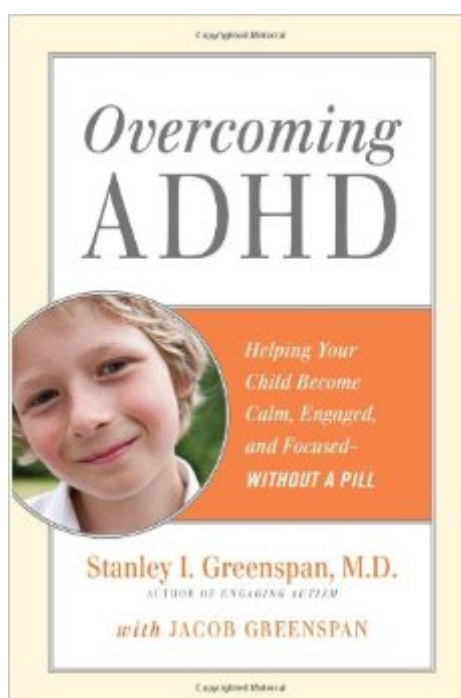


The book was found

Overcoming ADHD: Helping Your Child Become Calm, Engaged, And Focused--Without A Pill



Synopsis

This wise and informative guide applies Stanley Greenspan's much admired developmental approach to a very common disorder. In his distinctive and original view, ADHD is not a single problem, but rather a set of common symptoms that arise from several different sensory, motor, and self-regulation problems. As in his highly successful earlier books and in his practice, Greenspan emphasizes the role of emotion, seeking the root of the condition and rebuilding the foundations of healthy development. Overcoming ADHD steers away from the pitfalls of labeling, or of simply stamping out symptoms with medication, and demonstrates Greenspan's abiding belief in the growth and individual potential of each child.

Book Information

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Average Customer Review: 4.3 out of 5 stars [See all reviews](#) (11 customer reviews)

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Customer Reviews

Author Greenspan's book Overcoming ADHD promises parents, caregivers, and teachers, guidelines for helping children with ADHD--without resorting to pills--the current solution to help such children today. He feels that all too often those who demonstrate ADHD behaviors are put in programs that do not focus on the underlying reasons for a child's difficulty with self-control, paying attention, and remaining focused. Included in his list of influences affecting "attention" are cultural expectations and possible biological factors. Most importantly, however, Greenspan feels that careful consideration of any child's strengths and weaknesses is the most beneficial way to construct a realistic program for a child who appears hyperactive and inattentive. In its earliest pages, Overcoming ADHD discusses seven key factors of an interceptive approach. If after a twelve

month period of serious attempts to improve these factors, only then should a parent or caregiver seek further professional help for a suspect child. So often, it might seem easier to "give the kid a pill" rather than consistently try to move along the spectrum of steps listed below. An ADHD Person Can Learn How To:

1. Move their body and its parts in a way that is age-appropriate.
2. Remember the sequence of thought patterns and activities.
3. Reduce over-activity or under-activity.
4. Think more reflectively.
5. Feel self-confident enough to lower anxiety.
- 6.

Right from the book's outset, Greenspan presents what the current reviewers' hope and believe will be for its readers, a new way forward in helping children with ADHD and ADD diagnoses. Prior to the prescription and establishment of any psychoactive medicine regime, Greenspan argues for, and illustrates with successful case studies, the exploration of Piagetian-like activities set in a developmental-intervention program. Similar to those found in multi-month PII Brain Spa Programs, Greenspan introduces several customisable task/activity options to suit any child's target-set of strengths and weaknesses, for any family coping with an ADHD/ADD-diagnosed child. Parents are encouraged here to initially focus upon the identification, skill-development and monitoring of core indicators of developmental-behavioural anomaly, including age-normative motor planning, sequential coordination(s), and visual-spatial processing skills. Once such core behavioural differences have been clearly identified, Greenspan's proposed 'cognitive-scaffolding' activities/interventions may be introduced to the child's routine to assist with the generation of more context-appropriate behaviours, rather than immediately opting for managing the largely unwanted behaviours typically associated with ADHD/ADD by the uncritical use of psychoactive drugs following diagnosis. The author's propose in waiting to see the results of at least six months of continuous intervention/activity practice, before agreeing to offer their child pharmaceutical treatments (which may be proposed by some practitioners as a way to treat a child's behavioural symptomology, but not the cause(s), of undesired behaviours identified at initial clinical presentation).

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