

# Solving the Four Essential Puzzle Pieces: Sneak Peek - Bonus Module Action Steps Guide

In this action step guide, you can do two things:

**1. Note your questions, thoughts, and personal reflections on each step.**

**2. Complete the exercises.**

This helps to reinforce the issues covered, to make them more “real” and lasting. To keep track of completion, just check the box after “Action Step Completed”.

You can complete this PDF in two ways:

1. Print and write by hand
2. Interactively, on any electronic device that works with PDFs. As you type, text will get smaller when you reach the end – so as to allow more typing. Save and print, if you like.

Here are the steps of this introductory module:

Step 1 — Welcome!

Step 2 — You’re Among Friends—And We Get It!

Step 3 — Take a Sneak Peek: The Double Triple-Whammy ADHD Roller Coaster

Step 4 — Meet Our Six Case Couples **Action Step Completed**

Step 5 — Take A Sneak Peek: The Dysfunctional Interaction Cycle

Step 6 — Terminology, Course Materials, and Medical Disclaimer

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## Module Summary: Welcome!

**You are in good company.** You are not the only person or couple dealing with these issues.

What’s more, the people I have met through this work, adults with ADHD and their loved ones, are truly special. They ask questions. They think in complexity. They know

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that life can be better. They don't passively accept the status quo. And, they generously share support and information, helping to move us all into the 21st Century.

As for the research scientists and clinicians who lead the charge? They are some of the most intelligent, dedicated, and compassionate professionals of any type I've ever met. Often, other medical specialties tend to focus on one thing—for example, sleep, bipolar, anxiety, and substance-use disorders, depression, trauma, and nutrition.

The leading ADHD experts, however, remain rigorously mindful that ADHD is a highly and variable complex phenomenon, and it often travels with and is often mistaken for the many other conditions whose specialists miss ADHD.

Finally:

- **Your predictable ADHD-Related Challenges have explanations—and solutions.** We will tackle the range of possibilities in this course.
- **Despite your best efforts to find or cooperate with mental healthcare treatment, you might feel that you're not making the progress you'd hoped for.**

And, despite your care providers' best intentions, they might not possess the skills you need to take treatment to the next level. This is why self-education is crucial. So is advocating for yourself with healthcare providers.

- **You'll have support on this journey.**

Obviously, all of this knowledge is not in itself a solution. But I hope it helps to remove what might be a huge boulder of stress off your shoulders. And that's big. Because stress, tension, and worry, self-recrimination, .....arguing.... can make everything so much worse. These negatives feelings and behaviors can block our ability to see a better future for ourselves — and how to go about creating it.

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## **Step 1. Welcome!**

*Notes/Questions:*

## **Step 2. You're Among Friends And We Get It**

*Notes/Questions:*

## **Step 3. Take a Sneak Peek—The Double Triple Whammy ADHD Roller Coaster**

*Notes/Questions (remember, this topic is covered in-depth in Course 1)::*

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**4. Meet Our Six Case Couples : in two exercises, please note your reactions to the couples and then your own “case couple” story.**

## **EXERCISE A**

Sometimes we learn best about ADHD-related challenges by seeing how they manifest for other people. The fact that we aren’t alone in these challenges—that is, they aren’t unique to our personal flaws—helps us to de-personalize, step back from paralyzing emotions, and focus on problem-solving.

For each couple, check any points that resonated for you. Then consider the last question: “Can this relationship be saved”—and why or why not.

### **Couple #1. Reggie and Patrice**

***Reggie (ADHD Partner):***

- \_\_\_\_\_ ADHD first suggested in grade school; parents dismissed the idea
- \_\_\_\_\_ Zoning out in school
- \_\_\_\_\_ Always felt smarter than his school performance indicated.
- \_\_\_\_\_ Joined the military for structure and opportunity.
- \_\_\_\_\_ Met future spouse, Patrice, *while* he was benefiting from that structured environment and immediate consequences
- \_\_\_\_\_ Difficulty adjusting to civilian life that requires self-structure
- \_\_\_\_\_ Loses track of priorities in job; tries to compensate by bringing work home
- \_\_\_\_\_ Has poor sleep and eating habits, gets little exercise
- \_\_\_\_\_ Becoming emotionally detached
- \_\_\_\_\_ Being treated for depression, which added to the weight gain and dulled his libido but didn’t improve primary challenges
- \_\_\_\_\_ Learning accidentally about ADHD
- \_\_\_\_\_ Other:

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## ***Patrice (Other Partner)***

- \_\_\_\_\_ Bewildered by her husband's changed behaviors
- \_\_\_\_\_ Felt that something "new" must be happening—not that something old was losing its camouflage
- \_\_\_\_\_ Has he stopped loving her? Could he be having an affair? Is she doing something wrong?
- \_\_\_\_\_ Loves her husband but feels frightened about their future, especially about having a child together
- \_\_\_\_\_ Couple therapists, individual therapists, and physicians have led them down all the typical rabbit-holes.
- \_\_\_\_\_ Other:

**QUESTION: What do you think: Can this relationship be saved? If so, what steps might each partner consider taking?**

## **Couple #2. Lin & Simon**

### ***Lin (ADHD Partner):***

- \_\_\_\_\_ Diagnosed as a child
- \_\_\_\_\_ Avoided medication; sensitive to stigma

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- \_\_\_\_\_ In college, saw medication as an unfair advantage
- \_\_\_\_\_ Relied on structured home environment and mother's support in managing assignments and tasks
- \_\_\_\_\_ Has trouble keeping up at work but tries to cover with engaging personality and volunteering to write special reports (thus coming home late or exhausted many nights)
- \_\_\_\_\_ "I get bored in conversations—wish people would just get to the point!"
- \_\_\_\_\_ Has a new boss who isn't tolerating her "quirks" as her previous boss did; worries about losing her job
- \_\_\_\_\_ Sees Simon as performing domestic tasks effortlessly; concludes he must really enjoy doing tedious things because she has such a hard time doing tedious things
- \_\_\_\_\_ Wants to spend more quality time with her daughter but can't get through another game of Candyland without checking her phone
- \_\_\_\_\_ Loves Simon but is really tired of his nagging and being crabby
- \_\_\_\_\_ Other:

### ***Simon (Other Partner):***

- \_\_\_\_\_ Told of Lin's childhood diagnosis only recently
- \_\_\_\_\_ Never knew how disorganized she was, she lived with parents until marriage
- \_\_\_\_\_ Assumes that her refusal to help at home comes from her mother doing everything for her
- \_\_\_\_\_ Views her "overpromising and underdelivering" as dishonest and manipulative
- \_\_\_\_\_ Resents being a "personal assistant"
- \_\_\_\_\_ Confused and hurt, victim of "bait and switch"
- \_\_\_\_\_ Can't talk to friends or family about it for fear they will form a bad opinion of her—or him

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- \_\_\_\_\_ Grows more frustrated over time; becomes chronically resentful and irritable
- \_\_\_\_\_ After learning of her childhood diagnosis, he educates himself about ADHD and fosters compassion for her, but she still rejects the diagnosis, much less treatment
- \_\_\_\_\_ Feels he is at an impasse
- \_\_\_\_\_ Other:

**QUESTION: What do you think: Can this relationship be saved? If so, what steps might each partner consider taking?**

### **Couple #3: Jeff & Carlos**

#### ***Carlos (ADHD Partner):***

- \_\_\_\_\_ Professional suggestion of ADHD in his childhood dismissed by parent; his two brothers had more severe symptoms
- \_\_\_\_\_ Impulsive home remodeling; starts the next thing before finishing the previous
- \_\_\_\_\_ Excels at work, where his tasks are highly structured and involve expertly using machinery to move things around—but not at home with chores and housecleaning

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- \_\_\_\_\_ Resents Jeff's rigidity about chores, clutter, etc.
- \_\_\_\_\_ Calls ADHD a "Big Pharma Invention"
- \_\_\_\_\_ Enjoyed his retirement's first six months by "doing what I want". Now he is realizing, however: He would like to have larger goals than staying up as late as he wants and watching crime shows all afternoon—but he's not sure how to begin.
- \_\_\_\_\_ Other:

### ***Jeff (Other Partner):***

- \_\_\_\_\_ At first, thought "opposites attract"—Jeff's a planner and Carlos is a do'er—and so they should "play to their strengths"
- \_\_\_\_\_ Over time, Jeff grew hypervigilant and resentful as Carlos violated domestic boundaries and failed to remember important agreements
- \_\_\_\_\_ Retirement: An already tenuous situation became a crisis when they had to spend more time together during the day—and when Carlos was not respectful of Jeff's need for working at home in peace
- \_\_\_\_\_ Carlos is burning through his retirement funds; Jeff worries about their financial future
- \_\_\_\_\_ Since Carlos retired, old friends comment that Jeff's more on edge; they are concerned for him
- \_\_\_\_\_ Other:

**QUESTION: What do you think: Can this relationship be saved? If so, what would need to happen?**



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## Couple #4: Gwen & Jerome

### *Jerome (ADHD Partner):*

- \_\_\_\_\_ Achieved an advanced degree and finished medical training thanks to mono-focus, the structure that school provided, and Gwen taking care of most life details
- \_\_\_\_\_ Motivated by pressure to “live up” to family tradition (e.g. father and grandfather are physicians)
- \_\_\_\_\_ Used cocaine occasionally to get through advanced studies and training
- \_\_\_\_\_ Always a poor sleeper
- \_\_\_\_\_ Has lost jobs due to ADHD-related symptoms (e.g. making mistakes, not following protocol, getting bored and therefore error-prone)
- \_\_\_\_\_ Diagnosed in mid-30s
- \_\_\_\_\_ Takes Adderall sporadically, more as a “performance drug” than steady, ongoing treatment after careful trials of several medications
- \_\_\_\_\_ His brain is “off” by the time he comes home; he justifies that by saying he works hard
- \_\_\_\_\_ Doesn’t know children’s schedules or sleep times but issues orders anyway
- \_\_\_\_\_ Manages to get to work on time and plan ski trips with buddies but often late to family events and plans little involving family (as he explains, some events are more highly motivating than others for adults with ADHD)
- \_\_\_\_\_ Was close to his children when they were young but now feels distant from them
- \_\_\_\_\_ Insists ADHD gives him an edge, making him more intelligent than the average person
- \_\_\_\_\_ Works with a life coach who is not trained in ADHD; he’s never has received professional ADHD psychoeducation or therapy
- \_\_\_\_\_ With one couple therapist, he comes to life and assumes an air of confidence, charm, and forbearance as to his nagging wife’s behavior while Gwen sits there shocked and surprised as his disconnection from reality

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- \_\_\_\_\_ With another couple therapist, his behaviors are seen as likely due to Narcissistic Personality Disorder
- \_\_\_\_\_ Feels he is making progress by keeping a job for two years; hurt that Gwen does not recognize this achievement
- \_\_\_\_\_ Wants Gwen to “take equal responsibility for the parent-child dynamic” between them—crushed when she rejected that as delusional
- \_\_\_\_\_ Insists that his total focus must go to work because it takes him a long time to finish reports
- \_\_\_\_\_ Feels he must walk on eggshells because “nothing I do is ever good enough” for Gwen
- \_\_\_\_\_ Other:

### ***Gwen (Other Partner):***

- \_\_\_\_\_ Assumed Jerome would be “less intense” once he finished medical school, but she did not know Jerome *before* he started medical school
- \_\_\_\_\_ Attributed his sleep issues to medical school stress, too, and did not know of the lifelong issues
- \_\_\_\_\_ Is tired of financially supporting the family *and* tending to the children’s needs *and* taking care of most domestic responsibilities with little help from Jerome but plenty of criticism
- \_\_\_\_\_ Suspects that being a single parent would be easier than living with Jerome
- \_\_\_\_\_ Claims that the children are calmer and happier when Jerome is out of town
- \_\_\_\_\_ Doesn’t understand why she should celebrate a 30-something professional finally keeping a job for 2 years
- \_\_\_\_\_ Has not learned about ADHD because neither child has ADHD (at least not yet diagnosed) and because Jerome is himself a medical professional—plus, she is already working a fulltime job and taking care of the house and the children
- \_\_\_\_\_ At couple therapy, she claims he charmed the first therapist and convinced him that Gwen is an unreasonable control freak; the second therapist said

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he was a narcissist yet had little else to offer the couple, who gave up on couple therapy

\_\_\_\_\_ Is concerned about Jerome's temper outbursts creating anxiety for the children and alienating them from their father; she sees how they become more anxious when he's around

\_\_\_\_\_ Gave up repeating the same information again and again because Jerome doesn't remember and doesn't seem to care that he doesn't

\_\_\_\_\_ She is also a hard-working professional, an attorney, resentful she's had to make career sacrifices to pick up Jerome's slack.

\_\_\_\_\_ Feels stuck between "divorcing a jerk" in good conscience or "abandoning a spouse with mental illness" and feeling guilty

\_\_\_\_\_ Feels guilty that their children don't have a happier home life

\_\_\_\_\_ Other:

**QUESTION: What do you think: Can this relationship be saved? If so, what would need to happen?**

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## **Couple #5: Roy & Estella**

### ***Roy (ADHD Partner):***

- \_\_\_\_\_ Had an authoritarian father who was hard on him. His daughter described them as “fire and fuel.”
- \_\_\_\_\_ College or trade school not being an option for financial reasons and mediocre grades, Roy joined the Navy, where he picked up some good habits and kept them—but may have helped to camouflage ADHD symptoms.
- \_\_\_\_\_ Did good work in residential construction projects but had difficulties tracking expenses, creating invoices, and paying taxes.
- \_\_\_\_\_ His now-deceased wife kept the business afloat, despite struggling to get cooperation from Roy. This caused a lot of conflict and stress.
- \_\_\_\_\_ Vows to quit smoking in order to ease the health concerns of his new love, Estella. When he did quit cold turkey, however, ADHD symptoms rushed to the fore—but weren’t immediately recognized as such.
- \_\_\_\_\_ After giving up nicotine, he became more irritable. He even seemed to be “self-medicating” with AM-radio shock jocks and anger; more recently, he’s started troll-like behavior in social media.
- \_\_\_\_\_ Loves Estella but is resistant to having a “brain disorder”.
- \_\_\_\_\_ Resistant to being evaluated because he fears it automatically means medication for his brain.
- \_\_\_\_\_ Other:

### ***Estella (Other Partner):***

- \_\_\_\_\_ Grateful to have found love again after her first husband died — felt that Roy “swept her off her feet”
- \_\_\_\_\_ Knew nothing about ADHD—had no idea what to make of Roy’s behaviors

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- \_\_\_\_\_ Worried about Roy's health due to smoking—and then their marriage after he *stopped* smoking
- \_\_\_\_\_ Doesn't know how to break through Roy's "denial"
- \_\_\_\_\_ Disappointed after the therapist didn't know how to help Roy understand and accept the nature of his challenges
- \_\_\_\_\_ Other:

**QUESTION: What do you think: Can this relationship be saved? If so, what would need to happen?**

### Couple #6: Sarah & Jake

#### ***Jake (ADHD Partner):***

- \_\_\_\_\_ Smart but under-performed in high school
- \_\_\_\_\_ Tried college (the first in his family) but became too overwhelmed by distractions and the amount of reading and writing required
- \_\_\_\_\_ Never liked sitting at a desk—wanted to be active on the job
- \_\_\_\_\_ Carries "optimism" to extremes; doesn't anticipate likely negative consequences
- \_\_\_\_\_ Is "smarter than he acts"
- \_\_\_\_\_ Instead of solving problems, escapes into videogaming
- \_\_\_\_\_ Seems oblivious as to the financial and emotional cost of his unemployment to his wife and child
- \_\_\_\_\_ Uses a religious perspective to justify his role as sole decision-maker in the house, no matter how poor his decision-making tends to be; doesn't see

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that his poor working memory and distractibility inhibit his ability to discuss issues and collaborate on decisions with Sarah

\_\_\_\_\_ Other:

### ***Sarah (Other Partner and also ADHD Partner):***

- \_\_\_\_\_ Angry that Jake spends money on “toys” when he is unemployed and in debt to her her parents for living expenses
- \_\_\_\_\_ Hurt and offended that Jake spends most of his time playing videogames when he should be job-hunting and helping around the house
- \_\_\_\_\_ Feels trapped: Needs to bring in money but can’t trust Jake to take care of their toddler and can’t afford child care
- \_\_\_\_\_ Tends to be passive about Jake’s problematic behaviors until it’s almost too late—and then relentlessly hyperfocuses on him
- \_\_\_\_\_ For a long time, tended to be taken in by his over-optimism; if she asked questions, he’d tell her to stop being “bossy” or “negative”
- \_\_\_\_\_ Read a book a friend gave to her about ADHD with Jake in mind; discovers herself as well—but wonders how can ADHD manifest so differently?
- \_\_\_\_\_ Begins to question the religious perspective that Jake and others in her church hold, that women need to support their husbands’ decisions—no matter what

**QUESTION: What do you think: Can this relationship be saved? If so, what would need to happen?**

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### EXERCISE B: Now it's your turn: What's Your Story?

Pretend you are the 7<sup>th</sup> case couple. Write your story, as short or long as you like. Write in paragraphs, bullet points, phrases—whatever is easier.

#### ***Questions to spark your thinking:***

- Describe your dating experience
- If the relationship changed over time, describe how and why—for better and/or worse

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- If ADHD has gone undiagnosed, how did you previously explain ADHD-related challenges to yourself? How did your partner explain them? Include specific examples
- Describe how family, friends, and outsiders would describe your relationship and your partner.



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## 5. Take a Sneak Peek—The Dysfunctional Interaction Cycle

*Notes/Questions*

## 6. Navigating This Course: Terms, Materials, and Medical Disclaimer

*Notes/Questions*

**END OF Sneak-Peek/Bonus module ACTION STEPS GUIDE**