



families, periodic “booster” sessions can be scheduled throughout the year to assess progress with treatment plans and to make any needed adjustments.

### Program Director

Bart Hodgens, Ph.D., UAB Civitan International Research Center, is Director of the STP. He is a Clinical Child Psychologist with over 20 years of experience in research, evaluation, and treatment of ADHD and associated disorders. He is on the faculty of the Departments of Psychology and Pediatrics at UAB and directs clinics focused on childhood behavioral and learning problems at the UAB Sparks Clinics.

### Medical Consultant

Leon Dure, M.D., Director of the Division of Pediatric Neurology, UAB Department of Pediatrics, serves as the STP medical consultant. In addition to his departmental duties Dr. Dure’s medical practice includes several ongoing clinics at The Children’s Hospital of Alabama. He has published extensively on medical treatments for children with ADHD and movement disorders such as Tourette’s Syndrome.

### About Our Treatment Program

The Pelham Summer Treatment Program has been a component of psychosocial treatment for children in clinical and prevention

trials funded by the National Institutes of Health with well-documented positive results. Based on its strong treatment, research, and training record, the Summer Treatment Program has been named as a Model Program in Service Delivery in Child and Family Mental Health by the Section on Clinical Child Psychology (Section 1, Division 12) and the Division of Child Youth, and Family Services (Division 37) of the American Psychological Association.

### Contact Information

For more information about the Summer Treatment Program contact Angie DeVaux at 934-5471 or e-mail Dr. Bart Hodgens (bhodgens@uab.edu). Visit our web site: [www.circ.uab.edu/sparks/adhd](http://www.circ.uab.edu/sparks/adhd).

### References

<sup>1</sup>Pelham, W.E., & Hoza, B (1996). Intensive treatment: A summer treatment program for children with ADHD. In E. Hibbs & P. Jensen (Eds.), *Psychosocial treatments for child and adolescent disorders: Empirically based strategies for clinical practice* (pp. 311-340). New York: APA Press.

<sup>2</sup>Pelham, W.E. (1993) Pharmacotherapy for children with attention-deficit hyperactivity disorder. *School Psychology Review*, *22*, 199-227.



# UAB Summer Treatment Program for Children with ADHD



**A**ttention-deficit hyperactivity disorder (ADHD) is one of the major mental health disorders of childhood. Children with ADHD have difficulties in attention, impulse control, and activity level that can lead to impairment in daily life functioning, including classroom performance, peer relations, and family relationships.

The UAB Summer Treatment Program for children with ADHD offers a comprehensive approach to treatment provided in a therapeutic summer day camp setting. The six-week program utilizes social skills and problem solving training, academic remediation, sports skills training, medication assessment, and behavior therapy in a unique and well-established program developed by William E. Pelham, Ph.D. The Summer Program can be combined with the Follow-up Program for interested families, which includes school consultation and family “booster” sessions.

## Eligibility

This program is offered to children ages 6 to 12 who have been diagnosed with ADHD (and associated disorders such as ODD/CD or LD). Each child completes a pre-camp assessment that includes establishment of behavioral and academic goals for the summer.

## Program Description

Enrolled children attend the Summer Treatment Program for six weeks, from 8:00 AM until 5:00 PM on weekdays. Treatment plans are tailored to each child's behavioral, affective, and cognitive needs. The individually designed treatment plans are implemented by a well-trained staff of educators and therapists.

Each group of 12 children has one lead counselor, four counselors, one teacher, and a teacher aide. These staff are in addition to the Program Director, a clinical psychologist, who is on-site at all times. The groups stay together throughout the day to facilitate group cohesiveness and improvement in peer relations. Each group spends three hours daily in classroom sessions comprised of Art, Computer Lab, and Academic Skills. The remainder of each day consists of recreationally-based group therapy activities (e.g., soccer, softball). In all settings throughout the day, a variety of treatment modalities are implemented in an integrated manner. For more information online, please visit our web site at: [www.circ.uab.edu/sparks/adhd](http://www.circ.uab.edu/sparks/adhd).



## The treatment components include the following:

- Point/token Economy System
- Social Skills Training
- Group Problem-Solving Discussions
- Sports Skills Training
- Time Out
- Daily Report Cards
- Individualized Programs
- Daily and Weekly Reward Systems
- Weekly Parent Education Meetings (conducted on Wednesday evenings)

## Medication Assessments

Pharmacological interventions are an important but optional part of the Summer Treatment Program (STP). Using a unique assessment procedure that has been developed and validated in previous scientific studies, an individual child's response to various medical treatments can be evaluated under medical supervision. The medication assessment employs placebo-controlled double-blind procedures and a variety of measures of functioning (e.g., classroom productivity and accuracy, social behavior with peers, compliance with adult requests, parent and teacher rating scales) to produce a highly refined medication recommendation for each child involved in the assessment. Comprehensive reports to referring physicians enable them to determine whether medication is effective and what dose should be employed in the child's ongoing treatment.

## Follow-up Program

School consultation is available for interested families. Children with ADHD often have Section 504 Plans or an Individual Education Plan (IEP) at their respective school. Information obtained from the STP can be used in the development of an effective plan that establishes both academic and behavioral goals for the year.

Parent education is an important component of the STP. Parents attend weekly groups in the evenings, during which they are taught how to implement treatment with their children in the home setting. For interested