

MANAGING IMPULSIVITY

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THE CONATIVE GROUP PLLC
— THINKING, FEELING, GROWING —

INTRODUCTION AND DISCLOSURES

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- Dr. Kimberly Harrison is a clinical psychologist who works with children, adolescents and families. She has been in private practice in the Houston area since 2012, and founded The Conative Group, PLLC, in 2016. Dr. Harrison provides individual and group therapy, psychological testing and parent consultation. She regularly speaks and writes on the topics of ADHD, parenting, and transitioning to adulthood issues. She also is an active researcher in the fields of ADHD, Transition to Adulthood, and Autism Spectrum Disorders. Dr. Harrison is passionate about helping parents and children get to root issues that are causing difficulty at home and school.
- Dr. Harrison does not have any conflict of interest or commercial support relating to this presentation.

GOALS OF THE PRESENTATION

- Define types of impulsivity.
- Review basic information about ADHD as it relates to impulsive behavior.
- Discuss strategies for engaging impulsive children and teens in focused work at home and at school.
- Learn interventions for improving negative behaviors and emotional responses.
- Create tools for children and teens for using their energy for productive purposes.



IMPULSIVITY:
Acting without Thinking First

With Impulsivity “It’s always NOW!”

- Impulsivity can bring about serious safety issues, not to mention emotional and behavioral consequences.
- In the moment, the person does not have cognitive access to things they “should” know:
 - The past fades away
 - Future consequences are not considered
- The impulse takes over and blocks higher-level thinking.
- Interest drives attention.
- Impulsivity occurs when “it’s always now” meets the next “interesting” thing.



TYPES OF IMPULSIVITY

Three basic types of impulsivity are most problematic for individuals with ADHD:

- **Physical**
 - This often co-exists with hyperactivity but is different. Hyperactivity involves over-physicality. Physical impulsivity means the person uses their body inappropriately without seeming to notice.
 - Hitting, kicking, biting
 - Rough play
- **Verbal**
 - Blurting out in class
 - Saying inappropriate things
 - Talking back
- **Emotional**
 - Over-reacting
 - Shutdowns
 - Meltdowns
 - These often look like “oppositional” behaviors but are usually anxiety-related



SO, WHAT CAN YOU DO TO MANAGE IMPULSIVITY IF IT'S "ALWAYS NOW?"

Modify the Child

- Medication
- Sleep
- Nutrition
- Strategies (Habits and Routines)

Modify the Situation

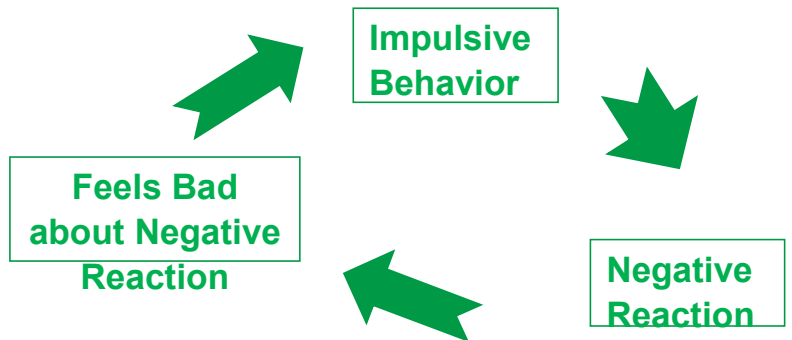
- Set up for success
- Avoid common traps



WHY IT IS IMPORTANT TO ADDRESS IMPULSIVITY

There are many reasons why it is important to help a person manage impulsivity, including:

- Safety
- Social fall-out
- Interference with Learning
- Interference with participation in every-day activities
- Self-esteem



**Repetition of this
Cycle
Creates Low Self-
Esteem**



**REVIEW
OF
BASIC INFORMATION ABOUT ADHD**

ADHD & ADD

The official diagnostic term is:

“Attention-Deficit/Hyperactivity Disorder” (ADHD) with one of three subtypes:

- Predominantly Hyperactive/Impulsive Type
 - ** (These 2 Features are Interdependent)
- Predominantly Inattentive Type
- Combined Type (68%)



ADHD IS NOT BAD BEHAVIOR

- The result of ADHD-stimulated actions is often bad behavior, but it is not willful misbehavior.
- A child with a broken leg who can't run fast is not penalized for slowness. Rather, they are given support.
- The more often a child is told he or she is "bad," the greater the chance of emotional dysregulation and low self-esteem as they grow older.
- For the ADHD child, "It's always NOW!" (This is where impulsivity comes in).



Executive Functioning (EF) Deficits: Developmental Delay

By age 7, most children with ADHD have a 2 to 3-year delay in executive functioning. During the Preschool and early Elementary years, the delay is often in excess of 1 year.

**IMPULSIVITY IMPACTS
ALL OF THESE AREAS
OF EF!**

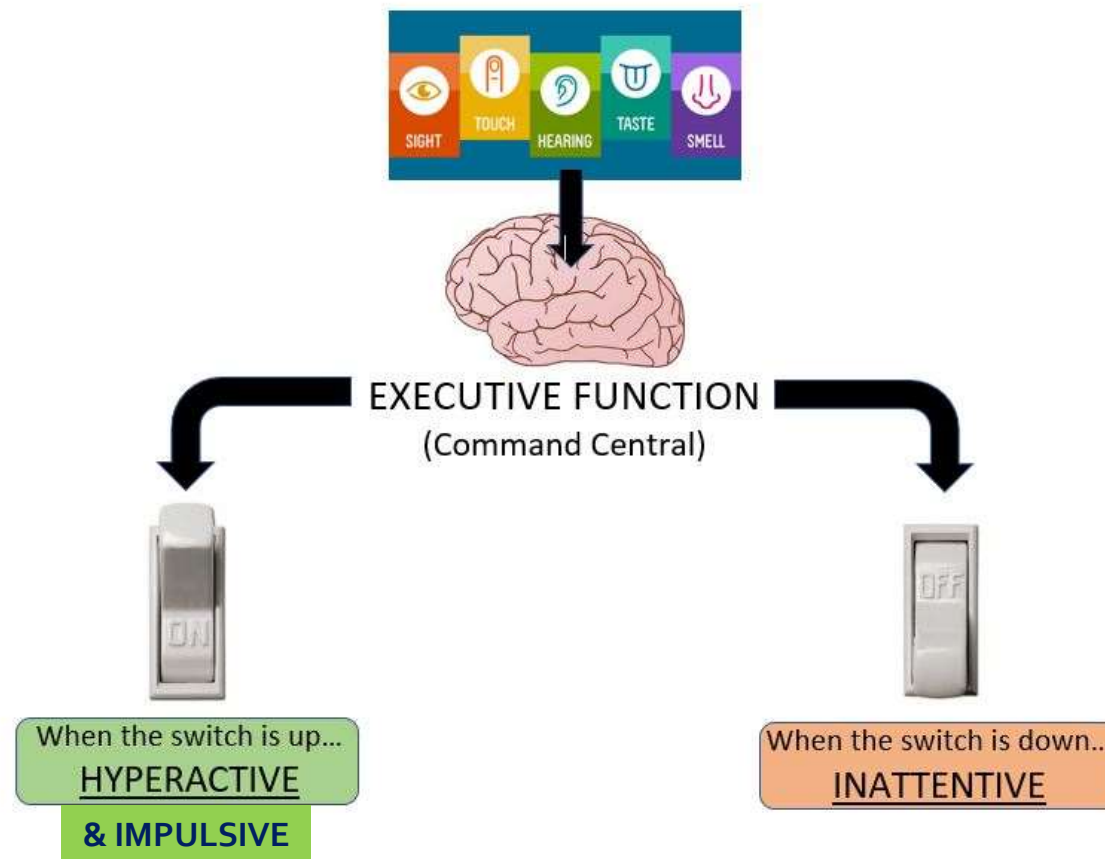
The executive functions include:

1. Self-Management to Time
2. Initiating
3. Planning and Organizing
Thinking/Problem-Solving
4. Working Memory/Cognitive
Flexibility
5. Organization of Materials
6. Shifting from Task to Task

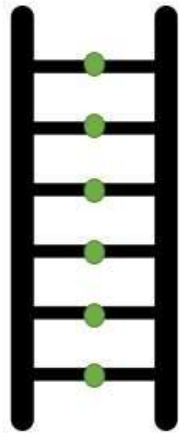


The Executive Function Switch

The “ADHD Switch”

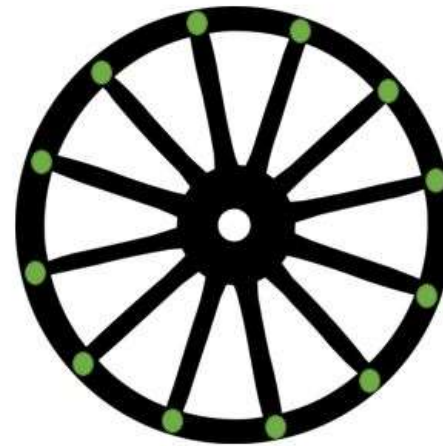


ADHD = WAGON WHEEL APPROACH TO TASKS



LADDERS

- linear
- logical
- task-sequencing
- “hunters”



WAGONWHEELS

- circular
- creative
- task-switching
- “gatherers”



Addressing Impulsivity: Modify the Child



MEDICATION

Pros:

- Impulsivity can bring about serious safety issues, not to mention emotional and behavioral consequences, and medication can help considerably with managing impulsive symptoms of ADHD
- Usually about 85% effective
- Can help the child be in control of themselves so that strategies are more effective

Cons:

- Not all children can tolerate the medication and/or it doesn't work well
- Medication does not change behavior or bad habits
- Most children aren't medicated 24 hours per day so impulsivity still wreaks havoc



PLAN!

If your child takes medication, then plan extra-curricular activities and homework around medication cycles:

- When medication wears off, impulsive children are often unable to participate well in group activities.
 - Choose activities where they can be successful (ex. swimming is usually better than baseball)
 - Have plan for homework when they can focus best. If a child can't do school work without medication then they probably will struggle doing homework without medication. Be creative:
 - Do homework in the school library (fewer distractions)
 - Do homework in the morning after taking medication
- **BE REALISTIC** – when you rush or try to have the child accomplish more than they are able, meltdowns or shutdowns occur.
 - Neither one of you accomplishes the goal if the child melts down.



SLEEP

Many children with ADHD have difficulty falling asleep because they have a hyper-stimulated system. Not being fully rested makes impulsive behavior worse.

Create a sleep-hygiene routine which allows for a winding-down of the day

- Read
- Bath
- Music
- Meditation
- One-on-one snuggle time
- No electronics
- Have an “old-fashioned” alarm clock
- Add Melatonin





NUTRITION

There are many theories about whether nutrition influences ADHD-related behaviors and, if so, what helps and what hurts.

Proper nutrition helps everyone - **FIND WHAT WORKS FOR YOUR CHILD!**

Basic rules of thumb:

- Make sure there is a proper amount of caloric intake each day
- Have a balanced diet
- Limit refined sugars
- Complex carbs create longer-term energy streams
- Make sure there is protein



STRATEGIES: BASED ON HABITS AND ROUTINES

- **Strategies tend to work best in combination with medication and situation modifications, since in the moment the child may find something else more interesting.**
- **Habits take 4-6 weeks to take hold, so you must be consistent and persistent when helping your child learn a strategy.**
 - Most parents and teachers give-up before a habit is formed!
- **Routines are actually habits strung together. They provide structure which can override impulsivity.**
- **Considerable help or “scaffolding” is usually required to assist a child in developing strategies**

BASIC BEHAVIORISM: HOW TO CREATE A HABIT

Reinforcers and Consequences

- How we shape our children's behavior to work within our boundaries
- Basic principles of behavior change
- To be effective, must be immediate

CONSEQUENCES (Decrease Unwanted Behaviors)	REINFORCERS (Increase Wanted Behaviors)
+ Add something, such as an extra worksheet or making an apology	+ Add something such as praise or a reward
- Take away something, such as screen time	- Take something away, such as a worksheet



REMEMBER – IT'S ALWAYS NOW

That's why traditional consequences don't work.

- Past behaviors have evaporated from awareness.
- Future rewards are not consciously present.
- Often, children will be overly emotional when consequences are implemented because they “forgot” what they did.

That's also why reinforcers need to be at the point of presentation.

- To foster motivation, the child needs to connect present behavior to a sense of accomplishment before they can move on.
- This is also tied to the “shift” feature: motivation helps shift in a wanted direction.



BE CREATIVE WITH REINFORCERS

Sometimes, traditional behavior charts are helpful, but think outside the box, too.

- The child can often help manage a behavior system.
 - Use the “complete a picture” activity (from *Behavior Charts and Beyond*)
 - Checklist on desk
 - Have them turn in parts of assignments or report back after completing a task for high-fives



STRATEGIES FOR FIGHTING AGAINST THE IMPULSES

There are endless things a child can learn to do to fight against an impulse, but they must practice until these strategies become habit. The habit then can be stronger than the impulse.

- Circle Palm
- Count Backwards from 10
- Mantra – ex. “slow it down, think it through”
- Put on the “Impulse Control” glasses
- Talk to self (when not disruptive)
- Give them ways to move and talk to stay on track: make tick marks on paper or dry-erase board; give a high-five when completing a task.
- Worry bead bracelet
- Scented fabric/felt/bracelet



RE-DIRECTION

Parents and teachers can develop systems for re-direction which then can be “interesting” and, thus, an intentional distraction. Have pre-determined ways to redirect:

- Eye contact
- Visual cue (e.g., stop sign)
- Verbal cue (e.g., “turtle”)
- Tap on desk
- Initials on desktop “report card”

If a child is unable to attend to the task at hand, then:

- Switch tasks
- Take a break
- Incorporate movement (Often, asking them to help you with something is a win-win.)



OVERARCHING STRATEGIES

- Make a problem-solving manual
 - Do this with your child. Offer choices for each regularly occurring activity.
 - Ex. Memorizing Spelling words can be done on the trampoline, tossing a ball, or with shaving cream in the bathtub (all are kinesthetic and interesting!)
 - Have one for yourself to remind yourself of your “go-to” resources for re-direction, reinforcing and partnering
- Intervene at the point of performance
 - Talking before or after does not typically help the impulsive child because “It’s always now!”
- Remember, this is a chronic condition which requires ongoing strategies, and the types of things you do can change over the lifespan.
 - Reevaluate strategies at the beginning and end of the schoolyear and after winter break.
 - Assist, don’t enable.



Addressing Impulsivity: Modify the Situation

SET-UP FOR SUCCESS AT SCHOOL

- Determine best seating placement for the student
 - Teachers should have easy access for eye contact and brief physical touch of the desk.
 - Don't provide a stageL group settings typically fail for hyperactive/impulsive students (but assist those with inattention.)
 - Dyads (a pairing of 2 students) can work well for both if specific responsibilities are outlined.
 - When possible, seating should vary throughout the day, with different classroom placement for various activities.
 - If your child is not thriving in a seating placement, then ask that it be re-evaluated and changed!



SET-UP FOR SUCCESS AT HOME

- Determine when your child needs more scaffolding (where there are more distractions/“interesting things” to cause impulsive shifts:
 - Morning
 - Homework time
 - Bedtime
- Create ways to help:
 - Timers
 - Breaks
 - Brief Checklist or Post-It Notes
 - Regular “check-ins” with movement and talking (ex. “ I put away my socks” – high five!)
- If they need an adult to help them move from task to task, make sure one is available.
 - The goal is independence, of course, but epic fails day after day do not help anyone – remember maturity is 2-3 years delayed.



MODIFY TIME ALLOTTED

Remember, most individuals with ADHD have different internal timing. Impulsivity occurs when the child becomes interested in other things, so short segments are important to incorporate whenever possible.

- Allow for frequent breaks with kinesthetic elements.
- Plan for shorter attention to individual tasks.
 - Reward each step completed with high-fives, initials on a tracking sheet, smiley faces, stamps, stickers, “good job!” etc. (Yes, this reward part is critical.)
- **BE REALISTIC** – when you rush or try to have the child accomplish more than they are able, meltdowns or shutdowns occur.
 - Neither one of you accomplishes the goal if the child melts down.



BREAKS

- If your child is not able to stick to task, they need a break.
 - Their brains will take an impulsive break whether you plan it or not.
 - So, don't fight it; instead, have a built-in plan.
- Breaks should be **time limited** and **physical**, such as:
 - Sharpen pencil
 - Water fountain
 - Clap hands over head
 - Shoot a hoop
 - Run a lap in backyard
- If a break doesn't help keep them on track, then the child should be redirected to a different activity.

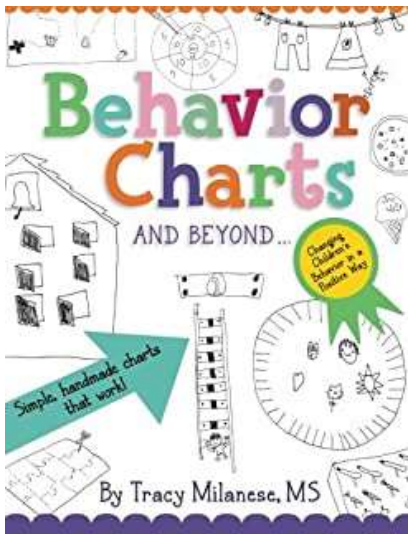


MAKE TIME VISIBLE

- This is critical for the “It’s always now” student as monitoring time can be “interesting” to their brain.
 - Use Time Timers (www.timetimer.com)
 - Use sand timers
 - Have a “countdown” clock
 - Use vibrating watches



Resources



 **CONATIVE
PARENTING**
THE BASICS

<https://www.drkimberlyharrison.com/services-conativeparenting>

Check out my latest blog on
Harnessing Hyperactivity for the
Holidays!:

[https://www.theconativegroup.com/
post/harnessing-hyperactivity-for-
the-holidays](https://www.theconativegroup.com/post/harnessing-hyperactivity-for-the-holidays)



www.timetimer.com



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