First results concerning the effect of a multi disciplinary social competence group on children an adolescents diagnosed with ADHD


Background
In children diagnosed with the Attention Deficit Hyperactivity Disorder (ADHD) a limited social integration, a restricted ability to interact socially, disorders in emotionality as well as academic and familial problems often constitute considerable comorbid symptoms. In addition to medicinal measures, a holistic multimodal treatment concept also includes occupational therapeutic and, in particular, behavioural therapeutic interventions (individual setting).

Introduction
The “Centre of Developmental Advancement and Paediatric Neurorehabilitation of the Wildermeth Foundation” (Z.E.N.) in Biel provides a specific group therapy for children diagnosed both with ADHD and a comorbid conduct disorder (“Hyperkinetic Conduct Disorder”, F 90.1, ICD-10) from age 6 to age 14. Within this group training, the children concerned are supported in abandoning negative behavioural patterns and are encouraged to try out and implement their own behaviour modification resources.

Methods
Within two small groups (6 boys each from age 8 to age 10 and from age 11 to age 13, respectively) the children are being looked after by occupational therapists and psychologists during the time period of one year. The hour-long sessions are taking place fortnightly. The multidisciplinary approach is based on the experiences of Largo, Petermann & Petermann, Hampel. Amongst other things, the following working materials were used:
- Parental questionnaire for the diagnostic acquisition and verification of target agreements (Conners’ Teacher and Parents Rating Scales CTRS-R-L, KIDS Kinder-Diagnostik-System 1)
- Interactional project work in the occupational therapy group during the time period of 6 months (e.g. a cooking project with children from age 8 to age 10, the construction of a parlour game to be played outdoors with children from age 11 to age 14)
- Continuous videotaping for behaviour analysis
- Role- and interaction games, relaxation exercises (progressive muscle relaxation) as well as exercises for self- and other perception (e.g. by Reichling & Wolters)
- Attention training by means of certain elements from the ATTENTIONER according to Petermann
- Evaluation by means of questionnaires (CTRS-R-L, KIDS), semi-standardised interviews as well as feedback exercises carried out with the children in order to verify improvements in academic and familial areas
- Continuous collaboration with parents and school in individual and group settings (3 parent-teacher conferences, individual talks with parents and teachers according to requirements)

Already existing treatment concepts (e.g. medical treatment) were maintained unchanged during the time period of the group therapy.

Results
The evaluation of the previous therapy sequence yielded anamnestic and clinical progress in the following areas:

- A more differentiated perception and verbalisation of one’s own mental states
- Furtherance and fortification of self-esteem and, trough this, improvement in frustration tolerance when confronted with failure
- Acceptance of and respect for counterpart, self and social rules
- Confrontation with the challenges in the group (tolerance and fairness in decision-making and conflict situations)
- Maintenance of cooperation in favour of the group aim
- Concerning oneself with the role in and responsibility for the group
- Experience of being active in a group
- Endurance / concentration in group setting

In collaboration with the parents it became evident that many of the above mentioned elements could be transferred to familial everyday life. The effects in the academic setting were smaller.

Background

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Conclusion

The multi disciplinary approach described earlier makes it possible to apply and use the professional competences of psychology and occupational therapy in a more ideal way in children diagnosed with ADHD and a comorbid conduct disorder. Thus the areas of thinking, feeling and acting can be approached more tightly focused. Moreover, evidence showed that group therapeutic intervention can be advantageous compared with individual therapy in children with disorders as described above.

Litteratur


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