



WHAT WE KNOW

Coaching for Adults with AD/HD

Coaching is a relatively new field that has become more prominent in recent years. In general, coaches help individuals reach their fullest potential in life. As a specialty within the broader field of coaching, AD/HD coaching has emerged among the many approaches, services and treatments for AD/HD. This sheet will:

- describe AD/HD coaching and how it may help
- discuss who may benefit from AD/HD coaching
- describe the credentialing process available to AD/HD coaches
- provide practical suggestions for selecting a coach

COACHING IN GENERAL

Coaching is an emerging field that seeks to help individuals accomplish their life goals. The coaching relationship is intended to help people achieve better results in their lives: academically, professionally, socially, or in any area of life they want to improve. Through individualized assistance and support, coaches help people concentrate on where they are now, where they want to be, and how they can get there.

Currently, there is no published research evaluating the effectiveness of coaching as an intervention for individuals with AD/HD. There is anecdotal evidence (reports based on individual cases rather than a research study) suggesting

that coaching may be a helpful supplement to other interventions for which there is a more established evidence base. This sheet and the suggestions it offers are based upon the emerging standards of coaching practice and the principles of behavior change, not on scientific literature.

WHAT IS AD/HD COACHING?

Although the concepts of professional and personal coaching have been around for several decades, the concept of AD/HD coaching was first addressed in the 1994 book, *Driven to Distraction*,¹ by Edward M. Hallowell, M.D., and John J. Ratey, M.D.

AD/HD coaching seeks to address the daily challenges of living with AD/HD. A coach helps people with AD/HD carry out the practical activities of daily life in an organized, goal-oriented, and timely fashion. Through a

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close partnership, an AD/HD coach helps the client learn practical skills and initiate change in his or her daily life. A coach may help an adult with AD/HD:

- Maintain focus to achieve identified goals
- Translate abstract goals into concrete actions
- Build motivation and learn to use rewards effectively

Through regular interactions, coaches learn how the symptoms of AD/HD play out in the daily lives of their clients and then provide encouragement, recommendations, feedback, and practical techniques to address specific challenges. They may offer reminders, raise questions, or suggest time management methods (see the related What We Know sheets on time management and organizing the home and office). Coaches ask questions to help the client come up with strategies and act on them. Examples of such questions are:

- What can you do about it?
- How can you motivate yourself to take action towards this goal?
- When must this action be completed?
- What steps have you taken already, and when will you take the remaining steps?

Regular meetings and check-ins are an essential part of the coaching process. These sessions can be conducted in person, by phone, or by e-mail, depending on the client's preference. However, before the coaching process begins, the client and the coach should have an initial session that addresses issues such as client needs, expectations of the client and of the coach, and fees and payments (coaching services are often not covered by traditional health insurance). The first coaching session is typically an in-depth, 1-2 hour meeting to develop a step-by-step plan for identifying and achieving the client's goals.

WHO BENEFITS FROM AD/HD COACHING?

AD/HD coaching may be beneficial particularly for adults with AD/HD. It is important that clients are ready for coaching before they commit to the process. Clients are ready for coaching when they are able to admit that they have a problem, can spend the time necessary to create strategies for improving their behavior, and can adhere to those strategies to the best of their ability.

OBSTACLES TO EFFECTIVE COACHING

There are several issues that can complicate the coaching process and often require a referral to a medical or mental health professional:

- The client can not use simple self-management or organizational strategies to achieve goals, despite the coach's resources and reminders.
- The client has a co-existing psychiatric condition such as depression, bipolar disorder, anxiety disorder, substance abuse, or personality disorder.
- The client has stressful life circumstances such as marital problems, divorce, or death of a loved one.
- The client has a serious physical illness or other chronic medical condition.

Under such circumstances, the coach should work collaboratively with the medical or mental health professionals involved in the client's care. In such cases, the client may benefit from the addition of traditional treatments such as medication and psychological therapy.

AD/HD COACHING CREDENTIALS

There is currently no specialized schooling or licensing required to become a coach or a coach who specializes in AD/HD. AD/HD coaches often have different educational and professional backgrounds and diverse knowledge about AD/HD. Many coaches, including those who work with individuals with AD/HD, seek credentialing through the International Coach Federation (ICF), an international association of personal and business coaching that is evolving as the principal governing body for this field. General requirements and more information on guidelines and accredited coach training programs can be found on the ICF Web site (www.coachfederation.org). The ICF recognizes AD/HD coaching as a special area of expertise. Because coaching is a very broad field with many areas of subspecialty, adults with AD/HD should

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ask potential coaches about their experience with AD/HD and coach-specific training in AD/HD as well as their credential status.

Because the coaching field is still in its infancy, much remains to be done to establish practice standards and ethics. In 2002, a task force of coaches organized by the Attention Deficit Disorder Association (ADDA) wrote “The Guiding Principles for Coaching Individuals with Attention Deficit Disorder.”²² This document proposes the essential elements of AD/HD coaching, establishes standards, and outlines ethical principles to help people better understand AD/HD coaching and field standards.

The Institute for the Advancement of AD/HD Coaching (IAAC) was formed late in 2006 to advance the field of AD/HD coaching through the development and delivery of credentialing and certification for AD/HD coaches worldwide. This adds a new option for those wishing to become AD/HD coaches, and offers people with AD/HD new options when seeking coaches. For more information, go to www.adhdcoachinstitute.org/.

FINDING AND CHOOSING AN AD/HD COACH

Step One. Coaching is a collaborative process so it is important to find the right match in a coach. First, ask yourself the following questions before contacting prospective coaches:

- Is it important that my coaching sessions be face-to-face? (If so, look for a coach who is geographically close and offers this as part of a service package. Many coaches conduct the initial session in person, and then do weekly check-ins by phone and/or e-mail.)
- Do I prefer to be coached by a man or a woman?
- In addition to the coach’s knowledge of AD/HD, would I benefit from a coach who has a background in business, academia, or gender issues?
- Am I looking for someone who has expertise in an area such as organization or family issues?
- Do I want someone who has a lot of energy, or someone who takes a more subtle approach?
- Is a sense of humor important? Would a more serious person make a better match?

Step Two. Compile a list of potential coaches with training in AD/HD coaching and interview them, using the following types of questions:

- How long have you been a coach?
- What is your approach to coaching adults with AD/HD?
- How many clients with AD/HD have you coached?
- Have you received formal training in coaching? Did this include certification or credentialing of any kind?
- What coach training courses or conferences have you attended? Were they AD/HD-specific?
- Are you involved in any local professional coaching groups? Are they AD/HD-related?
- In what ways are you contributing to the development of the field of AD/HD coaching?
- What is your confidentiality/privacy policy?

Step Three. Take notes on each coach’s answers to these questions as well as your own overall reaction to the personality and style of each coach.

Step Four. Review all of the information and select the coach that best meets your needs.

COACHING IS NOT THERAPY

Coaches deal with problems in everyday living such as organization, time management, memory, follow-through, and motivation. Coaches focus on *what*,

when and how—never why. They are not trained to address psychiatric, emotional and interpersonal problems, which should be addressed by mental health professionals. Through formal educational programs, mental health professionals (e.g. psychiatrists, psychologists, clinical social workers, psychiatric nurse practitioners, marriage and family therapists) are trained to diagnose and treat mental health issues such as depression, anxiety, personality disorders, and interpersonal difficulties. They also must have a license to practice. Therapists work primarily through face-to-face contacts while many coaches also work by telephone or e-mail.

Depending on an individual's diagnosis, the mental health professional may employ a number of psychotherapeutic approaches such as cognitive-behavior therapy and behavior modification. The goal of therapy is generally to help clients address the symptoms and problems that brought them to therapy in the first place. Often, mental health professionals take a "problem-centered" approach to therapy rather than a "client-centered" approach; treatment lasts until the specific problem is no longer causing significant impairment and disruption to the client.

If an adult with AD/HD needs assistance primarily in dealing with the practical challenges in daily life, a coach may be a good person to help. If the adult needs assistance with emotional, psychiatric, or interpersonal problems, then a therapist should be consulted. If an adult with AD/HD needs both types of assistance, it may be helpful to select a coach and a therapist, and ask them to work with each other.

SUMMARY

Although the field of coaching is still developing and does not yet have a research base that demonstrates its effectiveness as an intervention for adults with AD/HD, many adults find that having a coach who is familiar with AD/HD can be helpful in facing the challenges of daily life. Individuals who need more information about coaching should consult the resources listed below. Because there is a great need for research evaluating the effectiveness of AD/HD coaching, coaches and other professionals are strongly encouraged to pursue research on this emerging form of support for those dealing with AD/HD-related challenges.

REFERENCES

1. Hallowell, E.M., & Ratey, J.J. (1994). *Driven to distraction*. New York: Pantheon Books.
2. ADDA Subcommittee on ADD Coaching. (2002). *The ADDA Guiding Principles for Coaching Individuals with Attention Deficit Disorder*. Hyde Park, IL.: Nancy Ratey & Peter Jaksas (Eds.).

SUGGESTED WEB SITES

International Coach Federation, www.coachfederation.org

CHADD Directory of Professionals, Products & Services (coming in February 2004)

SUGGESTED READING

Quinn, P.O., Ratey, N.A., & Maitland, T.L. (2000). *Coaching college students with AD/HD*. Silver Spring, MD: Advantage Books.

Quinn, P. & Ratey, N. (Eds.). (In press). *AD/HD throughout the lifespan: Research, diagnosis and treatment*. South Easton, MA: S.C. Publishing, Inc.

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Please also visit the CHADD Web site at
www.chadd.org.