

Understanding ADHD

Lecturer: Barry H. Schneider, Ph. D.

Schedule of Topics:

Week 1: History, Definitions and Possible Causes

We will review the history of concepts and definitions of ADHD. Most of lecture will be devoted to the current definition and contemporary understanding of the features of ADHD, its progression over the lifespan, the difficulties it brings, its prognosis and treatment. In addition to the mainstream scientific literature, we will briefly consider the minority position – that ADHD does not really exist but was fabricated by pharmaceutical companies.

Week 2: Childhood ADHD

This lecture will be devoted to the assessment and treatment of childhood ADHD. This week, we will discuss the advantages and disadvantages of diagnosing disorders in the early years from a developmental perspective. The challenges to parents and teachers are emphasized.

Week 3: Adolescent ADHD

Although it was once thought that ADHD generally disappears with the onset of adolescence, recent research indicates that it does not. Emphasis will be placed on interventions that help adolescents with ADHD from and maintain relationships with peers and with close friends

Week 4: Adult ADHD

It is now known that ADHD can continue into the adult years. Research on ADHD in adulthood is recent and quite limited. In this lecture, we will discuss what is known about the extent of adult ADHD, its assessment and treatment.

Week 5: Gender and Cultural Differences

The overwhelming proportion of people diagnosed with ADHD are boys and men, perhaps because of an educational system that may be incompatible with the basic make-up of boys. Girls may have different symptoms. Differences between schools in different countries and differences in expectations for academic achievement may result in cultural differences.

Week 6: Alternatives to pharmacological treatment

We will review several non-pharmacological interventions, including exercise, diet, yoga and meditation as well as false treatments that simply do not work. Participants who wish to will have the opportunity of sharing their own views and preferences about how ADHD should be treated.