What does it mean when a health care professional says “attention-deficit/hyperactivity disorder”?

Hearing a health care professional say your youth or young adult has attention-deficit/hyperactivity disorder (ADHD) can be confusing. The good news is that the emotions and behaviors you have been concerned about are actually symptoms of a treatable disorder. By engaging in treatment and entering recovery, people with ADHD can manage their symptoms, concentrate better, and be more successful in their everyday lives. Recovery does not necessarily mean a cure. It does mean that people are actively moving toward wellness.

Getting information about your child’s diagnosis is one of the most critical tools you will need for the journey that you are going to embark upon. Far too many parents depend on the “experts” to tell them everything about their child’s diagnosis, but your own research will help you and your family better understand the diagnosis.

—Regina, Parent

It is important to talk with a health care provider about treatment options and additional information. Your provider may be a child and adolescent psychiatrist, general psychiatrist, psychologist, pediatrician, social worker, or other health care provider. If you are concerned that your youth or young adult may have ADHD, it is important to seek a thorough evaluation. The evaluation includes talking about their symptoms, blood and urine tests, and perhaps other tests to ensure that there is no underlying medical condition that could be causing the symptoms. Additionally, neuropsychological and/or psychosocial testing of ADHD can be helpful in determining a diagnosis. It is also important to ensure that your youth or young adult can tolerate medication, if recommended as part of a treatment plan.

What do we mean by recovery?

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Recovery focuses on wellness and resilience, encouraging [people] to participate actively in their own care.
What is ADHD?

ADHD involves a persistent pattern of inattentive and/or hyperactive and impulsive behavior. These behaviors interfere with day-to-day activities in school, at work, or in social situations. A person with ADHD has a hard time paying attention, following instructions, and organizing and carrying out activities. People with ADHD often lose things, are forgetful, and are easily distracted. Hyperactive behavior includes things like difficulty waiting or taking turns, fidgeting or squirming, always feeling “on the go,” and not being able to sit still. People with ADHD may interrupt others, talk excessively, and express feelings of being “driven.” The diagnosis of ADHD can be made in older youth and adults. However, for the diagnosis of ADHD, symptoms must have appeared prior to age 12. Youth and young adults who develop ADHD may not be hyperactive initially. Rather, they have trouble managing behavior, paying attention, and following instructions.

What caused this?

Researchers and health care professionals do not completely understand what causes ADHD. It is unlikely that a single factor causes ADHD. It is most likely caused by a combination of things such as genetics (i.e., family history of ADHD), chemical or other changes in the brain, and/or environmental factors. Traumatic experiences can also contribute to the development of psychiatric disorders. If your child has experienced a traumatic incident, it is critical to share that information with their mental health specialist and pediatrician.

Should I have known?

It is very difficult for parents and caregivers to know if their youth or young adult have behaviors that are consistent with ADHD. Working with trained health care professionals is important to help assess your youth or young adult and to discuss how to best approach treatment.

What do we mean by resilience?

Resilience is the ability to respond to stress, anxiety, trauma, crisis, or disaster. It is critical in recovery [from mental disorders].

ADHD is typically an ongoing disorder. In adolescence and adulthood, the hyperactive symptoms will diminish but the organizational and attentional challenges will persist. However, treatments that involve medications and other elements of an individualized treatment program can help your youth or young adult improve their coping skills (become more resilient), manage symptoms, improve everyday functioning, and lead a productive and meaningful life. An individualized treatment program can include positive family and peer support or specialized educational programming.
What are the treatment approaches?

ADHD can be managed in many ways. This includes the use of behavioral therapy or a combination of medication and behavioral therapy. You should discuss treatment options with your youth or young adult and their health care provider, and make decisions based on individual health goals and priorities. Youth or young adults of consenting age may need to provide written consent for parents or caregivers to participate on the treatment team. It is important to talk to your child’s health care providers about other types of treatment, such as complementary medicine, as well as programs that can provide additional support related to education, employment, housing, and vocation and career development. It is also important to encourage good self-care, such as a healthy diet, exercise, sleep, and abstinence from illicit drugs. Understanding the treatment for ADHD will help you play an active role in your youth or young adult’s recovery.

Medications
Medications can help manage many of the symptoms of ADHD. Stimulant medications are the primary treatment for ADHD. Each person reacts differently to these medications. For that reason, the prescribing health care professional may try different doses and different kinds of medication before finding the most effective approach. Finding the best medication and the most effective dose may take time. For some people with mild symptoms of ADHD, the health care professional may not need to prescribe medication.

Therapy
Health care professionals may recommend behavioral therapy and parent management training as stand alone treatment or in combination with medications. Therapy may help your youth or young adult develop behaviors and daily routines that can reduce the symptoms of ADHD. It can also help you develop strategies to support your youth with ADHD.

Support
Peer and family support are also important for people with ADHD. Family members and caregivers with positive attitudes, and peers who are recovering from similar disorders, can be great assets to the team or your youth or young adult with ADHD. As a partner on this team, you can help to identify problems early and provide important support and encouragement to help your youth or young adult comply with recommended medications. You can also help them stay focused on their recovery goals. Additionally, talking with other caregivers who also have a child diagnosed with ADHD can help you to learn more and know what to expect. You may benefit from having someone further along in the process with whom to discuss your own questions, thoughts, and feelings.

I found that working with my child’s health care professionals, reassuring my child they will get better, and taking care of myself were the best ways to keep our family moving forward.

—Jane, Parent
Is this my fault?
No, it is not. Decades of medical research provide evidence that ADHD and other mental disorders can be the result of a complex interaction of genetics and biological, environmental, social, physical, and emotional influences. None of the contributing factors alone are sufficient to cause a mental illness. Your youth or young adult is not to blame and neither are you.

How common is this disorder?
Data from the Centers for Disease Control and Prevention show that the rate of ADHD among 3-17 year-olds is in the range of 6.8 percent to 8.9 percent.¹

How can I help?
Parents, caregivers, and family members can be important partners in treatment and recovery from ADHD. You can play a major role by monitoring symptoms and response to medication changes and encouraging your youth or young adult to stick with their treatment and treatment plan. It is also important to alert health care providers if your youth or young adult uses drugs, excessive caffeine, nicotine, or alcohol. Seek immediate help if your youth or young adult has thoughts or plans of harming themselves or others. (For more information, see the hotline and website below*). The health care professionals and counselors working with your youth or young adult value your role in treatment. Please monitor for, and encourage youth to share information about any other health conditions or attempts to self-medicate symptoms. There is significant evidence that your involvement can improve treatment outcomes. Your own self-care is also an important part of caring for a child with a mental health disorder. Self-care may include talking to your own mental health professional, friends, or family, as well as joining a local support group through the National Federation of Families for Children’s Mental Health or the National Alliance on Mental Illness, exercising, getting a good night’s sleep, or meditation.


EDUCATION + TREATMENT + SUPPORT = RECOVERY AND RESILIENCE
Where can I learn more and get support?

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REFERENCES:

1 (2012). SAMHSA’s Working Definition of Recovery. SAMHSA.


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