ACCORDING TO Steven Safren, PhD, a professor of psychology at the University of Miami, not all adults with ADHD find that medication reduces their symptoms enough. And for those who do experience significant symptom reduction, many still lack the concrete skills and strategies needed to help them effectively navigate around areas of persisting challenge.

Thanks to the efforts of Dr. Safren and his colleagues—Susan Sprich, Carol Perlman, and Michael Otto—they’re now a treatment model healthcare providers can use to help adults with ADHD master these exact skills and strategies.

The model, described in their 2017 publication, Mastering Your Adult ADHD, draws upon empirically supported cognitive behavioral strategies for managing and navigating around common ADHD related challenges. An accompanying client workbook was published the same year. These 2017 publications—second editions of the team’s 2005 publications—were thoroughly updated to include advances in our understanding of adult ADHD as well as our understanding of effective cognitive behavioral strategies.

Three core modules
Three core modules comprise the treatment program:

- **Psychoeducation, organizing, and planning.** Participants learn that ADHD is a neurobiological disorder, a valid diagnosis, and not related to laziness or a lack of intelligence. They also learn that the cognitive behavioral treatment approach they’re embarking upon can significantly alleviate challenges associated with ADHD. Participants also learn how to effectively use a calendar and task list (cornerstones of staying organized), systems for filing papers, among other organizational and problem solving strategies.

- **Coping with distractibility.** Participants who struggle to stay focused on lengthy, uninteresting tasks learn how to break these tasks down into smaller chunks. They also learn how to use timers, cues, and other strategies to override distractibility problems.

- **Cognitive restructuring, or adaptive thinking.** Participants learn positive self-coaching strategies as well as how to look at situations more rationally, and how to dispute negative or other unhelpful thoughts.

Two additional one-session modules are included:

- **Procrastination.** Drawing upon skills learned in the above three modules, the session helps participants overcome problems associated with procrastination.

- **An informational session with a spouse, partner, or family member.** This allows a significant other to better understand the nature of the treatment program, along with things they can do to help facilitate behavioral change.

Each individual session includes a specific agenda clarifying the session’s purpose and the goals to be achieved, a review of progress as measured by the Adult ADHD Self-Report Scale (ASRS), a plan to practice newly learned skills and strategies throughout the week, and a review of the previous week’s practice experiences. Motivational interviewing strategies are also incorporated to help keep participants engaged in the treatment process and reminded about their own personal desires for behavioral change.

Participants will vary in the amount of time it takes for them to master new skills. Treatment providers are asked not to move on to new skills areas until previous areas have been mastered. Clinicians can also customize the
order of sessions to better fit the unique needs of participants. Some participants, for example, may not struggle in some areas addressed in the treatment program but struggle significantly in others.

With sustained practice, participants will find themselves better managing daily tasks and responsibilities, but ups and downs are to be expected. Treatment providers remind participants not to expect gains to be linear.

The program was initially developed at the Cognitive Behavioral Therapy Program at the Massachusetts General Hospital/Harvard Medical School. It was designed for adults with ADHD who were taking medication to help treat the disorder. When provided in conjunction with medication, studies of the program’s effectiveness reveal improved outcomes. To learn more, read the study by Safren and colleagues published in the Journal of the American Medical Association. Treatment providers will find more detailed information about the program in the second edition of the treatment manual.

A clinical and consulting psychologist, Mark Katz, PhD, is the director of Learning Development Services, an educational, psychological, and neuropsychological center in San Diego, California. As a contributing editor to Attention magazine, he writes the Promising Practices column and serves on the editorial advisory board. He is also a former member of CHADD’s professional advisory board and a recipient of the CHADD Hall of Fame Award.

MORE INFORMATION

To access the Adult ADHD Self-Report Scale (ASRS), go to https://www.hcp.med.harvard.edu/ncs/ftpdir/adhd/18Q ASRS_English.pdf.

