

Using Narrative practice with children labeled Attention Deficit Disorder (ADD)

By Stephen Wallace

Introduction:

Although I know each person's journey is different, my relationship with Attention-Deficit Hyperactivity Disorder (ADHD) is like travelling in a car at 100kms an hour without a seatbelt, brakes or a steering wheel. How does one manage all these feelings, thoughts and experiences without the benefit of an internal control to organise them, observe and understand them. This analogy often helps others gain some sense of the everyday confusion faced by many people diagnosed as ADD or ADHD.

I grew up with the label of being ADHD and lived with constant criticism, failures, confusion, isolation, depression, early academic underachievement, awareness of poor social skills and, most of all, poor self esteem. I spent many hours considering what was positive about me in the face of all this negativity. I recall one reflection where I decided to jot down all the positive things I had done from helping a teacher with her bag to standing up to a friend's bully. The frightening thing was for every positive thing I seemed to write two negatives countering these. I didn't finish the list. (Lost focus!).

Last year, while studying psychology, my journey of self discovery so to speak, I had to choose one of many therapeutic approaches, which I would then have to apply in an organisation where I would work for a period of time. I read and re-read the models and, in the final chapter, hidden away in three pages of post-modern approaches, I came across the quote: "The person is not the problem, the problem is the problem." I connected with this immediately. I had waited fourteen years, since being diagnosed at age 11 to hear that maybe, just maybe, I could look at ADHD on my terms and not in the terms it dictated. It was my "Aha!" moment and the beginning of my journey into the narrative.

The idea that the therapist adopts a de-centred, not knowing stance and that I am the expert of my own life, competent to change my own problematic life story, by telling my own narrative without interruption, judgement or blame, without a hidden agenda or

formula, allowing me the freedom to express myself in which or whatever way I choose, filled me with possibilities. We, ADDers may not be methodical. Only with extreme effort is our thinking logical but the advantage of this is the creativity and imaginative connections we make between ideas and thoughts. This seemed consistent with Narrative Therapy's approach - new, creative, imaginative outcomes. It freed me to realise that I am an ADDer – a contributor – someone who has the potential to bring something unique to each situation. What a shift in perspective to see myself as having something rich and meaningful to ADD rather than having a DEFICIT.

Of crucial importance is the ability for the ADDer to understand and interact successfully with others. In developing this understanding it is important to develop a language that verbalises the experiences of being ADHD. This requires vocabulary and meaning. ADDers are very expressive in their behaviour but tend to have difficulty translating their experiences into language. Narrative therapy helps language experience through analogies and metaphors, creating an opportunity to find common ground.

In this paper I have use male gender terminology because I work mainly with boys. This is not to ignore that many girls also grapple with their relationship with ADD but my sense is their journey is somewhat different to that of boys.

The Hunter/ Farmer Model

Although we want to avoid the label of “being” ADD or ADHD, the fact of the matter is that it is far more detrimental to go through life without something to attribute to the way we think or behave. A life of not knowing “Why?” has serious implications. Many ADDers are “why people”, constantly asking questions of themselves and, in the process, being their own worst critics.

To help explain ADHD to children I have adopted the Hunter/ Farmer Model proposed by Hartmann. When I was told I had ADD it labelled me as “different” and emphasized a

distinction I had been subliminally aware of between “me/us” and “them”; between the “normal” and “not normal”. The value of the Hunter/ Farmer model for young children is that it describes ADD in value neutral terms, encouraging the strengths and not the weaknesses associated with the ADHD label. No person wants to think or believe he/she has a “deficit” or is “hyperactive” or has a “disorder”.

The Hunter/Farmer Model describes ADD in a way that is easy to understand as well as easily adaptable to any age. The importance of describing ADD in terms that a child can understand is crucial, as it enables the child to explain what AD/HD is to friends and teachers and other family members. This protects the child from experiencing unnecessary ridicule, especially from peers, in situations when he cannot explain what he has to deal with daily. In many cases the explanation ends up sounding like an excuse for his unacceptable behaviours or recent failures. As the pressure mounts, the ability to articulate a clear explanation is lost and instead one comes up with whatever comes to mind. Invariably these ad hoc explanations can readily be deconstructed and torn apart.

It is easy for a child to understand that hunters relied on their ability to be aware of their surroundings and reactions to stimuli in order to feed their group and stay alive. Farmers came later and were less reactive to a wide range of stimuli. They planted crops in organised rows, and did not mind the methodical repetitiveness that farming required: tilling, planting, and harvesting. The reliability and higher yields of farming allowed for greater reproduction and soon the farmers outnumbered the hunters.

The hunter brain is highly capable of doing what it is designed for: scanning, moving, and reacting, but it is at odds with much of what the farmer society expects. In a classroom, learners are expected to sit still in rows and perform repetitive tasks in order to learn. In this context farmer’s brains have an easier time than the hunter’s brains.

The benefits of this explanation are its focus on the strengths and weaknesses of both the hunter’s and farmer’s brain, and the understanding that people’s brains work differently

but still efficiently though in another way. Although still distinguishing one group from another, it provides a less negative separation.

ADDers' problem saturated stories

ADDers live their lives in problematic stories filled with unsuccessful attempts to make friends and fit in. This leads ADDers to tell stories that mask or exaggerate their difficulties. They often use humour turned against themselves. These exaggerations are usually an attempt to mask inadequacies and to make ADDers feel better or more normal about themselves and gain much needed recognition and acceptance from peers and family. The problem with these exaggerated portrayals is that, through repetition, they become an ingrained part of a person's belief system, that even in the face of information to contrary, is accepted and subsequently acted out.

I like to think that some of these stories are exaggerated not because they are for benefit, but because of the intensity with which many ADDer experience everyday occurrences. This intensity comes out in their stories as a way of reflecting the intensity with which they experience event and attribute meaning to them. The downside is that most people view this as lying or acting out. My frustration with being labelled a "liar" was often the match that lit the fuse to my extreme aggression. This could be over an insignificant story that did not warrant such an intense reaction. These aggressive outbursts were associated with ineffective social skills and were often accompanied by a strong sense of guilt that only added to the confusion of being an ADDer. "Why do I do this? I never meant it. I was only trying to be funny. They don't get me. I wish I would stop trying".

These are just a couple of examples of the problem saturated stories associated with ADHD. With such constant negative views of themselves, ADDers provide a myriad of entries for externalising conversations.

Labelling and Externalising conversations

“.. we are interested in exploring the intentions, hopes, values and commitments that shape people’s actions rather than any internal deficits or deficiencies, or for that matter any internal resources, strengths or qualities.” Michael White.

With younger children, labelling centres round being ADHD. The primary labels children hear relate to symptoms and include words like “hyperactive”, “inattention” and “impulsivity”. Added to these are “strange”, “weird”, “different” - all labels that the younger child faces. It is important to be able to explain ADHD in terms that are easily understood, such as the Hunter/Farmer model.

By the time a child becomes an adolescent, there are many more secondary labels that, coupled with the emotional baggage from childhood, are seriously detrimental. Labels such as “stupid”, “lazy”, “crazy”, “unfocused”, “unmotivated”, “incapable”, “rude”, “obnoxious”, “selfish”, “a problem child”, “immature”..... the list goes on and on. The ADHD adolescent becomes totally defined by these labels and feels helpless and resigned to accept that these are descriptions of who he/she is. This severely limits his/her ability to see the potential in him/herself and any possibilities of future success, hopes, goals and other dreams.

Externalising conversations provide the starting point in helping ADDers. Often these people have heard and internalised all the criticism and commentary associated with their behaviour. This becomes a belief system and becomes a definitive factor in how they see themselves and describe their personality. “I’m just impulsive” or “I’m an airhead”. These negative descriptions are all too commonly used by ADDers firstly, as a belief system they have incorporated over the years and, secondly, as an excuse system that uses these descriptions in response to tasks that are un-stimulating or exhausting. These labels or descriptions are used and heard daily to the point where individuals find it very difficult, in spite of evidence to the contrary, to view themselves as capable or having the ability to accomplish tasks, engage in communication or form meaningful relationships.

It is important not to excuse ADDers from responsibility for their actions. Narrative Therapy emphasises that even in externalising conversations, where the problems are separated from the person, this does not mean that responsibility is separated as well. Having a relationship with ADHD does not mean that we are helpless victims, but provides the understanding, by attributing behaviours to something other than ourselves, but does not exempt responsibility for how we act, think or feel in this relationship.

ADDers' Unique Outcomes

During these externalising conversations it is important to listen for “unique outcomes”. These are moments when the influence of the problem is not so strong. One such example that is common is the ability to “hyper focus” an ability that allows children and adults to focus for a long period of time on a task without giving much attention to the amount of time spent or the environment around them. It is particularly important for children to be able to recognise this potential to focus in spite of the constant reminders in school or at home of their lack of ability to focus. Increasing their awareness of the times they are extremely focussed and the situations in which this occurs, gives individuals the possibility of tapping into this focussed state by creating situations in which it is more likely to happen.

The decentred, not knowing stance of Narrative Therapy that listens to the person’s narrative, give ADDers an opportunity for the conversational freedom they are not often afforded in daily life. All too often ADDers hear “get to the point”, “you’ve lost focus”, “where are you going with this?” ADD conversations are often not linear and logical in the conventional way, but given the freedom to explore the tangents of their thinking, they will arrive at the point and many others, often forming creative and imaginative connections between ideas and thoughts that would not have been considered otherwise. These conversations allow for not only realising this unique outcome, but also when, how, where this occurs, helping the ADDer in later life to make informed choices about school subjects, career paths and decisions of other life situations. The inventor Thomas

Edison often began a project with the intention of going in one direction only to find something that sparked him to follow another direction that led to another conclusion, until he arrived at something he never considered.

This imaginative and creative thought, provided by the freedom of Narrative therapy conversations enables the ADDer just enough distance from the problem to allow for reflection. This in turn opens up possibilities for exploring and considering future unique outcomes not previously considered achievable or realistic.

This “out of the box” or “radial thinking” can be a huge advantage if the solution to problems requires novel or considerate thinking. Later, in the work environment, in situations involving people where there is no established right way, the ADDer is often well-equipped to consider various viewpoints that allows representation of all concerned.

ADDers often struggle with focussing on certain essential details in life, which may be hazardous when one has to submit a tax form. However, in situations where looking at the big picture is important, such as in marketing or human resources or planning a big project , the ADD individual often has an advantage over the more logical and methodical thinkers.

Ritual of Inclusion

“Narrative practice is based upon the belief that our sense of self is socially constructed and exists in relationship to other people”. Michael White.

“Ritual of inclusion” proposed by White focuses on “time-in” and being part of the solution versus “time-out”, which only heightens the ADDer’s experience of being excluded. These rituals could be beneficial in working with the frustration and subsequent aggression that many ADDers face. Their yearning is often for involvement, not exclusion.

The theme of inclusion is particularly interesting and meaningful to me because of the many hours I spent outside a classroom, the headmaster's office, or at a desk on my own isolated from the rest of the class. All too often punishment involves some sort of isolation or removal from the situation. So, the idea of including an ADDer in ways that give him an opportunity to add to the process and share responsibility for possible outcomes holds enormous potential for diminishing aggression and finding meaningful solutions.

Adolescence and Re-membering conversations:

".. how others see us, how we experience ourselves with others, how we participate with others, all influence who we are becoming as people". Michael White.

Narrative Therapy has are many useful approaches but I have decided to focus on Re-membering conversations in respect of adolescents. This is normally a difficult period, but coupled with labels of being ADHD it is extremely challenging. Studies show that ADD adolescents are at greater risk for lowered school achievement, anti-social activity and poor peer relationships. Of primary importance at this stage wanting to belong to the peer group; what I like to call the "act to fit". The ADDer approaches most situations with feelings of inadequacy and gauges his success during this period on his ability to be part of the group and more especially to be liked. Unfortunately, the behaviours associated with being ADHD do not lend themselves to making friends easily, if at all.

As a reaction to repeated failures to gain acceptance, the adolescent either withdraws completely or establishes a persona, often encompassing a "bad boy" attitude, which does not bode well for school or at home. Unfortunately, this attitude tends to attract other bad elements within school with the same attitude towards work and authority but for different reasons. Although I believe that in most circumstances adolescents know these friends are not the best influence on them, the fact that they belong to a group is enough.

Attempts by parents to persuade the adolescent are met by extreme indifference or

defensiveness, often aggressiveness as the loyalty felt is strong. “They accept me for who I am and no one else does” or “They understand me and don’t judge me” are often the responses given to parents’ concerns. The result is that the ADDer, with all his feelings of insecurity and inferiority, often does whatever it takes to remain part of this social group. The danger obviously, is when these groups are involved in high risk behaviours such as alcohol, drugs and sex. ADD impulsiveness and the desire to please do not enable the ADDer easily to say “NO”. Often in conversations, and from personal experience, ADD individuals are quick to volunteer. They say “Yes” without waiting to think things through. More often than not we are the first to say yes to people who need something done or fetched. This can be a great aspect of our personalities but in high risk situations this can be disastrous where we end up in a cycle of doing dangerous things to make other people happy and gain status even if it is short lived. Re-membering conversations can be useful in dealing with this aspect of ADD.

Club of Life

Another useful approach with adolescents is Michael White’s idea “that people’s identities are shaped by what can be referred to as our “club of life ... that for all of us there are members of our club of life who have had particular parts to play in how we have come to experience ourselves. These members of our “club of life” often have different ranks or status within the club”. ADD adolescents place great value on peers in their club of life. Parents obviously have some rank but are superseded by people who support the adolescent’s “need to fit”.

Conversations about experiences allow the ADD teenager to be able to re-assess and reorganise the friends in his club. Even in fringe groups there are one or two individuals who bring good aspects to the situation. It is the way we view and deal with them that matters. Although the ADDers gravitation towards less responsible peers is usually driven by the need to be part of a group, often the continued involvement relates to the ADDers consistent comparisons of himself with other’s. These peers, more often than

not, have their own struggles and inadequacies, so the ADDer finds a sense of security in groups where peers have labels that are judged to be worse than his own. Focussing on negative behaviours - one's own and other people's - to feel positive about oneself is not very constructive and results in an approach to life based on excuses: "If he/she is worse than me then why worry". ADDers poor self observation makes it difficult to evaluate their weaknesses and strengths, thereby cementing the problems they face. Re-assessing these relationships and impact of peers and indeed the ADDers influence on them allows for a perspective which greatly improves the ADDers ability to surround himself with the positive aspects of individuals and, more importantly, enables a responsibility of "choice" rather than the perceived "no choice" in peer relationships.

An ADDer often lives under the mistaken assumption that he/she is the only one dealing with this relationship with ADD, despite repeated evidence to the contrary. This self absorption with the hopelessness of his existence often emerges as resignation to future failure with no hope for anything different. Providing ADDers with a list of famous people with typical ADHD traits, such as: Walt Disney, Henry Winkler, Jackie Stewart, Thomas Edison, Robin Williams, Carl Lewis, Sylvester Stallone, Magic Johnston, Stephen Hawkings, John Lennon, to mention but a few, allows for the hope of success. ADDers may want to consider these people, who are successful in so many diverse fields, as members of their "club". Their strengths and weaknesses and accomplishments aid in changing the meaning attributed to living with ADHD.

Using Therapeutic Documents with ADHD:

ADDers often have difficulty remembering and applying positive things they have discovered about themselves and their situation. Therapeutic documents provide an easy reference for ADDers to revisit what has been discussed and highlighted in therapeutic conversations. Strengths and possible weaknesses in certain situations can be highlighted and focused on to allow the ADDer more possibilities for success.

Often in stressful situations the ADDer finds it very difficult to cope, be it in the classroom when asked a question, in exam or test situations, speeches, homework or assignments. Any situation in which the ADDer may become frustrated can lead to a brain “shut off”. The harder the individual tries to provide an answer, the more difficult it becomes and the frustration and sense of failure increases.

Exams are periods of extreme stress. Often procrastination leads to a “cramming”, but also the ADDer struggles to get down to quality studying. Hours are put in but often 10 hours equates to 2 hours of quality study. All too often ADDers enter exams with a sense of failure that can lead to situations where, seeing the first question, the brain freezes. Documents which list strengths and gives helpful information about a method to follow, such as breathing, relaxing, reading through the paper first, moving to the next question if one gets stuck - can be beneficial in helping to combat these stressful events.

Having a document of knowledge in the one’s pocket or on one’s desk, which can be referred to before a lesson that the adolescent tends to have difficulty with, can help remind him of the strengths he carries with him in other lessons. These are the same as the strengths he brings to this lesson where he does well. These documents could also contain an explanation of ADHD which the adolescent can refer to so he does not feel the pressure of having to give an explanation off the cuff. He is prepared for the event and is able to articulate clearly.

Documents of knowledge can also be used in situations of aggression. Although these generally occur as outbursts, the ADDer is often able to recognise that his irritation and impatience levels are rising. In these circumstances, it is useful to have step by step notes as reminders. Personally, when I feel that a situation is moving out of my scope of control, or frustration is building, or confrontation is imminent, I practice three steps: (i) I remain calm and lower my voice level, (ii) I remove myself from the situation, and (iii) if still unsuccessful, I calmly count from 1 to 10 taking 2 or 3 breaths between each count and bringing as much attention to the activity as I can.

ADDERs often feel these outbursts for a brief period of time and after five or ten minutes the situation is over and things are back to normal as far as the ADDer is concerned. However, this is not the way the others involved view it. So it is best to avoid these angry outbursts using whatever techniques work best for the individual.

In a classroom situation I also see an opportunity for documents of circulation that highlight the preferred story by explaining what ADDers do bring to the classroom, what they would like to bring to the classroom, how they want to be treated in the classroom, how they would like to feel in the classroom. If the child agrees to writing the letter and it is circulated in the classroom, the class may see the individual in a different light and treat him differently, having heard the life story of a fellow classmate in his own words and being given a brief overview of a day in school by their ADD classmate. Hopefully allowing the class to see the difference between how the child would like to experience school and how he is experiencing school at the present will bring greater understanding. Presenting this letter in class allows for a joint understanding. With the teacher being present it helps to give the document more credence.

Conclusion:

I have touched on only a few of the narrative interventions that could be useful in challenging and deconstructing the labelling associated with ADDers. Narrative therapy holds great promise and possibilities for success and living an enriched and preferred life story. In compiling this paper, as well as presenting at the Narrative Conference, I have connected with many ideas that give some sense of the diverse, imaginative and creative scope for using the Narrative approach with people labelled ADHD. It has started my journey towards a better understanding of this approach and my own relationship with ADD, my ADDer kin and how I approach other individuals as well. The realisation and acceptance of Narrative “as a way of being” is certain to touch all aspects of my future.

Sources:

Thom Hartmann, *Healing ADD: simple exercises that will change your daily life*. Underwood Books, Grass Valley California (1998).

Michael White, *Selected Papers*: Dulwich Centre Publications (1989).