

1/3: Does My Child Have ADHD?

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SPEAKERS

Seth Perler



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Parents and teachers, what's up? In this video I'm going to talk about: does my child have ADHD? How do we know if a child has ADHD? So whether you're a parent or a teacher, if you're a teacher, and you're wondering about a student, you're concerned about if the child have ADHD? How do we know that? I'm going to be talking about it also with this book called the DSM-5. And this is an amazing book that is very helpful, but has a big, big problem that you must be aware of when you're trying to make decisions about how to help a student that you care about. What's up? My name is Seth Perler, I'm an executive function coach based in Colorado. I help struggling students navigate this thing called education so that they can have a great life. The DSM-5, meanwhile, go check out my site SethPerler.com. I have tons of resources for parents. If you like what I'm doing, support me, give me a thumbs up, put a comment below, subscribe to my YouTube channel, and check out my site and subscribe there, I send out something every week.



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Anyhow, the first thing you need to know about this manual, the Diagnostic and Statistical Manual of Mental Disorders, disorder, things that are out of order. How do we diagnose things? This is the fifth edition, done by the American Psychiatric Association. There's a big problem with this book, even though I'm gonna say some good things. But there's some great information in here that I want you to be able to use this as a resource if you're trying to help kids. The problem is, is that the pharmaceutical companies have massive influence when it comes to revising this. And of course, the job of the pharmaceutical industry is to sell pharmaceuticals, to sell drugs, to sell pills, to profit, to make as much profit for their shareholders as possible. That is their primary motivation. So you have to take the things in here with that knowledge. This is a great thing to spend a day with going through this. Whether you're a parent or a teacher, it'll give you incredible insight into what's going on. One of the problems I want to caution you against is that if you read through this, you might be looking at all of these different disorders. And you might be going, "Oh my gosh, that's me, Oh, my gosh I should be diagnosed with this, I should be diagnosed with that. I should be diagnosed..." it can make you crazy. You really have to take your time reading this, don't get a bunch of anxiety about it. That's not the point here. But it's an expensive book, costs about 150 bucks. You can get it in many places, and they try to sell this online, they try to get you to get the app right away, they try to get you to purchase the online version on the back page. So this is just a marketing machine. You got to remember to take certain things with a grain of salt. Having said that, there are some incredible things in this and when we were looking at ADHD and we're trying to figure out if a student has ADHD, this is the the main reference that people use to figure this out. So if you're speaking with the school or if you're speaking with a professional about if your child has ADHD, you might get screeners you might get parent screeners, teacher screeners, whatever. But this is the main manual. Now what happens in this book at the beginning, it tells you in the glossary, it tells you these different sections. And the first thing is neurodevelopmental disorders, neurodevelopmental. So starting on page 31, there are neurodevelopmental disorders. What that means is that these are the things that mostly apply to kids. And that goes until the second section, which is schizophrenia spectrum and other psychotic disorders, is the second section. And then there are many more sections after that, that it goes into bipolar, depressive disorders. There are many other sections after that, that are more geared towards adults. But what we're starting with here is the neurodevelopmental. As you look here, it says intellectual disabilities, communication disorders, and it tells you where to go for these different sorts of things.

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But what we are getting to in this one is we're getting to ADHD. So we're looking at attention deficit hyperactivity disorder here. Now if we go to page 59, this is where ADHD starts. In this video, I'm going to talk a little bit about the main categories here. In the next video, I'll go into depth about some of these. So here's what you want to know. Basically, we have what's called 'diagnostic criteria.' How are we going to diagnose? They break it into a few sections. I think there are five sections of diagnostic criteria, yep, it goes to E right here. I'm not going to go through the details on these first two, which are the most

important, but I'll go over them in a minute. The first thing in A, if you're diagnosing ADHD, it says a persistent, I'm very big on semantics and wording but listen to this. A persistent pattern of inattention and or hyperactivity, slash impulsivity, that interferes with a functioning or development as characterized by one and or two. And what they do is they break it into one and they give you all these different things to look at in terms of inattention. And then number two, they give you all of these different things to look at in terms of hyperactivity, all of these here, I'm not going to read those, I'll do those in the next video. You do want to know what those are, by the way, that is really the key here in all of this stuff. So basically, within attention, what the heading says here is "Six or more of the following symptoms," and they have A through I. A, B, C, D, E, F, G, H I. So I guess there are nine, nine or 10 different things here. "If six or more of the symptoms have persisted for at least six months to a degree that is inconsistent with the developmental level, so it is not the same as their peers, and that negatively impacts directly on social and academic slash occupational activities." So basically, it negatively impacts their life. So those are the things that we're looking for when it comes to inattention. And again, I'll go through those symptoms later. The next one says hyperactivity. Again, it says six or more of the following symptoms for at least six months. It says the exact same thing and then it lists all of the different hyperactivity things.

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B, down right here has B. Several inattentive or hyperactive impulsive symptoms were present prior to age 12. So if you're diagnosed with ADHD, and they're asking you about when you started seeing these, they're looking for prior to age 12. One thing that I wonder about for any of you therapists or counselors or psychiatrists or psychologists watching this, if you want to put in the comments, what if there was a brain injury or trauma? Like does that change it if it was 12? So if the kid is 16, and they had a trauma at 15, does that change it? Because I know brain injuries and traumas can affect executive function. So meanwhile, as a side note, if you look in the DSM, there's no such thing at all in the index. It doesn't even say 'executive function,' it doesn't say executive function disorder if you've heard that term. ADHD may be a disorder of executive function, but there's no such thing called 'executive function disorder' in here and it doesn't mention anywhere in the index whatsoever of the entire DSM executive function. I find that interesting.

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C, next one, "Several inattentive, or hyperactive impulsive symptoms are present in two or more things, meaning at home, at school, at work, with friends, with relatives, with other activities."



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D, "The there's a clear evidence that the symptoms interfere with or reduce the quality of social, academic, or occupational functioning." So in other words, what I always say with executive function stuff is this is a quality of life issue. This is no joke, it does not fix itself, we need to help human beings.



08:49

And finally, E, "The symptoms do not occur exclusively during the course of schizophrenia or other psychotic disorders are not better explained," and this is the important part, "and are not better explained by another mental disorder." And then it lists mood disorder, anxiety disorder, dissociative disorder, personality disorder, substance intoxication, or withdraw. So there we need to make sure that we are talking about the right thing. We can't confuse this with other things. There's a lot of misdiagnosis, there's a lot of under diagnosis, there's a lot of overdiagnosis, we need to be really careful in how we look at things. I fear that a lot of times it seems like people are rushed through diagnoses of things, and proper time and consideration is not taken to get the right idea of what's going on. So I want to point out that concern to you as you're looking at these things. As a parent and a teacher, this videos meant to help you understand what's going on with the DSM. I am not someone who diagnosis, please don't email me asking me to diagnose, and don't just watch this video and the next one that I'm going to make for you, and assume that you know. You really do need a professional who really exhaustively looks at these things so that there is not, again, I said misdiagnosis, under diagnosis, and over diagnosis so that there is not misdiagnosis, and there's not something else going on. I also want to mention a little bit about what else you're going to find in this chapter. The first thing I want to mention is co-morbidities, even though it's not the next one here. But comorbidities means that you might have a student who a lot of struggles. Students or humans who are diagnosed with one thing also have something else going on. So a student may be diagnosed with ADHD, but there also may legitimately be an anxiety disorder going on. Anyhow, as we go on here, it gives you more details about looking into ADHD, it tells you about diagnostic features, this is a very interesting portion right here, diagnostic features is a great part to look at. Meanwhile, you can get this book of the library too and check it out. You can also find a lot of information about this online. Then it says "associated features and supporting diagnoses," then it says "the prevalence." That part's really short and may as well read that to you, "Population survey suggests ADHD occurs in most cultures in about 5% of children and about 2.5% of adults." Then we have development, and course, risk and prognostic factors, culture-related diagnostic issues, gender-related diagnostic issues, functional consequences of ADHD, differential diagnosis. Then we have the comorbidity section, then it goes into other specified Attention Deficit

Hyperactivity disorders. Then finally, we get to SLD, or Specific Learning Disorders. This is a completely new section. We're done with the ADHD section by page 66.



12:03

I think it's really valuable to go through this exhaustively, take your time, you're gonna learn a lot. If you are a parent or a teacher, and you're concerned about kids, again, ADHD and executive function, struggles, executive function challenges, these are quality of life issues, okay? This is a quality of life issue. If the child or the adult, if somebody struggling with this stuff does not get adequate help, what often happens in our culture is we often do the opposite. We shame them, we use punishments, we use rewards, we use things that aren't getting to the root of the problem. So the problem persists as we use, again, often shaming strategies that are not understanding what the heck is going on here. So again, the pharmaceuticals have a big influence in revising this, because they want to sell, they want to profit. But what's in here is incredibly powerful. Again, in the next video, what I'm going to do is I'm going to go into the specific characteristics where it listed the characteristics of ADHD, so that you can know as I'm speaking, you can sort of check into that and see how they align with the student that you're concerned with, and you can get a better idea of what's going on and what the child needs to be helped.



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Again, my name is Seth Perler, I'm executive function coach based in Colorado. I'm really grateful that you're here. If you like what I'm doing, please support my work by subscribing. Check out what I'm doing, give me a thumbs up, leave a comment below. What do you think about the DSM and how they've structured this? What questions you have? Let me know in the comments and I'll get back to you as best I can. Be well, take care, be safe, be healthy. Thank you for serving kids. Take care.