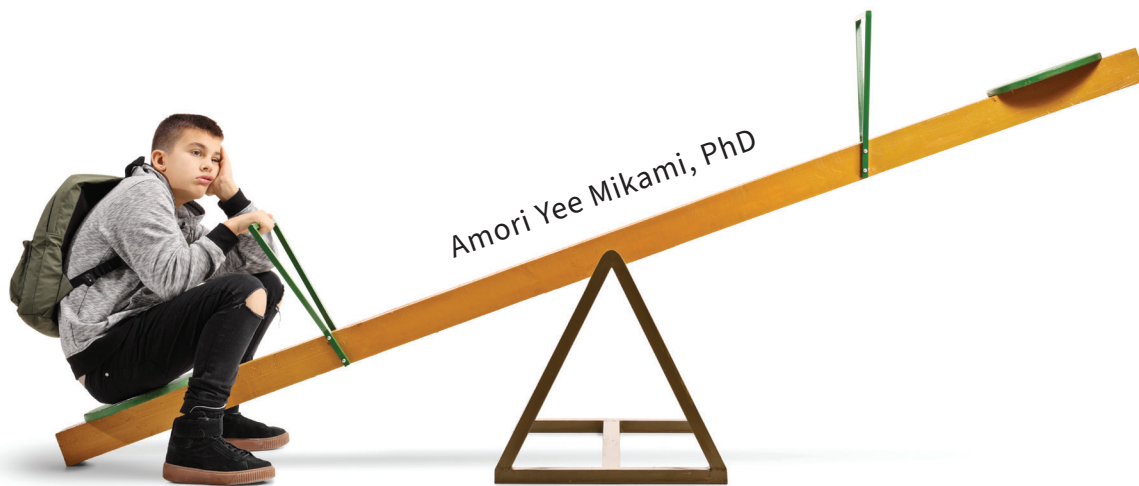


PEER PROBLEMS

How to Help



“**T**he birthday party and playdate invitations don’t come. My daughter is starting to notice that other kids don’t like her. She can behave badly around peers, so I get it, but my heart breaks for her. I’ve tried talking to her about her behavior but that doesn’t help. I don’t know what else to do.”

For many parents of children with ADHD, this is a familiar scene. Problems getting along with peers, and with making and keeping friends, affect more than half of school-age children with ADHD. These peer problems can hurt, and lead children to dislike school and to feel sad or angry, especially when the problems go on year after year. Children without friends also miss out on opportunities to learn or practice social skills, which can leave them falling farther behind.

Start with frontline treatments

If this example sounds like your child, the first thing to try is the frontline treatments for ADHD. Medication and behavioral management help many children with their ADHD symptoms. You might find that once the ADHD symptoms are under control, the peer problems get better by themselves. This could be because your child starts behaving better around peers because they are less impulsive. Or perhaps, when you make suggestions to your child about how to improve their social skills, your child is no longer distracted and can now take in what you say.

However, some parents find that medication and behavioral management are more useful for treating other aspects of the disorder (like homework time, or morning routine) but less helpful for improving peer relationships. The rules for interacting with peers are complex, and just because your child’s ADHD symptoms go down does not mean that they suddenly understand how to read social cues, negotiate interpersonal dilemmas, or phrase something in a sensitive way. Also, your

child might improve their behaviors, but peers may not notice this improvement or respond any differently to your child.

If you’ve tried the frontline treatments for ADHD and they haven’t helped your child enough in the social area, then it might be time for a more specialized treatment. Unfortunately, a lot of social skills training programs don’t work well for children with ADHD. This usually happens because a therapist tries to teach your child social skills in a clinic or the therapist’s office and then sends your child back out into the world assuming that all will go well. Children with ADHD can learn the skills around the therapist, but then they don’t use the skills in real life with their peers.

In other words, even though children with ADHD may know what they should do with peers, in the real world other things distract them or get in the way of them carrying out what they intended. That’s why we’ve learned that any social skills treatment needs to affect the child’s day-to-day environment in order to be successful.

Your Child with ADHD



The peer problems of children with ADHD can be difficult to change, but parents are in a good position to be able to help.

instruction in one group, while their parents receive instruction in another group at the same time. Because of their age, it makes more sense for teenagers with ADHD to be receiving coaching directly, but it helps to have parents involved to support the teens in translating the skills to real life interactions with their peers.

The peer problems of children with ADHD can be difficult to change, but parents are in a good position to be able to help. Note also that parents should not have to do these intensive friendship coaching efforts forever. Once children make some good friends, then friendship will provide a natural and reinforcing context for children's social skills to grow, and parents can be less involved. **A**

ADDITIONAL RESOURCES

The Parental Friendship Coaching research study is over, but the treatment manual can be purchased online. If you think your child might benefit from the approach, you can discuss it with your therapist and see if they are able to buy the manual and carry it out. The author donates all royalties to CADDAC (caddac.ca) to support ADHD awareness, education, and advocacy in Canada.

Mikami AY & Normand S. (2022). *Parents as Friendship Coaches for Children with ADHD: A Clinical Guide*. New York: Routledge. routledge.com/Parents-as-Friendship-Coaches-for-Children-with-ADHD-A-Clinical-Guide/Mikami-Normand/p/book/9781032118284

For more information about the social skills groups developed and offered by PEERS (Program for the Education and Enrichment of Relational Skills), go to peerssocialskills.org.



Amori Yee Mikami, PhD, is a professor of psychology and a registered clinical psychologist at the University of British Columbia in Canada. Her research focuses on peer

relationships among children and adolescents with ADHD. Her lab has been working on developing interventions that harness the power of parent and teacher influences on children's peer difficulties. In addition, she has a line of research about barriers to ADHD treatments, and the way social media has democratized ADHD information.

Some examples of specialized approaches

Our research team has developed a specialized approach for peer problems in children ages six to eleven with ADHD that directly aims to affect this day-to-day environment. In the program, called Parental Friendship Coaching (PFC), therapists teach parents how their can coach their children in social skills.

We think this works because parents are able to be in the child's social environment, to give children the reminders and reinforcements they need to do the skills in real life. We also coach parents in how they can help improve their child's social reputation with peers—in other words, to help peers to give their child a chance.

In a research study that we conducted, the program seemed to help children with ADHD to show more sharing and cooperation, and less aggression and rule-breaking, with their peers. It also gave parents tools to help their children, and helped parents and children have a better relationship as a result.

The PFC program seemed to work just as well for children who were medicated versus not medicated, and for boys versus girls. However, the children who did best were those who had

co-occurring oppositional behavior or aggression. They seemed to reduce the most in the fighting and conflict that they were showing with peers.

Another thing to consider is whether your child's peer problems are caused by something other than ADHD. As one example, perhaps your child has social anxiety that is stopping them from connecting with peers. Or your child may have a learning problem that makes school difficult and frustrating, and peers view them poorly as a result of their learning difficulties. Treating the anxiety, or the learning problem, might improve your child's peer relationships without you needing a specialized approach for peer problems.

Adolescents with ADHD often still need support with their peer relationships, but parents may need to take a different tactic. Some of the same principles apply: programs should provide support for the adolescent carrying out the skills in their day-to-day peer environment. One example is the Program for the Education and Enrichment of Relational Skills (PEERS).

Although the PEERS program was created for children with autism, it has more recently been adapted for teenagers with ADHD. In PEERS, teenagers receive