result in a system of putting out fires.*
- IV.** Lowest priority. These might be time-wasters at the office, things at home that would be "nice to do some day" These are often pleasant or appealing activities which could result in neglect of more important ones. *Redecorate the bedroom, re-organize a storage space.*

A-B-C Task List

(from Mastering Your Adult ADHD: Treatments That Work Series (2005) Safren, Sprich, Perlman & Otto)

There is more than one strategy that you can choose from to help with prioritizing tasks. The most important factor is that you select one that works for YOU! An alternative to the IV level rating system is a more simplified version, the A-B-C task list whereby you categorize tasks into one of three levels using letters.

A – Most urgent tasks. These are of the highest importance.

B- Less urgent and important than A tasks, however, also important or tied to a deadline.

C- Non-priority tasks. Tasks that you would like to get to but that can wait.

The general rule is you complete all A tasks prior to B tasks, all B tasks prior to tackling C tasks etc. Items can move from one category to the next as time passes. A system like this could also be implemented using a color-coding system. Again, choose a system that is easy to remember and works for you.

Activity Sheet 1: Time Tracking:

How long do tasks actually take? Used to strengthen my time awareness

	Estimated time to Complete	Start	Finish	Actual Time Elapsed
Shower				
Eat Breakfast				
Pack lunch				
Dress				
Organize things to leave				
Commute to work				
Settle into work- check voicemails, email, log-in				
Commute home				
Unload dishwasher				
Prepare Dinner				
Eat dinner				
Do dishes				
Exercise				
Watch TV				
Laundry				
Bedtime routine				

Activity Sheet 2: Time Log

Where does my time go?? Used to identify time “wasters.”

6:00-6:30	
6:30-7:00	
7:00-7:30	
7:30-8:00	
8:00-8:30	
8:30-9:00	
9:00-9:30	
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9:00-9:30	
9:30-10:00	
10:00-10:30	
10:30-11:00	
11:00-11:30	
11:30-12:00	



What am I willing to do?

Chances are you've already tried something similar to, or some combination of the abovementioned strategies in the past with only temporary or limited success. Remember that this is not a reason to throw the idea out completely. Sometimes a few adaptations in the system or application of the skill can make a big difference in the success of the strategy.

Think back to the last time you attempted the strategy, was it that the tactic itself was not of value, or was it that you didn't consistently apply it therefore the benefits of it were not sustained? What worked? What didn't? Use your past trials as learning experiences and make a new commitment to try some of these strategies, better informed of why some things work better than others.

ADHD TREATMENT GROUP

Session 3 Take-Home Exercise

Strengthen Your Time Awareness

The goal of this take-home assignment is to implement some of the behavioral skills that we discussed in today's session. In review of today's material, we discussed strategies that have been found effective for ADHD adults because of what we know about difficulties with **Time Management**.

Time-Management involves:

- Increasing one's awareness of the passage of time.
- Identifying the productivity "highs" and "lows" in your day.
- Identify and minimize your "time wasters."
- Keep a planner/calendar and follow the 4 Commandments of Planning.
- Prioritizing tasks using your system of choice.
- Eliminating unnecessary tasks.

Make a commitment. Choose one of the following to try for homework:

_____ I will re-commit to using a planner and entering in all items to-do.

_____ I will use the "Time Tracking" activity sheet at least one day to learn about my sense of time, and where I mis-judge how long activities take.

_____ I will use the "Time Log" activity sheet to learn where I spend the majority of my time and identify one "time waster" I'd like to contain or eliminate.

_____ I will....