

## Homeschooling: A Natural Fit for the Kinesthetic Child

Stephen Guffanti, M.D.

As we were sitting down to dinner, Alex, a wiry 4-year-old, finally stopped running and took his seat. Turning to his mom, I remarked, “When your child starts kindergarten in public school, they will want to put him on drugs for ADHD. Don’t do it.”

She replied, “I’ve been concerned about how he’ll adjust to the classroom. Do you think he has ADHD?”

“No, but he learns through movement, and his teachers most likely don’t. They’ll confuse his learning style with ADHD.”

Soon after Alex entered kindergarten, his teacher suggested that Alex had ADHD and should take Ritalin. Rather than do that, Alex’s mom moved to her home state. There, she found a school that “doesn’t use labels; they have some squeeze balls and some bouncy seats in the classroom, and the children that want the movement use those.”

Now here’s another example, this time with an older child: “Mrs. Baker, your son, Paul, is depressed. It is a common problem associated with ADHD. He needs to be on antidepressants and Ritalin,” the doctor advised. At 6’2” and about 250 lbs., Paul was an athletic 16-year-old who loved football, basketball, and baseball but struggled academically. He read years below grade level, and he seldom smiled. Paul’s mother decided to homeschool him after Paul’s freshman football teammates introduced Paul to marijuana. Paul was clinically depressed.

Paul lived on the West Coast and Alex on the East Coast, and besides the difference in their ages, the two were as different as night and day. However, I gave the same warning to both their parents, and within a year, teachers and a doctor gave both parents the same suggestion.

How could I know? Can I see into the future? No. People use three basic learning styles: kinesthetic, auditory, and visual. These preferences are genetic traits that are strengthened with use. Kids who learn through movement, or kinesthetic learners, are often considered ADHD. (Most teachers are visual or auditory learners, and often one of the child’s parents is as well.) Because the teachers themselves don’t learn through movement, they consider the kinesthetic learner’s behaviors abnormal. Unfortunately, the criteria for an ADHD child is based on the parent or teacher’s perception, not the child’s. Because kinesthetic learners move when they learn, kinesthetic learners immediately have five of the nine criteria doctors use to diagnose ADHD; a score of 6 will give the child the label “ADHD.”

Yet the label isn’t helpful to the child. It gets him placed on drug therapy, which only suppresses half the behaviors. Suppressing a learning style interferes with a child’s ability to learn.

In fact, studies show that the most effective treatment for academic difficulties associated with ADHD is tutoring, which is exactly what homeschoolers do.

Why was Paul depressed and why was Alex so happy? One reason is that Paul had experienced ten years of failure at school. Kinesthetics learn by doing, a trait very helpful in the workplace but a real distraction in a classroom setting.

So when Paul was in school, trying to pay attention by getting up and moving around, his teachers would respond to the movement and have him sit still, effectively shutting off his brain.

Sometime during those years Paul decided he was dumb. Compounding his failure in school was a mother at home who didn't understand his need to move. In fact, Paul's first experience with real success came this year when he got his first job as host at a local restaurant. Here, his ADHD was called "multi-tasking"! Between greeting and seating customers, he also quickly cleared and set tables or did whatever else was needed to make the restaurant run smoothly.

Within weeks of his starting the job, his manager was seeking Paul's advice on hiring decisions. Alex's mom knew that Alex needed to move, and she made sure he was allowed to move both at home and in school. She relocated and sent her son to a school that respected the kinesthetic learning style. Alex got to sit on a bouncy ball and bounce through his schooling.

Paul's mom eventually decided to homeschool him. She did it with the help of her boss, who also was a kinesthetic learner, and Paul started to blossom.

Both the child's freedom to move and the parent's flexibility to tailor the curriculum to the individual child's interests make homeschooling perfect for the kinesthetic or ADHD child.

Alex found a school that allowed him to move, but with twenty-five kids in the classroom, he's unlikely to be able to follow his passion. He would be better off if he were homeschooled.

Paul's real problem was that his mom didn't understand how important movement and passion were to her son. Because I am a medical doctor and family friend, Paul and his mom asked me if he should take the antidepressants prescribed by his doctor. I asked Paul, "How often do you play sports?" Paul answered, "Every couple of weeks." "Why so seldom? You need to follow your passion daily to be healthy. You are depressed because you so seldom follow your passion. The pills are helpful only if you are going to change that, and if you do what you love daily. If that doesn't happen, the pills will lose their effect no matter how much you take."

Just this week Paul started assisting the coach of a junior boys' basketball team, and after only one practice he became animated and excited—a different person.

Two different stories with different results about two different kids, but one common solution—homeschool with a curriculum that feeds their passion.

Why a curriculum that feeds their passion? Kinesthetic learners often can look at the pieces of an object and sense how it fits together. A child with this intuitive sense is going to want his schooling to fit him. If he is passionate about sports and you want him to read, consider giving him sports-related books or magazines to read. Otherwise, he'll constantly ask why he needs to know this. While he is following his passion, he will no longer display any "attention-deficit" problems.

Often kinesthetics can successfully use projects to learn a subject. For example, Sara needed to learn algebra, but her passion was horses. So she was assigned the project of designing and building a corral and stable. As Sara was designing, she learned principles of algebra in order to estimate the cost and how much board she'd need.

Moms, learning styles are inherited; if you're not the kinesthetic in the family, then your husband is. Sara's father, also a kinesthetic, was delighted to help her build the corral. It was a great way to get him involved.

Some moms of children who have been diagnosed as ADHD may be hesitant to homeschool them—they may worry that their child will cause chaos throughout the day, or they may not understand how to reach their child. Here are a few tips that have been very helpful to the moms who have attended my workshops.

### **Hints That Bring Hope and Healing**

1. **Let your child move.** When you read to your child, or when he reads, is he all over the furniture or all over the room? Try letting him move (within your behavior limits), and if you need to, turn your back so he does not distract you. Walk and talk. Whether you need to teach information or talk about an issue, take a walk together. Drive in the car and talk. Movement helps a kinesthetic child process information.

2. **Use few words.** Practice. You'll get better.

3. **Let him hug you; don't be alarmed if he resists your hugs.** When you hug your kinesthetic child, in essence you have thrown at him 20 pounds of input—you have touched his arms, you have touched his front, and you have touched his back—and he has no way to process all of it! It is like saying to your child, "Would you please turn off your mind for however long I feel like hugging you, until I release your mind back to you?" Your kinesthetic child is being overwhelmed.

4. **Do not always require eye contact.** Making eye contact is polite (and worth teaching), but it may prevent him from being able to listen and pay attention.

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## Biographical Information

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*As a medical doctor, teacher, tutor, author, and homeschooler, Stephen Guffanti, M.D., who communicates with warmth and humor, offers a unique background and tremendous insight. Not only is Stephen a doctor, but he is also dyslexic and ADHD, and from his unusual perspective he brings hope and understanding to parents of ADHD children ([www.drdyslexic.com](http://www.drdyslexic.com)). Born with a passion for education, Dr. Guffanti has served as the medical director of a clinic that specializes in learning disorders. He is the author of Rocket Phonics, Does Your Child Really Have ADHD? and The Purpose of Passion.*

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