



Accept – don't reject

**15th Anniversary
Greetings from the
Attention Deficit &
Hyperactivity Support
Group of Southern
Africa.
(ADHASA)**

Keeping up with ADD

May 2004

Company not for gain
93/003639/08

P.O. Box 3704
Randburg
2125

Tel: Sandy (011) 793-2079
Fax: (011) 793-4790
E-mail: rscox@icon.co.za



Counselling hours:
Wednesdays and Fridays
08h00 to 13h00
ADHD National Office
Delta Park School
Blairgowrie Tel: (011) 888-7655

DEPRIVING MY CHILD?

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"Everyone else has sweets, how can I deprive my child by taking them away from him?" Our children eat far too many sweets and sugary treats, but no one is suggesting that they avoid them altogether!

Far more important is the concept of depriving the child. What is he actually being deprived of? Is it the opportunity to feel like one of the other children as he eats additive laden food and then excluded because his behaviour is unacceptable; or teased because he disrupts the classroom OR is it the opportunity to feel healthier; the opportunity to feel more comfortable within himself; the opportunity to control his outbursts and have better social interaction and maybe a best friend; the opportunity to settle down and concentrate; or is it the opportunity to tackle and complete his



homework without the usual family upheaval?

When people first approach me for assistance I seldom tell them of the range of possible improvements because they would not believe me – but these, and many others, are the type of improvement I see on a regular basis. We can never predict what improvements to expect, nor how many there will be – each child is different and it depends upon the extent to which we are meeting the needs of his unique body. It also makes no difference if the child is on medication or not – we still see improvements!

BUT DIET DOESN'T WORK FOR MY CHILD!

Some children show improvement almost immediately, when **most** artificial colourants and flavourants are excluded from the diet; but many children only respond when **all** the offending ad-



ditives are removed. Sometimes just one wrong thing can keep a child in a state of continual reaction – and we think that

the child is just being difficult and uncompromising! Very health conscious parents have admitted that they were initially concerned when I made so few changes in their child's diet, but that they were amazed at the unbelievable

range of improvements in the child. Sometimes they have already covered all the dietary bases.

Sometimes parents are doing all they can to provide the correct foods for the child, but he buys unsuitable products at the tuck shop or swaps with his friend. Once you understand 'why the diet' and the basics of dietary intervention, make it a family



**15 years of service
to the community!!**

These solutions are for all children. So please send this E-mail to anybody who you feel could benefit from it.



project for improved health all round rather than focusing on the unfortunate child. Explain to the family that healthier eating will benefit everyone and ask for their input and suggestions. When children start to feel better within themselves they often take responsibility for their own diet. Encourage your school to upgrade their tuck shop so that they at least provide suitable snacks and treats.

Improvements noted in children are often attributed to other causes such as "he is finally maturing"; "it is the new school", or "I'm so keen to see results in him, that I'm already imagining them". Such statements may well be true but we frequently find symptoms returning to previous levels when the additives come back into the diet.



We are all human and may only see what we are looking for. Parents have followed all the dietary principles and returned to me stating that dietary intervention does not work for their child. A few questions have yielded improvements that were not even noticed such as better toilet habits, more adventurous eating habits, more efficient dressing in the early morning, reduced aggression, improved reading ability. Medication may still be prescribed for the child but that does not mean that the diet did not work! Many people with children on medication approach us for help because they need extra assistance, and diet often makes the difference for them.

WHAT IS THE DIETARY STORY?

The first step is to raise essential fatty acid levels in the body by supplementing with fatty acids and co-nutrient vitamins and minerals, providing fatty acids in the normal diet, and eliminating anything that prevents the body from using the fatty acids. This means avoiding certain additives in our food:

It is essential to avoid products containing artificial colourants and artificial flavourants (often listed on the labels as 'permitted' or 'approved')

as well as avoiding anti-oxidant preservatives and hydrogenated vegetable oil – and companies are becoming increasingly aware of our requirements. Just reading food labels will show that natural and nature identical flavourants, natural colourants and unhydrogenated vegetable oils are being introduced to replace the unwanted ingredients. Products with these ingredients are less likely to cause a reaction ... as long as 'suitable' sweets and other sugary/refined flour treats are eaten in moderation and never on an empty tummy!

Beware of confusing labelling. 'Natural colourants, no preservatives' does not mean that the flavours are suitable. In the same way, 'nature-identical flavourants, no preservatives' does not mean that there are no artificial colourants in the product. If it doesn't mention preservatives, find out if there are and what they are. Avoid any product if you don't understand the labelling. If you have any doubts about a product, contact the Support Group on 011-888-7655, Wednesdays and Fridays. Also contact us if you would like to know more about understanding labels, or if you would like a list of foods unlikely to precipitate a reaction in your child.

The second step is to prevent blood glucose levels from shooting too high or dropping too low.

The importance of starting a child's day with a balanced meal to provide a slow and steady stream of glucose to the brain is most important if the child is expected to concentrate and cope at school. A breakfast of egg on toast with slices of tomato (if tolerated), or a spoonful of mince on toast (or porridge), can keep him going with his best concentration at least until the first break. To maintain this concentration throughout the day, the child needs a balanced lunch and supper with balanced snacks in between.



A balanced meal consists of a single portion of protein combined with lots of slow-releasing carbohydrates. Sugar, wheat flour, rice flour, sticky rice and mushy potatoes are all fast releasing carbohydrates and should be part of a

balanced meal and not eaten on their own. For further details, contact the support group, or refer to pages 97 and 98 of my book "Hyperactivity and ADD – caring and coping" (second edition 2002). Alternatively visit the Glycaemic Index Foundation Website at - www.gifoundation.com. Please note that their lists do not exclude the additives we avoid.

IS THERE ANYTHING ELSE I NEED TO KNOW?

When I first started the Support Group in 1989, it was a different world. People thought I was totally crazy and suitable products were very difficult to find. There have subsequently been many improvements and far more is known about the subject than in those early years of the Attention Deficit and Hyperactivity Support Group. No matter what the level of our knowledge about dietary intervention and ADD in general, there is always more to be learnt. There is also new information coming in all the time. I firmly believe that as we come to understand the dietary needs of our bodies and we establish healthier eating habits, we will all benefit. And our children will have fewer difficulties.

If you are just starting down this road, contact the Support Group for assistance. My attached "Dietary Sheet" will help you get started, refer to my book for more in depth information. In addition to 'Hyperactivity and ADD – caring and coping' there are also Patrick Holford's excellent

WHAT IS THE DIETARY STORY?

- **The first step is to raise essential fatty acid levels**
- **The second step is to prevent blood glucose levels from shooting too high or dropping too low**

books on Optimum Nutrition, and Optimum Nutrition for the Mind. Attend his seminars when he comes to South Africa. There are books on Essential Fatty Acids – have a look at Dr Barry Sears' book on the Omega "Rx Zone" or Udo Erasmus' book "Fats that Heal, Fats that Kill". Order your own 'E for additives' by Maurice Hanssen so that you understand what additives are in your food. Some of these books will soon be available in our Support Group Library.

Become an expert in the field. Everybody wins – most of all, you and your family!

Heather Picton

Support Group Happenings:

15TH ANNIVERSARY SEMINAR NEWS!

ADD/Hyperactivity is often linked to tremendous trauma in the household, and at school, but a little bit of help can change family dynamics completely! Our Seminar, on 29 May and 5 June, could help caregivers and parents to do just that!!

We have held many Seminars in the past, but are particularly excited about this one as it is to be held at Wits, **in collaboration with the University of the Witwatersrand Special Education Division**. It is also the first Seminar we are holding since National Office of the Support Group returned to Johannesburg after spending five years in Pretoria.

I recently attended the ADDISS International Seminar on ADHD in England and so will be sharing information from the event.

We still have a few seats left and would really appreciate it if you are able to advertise our Seminar on your website or advertise it in any other way. Bring yourself, bring your school teacher, your mother or anyone who plays an important role in your child's life. Maybe you will be the winner of our 15th Anniversary Celebratory Hamper of foods – of course they are all suitable for our ADD children!



The two Seminar attachments give all details of speakers, times, dates cost etc. - I have often wished I had a fraction of my current knowledge on the subject when my children were at school. Their lives could have been so much easier!!!



SUPPORT GROUP NEWS!

After fifteen years of service to the community it is time to re-examine the work we do, and so, in many ways, we are re-launching the Support Group. In addition to our normal activities, and upgrading current services and information, we are sending out "Keeping up with ADD" to anyone who requests it; we run training courses for volunteers; we teach domestics to cook for families with ADD, and are in the early stages of programs to help people in disadvantaged areas dealing with the overwhelming challenges of ADHD. Phone us if you would like further information about any of these activities.



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VOLUNTEERS NEEDED!

Can you help us?

No experience needed – we offer full training.

One morning a week of your time enables us to provide a better service to the ADD/H community. As you help others, you inevitably gain greater skills for helping your own family.

Can you afford not to come?
Please contact Sandy at 011-793-2079



**ATTENTION DEFICIT AND HYPERACTIVITY
SUPPORT GROUP OF
SOUTHERN AFRICA
- NATIONAL OFFICE -**

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Randburg
2125

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E-mail: rscox@icon.co.za

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Accept – Don't reject

MEMBERSHIP

APPLICATION FORM - Annual Subscription R85-00

PLEASE PRINT

NAME:

POSTAL ADDRESS:

.....CODE:.....

TEL: (h) (.....)(w) (.....).....CELL.....

FAX NO: (.....).....E-MAIL.....

NAME OF CHILD/MEMBER:.....

DATE OF BIRTH:/...../.....

SCHOOL:

SIBLINGS: (Names & Ages)

1 2

3 4

OCCUPATION: Mother

Father

SIGNATURE: DATE:/...../.....

For confirmation of application kindly deposit into ABSA Sinoville Branch, Saving Account No. 907-161-3544.

- Please make all cheques payable to: ADHD Support Group – National Office (Jhb)
- Cash payments can also be made into this account
- Please complete the deposit reference blocks below your signature with your printed full name
- Please fax your application form together with the bank deposit slip to (011) 793 4790 or 793 2079.
- Alternatively, post this form, together with your remittance to PO Box 3704 Randburg 2125.