ADHD Therapy Options for Children and Adults



A child may understand the classroom task but still be unable to begin it. An adult may have the skills for their role but repeatedly miss deadlines, lose track of appointments or feel overwhelmed by everyday demands. These experiences can have many possible explanations, which is why ADHD therapy options should begin with a careful understanding of the person, their circumstances and any co-occurring concerns.

ADHD is not managed through one identical treatment for everyone. Effective care is usually multimodal: it may combine psychological therapy, practical supports, education, environmental adjustments and, where appropriate, medication prescribed and monitored by a medical practitioner. The right plan depends on age, symptoms, functional impact, strengths, goals and whether anxiety, learning difficulties, autism, sleep problems or mood concerns are also present.

Start with a comprehensive assessment

Before treatment can be planned, it is helpful to establish whether ADHD is the most accurate explanation for the difficulties someone is experiencing. Attention, organisation, restlessness and emotional regulation can be affected by many factors. For children and adolescents, developmental history, school demands, family context, learning and behaviour all require consideration. For adults, an assessment may explore longstanding patterns from childhood alongside current work, study, relationship and daily-living pressures.

A comprehensive ADHD assessment is not simply a checklist. It generally involves a detailed clinical interview, developmental and health history, standardised questionnaires and information from relevant people such as parents, partners or teachers, with consent. Assessment may also identify co-occurring conditions that need attention in their own right. This process helps make treatment planning more targeted and avoids treating a label rather than the person.

For people who have already received a diagnosis, therapy can still begin with a review of current challenges and priorities. A plan for a primary-school child who is struggling with transitions will look different from one for a university student managing independent study, or an adult rebuilding routines after years of unexplained difficulties.

ADHD therapy options in psychological care

Psychological therapy does not remove the neurodevelopmental basis of ADHD. Its purpose is to build practical skills, reduce the impact of symptoms and support healthier responses to the setbacks that can accumulate over time. Therapy is often

most useful when goals are specific and connected to daily functioning: starting homework, managing conflict, remembering appointments, planning meals or responding more calmly when plans change.

Behavioural therapy and parent support

For children, behavioural approaches often involve working with parents or caregivers as well as the child. The focus may include creating predictable routines, giving clear and achievable instructions, using consistent consequences and noticing behaviours that should be encouraged. These strategies are not about blaming parenting. They recognise that children with attention and impulse-control difficulties usually need more structure, repetition and immediate feedback than other children of the same age.

Therapy may also help families identify patterns that unintentionally increase conflict, such as giving multiple instructions at once or trying to resolve a difficult issue when everyone is already dysregulated. Small changes - a visual morning routine, one instruction at a time, a planned transition warning - can be easier to use consistently than broad advice to “try harder”.

Where appropriate, clinicians may liaise with a school or provide recommendations that support learning and behaviour. Useful adjustments can include breaking work into shorter sections, checking understanding, allowing movement breaks, reducing organisational load and providing clear written instructions. The most suitable adjustments depend on the student’s individual needs and school setting.

Cognitive behavioural therapy for adolescents and adults

Cognitive behavioural therapy, often called CBT, can help adolescents and adults examine the interaction between ADHD-related challenges, thoughts, emotions and behaviour. Someone who has repeatedly forgotten tasks may come to expect failure and avoid starting. Someone who feels behind at work may respond with overworking, procrastination or intense self-criticism. These responses are understandable, but they can make daily functioning harder.

In ADHD-focused CBT, sessions may address planning, prioritising, time awareness, task initiation, distraction management and problem-solving. Therapy can also explore unhelpful beliefs such as “If I cannot do it perfectly, there is no point beginning” or “I should be able to manage this without support”. The aim is not to demand perfection. It is to develop realistic systems and more flexible ways of responding when those systems do not work as planned.

For adolescents, therapy may include strategies for schoolwork, social pressures, sleep routines and growing independence. Privacy and parental involvement need to be balanced thoughtfully, taking the young person’s age, needs and family circumstances into account.

Emotional regulation and co-occurring concerns

Many people seeking ADHD support also experience anxiety, low mood, sleep disruption, relationship stress or difficulties with emotional regulation. These concerns may be related to the strain of living with ADHD, may occur alongside it, or may require separate assessment and treatment. Addressing them is often an important part of the overall plan.

Therapy can provide a structured place to understand triggers, practise coping strategies and strengthen communication within families or relationships. When anxiety is prominent, for example, treatment may need to address avoidance and worry alongside attention and organisational difficulties. A plan that focuses only on productivity may miss what is making change difficult.

Medication and coordinated medical care

Medication may be considered as part of ADHD treatment for some children, adolescents and adults. In Australia, ADHD medication is prescribed by appropriately qualified medical practitioners, commonly psychiatrists or paediatricians, within relevant state and territory requirements. Psychologists do not prescribe medication, but they may work alongside the prescribing practitioner as part of coordinated care.

The decision to use medication is individual. It should involve a discussion of potential benefits, side effects, medical history, other medicines and practical monitoring requirements. Medication may reduce some core symptoms for some people, but it does not replace skills development, supportive routines, school or workplace adjustments, or treatment for co-occurring mental health concerns.

Good communication between the person, family where relevant, GP, prescribing practitioner, psychologist and school can make care more coherent. Consent and privacy remain central to this process. Not every provider needs every detail, but sharing relevant information can help avoid duplicated advice or conflicting expectations.

Practical supports that make therapy easier to use

Therapy works best when strategies can be tested in everyday life. A recommendation that sounds sensible in a session may be hard to maintain when a parent is managing a busy morning or an adult is facing a full inbox and competing demands. Plans should therefore be simple enough to use on an ordinary week.

Helpful supports may include external reminders, shared calendars, visible task lists, a consistent place for essential items, planned breaks and routines that reduce the number of decisions required. The key is to match the tool to the problem. A detailed planner may help one person and overwhelm another; a short daily list may be more effective. For children, an adult’s support in setting up and maintaining the system is usually essential.

Sleep, movement, nutrition and regular daily structure can also affect attention, energy and emotional regulation. These areas should be discussed realistically and without presenting lifestyle changes as a substitute for clinical care. When difficulties are significant, a structured treatment plan and appropriate medical input remain important.

Accessing ADHD support in Australia

People may seek assessment or therapy through a GP, paediatrician, psychiatrist or directly through a psychology clinic, depending on the service. A GP can help coordinate care, consider other health factors and provide a referral where appropriate. Medicare rebates for psychology services may be available when a person has an eligible referral and Mental Health Care Plan; eligibility and rebate arrangements should be confirmed with the relevant provider and GP.

For families and adults outside major metropolitan areas, telehealth can make psychological consultations more accessible. Some aspects of assessment and therapy can be provided by Zoom, while other needs may require in-person appointments or local medical review. The most appropriate format depends on the person's age, presentation and the service being provided.

A helpful next step is to write down the situations causing the greatest difficulty, when they began, what has already been tried and what support would make the clearest difference. Bringing that information to an assessment or therapy appointment can turn a broad concern into a practical starting point for care.

For more information

Call (03) 9848 9100

Published: 28/08/2026 and updated on: 10/10/2026 by Dr Jacques Duff-PhD; BA Psych; Grad Dip Applied Psychology; FANSA; Clinical Neuroscientist