Lesley University DigitalCommons@Lesley

Mindfulness Studies Theses

Graduate School of Arts and Social Sciences (GSASS)

1-15-2024

Mindfulness Practices for Adults with Attention-Deficit/ Hyperactivity Disorder

Vince Banh vbahn@lesley.edu

Follow this and additional works at: https://digitalcommons.lesley.edu/mindfulness_theses

Part of the Social and Behavioral Sciences Commons

Recommended Citation

Banh, Vince, "Mindfulness Practices for Adults with Attention-Deficit/Hyperactivity Disorder" (2024). *Mindfulness Studies Theses.* 95. https://digitalcommons.lesley.edu/mindfulness_theses/95

This Thesis is brought to you for free and open access by the Graduate School of Arts and Social Sciences (GSASS) at DigitalCommons@Lesley. It has been accepted for inclusion in Mindfulness Studies Theses by an authorized administrator of DigitalCommons@Lesley. For more information, please contact digitalcommons@lesley.edu, cvrattos@lesley.edu.

Mindfulness Practices for Adults with Attention-Deficit/Hyperactivity Disorder

Vince Banh

Mindfulness Studies, Lesley University

January 2024

Dr. Melissa Jean & Dr. Andrew Olendzki

Abstract

This creative thesis project is intended to guide mindfulness instructors in offering a curriculum meant to instruct adults with attention-deficit/hyperactivity disorder (ADHD) as well as potentially their families, teachers, and healthcare professionals in the use of mindfulness practices and principles to better manage the effects of ADHD on the adults' personal and professional lives. The thesis is composed of a literature review and academic rationale discussion for the applicability of the principles and practices provided as well as a lesson plan and resources for the curriculum such as a syllabus, class presentation slides, and guided audio meditation recordings. The curriculum is meant to take place two times a week in group sessions for a total of four weeks.

Table of Contents

ABSTRACT	ii
1. INTRODUCTION	1
2. REVIEW OF LITERATURE	2
3. RATIONALE	13
4. CONCLUSION	
5. REFERENCES	
APPENDICES	
A. SYLLABUS	30
B. CURRICULUM LESSON PLAN	
C. GUIDED MEDITATION AUDIO FILES	54
D. CLASS PRESENTATION SLIDES	55

Mindfulness Practices for Adults with Attention-Deficit/Hyperactivity Disorder

Attention-deficit/hyperactivity disorder (ADHD) is a highly prevalent and globally impactful condition which exerts lifelong challenges on learning and functioning among individuals living with the disorder. The various subtypes of ADHD can all cause varying difficulties in many critical personal processes including but not limited to attentional regulation, interpersonal communication, and executive functioning; with all these potentially culminating into observable detrimental consequences for the lives of those experiencing the immediate direct symptoms of the disorder in addition to the many highly comorbid mental health challenges known to occur alongside ADHD. Furthermore, since ADHD exhibits such strong influences on many processes critical to interpersonal function such as auditory processing challenges, issues coordinating working with others in a professional setting, and difficulties with internal and socioemotional regulation, it also can present substantial personal and professional challenges for the people who make up the support network of individuals living with ADHD including family, friends, healthcare professionals, educators, and mental health counselors.

This paper is written with the intention of presenting the underlying concepts, validating literature, design, and implementation of a mindfulness-based curriculum designed to support adults with ADHD. It begins by discussing preliminary fundamental information regarding ADHD and its treatments and management strategies as well as outlining mindfulness concepts and practices and how they can be implemented in relation to ADHD. Topics covered include the neurophysiology of ADHD, cognitive-behavioral management of symptoms, personal mindfulness-based practices for individuals and families with ADHD, and possible avenues for implementation of mindfulness for ADHD care professionals. These subjects inform the

foundational basis for the selection and academic validation of the concepts and practices which the curriculum is built upon. The rationale for the curriculum design is presented following these discussions and describes the reasoning behind aspects of the curriculum through an outline of all underlying concepts introduced within each program session. Based on these discussions, mindfulness-based training for ADHD is shown in this thesis to be a worthwhile therapeutic intervention which should be considered alongside traditional ADHD management interventions due to the unique effects of mindfulness practices and its approaches to attention training and the curriculum presented in this paper is a comprehensive and thorough example of a program real classes implemented in the future can be based on.

Review of Literature

Characteristics of ADHD

ADHD is typically characterized by a multitude of symptoms including problems maintaining mental concentration, unregulated hyperfocus, extreme physical hyperactivity, problems with both short term and long-term memory, difficulties centered around planning and organization, impulsive thoughts and behaviors, and various learning disorders. Moreover, many individuals diagnosed with ADHD also have at least one commonly co-occurring mental health condition, consisting of various psychiatric, substance, and personality disorders. With rates of diagnosis increasing annually, a sizable percentage of the world's population is impacted by ADHD on a continual basis which can exert harmful results on the professional, social, and academic lives of those diagnosed and their loved ones. Underachievement and demotivation are common issues since ADHD is often associated with deficiencies between actual measured capability in terms of grades or work performance compared to potential ability, making the condition a major contributor to diminished personal success outcomes for those struggling with the long-term effects of the condition.

Current Treatments

Currently available commonly used first line treatment and intervention modalities focus on managing attentional and hyperactivity symptoms through either stimulant medication or cognitive behavioral modification, or a combination of both, in order to increase attention span, increase mental alertness, foster emotional and physical calmness, strengthen emotional wellness, and reinforce daily living and executive functioning capabilities. Non-medication treatments may be preferable for some patients with ADHD since medication may not be effective enough on its own, may not always be readily available, or due to the wish to avoid the common side effects or logistical requirements associated with a regimen of stimulant ADHD medications (Janssen et al., 2017).

Patients undergoing medication treatment for ADHD still may benefit greatly from complementary non-medication interventions, especially since the medication onset of action does eliminate throughout the day and some patients experience a more intense rebound or crash of ADHD symptoms immediately upon the medication wearing off. Due to the need for more varied and effective therapeutic non-pharmacological interventions aimed at the ever-increasing number of individuals diagnosed with ADHD, exploration of novel scalable modalities could be highly effective in helping to identify optimized treatment plans for the many differing patient profiles that exist within the ADHD patient population. Clinically tested psychological and socioemotional interventions, which address the immediate symptoms of inattentiveness and hyperactivity while simultaneously equipping patients with ADHD with the emotional regulatory skills needed to successfully manage comorbid symptoms and dysfunctional life challenges, are

of unique potential and necessity due to the relative ease of packaging the differing overall goals of the treatment plan into one directly targeted treatment; both for patients on medication as well as though who choose or must forego the taking of amphetamine-based stimulant medications.

Mindfulness Based Practices and ADHD

Mindfulness practice involves targeted engagement of psychocognitive processes utilized to develop present moment awareness and nonjudgmental acceptance towards the practitioner's experience. This is meant to foster increased attentiveness and mental wellbeing within the practitioner's internal mental and emotional states as well as towards their external environment, life events, relationships, conditions, and circumstances. Because of its observed utility in developing these qualities amongst experienced practitioners, mindfulness training is a practice that has gained growing interest within varied academic fields of study as a potential alternate method for management of ADHD symptoms as both a complement or as an alternative altogether for common primary treatment options, mainly stimulant medications which the use of carries other important concerns and side effects that need to be considered before a medication regimen is initiated.

Utilizing relaxation and meditation techniques to achieve healthy cognitive rationalizations involving acceptance of the practitioner's observable experience, mindfulness practice has often been evaluated in research for its practitioners' usage of the training to develop increased concentration, calm, and physical and mental wellness; qualities which when strongly cultivated can have an observably mitigating effect on the symptoms of ADHD. The existing available academic literature on the subject suggests a great deal of evidentiary support for the use of mindfulness practice's training processes as a potential complementary intervention for ADHD as the various mindfulness principles and trainings can be directed towards a spectrum of

ADHD symptoms. Potential benefits of mindfulness practice of particular note in relation to ADHD symptoms include the increase of attentional capacity via focused awareness concentration training, learning to actively and volitionally downregulate the nervous system through relaxation practices to curb emotional reactivity, reducing impulsivity and hyperactivity symptoms through sitting meditation and stillness practices for the hyperactive and combined subtypes of ADHD, and developing emotional resilience by building mindful acceptance of a patient's challenges can help the user effectively cognitively process many of the emotional difficulties that accompany comorbid conditions associated with ADHD, such as depression, anxiety, and substance abuse. These cognitive and emotional regulation skills are highly applicable to improving function in the areas which patients with ADHD experience the most challenges. The ability to engage in proper emotional regulation has been identified in literature to play a huge role in the overall life success of ADHD diagnosed patients, especially considering the impact of severe psychiatric comorbidities which display combinatory detrimental effects on daily functioning when appearing alongside ADHD (Anker, 2018).

Neurophysiology of ADHD

Although the most noticeable observable characteristics of ADHD appear chiefly psychocognitive in presentation upon initial assessment, the pathological circumstances responsible for the appearance of the condition have legitimate neurophysiological and genetic bases for ADHD symptom progression. ADHD is known to display a high factor of genetic heritability, with many families often possessing multiple co-occurring ADHD diagnoses among extended family members. In a study on the effects of mindfulness training and psychocognitive education on short-term working memory in adults with ADHD, Bachman and the study authors state that potentially as high as 90% of ADHD cases display common DNA markers indicating

evidence for a genetic basis for the pathophysiological underpinnings of the condition (2018). The familial heritability characteristic of ADHD reinforces the evidence for the neurobiological basis of ADHD development while also highlighting the importance of psychological counseling and psychoeducation for nuclear family units when there is at least one immediate family member diagnosed with ADHD.

In a study by Gehricke et al., the study authors utilized statistical regression models of magnetic resonance imaging data collected from subjects to determine the sample correlation values between specific patterns of neurological brain structure formations with occurrence of ADHD diagnosis and appearance of symptoms of ADHD in both children and adults. Gehricket et al. found that observed clusters of ADHD symptoms were shown to be significantly correlated with changes in brain structure and density in addition to being significantly correlated with the occurrence of dysfunctional brain regions known to be implicated during the course of ADHD pathophysiology (2017). Noted patterns of higher intensity of ADHD symptoms experienced by sample patients within this study were correlated with reductions in size and function in the frontal lobe regions, temporal lobe regions, caudate nucleus structures, and cerebellum structures of the brains of the study subjects.

Existing literature shows high potential for increases in neuroplastic formation of new neuronal structures induced by mindfulness practice which, along with the current research on ADHD-directed mindfulness, suggests that mindfulness training could induce growth and beneficial structural changes to the neurophysiological components of the nervous system that are affected by ADHD such as the frontal and temporal lobes (Kirk et al., 2016). Childhood interventions in mindfulness could potentially mitigate serious long-term reductions in brain matter that may arise due to environment and trauma and would lead to better outcomes in terms

of maintaining neuroplasticity throughout life and preventing cerebral atrophy in these brain regions as early on as possible during the psychocognitive and neurophysiological maturation processes of human development.

In a randomized control study Schoenberg et al. collected electroencephalogram (EEG) data on adult ADHD patients prior to and following mindfulness-based cognitive therapy (MBCT) treatment in order to gauge its effects on electrical brain activity (2014). The EEG data collected consistently displayed increased activity in brain areas positively correlated with ADHD symptom incidence. This provides strong evidence that the pathophysiology of ADHD is neurobiologically based rather than being a purely psychological or personality-based condition since demonstrable physical changes within the brain can be identified within brain scans of diagnosed patients with ADHD. Since mindfulness has been studied for its capability to induce neuroplastic changes inside the biological neural networks of practitioners, the findings of this study suggest a great deal of potential for evidence that mindfulness practice can address the neurophysiological bases for the pathological underpinnings of ADHD symptomatology. As neurodivergent patient profiles are becoming more commonly recognized as having biological underpinnings by academics across fields of neurosciences and psychology, this discovery helps validate the need for a line of investigative inquiry which incorporates a neuroscientific approach to ADHD treatment.

Despite ADHD being named using the term "attention-deficit", the inability to maintain attentiveness for inattentive and combined type ADHD stems from dysregulation of attention rather than a lack of attentional resources. This is why individuals with ADHD often experience hyperfocus, a state of extreme concentration which occurs when the individual is highly invested in the subject or action they are engaged in and is unable to divert attention to any other external

stimuli. This happens because of dysfunction of dopamine pathways within our nervous system which are responsible for activation of our reward systems. In a paper on the link between ADHD and reward deficiency syndrome, Blum et al. state that allelic variants of dopaminergic genes cause inadequate expression of dopamine receptors leading to addiction, impulsive behavior, and compulsions (2008). The authors hypothesize that ADHD is a subtype of reward deficiency syndrome and there is growing outside evidence that mindfulness can stimulate release of dopamine to regulate mood disorder symptoms and simultaneously regulate attentiveness (Young, 2011). Conversely, overstimulation of dopamine pathways can also potentially benefit from the regulatory effects of mindfulness practice. This relationship between ADHD symptom progression and dopaminergic dysfunction could potentially explain the frequency of self-medication related drug abuse among patients with ADHD and ADHD comorbid conditions, most notably substance use disorder. This is of high concern because ADHD self-medication usually involves stimulant class drugs of varying legality ranging from legal and widely available such as caffeine pills and prescription amphetamine-based pharmaceuticals such as Adderall (amphetamine / dextroamphetamine) and Vyvanse (lisdexamfetamine) to higher scheduled controlled substances such as methamphetamine. The high comorbidity rate between substance use disorders and ADHD makes the risk of drug dependence a genuine concern when determining whether patients should be introduced to a prescription drug regimen of stimulant medication.

In a study by Silva et al. comparing dopamine transporter density in the corpus striatum of the brains of male adolescents with ADHD and substance use disorder with transporter density in those with ADHD and no history of substance use disorder, the study investigators observed that, on average, individuals with ADHD and substance use disorder had a significant reduction

in dopamine transporter density (2014). The significance of these findings is twofold in that the dopaminergic dysfunction seen in ADHD and substance use disorder further compounds the evidence for the role of the reward system in the development of ADHD and also that a widely available and easily accessible treatment modality that can also address issues centered around substance abuse and self-medication would be increasingly impactful from a public health standpoint for groups of individuals living with both ADHD and substance use disorder. To this point, in evaluating the use of mindfulness meditation in the treatment of substance use disorders and relapse prevention, Priddy et al. state that substance use disorders, much like ADHD, involve dysregulation of the process of reward learning and of executive functioning (2018). The authors conducted a meta-analysis of existing data on the use of mindfulness-based interventions for substance abuse issues in their literature review and provided strong validation for their potential for effective treatment of the disorder and prevention of relapse.

Cognitive-Behavioral Approaches

Concerning the cognitive behavioral aspects of ADHD, mindfulness practice appears to improve many areas of functioning that are observed to be deficient or fully dysfunctional as compared to threshold levels of function in neurotypical persons. People living with ADHD appear to score lower on trait mindfulness characteristics based on a study from Smalley et al (2009). This study investigates baseline trait mindfulness levels among individuals with ADHD and attempts to discern the effects of ADHD on mindfulness scores from natural individual variations in trait mindfulness due to personality. It was determined that ADHD patients score lower on mindfulness scales than control subjects within the sample population. Additionally, subjects with ADHD self-rated within the survey battery as higher in propensity for impulsive behavior, higher in executive and organizational dysfunction, and higher in potential for self-

actualization. The results suggest that mindfulness-based interventions hold potential for mitigation of ADHD symptoms and optimizing executive functioning and self-improvement. Similarly, in a study by Haydicky et al., a hybridized mind-body therapy based on mindfulness principles and mixed martial arts training was evaluated for effectiveness on improvement of executive functioning, social functioning, and internalizing behaviors among adolescent boys with learning disabilities and comorbid ADHD (2012). The intervention reported improvements in social defiant behavior and self-monitoring as well as reductions in anxiety among the various ADHD subtypes. Mind-body interventions (MBI) appear to be particularly beneficial for the hyperactive and combined subtypes due to the receptivity of implementation among individuals with hyperactivity symptoms but this study also shows that MBI's still hold great promise as a therapy for individuals with inattentive subtype as well for a spectrum of comorbid psychiatric and ADHD symptoms.

In a review of multiple studies looking at various MBI's including Yoga, Qigong practices, and mindfulness for children with ADHD by Herbert and Esparham, scores indicating higher executive function, increased attentiveness, and lowered hyperactivity were observed in the subject data following training (2017). Bachman et al. report that mindfulness training is associated with statistically significant increases in working memory in clinical randomized controlled trials as well as increases in the process of task performance based on functional magnetic resonance imaging scans of adults with ADHD following mindfulness and psychoeducation training (2018). ADHD targeted MBCT was looked at by Janssen et al. in a mixed methods study using qualitative and quantitative data based on observations on intervention effectiveness and self-reported scores on ADHD symptoms, general and executive function, mindfulness, self-compassion, and health scales (2017). The authors report significant

improvements in quantitative scores in each area among sample subjects and identified potential barriers to intervention effectiveness based on the qualitative feedback from subjects. Additionally, patients in the study reported feeling benefit from the support of mindfulness trainers due to the direction and mindful communication they received from the teachers as well as the shared group support of their fellow mindfulness classmates.

Mindfulness Based Interventions for the Home and Classroom

Building upon the evidence for the value of communal and group mindfulness practice as well as support for the prospect of teaching mindfulness-based practices to parents of children with ADHD, many of whom could potentially have undiagnozed ADHD themselves due to its familial genetic origins, van der Oord, Bögels, and Peijnenburg discuss in their paper the use of mindfulness training for younger ADHD patients alongside concurrent instruction in mindful parenting for their parents (2012). The authors observed beneficial changes in ADHD and oppositional defiant disorder symptoms among the children as reported by their schoolteachers, ADHD symptoms in parents, stress related to parenting, reactivity in parents, parental permissiveness, and mindful awareness among parents and children following mindfulness trainings as compared to a waitlist control group. Miller and Brooker describe the effects of an 8week course in mindfulness-based stress reduction on stress, depression and anxiety symptoms, and mindfulness among a sample group of parents and teachers of children with ADHD (2017). Participants stated they felt less stress, anxiety, and improved mindfulness following the training. The training of teachers and its consequent results provides validative support for a broader perspective on how to educate students with ADHD which considers the circumstances of their ADHD diagnosis.

In a paper discussing the need for inclusive dialogue support from educators in Poland for their students with ADHD, Al-Khamisy states that education of ADHD diagnosed students should take a wide-encompassing integrative approach which examines the need for emotional and executive support rather than placement into special needs and learning-disabled programs (2015). Educational dialogue plays an important role in emotional regulation, behavioral regulation, and acceptance among students, making it so that teacher training in mindful communication and insight dialogue would benefit highly from combination with student mindfulness training. In Herbert and Esparham's review of MBI's for ADHD, one study showed benefits in attentiveness, functioning and behavior, stress, parenting ability, and mood among children with ADHD when mindfulness training was employed for both parents and teachers alongside training for the children (2017).

Mindfulness Based Interventions for Clinicians and Healthcare Professionals

Because the presentation of ADHD symptoms and long-term patient outcomes can vary widely across age and gender and also because underdiagnosis is prevalent within communities with disadvantaged and marginalized racial and socioeconomic backgrounds where access to care resources are already severely lacking, it is extremely important to recognize the impact of non-dominant intersectional societal identities on diagnosis rates and quality of care. It is critical for equal opportunities for diagnosis and for quality of care that parents and healthcare workers are better able to recognize the signs of ADHD and reduce the impact of their own implicit biases which make proper diagnosis challenging. Clinicians and educators could potentially utilize mindfulness to better be able to train patients as well as mindfully observe to achieve more inclusive diagnoses. The cultivation of mindfulness principles such as mindful awareness and mindful social engagement for those responsible for the care of individuals with ADHD can

be highly impactful in optimizing the diagnostic process of identifying the condition when the patient is a person of color, non-cis gendered, or socioeconomically disadvantaged as clinicians and school staff can become better at recognizing the beginnings of ADHD symptoms among individuals with ADHD through heightened vigilance and awareness to the patient's background or circumstances and working accordingly (Ginsberg et al., 2014). These skills become even further useful when creating a care plan for patients of differing backgrounds, races, and genders that considers the unique needs of these patients that arise as a function of their intersectional identities (Ramtekkar, Reiersen, Todorov, & Todd, 2010; Morgan et al., 2013).

Rationale

The mindfulness-based practices were selected for the ADHD targeted curriculum for adults presented here based on the purposes of allowing students and those in their support networks to develop a better understanding of their relationship to ADHD and reduce its effects on their lives. As ADHD is becoming better understood as a dysregulation of the neurobiological underpinnings of cognitive, behavioral, and emotional processes, this curriculum has curated selected practices aimed at allowing students to cultivate deeper regulatory skills on emotion, attention, and executive functioning. Students will be trained in developing deeper trait mindfulness, cognitive presence, focus and concentration, emotional calm and physical tranquility, emotional regulation, impulse regulation, mindful productivity, emotional acceptance and non-judgment, stress management, and organizational skills through the group practices presented in class and the individual practices provided to students for at-home practice. These traits and skills have been demonstrated in the academic literature to be positively influenced by mindfulness practices which are of noteworthy applicability to the concerns and challenges of adults living with ADHD. Specific meditation practices presented in the curriculum include awareness of breath meditation, body scan practice, walking meditation, informal mindful presence, concentration practice, noting/labeling, compassion meditation, and intention setting/visualization practices. The practices are presented in an order which is meant to build upon itself until students can apply the practices and their lessons to their daily lives and better mitigate the consequences of their ADHD symptoms. Students will be expected to develop more focus and resistance to external attention drawing stimuli through concentration and noting practice, trait mindfulness through informal practice, emotional regulation through grounding and compassion practices, and better time management and deeper executive function through intention setting and visualization practices.

Curriculum Design

The curriculum was designed in an order of content which is meant to best complement the way individuals with ADHD can pay attention and manage hyperactivity and then introduces additional practices which steadily combine to reinforce deeper attentional capabilities and heightened capacity to resist the urges of physical hyperactivity impulses. The first class session starts off with introductions and an icebreaker activity among the instructor and students in order to allow them to become acquainted with each other since being a part of a meditation community (or the Buddhist term *sangha*) can be crucial to the development of a complete mindfulness practice for many practitioners due to the relational aspects of mindfulness philosophy as well as due to allowing the space and opportunity for students to develop and strengthen their practices alongside each other and provide support amongst themselves, utilizing their cohort as a protective factor in their efforts at cultivating mindfulness. Following this, students are introduced to fundamental concepts of mindfulness including the definitions of mindfulness as a universal human trait, as a practice, and as a philosophy derived from Buddhist

teachings. Next, important background information on the ways in which ADHD can affect life and well-being and what role engaging in mindfulness practice can play in managing ADHD symptoms and comorbidities. This is important so that students have accurate expectations for the role that ADHD targeted mindfulness training will play in their lives and receive guidance for how the curriculum will progress to maximize the benefit of the training and orient students on how to approach the learning process for the lesson content. A section of the session's lesson plan is devoted to background information on the specific symptoms of inattentiveness and hyperactivity since these represent the most immediate overarching aspects of the various types of ADHD. This information is intended for students to become more aware of ADHD symptoms from a depersonalized perspective.

The first meditation practice selected for the class to learn and practice together was the body scan meditation which was chosen as the initial practice to start with rather than sitting awareness of breath as is common in most mindfulness curriculums because utilizing the sensations of the body can accommodate individuals who are prone to experiencing physical hyperactivity as well as those prone to mind wandering when asked to anchor their attention to their internal cognitive and emotional activity. Appointing one's bodily sensations and physical presence as the appointed meditative focal point is intended in this context to allow an accessible entry point for individuals with ADHD to engage in the requisite processes needed to develop consistent awareness of where their attention is aimed at any moment and the capability to better recognize and manage ADHD hyperactivity impulses. Following each group guided meditation session, the class will be given the opportunity to share feedback with the instructor and the rest of the class regarding the experience of the meditation to further establish interpersonal relationships among the *sangha* and provide guidance from the instructor and fellow classmates

in response to any difficulties or questions they may have encountered. This also encourages students to begin to practice observing and describing their experience from a contemplative and self-reflective space which is integral to the cultivation of mindfulness skills.

To prompt students to integrate mindfulness practice into their routine outside of meditations during class sessions, students are assigned after the initial class session to read the provided instructions for walking mindfulness meditation and begin practicing it on their own. Walking meditation was selected because it, like body scanning meditation, is a mind-body practice and provides an effective setting to build the connection between students' attention and their physical experience as well as due to the act of walking being immediately accessible for most people who do not have physical mobility concerns. Additionally, students are directed to begin a mindful journaling practice detailing their thoughts and observations regarding their journey in mindfulness practice to allow students to become more accustomed to describing their moment-to-moment experience through the lens of mindfulness and allow them to perceive their feelings without identifying with them through the spaciousness and tranquility of an undistracted writing environment. Each class session ends with a group compassion salutation to encourage students to take their practice efforts in the class and at home with a perspective of non-biased benevolence and compassion for themselves and others, particularly to help students foster a supportive attitude of self-compassion and understanding for the challenges that may come along with beginning a nascent meditation practice and with dealing with the challenges of ADHD symptom management.

The second class session is devoted to teaching the curriculum students about the concept of informal practice and how it differs from formal mindfulness meditation practices. Informal mindfulness practice entails real-time moment-to-moment attempts at holding mindful presence

throughout one's daily activities. Informal practice is differentiated from formal practice in that informal practice is intended to be implemented as consistently as possible from moment to moment whereas formal practice is engaged in during designated periods of focused meditative practice such as awareness of breath sitting meditation, walking meditation, and compassion meditation. Allowing students to have a daily objective of deliberately maintaining attention, calmness, and an accepting attitude is placed in the curriculum to directly address ADHD symptoms on a continual basis. Integrating consistent informal practice can enable individuals with ADHD to become consistently more acutely aware of the frequent instances of mind wandering and hyperactivity associated with ADHD. To transition to coordination of informal practice into students' meditation routines, the second guided group meditation selected was walking meditation which the students had been instructed to practice at home. Walking meditation was chosen as this session's practice since it bridges the meditative and contemplative processes involved from a setting of non-activity such as sitting meditation to a task-oriented activity like walking so that students can begin to experiment with employing these same cognitive processes to other activities throughout their day at home.

The third class session introduces the concept of the five hindrances of Buddhism which are sensory desire, ill-will/aversion, sloth/torpor, restlessness/worry, and doubt; with sensory desire, sloth/torpor, and restlessness/worry being of particular relevance to ADHD. Sensory desire appears in the context of ADHD as heightened impulsivity and students are directed to attempt a more consistent awareness of when these impulses arise, how they are experienced, and how they subside. Sloth and torpor are represented in ADHD by low motivation and disengagement during tasks and students are guided in the curriculum to cultivate a motivated and engaged attitude towards their daily obligations. Restlessness and worry appear in ADHD in

the form of physical hyperactivity and the common ADHD comorbidity of anxiety which the curriculum addresses through its various mind-body intervention practices and cultivation of an attitude of equanimity. To become more aware of the hindrances arising in the mind, this class session contains a group guided awareness of breath sitting meditation with a focus on the process of noting which entails labeling their subjective experience with depersonalized language.

In response to the detrimental effects of ADHD on interpersonal communication, the fourth class session lecture content covers the principles of mindful communication and how ADHD affects speaking and listening ability which can often damage relationships due to a breakdown in communication. Since low attentiveness often affects listening comprehension negatively, developing deeper listening skills and attention to communication is important for individuals with ADHD especially towards the other people in their lives they may need to rely on for support. Additionally, since ADHD can impair speech and non-verbal communication, improving speaking ability and developing physical relaxation through the act of mindful communication is a potential way for students to be able to communicate to others more effectively. To practice mindful communication and incorporate it into their lives, the process of insight dialogue is taught in this session and students are asked to group together in pairs to start them off with its practice before attempting to practice it at home with their friends and families.

The fifth class session in the curriculum discusses how life stress exhibits an exacerbating effect on the frequency and intensity of ADHD symptoms causing a range of damaging consequences on personal well-being. Since stress has been shown to increase mind wandering, impulsivity, inattentiveness, and decrease emotional regulation, all of which are already heightened due to the influences of ADHD, it is important that students develop increased self-

compassion and self-care skills while learning how to recognize and manage their stress through the mindfulness practices employed in this curriculum. To this achieve this goal, students are introduced in this session to the process of developing equanimity and self-compassion through metta visualization practice in which they are directed to send wishes of compassion to themselves and others while mentally visualizing the targets of their benevolence. The students are instructed to incorporate metta practice into their daily meditation regimen to reinforce both their sense of self-compassion and external compassion which segues well into the usual end-ofclass compassion salutation practice done in each session.

The sixth class session covers the subjects of organization, time management, task prioritization, productivity, and the practices of intention setting and visualization. Due to the impairment of executive functioning observed with ADHD, staying organized, motivated, productive, and on a consistent schedule can be highly challenging so this session is intended to acquaint students with developing mindful habits involving focusing while managing their dayto-day activities and time. Since people with ADHD are attracted to novel situations and have difficulties staying on-task with longer, repetitive work, multitasking is often employed in the belief that it is more effective and efficient than focusing on one task at a time to completion but in fact creates more potential for reduced productivity due to the continual context shifting from task to task causing a drain on attentional resources. Students are instructed in this session to direct their growing capabilities of attentiveness, grounding, and equanimity towards anchoring their attention and effort to a task while staying present in the moment and maintaining awareness of time. Attending to the body and mind while attuning to one's work is crucial to maintaining physical and mental wellbeing which in turn optimizes personal productivity and effectiveness, so students are asked to monitor their working habits and self-care when engaging

in important tasks to ensure they are functioning to the best of their potential. Externally, students are taught the value of cultivating a productive environment by limiting distractions and maintaining an organized, safe, and quiet space while also navigating inevitable distractions with ease and acceptance so they can return to their intended focus. Students are introduced during this class session to the practice of intention setting combined with visualization of tasks to provide them with a structure with which to prioritize and focus on a set number of important objectives throughout their day. Intention setting typically involves meditating and reflecting on three goals, ideally at the beginning of one's day, and observing one's progress on achieving these goals throughout the day. The intention setting practice used in the class is based on teachings and practices regarding the Buddhist concept of right thought. Right thought is a part of the Noble Eightfold Path which are a set of practices in Buddhism that are considered by Buddhists to be the process to liberation from worldly suffering. Because prioritization and completion of tasks is impaired in ADHD executive functioning, consistent intention setting practice allows practitioners to habituate themselves with an effective systematic process that reinforces daily function. Building upon the intention setting process, students are taught to visualize themselves during meditation performing the actions needed to fulfill the goals they have appointed as their intentions then imagining the feelings that may arise when those goals have been achieved. This visualization is intended to help students work through demotivation and analysis paralysis which often impede successful completion of tasks in individuals with ADHD. Students are asked to begin incorporating intention setting and visualization during their daily routine and journal about their experience to support them in acquiring consistency in their overall long-term goal-oriented success.

The seventh class session concerns regulation of emotions and impulses as heightened emotionality and impulsive behavior are associated with ADHD. The lecture portion of this session begins with the importance of regulation of emotions and behavior for individuals with ADHD due to commonly observed comorbid conditions such as substance use disorder, mood disorders, and impaired impulse control. Subsequently, the discussion is guided towards recognition of impulsivity and emotionality as a key step in their regulation and how noting practice can help individuals with ADHD become more aware of their impulses and emotions as they appear. Noting meditation, sometimes called labeling practice, entails noticing and identifying what arises within the mind which can include mental activity such as thoughts, feelings, impulses and urges, sensations, and perception of stimuli. Noting is often paired with an object of focus such as the breath in formal meditation where the practitioner consistently strives to return their attention onto the focal object following the act of noting in response to activity or stimuli, but it can also be practiced during open monitoring or informal meditation practice. Rather than approach the presence of emotions or impulses with active resistance, students are guided to observe their appearance and passing as mindfulness principles deem these feelings to be impermanent. Additionally, students are asked to observe the importance of the language used during the act of labeling by noting that a feeling is present within their mental landscape rather than being a state which is intrinsically a part of them in that moment. An example of this idea is recognizing that the sensation of fatigue has arisen in one's mind rather than stating that one is tired. This distinction is important as it helps the noting practitioner distance their state of mind from the transient emotions and thoughts which form within the mind and avoid identifying with them. By depersonalizing the mental activity which occurs as a result of ADHD impulsivity and emotionality, students can perceive how impulses and negative emotions do not need to

influence their behavior and mental state and simply observe the experience of allowing these to be present and disappear until they eventually arise again. To practice noting meditation as a group, the class is guided together in open monitoring practice with a focus on labeling thoughts as they become noticeable within the mental periphery. Following the guided group practice, the group discussion section asks students to reflect together on the frequency of thoughts they labeled and the experience of attending to them nonjudgmentally rather than or letting them control their actions and state. The class is requested at this point to continue noting practice outside of class during formal and informal meditation practice and to journal about their experience as they become more acquainted with actively labeling their mental activity on a continual basis.

The eighth and final class session aims to utilize all the principles and practices introduced up to this point and direct them towards volitionally attaining a productive workflow state. Here, students are introduced to the Buddhist concepts of *samatha*, *samadhi*, *ekaggata*, and *sukha* which can be translated and simplified as tranquility, concentration, one-pointedness, and joy respectively. The development of the quality of mental and physical tranquility can be achieved through mindfulness meditation practice and is described to occur through sustained focus of attention which the curriculum has attempted to build within the capabilities of the class participants thus far through the attention training aspects of the meditation practices utilized. In addition to soothing physical and mental hyperactivity, cultivation of internal tranquility mitigates the influences of the mental hindrances of restlessness and rumination and the impulse and desire to partake in subjectively appealing sensory experiences. Concentration and one-pointedness are similarly related concepts in Buddhism and mindfulness as one-pointedness describes a state of complete focal absorption in both formal and informal practice contexts and

is arrived at when full concentration can be put forth by the practitioner towards their intended subject. The lecture then informs students of the phenomenon of hyperfocus and how it is differentiated observationally from the concept of flow state. Hyperfocus and flow state both involve periods of one-pointedness but differ subtly in that hyperfocus is an unregulated and undirected state which can unintentionally remain uninterrupted by internal and external stimuli whereas flow involves intentional effort at full concentration, efficiency, and productivity towards a subject without impairment to internal and external sensory receptivity. A hallmark of hyperfocus is that while a hyperfocused individual may appear fully attentive to their task at hand, they are highly distracted by it from everything else going on around them. Hyperfocus occurs when individuals with ADHD engage in a task that they are highly passionate about and that they find enjoyable, so students are directed to attempt to find joy and satisfaction in their goal-oriented intentions to cultivate flow states through the same psychological mechanisms which produce hyperfocus but with the added requirement of the opening of their receptivity of attention to their entire moment-to-moment experience instead of on a singular hyperfocal subject. At this point in the curriculum, students are expected to have become comfortable with practicing awareness of breath sitting meditation through instructor guidance, check-ins, and their meditation practice regimen outside of the classroom so the final guided class meditation practice seeks to revisit the practice and convey its utility as an almost continually accessible meditation practice. During the meditation guidance, students are invited to strive to cultivate longer sustained periods of attention and relaxation with a joyful, accepting attitude as a training ground for bringing this same attitude towards informal practice and efforts at fulfilling their daily set intentions in the hopes that they can become proficient at approaching these goals with full attention and internal peace. The subsequent discussion seeks to motivate students to reflect

on their progress over the four weeks of the curriculum in developing the quality of mindfulness and how that has affected the ways in which ADHD impacts their lives before ending the curriculum with recommendations and resources for students who would like to continue with mindfulness training.

Conclusion

ADHD has been shown here based on the research presented, as well as on the wealth of available data out there in the academic literature regarding the condition, to be quite a negative presence in the lives of those living with it. The effects of the condition can effect deleterious consequences in all aspects of their lives and they can often feel like their symptoms are highly ingrained into every facet of their habits and ways of operating to the point where a different type of acceptance than mindful acceptance appears: a begrudging acceptance of its influences as a lifelong presence without remedy. This curriculum and thesis have sought to show that mindful acceptance of ADHD can instead be a start to the process of developing a psychocognitive buffer from the impact of ADHD symptoms in the lives of these individuals. It has been postulated to that end here that practicing mindfulness is indeed an advantageous yet nascent and growing therapy for individuals with ADHD and those in their symptom management support network as well as that the curriculum described here represents an impactful step towards making mindfulness a widely known and recommended ADHD intervention that can be easily accessed with options such as this curriculum. Much research is available addressing the suitability of mindfulness for ADHD for children, adults, and those around them yet widely available implementation of qualified targeted trainings toward ADHD do not seem to be present or easily searchable. In addition to the complementary qualities of mindfulness training with the needs of ADHD patients discussed, especially in tandem with other effective therapies, practicing

mindfulness is shown in the literature presented to be beneficial to the effects of the multitude of other comorbid conditions commonly diagnosed along with ADHD, making it a wide-reaching therapeutic process in terms of benefit to multiple areas of life with ADHD. The curriculum was designed with this approach in mind, being a carefully selected set of practices, which can be taught in an efficient time and manner yet having broad applications for the many facets of life with ADHD. Being a multiple front approach to ADHD management, this thesis has established the potential results of mindfulness training in cognitive-behavioral, neurophysiological, personal, and social dimensions of the condition, further highlighting the value of pursuing further work in the area through continually necessary future research, more developed and targeted curriculum offerings across a spectrum of patient profiles, and widespread awareness from the public and healthcare sector of the intervention as an important component of ADHD management along with other treatment options. Possible future research that could be conducted might include qualitative and quantitative studies on pilot classes based on this curriculum as well as exploration of novel applications or training approaches to mindfulness-based ADHD interventions. The research and subsequent curriculum design completed in the process of this thesis was done with the intention of addressing the most prominent challenges of ADHD through carefully selected practices aimed at effectively supporting participants with managing these challenges yet potentially new and different perspectives on how to conduct these trainings are crucial towards the successful development and evolution of the quality of mindfulness-based ADHD interventions as a whole over the long term stages of its utilization. This is all done for the purpose of mitigating the myriad ways in which ADHD collectively affects global populations with its prevalence and impact while normalizing life with ADHD by taking an attitude of mindful equanimity for those living with it. By attaining a stronger and more

consistent sense of awareness and acceptance that is often initially elusive for individuals with ADHD, they can grow and create fertile areas for success throughout their experiences and this mindfulness for adults with ADHD curriculum demonstrates a useful methodology to create this in the lives of participants.

References

- Al-Khamisy, D. (2015). Student with ADHD disorder in the process of dialogue support in inclusive education. In T.J. Karlovitz, (Ed.), *Case studies from the education* (pp. 43-54). International Research Institute s.r.o.
- Anker, E., Bendiksen, B., & Heir, T. (2018). Comorbid psychiatric disorders in a clinical sample of adults with ADHD, and associations with education, work and social characteristics: A cross-sectional study. *BMJ Open*, 8(3), e019700.
- Bachmann, K., Lam, A. P., Sörös, P., Kanat, M., Hoxhaj, E., Matthies, S., Feige, B., Muller, H.,
 Ozyurt, J., Thiel, C.M., Philipsen, A. (2018). Effects of mindfulness and psychoeducation
 on working memory in adult ADHD: A randomised, controlled fMRI study. *Behaviour Research and Therapy*, *106*, 47-56.
- Blum, K., Chen, A. L., Braverman, E. R., Comings, D. E., Chen, T. J., Arcuri, V., Blum, S. H.,
 Downs, B. W., Waite, R. L., Notaro, A., Lubar, J., Williams, L., Prihoda, T. J., Palomo,
 T., ... Oscar-Berman, M. (2008). Attention-deficit-hyperactivity disorder and reward
 deficiency syndrome. *Neuropsychiatric Disease and Treatment*, 4(5), 893-918.
- Gehricke, J. G., Kruggel, F., Thampipop, T., Alejo, S. D., Tatos, E., Fallon, J., & Muftuler, L. T. (2017). The brain anatomy of attention-deficit/hyperactivity disorder in young adults - a magnetic resonance imaging study. *PloS One*, *12*(4), e0175433.
- Ginsberg, Y., Quintero, J., Anand, E., Casillas, M., & Upadhyaya, H. P. (2014). Underdiagnosis of attention-deficit/hyperactivity disorder in adult patients: A review of the literature. *The Primary Care Companion for CNS Disorders*, *16*(3), PCC.13r01600.

Haydicky, J., Wiener, J., Badali, P., Milligan, K., & Ducharme, J. M. (2012). Evaluation of a

mindfulness-based intervention for adolescents with learning disabilities and cooccurring ADHD and anxiety. *Mindfulness*, *3*(2), 151-164.

- Herbert, A., & Esparham, A. (2017). Mind-body therapy for children with attention-deficit/hyperactivity disorder. *Children*, *4*(5), 31.
- Janssen, L., Vries, A. M., Hepark, S., & Speckens, A. E. (2017). The feasibility, effectiveness, and process of change of mindfulness-based cognitive therapy for adults with ADHD: A mixed-method pilot study. *Journal of Attention Disorders*, 24(6), 928-942.
- Kirk V., Fatola, C., Gonzalez, M.R. (2016) Systematic review of mindfulness induced neuroplasticity in adults: Potential areas of interest for the maturing adolescent brain. *Journal of Childhood & Developmental Disorders*, 2:1, 1-9.
- Miller, C. J., & Brooker, B. (2017). Mindfulness programming for parents and teachers of children with ADHD. *Complementary Therapies in Clinical Practice*, 28, 108–115.
- Morgan, P. L., Staff, J., Hillemeier, M. M., Farkas, G., & Maczuga, S. (2013). Racial and ethnic disparities in ADHD diagnosis from kindergarten to eighth grade. *Pediatrics*, *132*(1), 85–93.
- Priddy, S. E., Howard, M. O., Hanley, A. W., Riquino, M. R., Friberg-Felsted, K., & Garland, E. L. (2018). Mindfulness meditation in the treatment of substance use disorders and preventing future relapse: Neurocognitive mechanisms and clinical implications. *Substance Abuse and Rehabilitation*, *9*, 103–114.
- Ramsay J. R. (2017). Assessment and monitoring of treatment response in adult ADHD patients: Current perspectives. *Neuropsychiatric Disease and Treatment*, *13*, 221-232.

- Ramtekkar, U. P., Reiersen, A. M., Todorov, A. A., & Todd, R. D. (2010). Sex and age differences in attention-deficit/hyperactivity disorder symptoms and diagnoses:
 Implications for DSM-V and ICD-11. *Journal of the American Academy of Child and Adolescent Psychiatry*, 49(3), 217-228.
- Schoenberg, P., Hepark, S., Kan, C., Barendregt, H., Buitelaar, J., Speckens, A. (2014) Effects of mindfulness-based cognitive therapy on neurophysiological correlates of performance monitoring in adult attention-deficit/hyperactivity disorder. *Clinical Neurophysiology* 125(7), 1407-1416.
- Silva, N. Jr, Szobot, C.M., Shih, M.C., Hoexter, M.Q., Anselmi, C.E., Pechansky, F., Bressan,
 R.A., Rohde, L.A. (2014) Searching for a neurobiological basis for self-medication
 theory in ADHD comorbid with substance use disorders: An in vivo study of dopamine
 transporters using (99m)Tc-TRODAT-1 SPECT. *Clinical Nuclear Medicine*, *39*(2), 129-134.
- Smalley, S. L., Loo, S. K., Hale, T. S., Shrestha, A., McGough, J., Flook, L., & Reise, S. (2009). Mindfulness and attention deficit hyperactivity disorder. *Journal of Clinical Psychology*, 65(10), 1087-1098.
- van der Oord, S., Bögels, S. M., & Peijnenburg, D. (2011). The effectiveness of mindfulness training for children with ADHD and mindful parenting for their parents. *Journal of Child and Family Studies*, *21*(1), 139-147.
- Young S. N. (2011). Biologic effects of mindfulness meditation: Growing insights into neurobiologic aspects of the prevention of depression. *Journal of Psychiatry & Neuroscience*, 36(2), 75–77.

Appendices

Appendix A

Syllabus

Mindfulness Practices for Adults with Attention Deficit Hyperactivity Disorder

Course Description

In this four-week course meeting three times a week on Mondays, Wednesdays, and Fridays, students will learn about mindfulness principles and practices in a way which relates to how attention deficit hyperactivity disorder (ADHD) affects how they regulate their attention, emotions, and impulses. Students will practice mindfulness together with the class and on their own to develop strategies and habits which hope to improve their executive functioning and quality of life.

Course Objectives

Once this course is completed, students will be expected to learn about:

- Basic mindfulness practices and principles
- ADHD symptoms and their effects on executive and emotional function.
- Strategies for applying a mindful perspective in managing their ADHD symptoms.
- Further sources for resources in managing their ADHD.

Class Schedule and Topics

Week 1 - Class 1:

- Introductions
- What is Mindfulness?
- History of Mindfulness
- Types of Mindfulness Practices
- ADHD Discussion
 - ADHD Symptoms & Types
 - How does ADHD and mindfulness affect how we pay attention?
- Discuss Trait Mindfulness, Mind Wandering/Autopilot Functioning, and Attentional Regulation and how ADHD affects these aspects of paying attention.
- How mindfulness practice can improve these areas of our lives and recognizing where to apply its principles.
- Guided Body Scan Meditation (10 min)
- Group Practice Discussion

- Students will be invited to share and discuss their thoughts and feedback on their meditative experience with the class.
- Introduce Walking Meditation and Mindful Journaling for at-home daily self-directed practice for the week.
- Group Compassion salutation to end the class.

Week 1 - Class 2

- Review and expand on the concepts of and differentiations between formal and informal practice.
- Working with Hyperactivity and Mind Wandering.
- Group Walking Meditation focusing on mindful presence to segue into learning to apply informal practice.
- Group Practice Discussion
 - In-class walking discussion
 - At-home walking meditation discussion
 - Optional journal discussion
- Direct students to attempt to be mindfully present in informal practice throughout the weekend and record their experiences in their journals.
- Group Compassion Salutation

Week 2 - Class 1

- The Five Hindrances in Buddhism, particularly Sloth and Restlessness, and how they relate to working with ADHD
- Mindfully working through the obstacles that appear in the form of the Five Hindrances
- Guided Breathing Meditation Focusing on Noting and Concentration (15 min)
- Group Practice Discussion
 - In-class breathing meditation discussion
 - At-home walking meditation discussion
 - Optional journal discussion
- Provide at-home practice for the week:
 - Noting in formal and informal practice along with student's choice of breathing/walking/body scan meditations daily
 - Continue with mindful journaling
- Group Compassion Salutation

Week 2 - Class 2

- Communication Issues Commonly Observed with ADHD
- Mindful Communication and Insight Dialogue
- Group Insight Dialogue Practice

- Group Practice Discussion
 - In-class Body Scan discussion
 - At-home formal/informal practice Discussion
 - Optional journal discussion
- Continue with Noting and Journaling
- Group Compassion Salutation

Week 3 - Class 1

- The effects of stress on ADHD symptoms.
- Cultivating mindful acceptance and self-compassion for the challenges of ADHD.
- Group Metta practice and compassionate visualization.
- Group Practice Discussion
 - In-class Metta discussion
 - At-home Insight Dialogue practice Discussion
 - Optional journal discussion
- Incorporate metta into at-home practice in conjunction with daily practice.
- Group Compassion Salutation

Week 3 - Class 2

- Organization and Time Management with ADHD
- Prioritizing tasks and avoiding multitasking.
- Mindful productivity practices for ADHD
- Group Intention Setting practice.
- Group Practice Discussion
 - In-class Intention Setting discussion
 - At-home Metta Discussion
 - Optional journal discussion
- Continue Intention Setting practice at home.
- Group Compassion Salutation

Week 4 - Class 1

- How ADHD affects Emotional and Impulse Regulation and how these skills can be cultivated by mindfulness.
- Applying Noting practice to notice emotions and impulses when they arise.
- Group Open Monitoring practice
- Group Practice Discussion
 - In-class Open Monitoring practice discussion
 - At-home Intention Setting practice discussion
 - Optional journal discussion
- At-home Sustained Informal Practice

• Group Compassion Salutation

Week 4 - Class 2

- *Samatha* and *Samadhi* and how they relate to physical and cognitive hyperactivity as well as attention
- The concepts of *Ekaggata* and *Sukha* and how they relate to ADHD hyperfocus and task-oriented flow states.
- How to manage ADHD Hyperfocus using mindful practices and find flow.
- Group Awareness of Breath practice
- Group Practice Discussion
 - Group discussion on experiences with their developing practices so far
- Provide students with future direction and additional resources for continuing with learning mindfulness philosophy and meditation as well as on learning more about managing the condition of ADHD.
- Final group Compassion Salutation

Appendix B

Curriculum Lesson Plan

This lesson plan is intended to be used in guidance of lecture and practice sessions for the Mindfulness for Adults with ADHD course. This presents guiding points for the lecture and discussion and the lesson plan relies on the instructor to use their foundational background knowledge of mindfulness to lecture on topics presented during the lesson plan. Subjects covered during discussions may not be limited to what is covered in this lesson plan so instructors will be called upon to utilize their expertise from their mindfulness training to guide students responsibly through the discussions as well present outside topics during lectures that may be of relevant importance to the lecture.

Week 1 - Session 1 Lesson Plan

- 1) Instructors should introduce the course and then themselves and their background.
- 2) Present syllabus and course objectives:
 - a) Learn fundamental concepts and foundational knowledge on Mindfulness practice and ADHD as well as how they relate to each other and can influence each other.
 - b) Apply these teachings and practices to our personal and professional lives while living with ADHD towards achieving greater well-being and personal success.
- 3) Introductions & Icebreaker Activity
 - a) We will all be working very closely together over the next 4 weeks so it will be important for us all to become acquainted with each other. Instruct students to take a few moments getting to know each other. Start with going around the room and have everyone introduce themselves and then please describe a moment

where they felt very mindful, present, and calm and then contrast that with a moment where they recall feeling forgetful, distracted, unfocused, hyperactive, or restless.

- b) (Share instructor's personal experiences here then allow each class member to introduce themselves and share their experiences before thanking everyone for sharing.)
- 4) Discussion on Mindfulness
 - a) What is Mindfulness?
 - "Mindfulness is awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally" - Jon Kabat-Zinn, founder of Mindfulness Based Stress Reduction and a principal proponent of the modern Western mindfulness movement.
 - ii) Cultivating mindfulness means to maintain focus and nonjudgmental awareness of our internal processes in the form of our thoughts, feelings, and bodily sensations as well as our external surroundings in the form of physical stimuli from the world outside ourselves. Mindfulness is a universal human trait and the practice of developing mindfulness can be observed in many historical traditions and practices throughout human history. Modern mindfulness practice is most influenced and derived from classical Buddhist teachings and philosophies that have been carried on to be applied in modern contexts.
 - iii) We all have the capacity to be mindful and the inherent propensity to maintain present moment awareness with clarity and acceptance is termed trait mindfulness. Our goal over the next few weeks will be to develop increased trait mindfulness which has been shown to benefit ADHD symptoms greatly. Developing trait mindfulness is not exclusive to mindfulness practice as many activities and processes such as psychotherapy can be utilized to this effect but the perspectives and philosophies guiding the main body of mindfulness practice are principally aimed at this endeavor.
 - iv) Training ourselves to be more mindful can be achieved through mindfulness practices such as sitting meditation, walking meditation, mindful eating, and mindful communication among many other practices and applications that can be categorized as either formal or informal mindfulness practice. Formal mindfulness meditation practices involve cultivating mindfulness deliberately in stillness and solitude through a specific activity or focal point such as concentrating awareness on the breath while sitting or on the body's sensations while laying down. Whereas, informal mindfulness involves maintaining mindful awareness throughout the day's activities outside of times specifically set for formal meditation or "off the cushion" meditation as it is often called.
- 5) Discussion on ADHD
 - a) ADHD is a condition which affects how attention, executive function, and emotions are regulated. This can influence our lives in a variety of ways which

can present in inattentiveness, memory problems, hyperfocus, speech issues and auditory processing difficulties, relationship issues, consistent misplacement of possessions, time management problems, emotional issues, impulsivity, physical restlessness, and financial challenges.

- b) ADHD can be classed into three subtypes known as inattentive, hyperactive, and combined types. inattentive type ADHD is characterized by attentional and cognitive symptoms while the hyperactive type is associated with physical restlessness, verbosity, and impulsiveness. combined type ADHD exhibits symptoms seen in both inattentive and hyperactive types. Knowing which type you have can help identify which practices and strategies may work best for everyone here.
- c) ADHD symptoms exert strong challenging influences on the ability to maintain trait mindfulness as well as emotional and physical tranquility while the aim of mindfulness practice is to increase these qualities.
- d) Earlier the discussion was centered around moments where the class felt inattentive or distracted or their bodies felt compelled to move. These are instances where we experience what is termed mind wandering. Mind wandering happens to everyone, for instance you might find yourself thinking about what to cook for dinner in the middle of an important meeting or checking your phone while watching a movie, but individuals with ADHD tend to engage in more frequent mind wandering as well as functioning on autopilot which is when we participate in an action without being fully present and not noticing our moment to moment experience as we engage in the activity. Functioning on autopilot allows our life events, whether significant or mundane, to pass us by without present moment appreciation and engagement with our senses while mind wandering has been shown to be directly correlated with depression and anxiety.
- e) With mindfulness practice, we can learn to recognize more often when we are inattentive or distracted, we become more reflexively aware of when the mind starts to wander so that we can also learn how to steer the mind back to what is important to us in the moment. We become more engaged and focused on ourselves and the actions and behaviors we decide for ourselves with a calm and accepting mind so that we cultivate success and peace within our personal and professional lives. We learn how to work with our bodies to soothe restlessness and excess physical energy and to stop and take a moment to call ourselves to account before speaking or acting reactively. All these skills can be turned towards living with ADHD in direct response to the challenges the condition can present so that managing our lives does not become an overwhelmingly significant aspect of our days.
- 6) Guided Group Body Scanning Meditation for ADHD
 - a) Instructors should guide students in a body scanning meditation group session or play the "Body Scanning for Meditation" audio recording presented in the appendix section of this lesson plan. Take note to accommodate students who may have difficulty staying physically still by inviting them to turn their attention towards the urge to move and how it feels to just notice the urge without following it. Additionally, students may have trouble centering their attention so

invite students to notice where their attention reflexively shifts to within the body rather than aiming to concentrate on one physical area. If instructors wish to guide the class together in real time, please utilize the audio recordings prior to class to incorporate aspects of the meditation into their own personalized guidance. Please instruct students to consult the instructor if they experience any distress or negative events during their practice, either during or after the meditation as required. Students should always be free to discuss any challenges they face either privately or during class discussions. Please read through and refer to the meditation safety toolbox by Willoughby Britton found here for references and instruction on helping students experiencing possible adverse effects in response to meditation: https://sites.brown.edu/britton/resources/meditation-safety-toolbox/

- 7) Post-meditation Discussion
 - a) Invite students to share any initial questions or feedback regarding what they experienced during the group meditation. Any feelings or challenges they felt were noteworthy? Did anything feel particularly positive or successful? Did anything work for them during the meditation that they feel would be worth sharing with their classmates?
 - b) Invite students to share any questions or feedback they have had in regard to learning how to meditate or working with their ADHD as well.
- 8) Home Practice and Journal Assignment
 - a) Since people living with ADHD tend to have challenges sitting still and meditating, especially with hyperactive and combined types, the first at home practice assignment will be walking meditation.
 - b) Instruct students to read Walking Meditation Instructions by Tara Brach here before practicing on their own every day at home until the next class session: https://www.tarabrach.com/wp-content/uploads/pdf/Walking-Meditation-Instructions.pdf
 - c) Over the duration of the course, students will be asked to keep a journal regarding their mindfulness journey which will not be shared or read with anyone else. This is required and is meant to be used as a tool to help further our practices.
- 9) Group Compassion Salutation
 - a) Each class will end with the class reciting together the following salutations:
 - i) May I be happy, healthy, and safe.
 - ii) May I find the peace and calm to be patient and gentle with myself.
 - iii) May all beings be free of suffering.

Week 1 - Session 2 Lesson Plan

- 1) Formal vs Informal Mindfulness Practice
 - a) Formal mindfulness practices involve setting aside time and space to practice mindfulness meditation for set periods of time. The purpose of formal practice in the context of this course is to learn how we direct and regulate our attention as well as to increase our attentional capacity over time. As we spend time engaging

in formal meditation, we can better observe the frequency and intensity of instances of mind wandering and provide ourselves with opportunities to practice redirecting our attention. Formal meditation practices take on a range of forms and activities but share a common thread of intentional mindful awareness during the process. Such practices can include but are not limited to sitting meditation, walking meditation, awareness of the breath, body scanning, visualization, compassion meditation, mantra meditation, mindful movement practices, and writing/journal meditation.

- b) Informal practice entails attempting to maintain mindfulness throughout your typical moment to moment experiences. Instances of mind wandering and lowered levels of trait mindfulness will occur inevitably throughout our lives for a variety of reasons as this is simply how the mind functions but we can work towards being more consistently mindful during our day to day lives and recognizing where our awareness is pulling towards distraction and when it happens. The act of being mindful is not in avoiding distraction but in recognizing that we are distracted and accommodating accordingly. We can informally practice at any time of our day whether it be working, driving, cleaning, watching television, reading, exercising, doing chores, etc. As we develop deeper mindfulness through formal practice, we can take these qualities and skills we have gathered on the cushion to other areas in our lives, so we can approach even the most stressful moments with a requisite level of attention and calm.
- 2) Managing Hyperactivity, Mind Wandering, and Autopilot
 - a) For those that experience hyperactivity symptoms, such as feeling physically antsy, restless, fidgety, impulsive, and energetic, sitting still to meditate can often be a challenging feat. These people may feel more initially comfortable with formal practices involving physical activity such as walking meditation or mindful movement practices before advancing to sitting meditation or more stillness-based practices. Eventually, practitioners will develop more capacity to stay physically still and note and accept their impulsive urges to move around rather than reacting to them. As this happens, most meditators notice that the time they spend meditating increases in addition to their ability to maintain attentiveness which translates to better well-being when not meditating.
 - b) For those that experience inattentive symptoms such as getting distracted, losing things often, forgetting important dates and tasks, not being present during tasks, getting too absorbed into certain activities, and forgetting conversations, staying focused and mentally still can be more challenging than staying physically still. It is crucial for those living with inattentive type symptoms to habituate themselves to stay present informally so they can properly retain information from their experience and surroundings. Formal practice allows practitioners to learn how to manage the frequency, intensity, and trajectory of instances of mind wandering so that this can also be achieved off the cushion as well as recognize the frequency and degree of autopilot mode in their day-to-day activities so they can respond with deeper engagement and attentiveness.

- 3) Group Walking Meditation Practice
 - a) Direct class to pick an area inside or outside the classroom where they can practice walking meditation for 15 minutes either alone or alongside each other in peaceful quiet. Invite students to maintain mindful presence as much as possible during their walk so that they can start to develop the same habit of mindful presence when walking outside of a walking meditation session. If desired, present the prerecorded audio titled "Walking Meditation" audio recording presented in the appendix.
- 4) Group Practice and at-home Practice Discussion
 - a) Ask students to share what type of sensations they noticed during their walking meditations in class and at home as well as any successes or challenges they experienced.
 - b) Did practicing walking meditation at home on your own feel different from practicing alongside the class and if so, in what ways? Did it feel more challenging or more at ease along with the class?
 - c) Did you notice your mind wandering and if so, how did you respond internally?
 - d) How does walking meditation feel compared to the body scan meditation we learned together in class last time? Was it more challenging or more comfortable to walk?
 - e) Invite students to share feedback about their journaling process or if they would like to read from their journals at all.
- 5) At-home Practice
 - a) Students should be instructed to practice either the body scan or walking meditations learned so far for 10-15 minutes on their own daily until the next class session.
 - b) Direct students to attempt informal practice as consistently as possible until the next class session.
 - c) Please continue journaling with a focus on experiences with the assigned at home meditations and informal practice.
- 6) Group Compassion Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

Week 2 - Session 1 Lesson Plan

- 1) The Five Hindrances of Buddhism
 - a) In Buddhism, there are certain feelings and mind states that have become identified as barriers to progress in life and one's meditation practice.
 Specifically, in Classical Theravada Buddhism, these mental factors are considered to hinder progress through the stages of concentration known as Jhana and in Mahayana Buddhism, these factors are considered to impede the state of

tranquility known as *Samatha*. Within the Vipassana tradition, these mind states are considered as impediments to efforts at mindfulness meditation practices specifically. As mental and physical tranquility are relevant to both cognitive and physical symptoms of ADHD and concentration is relevant to attention in ADHD, learning to manage these mental factors, known as the Five Hindrances, can hold a significant impact on the progression of ADHD amidst a mindfulness meditation practice.

- i) These five hindrances are known as:
 - (1) Sensory Desire Attachment to sense pleasures such as touch, taste, sound, sight, and scent. This represents a craving or urge to engage in physical activities with pleasant feeling tones related to our sensory pleasures. Examples of instances of sensory desire could be wanting to watch television, craving sweets, or the urge to scratch an itch. While these are perfectly acceptable and normalized activities, excessive attachment to these desires can lead to becoming a hindrance. Preoccupation with the pursuit of these desires can get in the way of personal progress and attention to task completion and to one's present moment experience.
 - (2) Ill-will Mental states which contain fear, negativity, aversion, maliciousness, and bitterness. These are considered unwholesome mind states which contribute to the degradation of the relationships within oneself and with others. Ill-will cannot coexist at the same moment as loving-kindness and compassion which are both crucial to the development of a healthy attitude and view towards working with ADHD. Examples could include engaging in strong dislike of something, the desire to harm another, or resentment towards aspects of life. This represents the antithesis to the precepts of equanimity and compassion cultivated in mindfulness pursuits. Often individuals living with ADHD exhibit low tolerance for lack of aptitude in certain tasks and tend to want to complete tasks correctly initially or risk developing aversion to engaging in these tasks. This interferes with executive functioning and success as we may end up lacking the motivation to follow through on obligations due to developing resistance through aversion.
 - (3) Sloth and Torpor These two mental factors describe states of decreased energy and effort of the body and the mind respectively. Sloth is associated with a state of lack of physical vitality and disengagement from activities while torpor is compared to a state of drowsiness, apathy, or indifference. Sloth and torpor are often the impetus for inaction and procrastination in individuals with

ADHD resulting in decreased executive function and impaired self-care leading to increased stress which exacerbates ADHD symptoms further resulting in a feedback loop of attention drain. Sloth and torpor could appear in the form of laziness, apathy and indifference, and lack of physical energy and engagement. Sloth and torpor can also have a strong detrimental influence on achievement and functioning but instead through impaired motivation.

- (4) Restlessness and Worry Restlessness refers to a state of physical agitation and hyperactivity while worry is concerned with a state of mental anxiety. The mental state of restlessness parallels the hyperactivity symptoms of ADHD while worry can manifest in the form of performance anxiety which fuels procrastination in conjunction with sloth and torpor. Restlessness and worry can appear in the form of pacing and fidgeting, anxiety, and insecure task focus. When these aspects of life appear to a degree which causes disproportionate stress and difficulty, they can have a huge impact on mental well-being and physical health. Restlessness and worry can cloud the mind and prevent attention and physical tranquility.
- (5) Doubt Doubt represents uncertainty in one's capabilities. This lack of confidence can lead to anxiety and then procrastination related to the previous hindrances. Lack of self-confidence and self-esteem are often correlated with ADHD in adults due to impaired executive function and life challenges. Doubt shows itself in the form of low affect, low self-esteem, and poor task commitment.

2) Working with the Hindrances within the context of ADHD

- a) Mindfulness offers a host of complementary strategies and practices that work in conjunction with each other and strengthen each other. These have been shown to promote well-being by working with the ways that the five hindrances appear in our lives. These practices can provide salutary effects in response directly to the negative aspects of the hindrances on a granular level but really combine in a full mindfulness practice to result in wide overarching improvements in our lives. It is important to hold an attitude of equanimity and non-judgmental acceptance to the arising of the hindrances as self-compassion is crucial to the healthy coping strategies presented here.
 - i) Sensory Desire As stated previously, sensory desire is completely normal and in fact important in certain contexts but can harm us when allowed to

go unchecked without moderation. In mindfulness practice, we aspire to suspend the urge to follow the cravings for sensory pleasures and instead place ourselves in the mental headspace to notice and observe how sensory desires appear in our minds and progress. By watching how these desires form and influence us rather than giving into them immediately, we can better understand their triggers, how we can best manage them on a personal level, and over time resist their effects when they arise using the skills we cultivate in equanimity and tranquility. This is first achieved in mindfulness through noting practice which we will cover in this session. As we build our noting practice, we develop a process for observing and apprising instances of sensory desire with increased specificity and ease, so we then proceed to manage them accordingly.

- ii) Ill-will Aversion appears naturally in the mind and represents the result of our biological programming to pursue things we find pleasant and avoid things that can harm us or we find unpleasant. This is an evolutionary survival mechanism rooted in our tendencies as organisms to escape from danger or harmful objects. However, when resentment and hatred develop because of unchecked aversion, these feelings can degrade many aspects of our personal lives by clouding our mental landscape with negativity and destroy personal relationships. Developing deeper and more consistent feelings of benevolence and positivity in response to the hindrance of illwill often leads to higher levels of overall contentment, joy, and meaningful relationships. Compassion practice aims to reduce feelings of aversion and ill-will towards ourselves and others.
- iii) Sloth and torpor Our physical energy levels and mental effort naturally fluctuate over time, but when these reduce past a threshold level necessary to ensure our ability to fulfill our obligations to ourselves and others, executive functioning and achievement fall much lower than what we may typically deem suitable for ourselves. Incorporating mindful, joyful movement into our lives can connect us to the beauty and importance of physical movement One method found in mindfulness that can help us mitigate the effects of sloth and torpor is intention setting practice which we will cover in a later session. Intention setting involves designating healthy objectives for ourselves, working towards manifesting them in our personal lives, and observing our progress and difficulties along the way. Over time, as we become more proficient at following through on wholesome intentions, we develop deeper efficiency and commitment to our life goals.
- iv) Restlessness and worry We can learn to manage physical restlessness through concentration practices which calm the mind and provide an

anchor to the physical energy we have pent up within our bodies. By observing our bodies and the way it responds to our circumstances before anchoring back to our focused awareness on a subject, we can divert the body's tendency to want to move or fidget while giving it an outlet through mind-body interventions such as walking meditation or tai chi. We can work with worry in the way that we manage sensory desire as well, by noting instances of worry and responding with equanimity.

- v) Doubt Working with doubt can sometimes be the most difficult to tackle for some as confidence and conviction often require time and effort to develop and feelings of doubt can lead to instances of analysis paralysis that prevent us from following through on our intentions. It is important when working with doubt to notice and observe it carefully and respond with self-compassion either in formal or informal practice. Doubt and worry combine to produce rumination which negatively affects acceptance and tranquility as the mind races and suffers when ruminating.
- 3) Group Awareness of Breath Meditation Focusing on Noting
 - a) Guide students through sitting meditation with awareness of breath as the focal anchor for their attention for ten minutes.
 - b) Direct students to mentally acknowledge and label their moment-to-moment experience that appears internally as one of the following: thought, sensory perception, or emotion before steering their focal attention back to their breath continually until the meditation is completed. (Alternatively, the prerecorded audio titled "Awareness of Breath Meditation" in the appendix.)
- 4) Group Practice and at-home Practice Discussion
 - a) Invite students to share their experience with noting and anchoring their attention during the guided meditation on awareness of breath. Did they find it difficult to identify the nuances between thought, perception, and emotions? Or was it more difficult steering their attention back to the breath? Was sitting still particularly difficult?
 - b) Ask if they would be willing to share how their experiences with daily at-home self-directed meditations have been? Have they gravitated towards either walking or body scanning more than the other or practiced an equal mix of both?
 - c) How has informal practice felt for students? Have they noticed themselves being more attentive in everyday life or are they becoming better at recognizing moments of inattentiveness or hyperactivity?
 - d) Invite students to share feedback about their journaling process or if they would like to read from their journals at all.

- 5) At-home Practice
 - a) Request that students continue with daily meditations with either walking, body scan, or awareness of the breath meditations.
 - b) Ask students to try to consistently incorporate noting in their formal and informal practices for the week.
 - c) Continue journal incorporating their thoughts and experiences with noting.
- 6) Group Compassion Salutation
 - i) May I be happy, healthy, and safe.
 - ii) May I find the peace and calm to be patient and gentle with myself.
 - iii) May all beings be free of suffering.

Week 2 - Session 2 Lesson Plan

- 1) Communication with ADHD
 - a) Communicating with ADHD can be extremely difficult. Often, the most apparent symptoms of inattentiveness and hyperactivity are not recognized for their effects on speaking and listening and effective strategies to learn proper communication with ADHD may not be potentially explored because of this. The range of symptoms of the multiple subtypes of ADHD often creates communication issues for those working to manage their conditions. Attention, listening skills, speaking ability, non-verbal communication and interpersonal relationships while these are all also qualities which are directly or indirectly made more challenging by ADHD symptoms.
 - inattentiveness makes it difficult to follow and remember what is being said in dialogue and can cause speakers to lose track of their own thoughts while speaking. Mind wandering often appears in individuals with ADHD in mid-conversation and these people might find themselves distracted for significant portions of the discussion before catching themselves and zoning back in. This can often lead to auditory processing issues which results in important details staying unretained in those with ADHD.
 - ADHD has been observed to correlate highly with multiple types of comorbid speech issues and delays. As a result of inattentiveness symptoms, ADHD can lead to issues such as stuttering, incorrect, or unintended usage of vocabulary, difficulty organizing and conveying thoughts prior and during speech, and other various speech impediments. Hyperactivity type symptoms can cause flight of words / excessive verbosity, improper or unintended body language / non-verbal communication, impulsive speech, interrupting others' speech / talking out of turn / dominating the conversation.
 - iii) These issues often can culminate into a host of issues in the personal and professional lives of those living with ADHD. Executive functioning and interpersonal relationships can then decline as a consequence of listening and speaking difficulties. For example, romantic partners and loved ones can often feel unheard by those with ADHD and the inability to foster

healthy communication from both people can lead to relationship issues. Adults living with ADHD have been observed to be as much as twice as likely to be divorced than those without the condition. Poor listening skills in the workplace and at home can cause important details and information being missed leading to reduced professional and personal success and well-being.

- 2) Mindful Communication & Insight Dialogue
 - a) The practice of mindful communication entails bringing the principles of mindfulness into the ways we interact and communicate interpersonally. Mindful communication involves bringing mindful awareness and an attitude of reflexive non-judgement in the way we listen and communicate, both verbally and nonverbally. Mindful communication is non-reactive, patient, attentive, and focused and can be cultivated through interpersonal meditative exercises so that everyday communication is practiced with further informal mindfulness. While mindful communication primarily directly influences personal communication skills, the overarching goal of the practice is to further personal well-being and mindfulness as a whole via the realm of personal communication.
 - b) Stemming from the insight traditions of various Buddhist and mindfulness practices, insight dialogue practice is a method for developing mindful communication skills both in formal and informal practice in a way which deepens awareness, insight, and well-being. Insight dialogue practice is comprised of 6 dimensional processes which are each meant to be practiced in isolation in formal practice and weaved together in informal mindful communication which are as follows:
 - i) Pausing This process involves responding prior to the act of listening or speaking with a moment of time to collect oneself and zone in on the act with mindful presence. This step allows us to better suspend reactive habits, thoughts, and instances of mind wandering before they arise in communication which in turn provides better presence and clarity later as we speak and listen.
 - Relaxing In this step, we seek to foster deeper tranquility within our physical and mental processes. By becoming more attuned to how to guide our bodies and minds into a more relaxed state and building upon the cognitive and emotional clarity we cultivate in the first step, we respond with mindful acceptance of our present moment experience entailing perceptions and sensations, thoughts, and emotions.
 - iii) Opening When opening up to the dialogue experience, we turn our mindful acceptance towards our surroundings, others, and external stimuli as we approach the act of communication. This allows us to meet whatever arises in the dialogue with equanimity and non-judgement.
 - Attuning to Emergence This step requires practitioners to approach the dialogue without bias or personal motivation, relinquishing control of where the back and forth pattern of communication may lead with an open mind while staying aware of the impermanence of this moment of dialogue.

- v) Listening Deeply Here the mindful communicator focuses on the receiving of dialogue with tranquility while compassionately holding a deep abiding acknowledgement of the discussion, feelings, and lived experience of whoever is speaking to them.
- vi) Speaking the Truth When the practitioner is ready to present their moment-to-moment experience through their words, they present a sincere and frank interpretation of that experience that takes into account the presence and acceptance of themselves and their fellow communicators derived from every step in the insight dialogue process.
- 3) Group Insight Dialogue Practice
 - a) Pair up students as dialogue partners to allow them an opportunity to practice insight dialogue to learn mindful communication. Instruct students to take walk through each of the steps together:
 - i) To pause, students should take a few moments to breathe and relax their minds and bodies. When they feel they are sufficiently mindfully present to proceed, they can move on to the next step.
 - ii) As they breathe, ask the students to notice any physical or emotional tension or atypical sensations they are feeling and to try to allow the physical tension to recede on each successive breath. Instruct students to note these sensations as well as their mental activity with mindful acceptance before aiming the attention back to the breath. When sufficiently relaxed in body and mind, they can proceed further.
 - iii) Now students should aim their attention outward to their external surroundings which includes their dialogue partner with the same mindfully accepting attitude from the previous step.
 - iv) Guide students to take some time to remember to approach the next steps free from any preconceived goal or motives, knowing that the dialogue will arise and disappear as the communication progresses without any expectation for what will develop as a result of the interplay of dialogue and communication.
 - v) Ask partners to decide together who will speak first while the other listens. The speaker is to speak as candidly as they are comfortable with about a subject, they are passionate about patiently and deliberately. The listener is to tune in and focus on the speaker's dialogue with supportive acceptance and acknowledgment of their worth and presence. Then partners will switch roles with the first speaker now listening and vice versa.
 - b) Once the students have had an opportunity to practice the fundamentals of insight dialogue, ask partners to engage in insight dialogue about any of their experiences with at-home meditation practice of their choosing following the same pattern of switching roles in the practice about their passionate subjects.
 - c) Open the discussion to any questions or feedback the students may have for the instructor as the class participates in group mindful communication together.

- 4) At-home practice
 - a) Ask students to attempt to practice insight dialogue with a friend or family member at home and incorporate a consistently mindful attitude towards informal mindful communication practice.
 - b) Students should journal about their experiences with mindful communication and their thoughts on the insight dialogue process.
- 5) Group Compassion Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

Week 3 - Session 1 Lesson Plan

- Stress and ADHD Stress plays a significant role in the degree and frequency to which ADHD symptoms can progress. Stress can influence a wide range of aspects of life related to ADHD and its common side effects. It can increase mind wandering, impulsive behaviors, cause depletion of attentional resources, and decrease emotional regulation. The impact chronic and severe stress has on functioning and well-being in relation to living with ADHD makes proper self-care and stress management crucial to success and personal health.
- 2) Mindful Acceptance and Self-Compassion Mindfulness practice combined with an attitude of self-compassion for the challenges that ADHD causes can be a wonderfully effective tool in addressing the role stress plays in our lives. As we practice on the cushion, we create the mental space to take life's difficulties with patience and acceptance off the cushion, understanding that they are impermanent. Formal practice has both short-term and long-term effects on the way we perceive stressors in the moment and can serve as a protective factor from future stress triggers. Since stress affects emotional regulation and mental resilience, people living with ADHD can develop hindrances of doubt and worry over their challenges and circumstances. Self-compassion and self-care become extremely important in managing the effects of these hindrances as they have such a strong effect on mood and affect and can lead to depressive symptoms as a side effect which can then lead to sloth and torpor. Through compassion and non-judgmental clarity, we can work through the hindrances and accept whatever obstacles ADHD may present so that we can manage ADHD successfully and find deeper meaning to both positive and negative aspects of ADHD.
- 3) Group Metta and Compassionate Visualization Practice
 - a) Please guide students in a group metta meditation focusing on calling to mind each subject for their wishes of loving kindness in a joyful state.
 - b) Instruct students to send metta to themselves while visualizing themselves happy and healthy then repeat the same successively to someone who has cared for them, someone they feel indifference to, and someone who they may have disagreements with.

(If desired, the audio recording titled "Metta and Compassionate Visualization Meditation" can be played instead of personalized guidance.)

- 4) Group Practice and at-home practice discussion
 - a) Metta practice discussion
 - i) Invite students to share if they would like what feelings arose as they sent metta to the people they visualized.
 - ii) Did they have difficulty picking someone to send metta to?
 - iii) Did they have difficulty visualizing their subjects?
 - iv) What was their experience with sending metta to someone they disagreed with?
 - v) Did sending metta to themselves come with ease?
 - b) At-home mindful communication practice discussion
 - i) How have students' efforts at practicing mindful communication in their personal lives come along?
 - ii) Are any steps particularly difficult?
 - iii) Are they seeing changes in interpersonal relationships as a result?
 - c) Optional Journal Discussion and Open Discussion
- 5) At-home practice
 - a) Incorporating Metta into at-home practice By now students should have a consistent daily practice consisting of the meditations which they are most attuned to. Ask students to begin each meditation with the metta practice taught in this class session prior to their sit, walk, or body scan.
 - b) Students should write in their journal regarding their experiences with metta and its impact on their personal lives, particularly with self-directed metta.
- 6) Group Compassion Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

Week 3 - Session 2 Lesson Plan

 Organization and Time Management with ADHD - Often with ADHD, people exhibit trouble with staying organized in their environment and schedules. Both hyperactivity and inattentiveness can lead to individuals taking on too many tasks all at once leading to impaired task function as low attentional resources and lack of focus on one subject at a time leads to a bottleneck of obligations in their personal and professional lives. When combined with poor time perception and time management often seen due to ADHD, this can create a cascade of impaired function as a result. Feeling time-poor can make existing commitments feel like overwhelming chores and as a result, individuals with ADHD can develop aversion and rumination to the thought of completing these tasks regardless of how much a priority the task is or subjectively feels. This leads to procrastination, reduced performance, and a breakdown in quality of life. 2) Prioritizing tasks and avoiding multitasking - It is important to note that research has shown that we are mentally incapable of engaging in the act of multitasking in which individuals sustain consistent attention to multiple tasks simultaneously. Attempting to do so divides and constantly shifts our attention to the various tasks leading to an increased drain in cognitive resources and poorer performance than if we focus our attention on one task at a time from start to finish then move on to the next task. The skills we have been developing here through our mindfulness practice in guiding our attention to our intended focus and sustaining it are monumentally effective ways to approach our respective endeavors with the type of attention necessary to achieve success in our life function.

3) Mindful productivity practices for ADHD

- a) Mindfulness of how we function We all have different habits and ways of working that can vary widely because of our wonderfully individual personalities. Knowing what works best for yourself is important to finding success in your endeavors. Some of us might function better at different times of the day or have different needs to ensure we are staying on task and productive. Staying hydrated, nourished, and rested can have particularly salutary effects for some of us when working or we may work better in different environments. To learn what is most beneficial for us in the ways we operate, it is important to turn a mindfully investigative perspective on how we function so we can observe and identify these successful strategies and eliminate detrimental habits.
- b) Mindfulness of priorities It is important to take a moment and collect ourselves when there are multiple obligations encountered seemingly all at once. By taking a step back from the ostensible flood of demands and soothing the mind and body, we can attend to mindfully prioritizing our tasks and meet them accordingly one by one with our full attention.
- c) Mindfulness of surroundings What we keep around us affects how we function as our surroundings are an external extension of our inner landscape as they both interconnect to represent our experience. Just as we seek to develop our attention after limiting our distractions in formal practice, we need to limit our unnecessary distractions when engaging in deep work by ways such as having a clean and organized environment, sequestering ourselves from others, and maintaining quiet time around ourselves. While this is helpful, it does not eliminate the possibility of distractions, so it is important to practice how to anchor our attention appropriately and mindfully acknowledge external stimuli with equanimity before guiding our attention to our intended focus.
- 4) Group Intention Setting and Task Visualization Practice
 - a) Intention Setting and Visualizing Tasks Intention setting is the practice of naming and visualizing three intentions or objectives in the morning for the rest of the day.
 - i) Instruct students to take a comfortable position and take a few cleansing, grounding breaths then decide what intention they would like to achieve for themselves in the moment.

- ii) Invite them to contemplate and visualize how they will feel once they have achieved this goal before visualizing the singular next step they need to take in the process of achieving that goal.
- iii) After taking a few more additional breaths, repeat this intention setting process two more times before instructing students to collect themselves with mindful awareness and acceptance before going forth on their endeavors to fulfill their intentions.
- iv) Throughout the day students should check back in with themselves to note their progress in completing their intentions.

(The audio recording titled "Intention Setting and Visualization Meditation" can also be played for the class in lieu of in-person classroom meditation guidance as well.)

- 5) Group Discussion
 - a) Intention setting and visualization discussion
 - i) Invite students to share their intentions if they would like. Was it difficult deciding what felt like a priority?
 - ii) What did they notice arising in them internally when visualizing the intention as completed?
 - iii) Do they feel increased feelings of motivation and confidence as they set out to manifest their intentions?
 - b) At-home metta practice
 - i) Ask if students would be willing to describe their progression with metta practice.
 - ii) Have they noticed anything new in the way they interact with others interpersonally?
 - iii) Are there any difficulties they need guidance in support of their practice?
 - c) Optional Journal Discussion and Open Discussion
- 6) At-home Intention Setting and Visualization Practice
 - a) Instruct students to integrate intention setting into their daily routine and encourage them to strengthen their visualization skills regarding the practice.
 - b) Journals should be about their experiences, progress, and difficulties with intention setting practice.
- 7) Group Compassion Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

Week 4 - Session 1 Lesson Plan

1) How ADHD affects Emotional and Impulse Regulation - ADHD often leads to issues with managing our emotions and impulses in the face of triggers. Individuals can often feel heightened emotions with ADHD and moderating them can require more deliberate effort when these feelings arise. This can result in harmful tendencies and behaviors when lacking the capability to soothe and calm the mind when feelings related to the hindrances can arise. This is especially true for individuals that lack healthy support and positive outlets for their negative emotions leading to additional stressors and dysfunctional habits. Poor emotional regulation typically results in an increase in impulsivity which can reinforce destructive behaviors which are compounded further by the poor impulse control often seen in individuals with ADHD. When learning to manage our emotions and impulses, it can be difficult to develop a process for regulating one's mind if these emotions and impulses are driving our attention and thoughts away as distractions. This is why it is necessary to learn how these triggers can arise at any time and then notice them when they do so that we can take the steps to not give in to them and relinquish control of our attention and behavior to them.

- 2) Applying Noting practice We can utilize noting practice to more readily recognize when negative emotions appear or if we are having difficulty regulating them or not letting them cloud our thoughts. When these feelings are present, we can internally name them in a manner which depersonalizes the inner proximity we feel from them to create the distance required not to identify with our emotional landscape in the moment. For example, rather than stating "I am angry" when anger is felt, we can state internally that "anger is present" while shielding our attention from how the anger affects us. This can also be applied to impulsive urges that can arise due various stimuli. Instead of stating "I am craving that piece of cake", we can reframe the impulse as "the urge to eat the cake is arising" which can allow us to position ourselves to refrain from indulging in the impulse.
- 3) Group Open Monitoring practice Instruct students to practice sitting meditation with their attention turned towards whatever arises in the mind, body, or externally openly and without agenda. Students should first take a few moments to ground themselves with a few breaths or a momentary body scan before opening up their attention to whatever arises with calm acceptance whether it be a thought, an emotion, impulse or sensory desire, or a sensation/perception and labeling them before returning to choiceless awareness of the entirety of their moment-to-moment experience. (As always, instructors can opt to play the audio recording titled "Open Monitoring Meditation" if they so choose.)
- 4) Group Practice Discussion
 - a) In-class Open Monitoring practice discussion
 - i) Where did you find your attention turning to?
 - ii) Did any thoughts or emotions stay present for long moments or did their noting shift from different focal points often?
 - iii) How did it feel to pay attention without having to direct it on one focus during the entire meditation?
 - iv) Did they notice any negative emotions or impulses?
 - v) How did they respond to them?
 - b) At-home Intention Setting practice discussion

- i) Has intention setting made a difference in the way students are able to follow through on their intentions?
- ii) Has visualizing tasks before starting them changed how students process these tasks?
- iii) Are they better able to stay organized and prioritized as a result of these practices?
- 5) At-home Sustained Informal Practice
 - a) Students will be directed to work on maintaining sustained periods of mindful awareness and presence throughout their days, incorporating all the at-home practices accumulated up to this point and continue journaling their experiences and experiments with cultivating mindfulness.
- 6) Group Compassion Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

Week 4 - Session 2 Lesson Plan

- 1) *Samatha* and *Samadhi* and how they relate to physical and mental hyperactivity as well as attention
 - a) *Samatha* is a Buddhist term describing mental tranquility and is a trait developed strongly through mindfulness practice. It refers to a state of mental stability and calmness that is attained through sustained focus and training in self-induced processes for regulating the mind and nervous system. Developing *samatha* in response to restlessness and rumination allows the practitioner to quell cognitive and physical hyperactivity to achieve greater clarity and emotional regulation in their moment-to-moment experience. Furthermore, practitioners can utilize this quality to learn how to better exist calmly in the presence of sensory desire without the need to follow through with them and effectively work through impulses to feel certain sensory perceptions the practitioner has been attached to.
 - b) Samadhi is a Buddhist term that can be translated as meditative concentration and describes a state of full cognitive absorption into whatever the practitioner's focal subject is, whether it be within a specific meditation practice or during informal mindful experiences. Within the mind of a person that has entered into samadhi, they experience unhindered anchoring of attention and thought onto the moment and what arises effortlessly and without difficulty. By immersing themselves into the moment with deep concentration and mental clarity, the individual can respond with whatever happens immediately with insight and benevolence free from personal agenda. Like samatha, the presence of the state of samadhi is

extremely effective in allowing those living with ADHD to maintain consistency and depth of awareness as well as unify the body with the mind in response to the luring aspects of the five hindrances. *Samatha* and *samadhi* develop alongside each other as mindfulness practitioners deepen their practice over time and both help reinforce and sustain each other.

- 2) The concepts of *Ekaggata* and *Sukha* and how they relate to ADHD hyperfocus and taskoriented flow states
 - a) The path to attainment of *samadhi* and *samatha* involves the mental factor of *ekaggata* translated as "one-pointedness" and the state of *sukha* which describes a lasting sense of contentment and joy for one's experience. When our focus is aligned with our present moment endeavors and intentions, *sukha* can arise and ground the mind in the experience further due to the ease and satisfaction felt then. *Sukha* counteracts ill-will towards the task at hand to eliminate mental resistance and sets the conditions for us to enter into *ekaggata* where we are fully focused on a single object with no interruption. *Ekaggata* forms the basis for the development of long lasting *samadhi* as we become more readily able to access one-pointed concentration intentionally.
 - b) The state of flow, in which one is completely mentally zoned into an activity with full attention, engagement, and enjoyment and resistant to external distractions or the influence of negative internal mind states, draws deep parallels to the phenomenon of *samadhi* in differing contexts. Entering into a state of flow can maximize productivity and efficiency while incurring minimal depletion of mental resources. This can hold special significance in learning to manage task performance with ADHD. Since ADHD is due to a dysregulation of attention rather than a lack of attentional resources, individuals with ADHD can often experience hyperfocus on an activity if they are particularly interested in it and enjoy it to a great degree. Hyperfocus differs from flow, however, in that hyperfocus does not involve consistent conscious awareness of attention and can cause inattentiveness towards external stimuli whereas flow includes being fully present in the environment in which they are engaging in their intended activity. By setting healthy intentions and prioritization for an activity, people with ADHD can aim their propensity for hyperfocus to significantly achieve high performance flow states without the intrinsic distracted nature towards external surroundings seen in hyperfocus. As students develop stronger observational skills, they can ascertain the conditions and nuances of hyperfocus from those of flow in complement with increased opportunities to observe their mind states while in flow due to deepening concentration.

- 3) Group Awareness of Breath Meditation
 - a) For this final meditation, we revisit awareness of the breath now that students have become more proficient and comfortable with sitting meditation, especially those who may have had issues sitting still. Awareness of the breath for many is the most useful meditation practice as it is always readily accessible in any setting whereas other practices such as walking or laying down to do a body scan may not always be feasible depending on where the practitioner is situated.
 - b) Guide students to attend to the breath with the goal of sustained concentration over long stretches of the meditation period. While they may not be able to achieve this at this point in their progression, the foundation for their path towards concentration in practice is being conveyed to them through this instruction and for most will develop over time and continued learning of mindfulness. (The audio recording for "Awareness of Breath" meditation can be played here in lieu of in-class guidance)
- 4) Group Practice Discussion
 - a) Now that we have had a chance to learn a good base for our mindfulness practices, invite students to contemplate on the first icebreaker activity in class and recall any significant moments of mindfulness they have experienced in the last four weeks in contrast to the mindfully present moment they shared initially.
 - i) Did they notice differences in the way they were present recently compared to back then?
 - ii) Are they finding themselves more consistently or more deeply mindful now that they have a solid practice?
 - iii) What about instances where they have been distracted or hyperactive recently compared to the moment they described in the first class?
 - iv) Has inattentiveness and physical restlessness decreased in their day to day lives?
 - v) Are students still finding any aspect of their practice particularly challenging?
 - vi) What other indirect ways has the practice affected their lives?
 - vii) Do they intend on pursuing more mindfulness training as a result?
- 5) Additional Resources
 - a) Inform students of resources like books, podcasts, and additional programs that may be available to them.
 - b) Recommend students develop a consistent practice with further training with a mindfulness instructor and to consider going on a meditation retreat possibly from one of the retreat centers provided.

- c) Encourage their friends and family to practice alongside them to develop a meditation community to help further each other's practices.
- d) Find healthcare from professionals versed in managing ADHD as well as in mindfulness principles or encourage current doctors or counselors to learn more about mindfulness and how it can benefit patients and clients living with ADHD.
- 6) Final Group Salutation
 - a) May I be happy, healthy, and safe.
 - b) May I find the peace and calm to be patient and gentle with myself.
 - c) May all beings be free of suffering.

(Make sure to show gratitude towards the students for participating in the class and send farewells imbued with metta to them as they embark on their mindfulness journey.)

Appendix C

Guided Meditation Audio Links

Guided Awareness of Breath Meditation for ADHD:

https://www.dropbox.com/scl/fi/gnqm23x6j09vjt41qjkfy/Guided-Awareness-of-Breath-

Meditation-for-ADHD.m4a?rlkey=6x5bozwbra79fp446boir2cau&dl=0

Guided Body Scan Meditation for ADHD:

https://www.dropbox.com/scl/fi/ehcyq8kqflxw9w111kokl/Guided-Body-Scan-Meditation-for-

ADHD.m4a?rlkey=mce15vzlvw5i0wvr7kp4ym042&dl=0

Guided Compassion and Visualization Meditation for ADHD:

https://www.dropbox.com/scl/fi/4xp35jx5wj28sd5mzt5xb/Guided-Compassion-and-

Visualization-Meditation.m4a?rlkey=hdhyqb5ii7h5aco8nk7pppuym&dl=0

Guided Intention Setting and Visualization Meditation for ADHD:

https://www.dropbox.com/scl/fi/t9lh1ees4k91qxq221sh8/Guided-Intention-Setting-and-

Visualization-Meditation-for-ADHD.m4a?rlkey=scf2yeita3f7cact5xjf4xv7k&dl=0

Guided Open Monitoring Meditation for ADHD:

https://www.dropbox.com/scl/fi/yrlhft3ix6qen7u6o95fu/Guided-Open-Monitoring-Meditation-

for-ADHD.m4a?rlkey=ta39wfe0txhziaf44sej8jzw1&dl=0

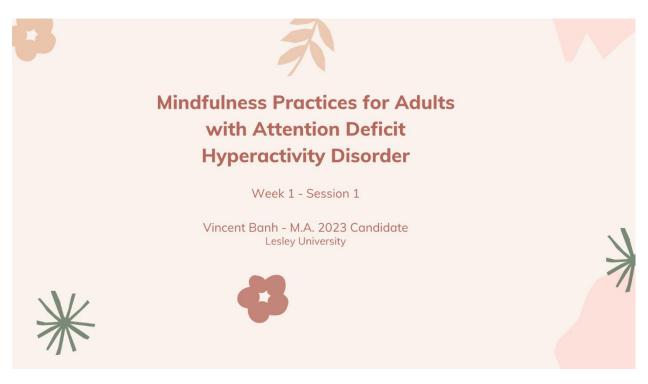
Guided Walking Meditation for ADHD:

https://www.dropbox.com/scl/fi/hhw9yooxsx7hdnw792lpk/Guided-Walking-Meditation-for-

ADHD.m4a?rlkey=l6xlosr15a4c7qld77wc17dvb&dl=0

Appendix D

Curriculum Presentation Slides



Introductions

- (Instructor name, background, training, credentials, etc.)
- Course syllabus
- Course objectives:
 - Learn fundamental mindfulness concepts and practices
 - Apply this knowledge to complement ADHD management
- Class participant introductions

• Icebreaker activity:

 Please describe and contrast a moment where you felt mindful, present, or calm with another moment where you felt forgetful, distracted, or restless.

What is Mindfulness?

"Mindfulness is awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally" - Jon Kabat-Zinn

Mindfulness describes:

-An innate human trait or quality -A collection of teachings and practices derived from Buddhism aimed towards therapeutic applications

When we are not able to stay mindful, we can experience:

Mind wandering

- Physical restlessness
- Going on autopilot
- Forgetfulness



Some types of mindfulness meditation practices:

Sitting/awareness of breath meditation Walking meditation Loving Kindness/Metta meditation Open monitoring meditation Visualization meditation

Formal vs Informal Mindfulness



Formal mindfulness

Formal mindfulness meditation practices involve cultivating mindfulness deliberately in stillness and solitude through a specific activity or focal point such as concentrating awareness on the breath while sitting or on the body's sensations while laying down

Informal mindfulness

Informal mindfulness involves maintaining mindful awareness of our moment-to-moment experience throughout the day, outside of periods of formal meditation.

Attention-Deficit/Hyperactivity Disorder

ADHD is a condition which affects how attention, executive function, and emotions are regulated. This can influence daily lives in a variety of ways which can present as inattentiveness, memory problems, hyperfocus, speech/auditory processing difficulties, relationship issues, loss of property, time management problems, emotional issues, impulsivity, physical restlessness, and financial challenges.

ADHD Subtypes

Inattentive Type

Hyperactive Type

Characterized by attentional and cognitive symptoms

Associated with physical restlessness verbosity, and impulsiveness

Combined Type

Exhibits symptoms seen in both inattentive and hyperactive types

Guided Body Scanning Meditation

- Please sit or lie down comfortably, eyes can be closed or kept open
- Aim to pay attention to the sensations of the body
- Follow along with the guided instruction provided
- While staying completely still is not the goal of this practice, strive to remain seated or lying down while being guided if physically possible.

Practice Discussion

- Questions? Feedback?
- Positive experiences?
- Questions about ADHD?

- Noteworthy feelings or challenges about your meditation?
- Questions about meditation?

Practice and Journaling Assignment

1) Walking meditation - Instructions:

https://www.tarabrach.com/wp-content/uploads/pdf/Walking-Meditation-Instructions.pdf

• Please practice everyday until the next class session

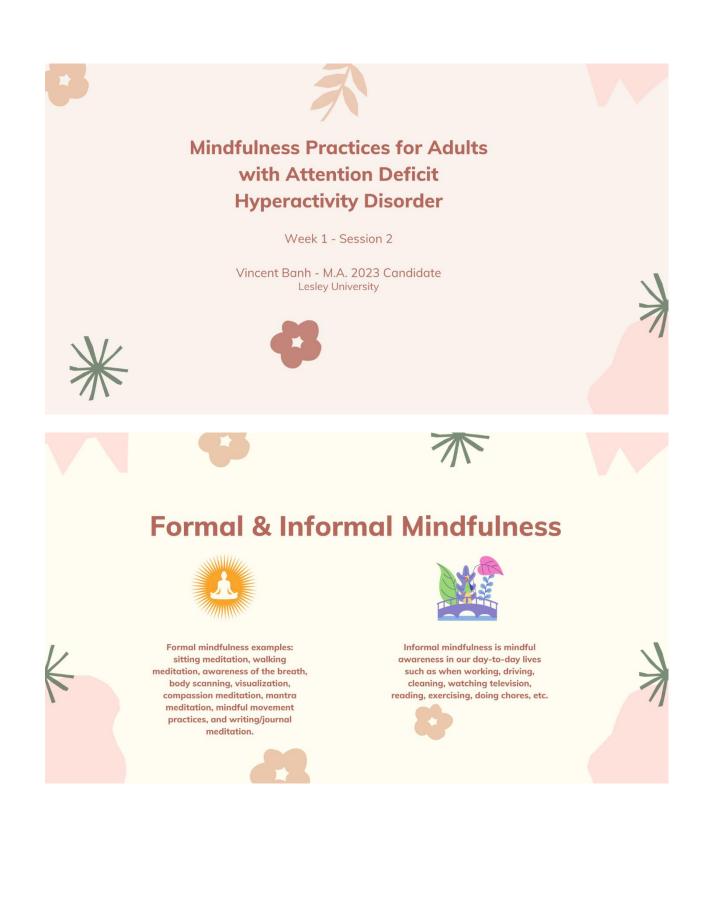
2) Begin daily meditation journaling

- This will not be read by the instructor or other students and is mainly for the development of your own personal practice.
- This will be about your personal experience so feel free to journal whatever you feel is true to your experience (meditation is a highly experiential practice!).

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

- 1. May I be happy, healthy, and safe.
- 2. May I find the peace and
- calm to be patient and
- gentle with myself
- May all beings be free of suffering.



Managing Hyperactivity, Mind Wandering, and Autopilot Mode

Hyperactivity is often described as feeling physically antsy, restless, fidgety, impulsive, and energetic.

- Sitting and stillness meditation can be challenging for those with hyperactivity.
- Walking meditation or mindful movement practices can be a great way to develop a formal practice for those that are hyperactive.

Mind wandering and autopilot happens when we are distracted, forgetful, disengaged, and even hyperfocused.

- Staying present and engaged are the hallmarks of being mindful
- Rather than trying to resist mind wandering and autopilot mode when they arise, simply notice and observe your thoughts and feelings when they have arisen.

Group Walking Meditation Practice



15 minutes of sustained walking meditation as a class

- Choose a place to walk inside the classroom or outside
- Follow the practice learned in the walking assignment

Practice Discussion

- What sensations did you notice during the walking meditations in class and outside of class?
- How did practice with the class contrast with practicing solo? Was it easier or harder?
- How did the walking meditation contrast with the body scanning meditation? Did either feel easier or more enjoyable?

- Did you notice any difficulties, challenges, or discomfort during the meditations?
- Did your mind wander? How did you respond to the mind wandering, if so?
- Would anyone like to share feedback on the journaling process or share an excerpt of their journals?

Practice and Journaling Assignment

- 1) 10-15 minutes of walking or body scanning meditation daily outside of class
- 2) Begin incorporating informal mindfulness into their day-to-day activities
- 3) Continue journaling about daily and in-class practice as well as informal practice

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

L.May I be happy, healthy

and safe.

- 2. May I find the peace and
 - calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



* 5 *

Mindfulness Practices for Adults with Attention Deficit Hyperactivity Disorder

Week 2 - Session 1

Vincent Banh - M.A. 2023 Candidate Lesley University





The Five Hindrances of Buddhism

The five hindrances in Buddhist traditions refer to certain mind states that present as barriers to clarity, concentration, and tranquility. They are as follows:

- Sensory Desire Attachment to sense pleasures such as touch, taste, sound, sight, and scent.
- Ill-will Mental states which are characterized by fear, negativity, aversion, maliciousness, and bitterness.
- Sloth & Torpor States of decreased energy and effort of the body and the mind.
- Restlessness & Worry Restlessness refers to a state of physical agitation and hyperactivity while worry is describes states of mental anxiety and rumination.

Doubt - Doubt represents a lack of confidence or faith in one's capabilities

The Five Hindrances and ADHD

- Sensory Desire Rather than give in and indulge in the allure of sensory desire, we try to suspend this urge and instead pay attention to how sensory desire arises and changes in its form and presentation.
- Ill-will We observe our feelings of ill-will and counter them by cultivating loving kindness towards ourselves and others.
- Sloth & Torpor Setting intentions for ourselves in our actions and activities with an emphasis on mindful movement.
- Restlessness & Worry Observing our minds and bodies to notice when these arise allow us to know when to incorporate mental and physical relaxation practices and respond with equanimity and self-compassion
- Doubt Developing equanimity and self-compassion also counters doubt and intention setting can allow us to find confidence in ourselves and our abilities.

Group Awareness of Breath Meditation Focusing on Noting/Labeling

- Please sit or stand comfortably, eyes can be closed or kept open
- Aim to pay attention to the sensations of the breath within the body
- Follow along with the guided instruction provided
- While staying completely still is not the goal of this practice, strive to remain seated or lying down while being guided if physically possible.
- Strive to remain still while noticing and observing any physical sensations or thoughts and feelings that arise before naming/labeling them and returning to focusing on the breath



Practice Discussion

- Please share your thoughts and feedback about the meditation.
- How did it feel to intentionally direct your attention back to the breath?
- How is your daily practice coming along? What about informal practice? Jouirnaling?

- Was it difficult identifying/differentiating between thoughts, sensory perceptions, physical sensations, and emotions?
- How did it feel to sit still for a prolonged length of time?
- Are you recognizing more attentiveness/physical tranquility or better identifying instances of inattentiveness/hyperactivity?

Practice and Journal Assignment

- Continue meditating daily with walking, body scanning, or awareness of breath meditations at least 15 minutes daily. Please attempt awareness of breath at least once on your own prior to the next class meeting.
- Please integrate noting/labeling practice into your efforts in informal mindfulness
- Please journal regarding the experience of noting/labeling as well as any noteworthy thoughts regarding your practice.

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

- 1. May I be happy, healthy, and safe.
- 2.May I find the peace and calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



Mindfulness Practices for Adults with Attention Deficit Hyperactivity Disorder

Week 2 - Session 2

Vincent Banh - M.A. 2023 Candidate Lesley University





- Inattentiveness and mind wandering can affect our listening skills. Auditory processing issues and receptive aphasia are commonly seen in those living with ADHD.
- Difficulties with speech are also observed in those with ADHD, often resulting in speech impediments, reactive speech, misspeaking, and expressive aphasia. Hyperactivity can result in impulsive speech/flight of ideas, improper body language/non-verbal communication, interrupting the speech of others/talking out of turn, and preventing others from speaking.
- These effects can cause a decline in executive functioning and interpersonal relationships with family, friends, and in the workplace

What is Mindful Communication?

The practice of mindful communication entails bringing the principles of mindfulness into the ways we interact and communicate interpersonally. Mindful communication involves bringing mindful awareness and an attitude of reflexive nonjudgement in the way we listen and communicate, both verbally and non-verbally.

Insight Dialogue Practice

1) Pause - Taking a moment to collect ourselves prior to engaging dialogue.

2) Relax - Fostering tranquility in our minds and bodies to further ourselves from physical, mental, and vocal reactivity.

3) Open - Meeting the circumstances with mindful acceptance through equanimity and non-judgement.

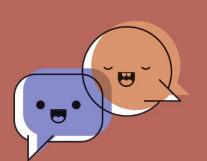
4) Attune to Emergence - Seek to understand the impermanence of the moment and to be free of agenda within the dialogue.

5) Listen Deeply - Being attentive and compassionately receptive to the speech of those we connect with.

6) Speak the truth - Presenting our words as a genuine representation of our lived experience with compassion and acceptance.

Group Insight Dialogue Practice

- Group up into pairs to discuss and attempt each step of insight dialogue practice regarding a subject they are passionate about:
 - Pause
 - Oper
 - Attune to emergence
 - Listen Deeply
 - Speak the truth
- When ready, partners should engage in insight dialogue regarding their practice so far.
- Present any questions or feedback to the instructor and the class through group mindful communication.



Practice and Journal Assignment

1) Please practice insight dialogue with a willing volunteer outside of class and begin to incorporate a mindful attitude towards the ways you communicate.

2) Journal Topic: Mindful communication practice and times when we were not mindful in our speech and listening.

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

L.May I be happy, healthy

and safe.

- 2. May I find the peace and
 - calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



* 5 *

Mindfulness Practices for Adults with Attention Deficit Hyperactivity Disorder

Week 3 - Session 1

Vincent Banh - M.A. 2023 Candidate Lesley University





Stress and ADHD

- Stress has been shown to have a strong impact on the progression of ADHD symptoms in addition to affecting other areas of our lives and decreasing wellbeing which can in turn cause further negative influence on ADHD symptoms.
- Stress can decrease attentiveness and emotional regulation while increasing impulsivity and distractedness.
- Proper stress management and self-care can help decrease ADHD symptoms. ADHD can already make having a proper self-care regimen difficult to implement yet incorporating this practice into our routine reinforces itself in many aspects of lives.

Mindful Acceptance and Self-Compassion

Formal and informal mindfulness creates the conditions for equanimity towards life's ups and downs so that we can meet stressors with an open attitude and understanding.

Through self-compassion, we give ourselves the space to hold our well-being in the utmost priority and the strength to accept and work through stressors, understanding that they are impermanent.

Group Metta and Compassionate Visualization Practice

Please send metta/loving kindness to the following people:

- Yourself
- Someone who has cared for you
- Someone you feel indifferent to
- Someone whom you shared a disagreement with

While visualizing each subject in a vibrant, joyful state, send the following wishes to each of them:

- May you be happy.
- May you be healthy.
- May you be at peace.



- What feelings arose when sending metta?
- Was it challenging to realistically visualize each person?
- How did it feel to send metta to yourself? Was it difficult?
- Has mindful communication outside of class been challenging?

- Was it difficult to decide who to send metta to?
- How did it feel to send metta to someone with whom you have had a disagreement?
- How are your efforts at practicing mindful communication?
- Has mindful communication benefitted your relationships?

Practice and Journal Assignment

1) Please practice metta meditation along with your daily practice of sitting/walking/body scanning.

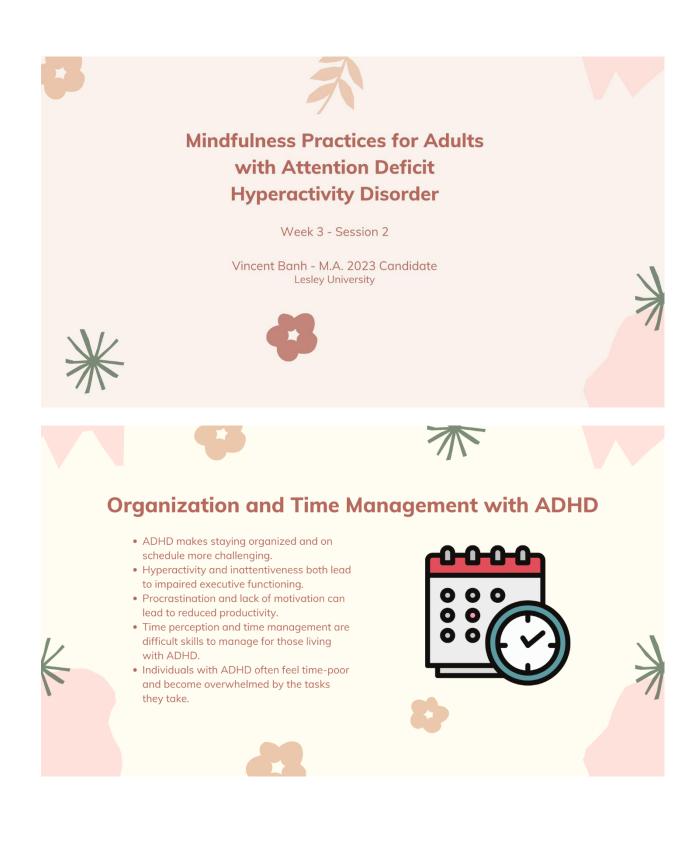
2) Journal Topic: Please write about how practicing metta is playing out in your daily lives, particularly with self-directed metta and selfcompassion

r r

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

- 1. May I be happy, healthy, and safe.
- 2. May I find the peace and
- calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



Task Prioritization and Avoiding Multitasking

Multitasking is a perniciously pervasive concept that has been presented in work culture as a tool for productivity and efficiency but has been shown in research to actually be misrepresented as the ability to effectively complete multiple tasks simultaneously rather than the reality of it being a process which divides and shifts our attention from task to task which leads to poorer performance and increased mental fatigue.

It is important to develop mindful habits to be present and attentive to each task we attend to by giving them our full attention before shifting it to the next task. Anchoring our focus on one task at a time additionally allows us to build our ability to sustain and increase our attentional capabilities. This leads to greater long term success through better well-being and executive functioning

Mindful Productivity for ADHD

Staying mindful of:

- How we function
- How we prioritize obligations
- Our surroundings



Group Intention Setting and Task Visualization Practice

Intention setting is the practice of naming and visualizing three daily intentions or objectives at the start of the day.

- 1) Take a comfortable position and a few
- grounding breaths
- 2) Choose three intentions and visualize how it
- will feel to fulfill them
- 3) Visualize yourself completing the first step
- needed to achieve each objective
- 4) Check in with yourself throughout the day to monitor your progress with each intention



Practice Discussion

- Did anyone select any intentions they would like to share with the class
- How did it feel to visualize each intention being achieved?
- How is metta practice coming along?
- Does anyone have any difficulties in their practice they need instructor support and guidance on?

- Was it challenging to decide on only three intentions?
- Did this make you feel motivated and confident towards your intentions?
- Are you recognizing deeper empathy and compassion in your personal relationships?

Practice and Journal Assignment

 Begin intention setting practice daily in addition to the practice routine established in the previous weeks
 Journal Topic: Please write about your experience with intention setting practice and outline your progress, successes, and challenges.

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

- 1. May I be happy, healthy, and safe.
- 2. May I find the peace and calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



Applying Noting Practice

- Noting and labeling emotional and impulsive reactivity more readily allows us to better regulate them and prevent mental clarity
- Naming these mind states helps us distance ourselves from them so that we are better able to resist personalizing and identifying with negative emotional landscapes
- Rather than stating "I am angry" when anger arises, we can state internally that "anger is present" while shielding our attention from how the anger affects us
 Instead of stating "I am craving that piece of cake", we can reframe the impulse as "the urge to eat the cake is arising" which can allow us to position ourselves to refrain from indulging in the impulse.



Group Open Monitoring Practice

Please practice sitting meditation, eyes closed or open, with your attention turned towards all stimuli inside and outside of the mind and body. Start with some grounding breaths and a quick body scan before opening up your focus towards whatever arises with equanimity. Don't forget to mentally note/label whatever comes to your attention (Examples: thoughts, emotions, impulses, sensory desire, sensation, or perception, etc.)



80

Practice Discussion

- Where did your attention turn to while open monitoring?
- How did it feel to pay attention on more than one focal <u>point?</u>
- Has intention setting practice created the conditions for better fulfilling your goals?
- Are you better able to stay organized and prioritize tasks better?

- Did thoughts or emotions remain for long or did they dissipate quickly?
- Any negative emotions or impulses? How did you respond internally if so?
- Has visualizing tasks before starting them changed how students process these tasks?

Practice and Journal Assignment

Please work on maintaining sustained periods of mindful awareness and presence daily, incorporating all the assigned practices accumulated up to this point and continue journaling your experiences and experimentation with cultivating mindfulness.

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING:

L.May I be happy, healthy

and safe.

- 2. May I find the peace and
 - calm to be patient and
- gentle with myself.
- 3.May all beings be free of suffering.



* 5 *

Mindfulness Practices for Adults with Attention Deficit Hyperactivity Disorder

Week 4 - Session 2

Vincent Banh - M.A. 2023 Candidate Lesley University





Concentration and Tranquility

Samatha

A Buddhist term describing mental tranquility as a trait cultivated through mindfulness practice. A state of mental stability and calmness attained through sustained focus training that regulates the mind and body.

Samadhi

Another Buddhist term for meditative concentration where there is a state of full cognitive absorption into the practitioner's focal subject. In this mode, the mind is fully anchored in attention clearly and strongly.



Focus and Mood with ADHD

Ekaggata

The Buddhist term for a mental factor where the mind is "one-pointed" and fully coordinated in focus on an object of attention while staying grounded and present with one's moment-tomoment experience. It is thought of in

grounded and present with one's moment-tomoment experience. It is thought of in Buddhism as a countering influence on the hindrance of sensory desire. Ekaggata forms the conditions for developing samadhi.



Sukha

A Buddhist term sometimes translated as joy, ease, or bliss. When we attain samadhi, sukha can arise in response to the experience and further ground us into our attention due to the ease and joy we can feel when fully attentive to our experience. Sukha is a counter to ill-will and helps eliminate mental resistance and

demotivation commonly seen in ADHD in the context of task completion



ADHD Hyperfocus and Flow States

ADHD hyperfocus occurs when we become fully absorbed in an activity that we are highly interested in. Hyperfocus states can be highly difficult to suspend as the entirety of our attention is immovably placed onto that specific activity. This differs from the phenomenon of the flow state in which we can maintain conscious awareness of our attention and external surroundings/stimuli while maintaining a high degree of productivity with minimal depletion of cognitive resources. Through training and deliberate effort, we can take advantage of our propensity to hyperfocus with ADHD and instead utilize that same depth of concentration within a highly task-oriented flow state.



Group Awareness of Breath Meditation

By now, you should have a good base of practice with sitting meditation on the breath. Breathing meditation is a powerful practice that can be practiced virtually anywhere at anytime as well as in conjunction with many other meditative practices. As you become more at ease with sitting and breathing, aim to hold your attention on your breath for as long as possible (it's okay if your mind wanders! Just catch yourself and bring your attention back!). Over time, it becomes more effortless to anchor onto the breath with your mind and you will notice your attention grow in strength.



Practice Discussion

- Are you more present now compared to the beginning of the course?
- Are you noticing less distractedness or hyperactivity?
- Are you still experiencing any remaining challenges in your practice?
- Do you feel you will continue with your practice? Why or Why not?

- Do you feel more mindful after establishing your practice?
- Are you feeling less inattentive and physically restless/impulsive?
- Has your practice affected your daily life in indirect ways?

Additional Resources

· Books:

- Natural Relief for Adult ADHD: Complementary Strategies for Increasing Focus, Attention, and Motivation With or Without Medication by Stephanie Moulton Sarkis
- <u>10 Simple Solutions to Adult ADD: How to Overcome Chronic Distraction & Accomplish Your</u> <u>Goals</u> by Stephanie Moulton Sarkis
- The Mindfulness Prescription for Adult ADHD by Lidia Zylowska
- Podcast:
 - The Mindfulness Prescription for Adult ADHD by Lidia Zylowska
- Online Course:
 - UCLA MAPs Applications: Introduction to Mindfulness for Adult ADHD:
 - https://www.uclahealth.org/programs/marc/classes#adhd

• Meditation Retreat Centers:

- Spirit Rock Meditation Center: https://www.spiritrock.org/
- Insight Meditation Society: https://www.dharma.org/

Group Metta Practice

TOGETHER, PLEASE RECITE FOLLOWING: ~ 5~

L.May I be happy, healthy

and safe.

- 2. May I find the peace and
- calm to be patient and
- gentle with myself.
- 3. May all beings be free of suffering.