



ADHD Brain Hacks: How Parents Can Harness Neuroplasticity to Help Kids Strengthen Executive Function

Dr. Sharon Saline

Interviewed by Dr. Laura Markham

Laura Markham (00:04):

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Laura Markham (00:10):

Hello, I'm Dr. Laura Markham, founder of Peaceful Parent, Happy Kids, and organizer of this online summit, Nurturing Hearts, Nurturing Minds: The Neuroscience of Peaceful Parenting.

Laura Markham (00:22):

I'm delighted today to introduce you to my friend Dr. Sharon Saline. Dr. Saline is the author of the award-winning book, *What Your ADHD Child Wishes You Knew: Working Together to Empower Kids for Success in School and Life*, as well as the ADHD solution card deck. She speaks internationally as a part-time lecturer at the Smith College for Social Work, blogger for Psychology Today, contributing expert at WWLP TV and serves on the editorial board of and hosts a monthly Facebook live event for AttitudeMag.com. We're talking with Dr. Saline today about ADHD brain hacks, how parents can harness neuroplasticity to help kids strengthen executive function.

Laura Markham (01:07):

Dr. Sharon Saline, welcome to the summit.

Dr. Sharon Saline (01:10):

Hi. And thank you so much for having me. I'm thrilled to be here.

Laura Markham (01:14):

Well, I am always thrilled to talk with you. So let's start with what do parents need to know about how the ADHD brain works.

Dr. Sharon Saline (01:23):

How much time do you have? So I think the first thing that I would want to say to all parents of kids with ADHD is that development is in your child's favor, that we know that the brain reaches its full size and volume by the age of 10. But the connections between the different parts of the brain continue to happen and strengthen over time. And the part of the brain that we're interested in is the prefrontal cortex. So if you're looking at your brain, with the back of our brain here is our reptilian brain, our physiological brain, it keeps us alive. It has to do with blood pressure and heart rate and also big movements and breathing. The middle of our brain is the emotional brain, also known as the mammalian brain. And the front of our brain is called the human brain or the thinking brain. This part of our brain connects with the rest of the brain throughout childhood and adolescence and early adulthood, and it kind of coalesces in its connections around age 25 in neurotypical brains, but with a three-year delay in people who have ADHD.

Dr. Sharon Saline (02:52):

So what we see is that it takes kids and teens with ADHD longer to learn things that are related to executive functioning skills. And there are a number of executive functioning skills which we'll get into. So the first thing that I want to say to parents is take a deep breath because you're going to be working on these skills over and over again.

Dr. Sharon Saline (03:22):

The second thing I want to say is that research has found that certain parts of the ADHD brain can be smaller than in people who don't have ADHD. So for example, the corpus callosum, which is the superhighway of a brain that connects our left and right hemispheres and it integrates details, that's been found to be smaller in people with ADHD. The hippocampus can be smaller and the amygdala can be stronger

because there's a lot of limbic system activity in people with ADHD. There's kind of a crisis mode that propels them into doing things that otherwise they might not have the motivation to do. And that on a very biological level has to do with lower amounts of certain neurotransmitters, dopamine and norepinephrine, for example.

Laura Markham (04:21):

Okay. So what I've just gleaned from what you've said is that people who struggle with ADHD have less dopamine, less norepinephrine, maybe a bigger amygdala and maybe the corpus callosum, which is about the connections and the details might be smaller and hippocampus might be smaller, which we know is about memory and also about emotion. So as I'm hearing all this, and I'm a parent, I'm a little scared.

Dr. Sharon Saline (04:52):

Oh, I would imagine.

Laura Markham (04:53):

[inaudible 00:04:54].

Dr. Sharon Saline (04:54):

Right. I know that you're scared. I want to reassure you, take a deep breath, I've got this. So one of the things about lower levels of dopamine, so dopamine is a neurotransmitter that has to do with reward and interest. And norepinephrine has to do with sleep and alertness as well as concentration. And so we see naturally lower amounts of these in brains of people with ADHD. This is something that medication attempts to correct.

Dr. Sharon Saline (05:32):

Now, medications don't add neurotransmitters into your system, but what they do is they facilitate or delay the reuptake and release process at the neuronal level. So let's imagine that your neurotransmitters are like fairies. So you're at the end of one neuron in your brain and you're trying to get to the beginning of the next one. And so the neurotransmitters are released and they hang out in the what's called the synaptic gap, and they pick up messages. Sometimes they have to hang out in that synapse a little longer. Sometimes they need to cross over quickly. There's a lot of neuroscience here, which I won't get into. Medications can help with that process, but the bottom line is that pills don't teach skills.

Dr. Sharon Saline (06:23):

So for all you parents who have now had many panic attacks from the first things that I've said, what I want you to realize is that actually the tools that you teach your kids, the strategies that you give them are the things that help change their brains for the long run, that teach them skills. So we know that routines are very helpful for kids with ADHD. And routines are the building blocks of habits. So you need to follow a routine for quite a while and then it becomes a habit.

Dr. Sharon Saline (06:59):

So this is the type of information we really want to talk about when we're talking about kids with ADHD and neuroplasticity. Yes, you want to consider medication. Medication is a catalyst for learning these skills. And medication can assist with things like working memory and processing speed and focus. And children still have to learn how to manage their emotions, how to get started on something that doesn't sound interesting, what is a system of organization that works for their brain, how do they stay with an activity until they reach completion. And these are the things where your efforts as parents really make a difference.

Laura Markham (07:50):

So the things you've just described, the examples you just gave are all examples of executive function. I wanted to just highlight that emotional regulation is actually also about executive function based on what you just said, yes?

Dr. Sharon Saline (08:04):

Yes. As is impulse control, verbal impulse control and behavioral impulse control. One of the things that I think is important for parents to know, which is why I give all the scientific information first so they can gulp and then I can say, "Guess what? We can deal with that. We are going to teach skills to help reduce the effects of some of that." And in the process of reducing the effects by learning the skills, you can change the size of the amygdala because if the amygdala isn't lifting 10-pound weights every day, it's not going to walk around with a six-pack. But the hippocampus might learn to help with emotional regulation and then it can grow its own six-pack.

Laura Markham (09:03):

So it actually changes the brain. Any repeated experience changes the brain. So are you saying that as parents teach kids routines and kids get used to those routines and develop habits as for instance, that that's going to change the brain?

Dr. Sharon Saline (09:21):

It can shift patterns in the brain, connectivity in the brain. And the research on the size of organs is somewhat... People argue about this and debate about it, so it can or cannot depending on which research you're looking at. But I think the important and most empowering piece is that the tools that you teach your kids, including mindfulness, exercise, nutrition, these all are part of a whole person approach, which is how I work with people with ADHD. I'm not only interested in what's happening here, but what's happening in the environment. How is your child experiencing the world and in relationship to you as well?

Dr. Sharon Saline (10:15):

The research shows, Laura, according to Dr. Russell Barkley, that as many as 75% of adults who have ADHD have a child with ADHD. And if one child has ADHD in a family, there's at least a 33% chance that a second child will have it.

Laura Markham (10:36):

Okay.

Dr. Sharon Saline (10:37):

Now we have families living with ADHD. All kinds of mirror neurons setting each other off, so we want to come up with the executive functioning skill and interventions that you can actually do as a parent, remember and notice when your child is making those efforts.

Laura Markham (10:59):

So let's go back to the practical things that parents can do. You mentioned routines. What are the other things? Like if a parent says to you, "My kid is so impulsive. What can I do to help my kid learn to control that impulsivity?" What would you say?

Dr. Sharon Saline (11:18):

Well, I think there's a difference between sort of verbal impulsivity and behavioral impulsivity. And of course impulse control is directly related to emotional regulation, right? Because sometimes there's a sort of quick response that doesn't have to do with emotion. But many times what I find with kids with ADHD is that there is an emotional factor that they're triggered by something they might feel anxious, which we see in at least 34% of kids with ADHD as opposed to 9% of kids who don't have ADHD. And that can be general anxiety, but also kind of social anxiety. There also can be anger and reactivity, sort of big feelings that kids can't control because they can't name, they don't know what to do about them. These big feelings are scary for these

kids. They want to do differently. Ross Greene talks about how kids do well if they can. And I like to say kids with ADHD do well if they can and if they have the tools available to them to help them do that.

Dr. Sharon Saline ([12:44](#)):

So when we're talking about impulsivity, one hack that I like to work with with families is what I call take back of the day. So everybody in the family gets a take back. This is a chance for them to reflect on something that they did that they might regret after. So this is not an in-the-moment impulse control, we can get to that in a second, but this is an opportunity to build not just impulse control, but something even just as significant, if not more significant, which is called metacognition. It's one of the executive functioning skills, and it really is the ability for self-awareness. This is the last skill to mature, around age 28. It has to do with judgment and decision-making as well.

Dr. Sharon Saline ([13:37](#)):

So when we teach our kids take back of the day, they get a chance to reflect. "Did I really want to bite my sister? Actually, no, I don't. I'd like that to be my take back of the day. Or did I really want to tell you you were stupid when you put the orange juice on the table for my cereal instead of the milk? No, I don't." So we give them an opportunity to do this and we teach it in a family meeting, a once a week short family meeting because kids don't have long attention spans. And we don't say to kids, "This is your take back of the day." Nah, we don't do that. Instead what we do is we say, "Is that something that you'd like to consider that you really want to say or do right now?" So we offer them the opportunity. Most kids with ADHD know exactly what to do in a moment. They just can't access it because of heightened stimulation and heightened emotionality.

Laura Markham ([14:53](#)):

And when we give them that opportunity, it can be a very fun and positive thing actually, as opposed to a shaming, "You don't want to do that, do you?" It can absolutely be a, "Wait a minute. Is that your take back?" You know?

Dr. Sharon Saline ([15:14](#)):

"Is that something you might want to consider for the what?"

Laura Markham ([15:18](#)):

Right. Right.

Dr. Sharon Saline (15:20):

And it's also great because as adults, we can have it too. So as a parent, I know that there were times when I was dysregulated and I said something that I wish I hadn't. In fact, as a partner, I recently said something to my husband, and as it was coming out of my mouth, I was like, "Oops." So I paused and I said, "I'd like not to finish that sentence, and I would like that to be my take back of the day. "

Dr. Sharon Saline (15:47):

The thing about the take back is that there's forgiveness. It's not, "I'm going to hold this over your head and come back to it later and teach you why that was a bad thing to do." So there's no kind of right and wrong and black and white thinking and shaming, blaming at all. It's really about building self-awareness.

Dr. Sharon Saline (16:09):

Sometimes kids with ADHD can't do that, okay? And I talk about this in my book and I call it Stop, Think, Act, and I've since added Recover. So it's the STAR approach. In the family meeting, we're going to agree that when things start to escalate, when there's activation, we are going to call for a stop in the action. This is not a timeout because nobody's wrong. This is a pause to reregulate. We have to have a plan for that in families with ADHD. You can't just call for a stop and expect that people are going to stop because it's very hard when you're that activated for your nervous system to calm down.

Dr. Sharon Saline (17:03):

In fact, I don't know about you, Laura, but when my husband says, "Sharon, I think you need to calm down," I'm just like, "Don't talk to me. Don't even say that word. It's no condescending. I hate that." But it's different if we approach it with, "We all need to slow down. We all need to slow down." So that's what the stop is for. So we're stopping so we can all slow down.

Dr. Sharon Saline (17:29):

And then there is a pause. Now depending on the age of your child, and you talk about this a lot too, you'll decide what you're going to do in the pause. Some families, one of my families I worked with created a calm me down box and they went to the dollar store and they got all kinds of little things that their kids could do. And when they called for the stop, the box came out. There was a coloring book and there was like, I don't know, some sort of blocks and maybe stickers, something that was an activity. Some older children perhaps might want to go into their rooms to have

some time away from you, maybe listen to some music, text their friends about how horrible you are.

Dr. Sharon Saline (18:20):

One of my clients who also had sensory issues like to go under her bed. She had a bed that was a little bit off the ground and so she would go onto the bed and she had a flashlight and a book that she would keep there and she would read her book. So we do all kinds of things. Sometimes a kid may want to hug from you and have you read them a story. And this is very challenging for some parents because their kids have pushed all the buttons and they still have to put on their big parent pants and do this thing.

Dr. Sharon Saline (18:57):

So then we come back after the pause, and it can be five minutes, 10 minutes, 15 minutes. That's kind of the maximum range, and it's a time for thinking. And thinking is not about, "Let me tell you how you should have done this differently." Thinking is, "Is there anything that you would like to say about what happened?" So we give them an opportunity, we give ourselves an opportunity.

Dr. Sharon Saline (19:23):

And then we talk about what is the next right action. What is the next thing that we're going to do to move forward? And then we act, S-T-A, we're going to act, we're do that next thing and then we're going to R, recover. And this is to give us time and space between the event and whatever is next. If a part of that recovery is having a conversation 2, 3, 4 hours later the next day in the family meeting to say, "Wow, that was really a big blow up this week. Let's talk about how we can avoid it," that's fine. But we want to remember that kids with ADHD need extra time to recover. And for some kids, out of sight, out of mind. "What happened? That thing that was like three days ago." No, it was only yesterday.

Laura Markham (20:19):

And I'm guessing that when you do come back and think about what happened and you say, "Is there anything you want to say?" that a lot of times kids will say, even though they've calmed down a little in the 15 minutes, they might say, "Yeah, you were being so unfair. It wasn't okay. Blah blah, blah. And it wasn't my fault." And that parents, that things could blow up again. So a little guidance for parents about how to approach that part of the interaction?

Dr. Sharon Saline ([20:47](#)):

Reflective listening.

Laura Markham ([20:48](#)):

Beautiful.

Dr. Sharon Saline ([20:49](#)):

Reflective listening. "What I heard you say is that I wasn't fair and I want you to know that I hear that and I'd really like to focus on what's the next right thing for us to do, how are we going to move forward." So we hear, we validate and we continue to pivot towards what's next. We don't want to open it up again because you're just going to go right back into it.

Dr. Sharon Saline ([21:14](#)):

In your time, parent, if you're not engaged with your child, do something that is going to help you reregulate. And that can be anything. It can be stepping outside in 30 degree weather. It can be making yourself a cup of tea. It could be busting out a down for or two, listening to a song that really helps you settle, or a quick meditation on maybe Insight Timer or one of those three minute SOS things or something. But you have to come into this meeting grounded and ready to really focus on moving forward. That's the most important thing, because what kids with ADHD expect is to be blamed and humiliated.

Laura Markham ([22:05](#)):

Exactly. So we've talked a lot about emotions in the context of impulse control. Besides medication which we've also discussed, what about things that might strengthen working memory?

Dr. Sharon Saline ([22:18](#)):

I'm so glad you asked. So there are hot executive functioning skills and cool executive functioning skills. Hot skills are our conscious skills. Things like actually impulse control or emotional regulation, organization, getting started on a project, time management. These are all hot skills.

Dr. Sharon Saline ([22:42](#)):

Cool skills are things like working memory, focus, and sustained attention. Sustained attention because kids don't know, they're not in control of when they're drifting off. They see the snow and they look at the snow and they're like, "Oh my goodness, look

at all that snow." Or it's like one of my clients used to call ADHD ADLS, attention deficit. "Look, there's a squirrel!" that kind of thing. So they're not aware that they've drifted off, but they don't know what to do when they come back from the drift. So let's address that after working memory.

Dr. Sharon Saline ([23:20](#)):

Working memory is something that is a cool skill, and there are a couple ways to really build this skill. So many parents of kids with ADHD feel like they're reminder machines. "Did you do that? Did you do this? Did you do blah, blah, blah? When are you going to do that?" I want to encourage you to use a list, a chalkboard or a whiteboard to organize what has to be done in the morning after school, before bed so you are not constantly saying, "Did you blah, blah, blah?" Instead, what you want to say is, "Check the list. Check the chart. Check the chalkboard" and have some system for checking off things that are done.

Dr. Sharon Saline ([24:08](#)):

One of my clients had a chalkboard and it was a magnetized board, so there was a magnet for each activity. And once it was done, the magnet was moved, the child moved the magnet to the done side. So we want to remember that with working memory, it's hard to hold information in your head. So some children with ADHD struggle with auditory processing issues as well. So visual cues are really useful. Pictures if your child doesn't read words. If they do pictures and words, if they like them both. And this actually cues the memory about what's next.

Dr. Sharon Saline ([24:55](#)):

I had a client who basically at the first day of school would take a picture of her daughter with her jacket and her lunch box and her backpack. She took a picture of it each year and then she would print it and put it on the refrigerator with the following words, "If you look like this, meet me at the door, we're ready for school." And so that would just cue the child. And by the third year, so started in first grade, second grade, by third grade, the child was like, "Oh yeah, I'm on the picture." So we can have fun with it. We can gamify these things. It all doesn't have to be drudgery.

Dr. Sharon Saline ([25:35](#)):

And the third thing that I want to use is what I call the rule of three to help build working memory. And it works like this. A parent states the direction, so you're going to state the direction having made some contact with your child, if your child is comfortable with eye contact, eye contact is great, but some kids are not. So they

can look right here. Or I wear earrings, so if they could look at my earrings. Or if you're a parent and you wear earrings or a hat or something or your glasses, of course that is close to the eyes, so you're making some contact sometimes a hand on a shoulder. If they could tolerate that and you state the direction. And then they repeat the direction back to you twice. So once so that they heard it and twice because the second time transfers it from working memory into longer term memory. They hold onto it more.

Dr. Sharon Saline ([26:37](#)):

What happens a lot in families with ADHD is a parent yells a direction from another room. "Get your shoes and socks on. We're late" And the kid hears shoes or socks and doesn't really hear the whole direction. So actually being able to take the time to go to your child, state the direction, have them repeat it back to you twice is very important. And many parents are like, "Oh, who has the time for that in the morning?" I'm like, "You do. Because if you don't, you're going to spend more time on other stuff."

Laura Markham ([27:16](#)):

So I love these ideas for working memory. You mentioned, you said, "Well, after working memory we can come back to the squirrel." What happens to keep attention sustained?

Dr. Sharon Saline ([27:27](#)):

So this is really interesting. So the first thing that we want to do with kids is normalize the drift. It's very normal for someone with ADHD to be doing something and then think of something else and think of something else and their mind is way away from the first thing. And then they're like their teacher will sit in class and the teacher will call on them and they're just like, "Oh, I don't know what to say. And everyone is laughing at me." So at home we want to help them with that. We want to offer them a strategy.

Dr. Sharon Saline ([28:05](#)):

When you drift off, how can you come back from the drift? And this is a conversation that we also want to have with their teachers in elementary school in particular. By middle school, we hope that kids have come up with strategies for the drift, but we still want to let all the teachers on a team, because most middle schools do use team models, know that your child has ADHD either because they have an IEP, an individualized education plan, or what's called a 504 accommodation plan. So we

want to have the teachers aware that the drift happens and how do we help the child adjust. So that's the first thing.

Dr. Sharon Saline ([28:48](#)):

The second thing is one of the things that helps kids is deciding on the order of the work that they have to do, including chores. Because some things are interesting, and if something's interesting, it automatically is easier. If something is not interesting, it automatically is harder. So some people like to do the easy thing first and then do the hard thing because they're warmed up and then finish with the medium thing. Some things people like to start with the hard thing. Apparently, we call that eating the frog and then do the easy thing as a reward and then the medium thing because it's left over, or whatever. If you think about yourself, Dr. Laura, how do you like to do things?

Laura Markham ([29:38](#)):

I eat the frog.

Dr. Sharon Saline ([29:41](#)):

So for me, I go 50/50. Some days I'll do easy stuff to warm up because I'm not super excited about the hard thing, but I want to do something to feel like I'm in the game and then I can do the hard thing. And a lot of times I have to sit down and just do that hard thing and get it out. So we want to find out for our kids what's easy, what's medium, and what's hard, and then how they want to structure their chores or their work time, and what will make something hard, a little bit more fun, a little bit more doable. Usually that has to do with the time allocated for the task. So too much time for something that's hard to do doesn't result in completion.

Dr. Sharon Saline ([30:30](#)):

So we want to think, "Okay, well how long can you concentrate on this before you need a break?" And that's a conversation, a really great conversation. "I can do this for five minutes."

Dr. Sharon Saline ([30:41](#)):

"Okay. So you want to do math for five minutes?"

Dr. Sharon Saline ([30:44](#)):

"No, what I want to do is problems. I'm going to do problems one to four and then I'm going to take my body break or I'm going to play with the dog or whatever. We're

going to time that. And then I'm going to do problems five to eight or nine or whatever."

Dr. Sharon Saline (31:03):

Some kids want the minutes, some kids like to do it that way. So we really want to unpack what people have to do. I can already hear parents of teenagers saying, "Well, my teen is not going to talk to me about that." And here's the thing, your teen, your tween and your teen, do not like the arguments with you. I can 100% guarantee that they dislike them. And so we are working to together with them to come up with a plan to reduce arguing and build independence. Those two things are buy-ins for tweens and teens. So you are their ally here. You are not their taskmaster. So we want to really collaborate with them on it. And the goal here is making sure they do the work and they press send.

Laura Markham (31:57):

Yeah. Yeah. So this is all really helpful to frame this for parents. I am hearing a parent say, "Okay, but my biggest problem is actually screens. My kid with ADHD is drawn to technology in a way that it seems like my other kid is not." So what advice do you have for parents about screens?

Dr. Sharon Saline (32:26):

So glad you asked this question, because it's directly related to improving motivation and decreasing procrastination. Kids with ADHD love screens. Why? Because they are interesting, they're bright, there's usually sound, they're engaging and there are very clear rewards. You do blah blah, blah and you get to this level. You do X, Y, Z, you get to this level. And you can also be very physically engaged as well as verbally engaged, from what I hear.

Dr. Sharon Saline (33:05):

So what we want to do is we want to put the have-dos before the want-tos, okay? And for a lot of people, William has written on this about incentives. It's different than what people write who don't work with kids with ADHD. So people who don't work primarily with kids with ADHD will see like extrinsic rewards are not good. You don't want to do them. You want to build intrinsic motivation. Well actually the research shows that intrinsic motivation coalesces in the late teens, early twenties. Add three years. So we are seeing delayed intrinsic motivation for uninteresting unpleasant tasks.

Dr. Sharon Saline (34:00):

Remember, the thing about living with ADHD is living with consistently inconsistent motivation. And it's so confusing for kids, for parents, for adults. It's confusing. So what we want to do is actually link things that kids have to do to rewards that matter to them until the intrinsic motivation kicks in for these unpleasant tasks.

Dr. Sharon Saline (34:30):

For tasks kids enjoy, there's plenty of intrinsic motivation. There's no problem getting started, but if you don't like it's really, really hard because of those lower amounts of dopamine. So dopamine is what helps us generate activity for things that bring pleasure and interest and reward. And if you have lower amounts of dopamine and you're facing a task that is naturally lower in dopamine, it's not that appealing, these kids are at a double dopamine disadvantage. That's a mouthful there, a double dose dopamine disadvantage.

Dr. Sharon Saline (35:12):

So what we want to do is try to bring in some dopamine by putting the want-to after the have-to, and this is what we want to do with screens. So let's say that youth believe that your child, after doing schoolwork, can have two hours of game time on their computer. It's important for parents to remember that not all screens are created equally. And so what kids do on a computer is different than a phone and they are well aware of that. And they're going to test and push you on everyone. So what we want to do is say, "Okay, this is the routine. You're going to come home from school. and if you take medication while it's still in your brain, we're going to have snack, we're going to eat the frog. And then you can gain for two hours when you're done eating the frog. Or you can gain for an hour and a half and save a half hour of that for later."

Dr. Sharon Saline (36:16):

One of the things that I like to do with parents is to encourage them to promise a little bit less so kids can earn it. So you can say, "If you do blah, blah, blah, you can have an hour and a half. And if you do this extra thing, you can have two hours." Because what kids want is that carrot.

Laura Markham (36:39):

Especially enticing, you're

Dr. Sharon Saline (36:41):

Very enticing. So you can have two hours of gaming. And if you want a half hour on your phone, then you'll have to set and clear the table. And this actually is very important for kids with ADHD because then as adults, they learn I finished dinner. "Even though I have no interest in cleaning up the dishes, I actually do not want to face the gross dishes in the morning. So I'm going to do the dishes now and then I'm going to reward myself with my show."

Laura Markham (37:21):

Which is a thing we all need to learn how to do.

Dr. Sharon Saline (37:24):

Exactly.

Laura Markham (37:25):

And you're saying that these are kids because of the way their brain works, they have a harder time learning this lesson. And you're suggesting that parents use rewards really thoughtfully as a way to help kids learn these lessons. Is that right?

Dr. Sharon Saline (37:40):

Yes. And parents do not decide what the rewards are. Parents talk to their kids about it. Parents decide of a quantity. So if you don't want your child gaming for four hours after school every day, that's up to you because screens are not an entitlement. We have food, clothing, shelter, medical care, education, love. Screens are not one of those things, right? Screens are something that is an add-on. And so we want to think about that. And you might have different policies for different days. There might be more screen time on the weekends and less on the weekdays, and that's fine, but it's still the have-to to get the want-to.

Laura Markham (38:23):

Beautiful. All right, well, you started by saying how much time do you have, and I know we could talk for another few hours about this and I wish we could, but this has been terrific. I think this been very insightful about practical application with the understanding of how the brain works, which is exactly what I hope for from this discussion. So thank you.

Dr. Sharon Saline (38:45):

I'm so glad. It's such a pleasure to be here and talk with you. And you ask such great questions. I'm really thrilled to be able to be part of this summit. Thank you so much.

Laura Markham (38:57):

We'll tell our viewers where they can find you. Underneath our interview, there will be the link to your website and any other links you give us. And I think you have a free gift.

Dr. Sharon Saline (39:10):

I do. I have a free downloadable gift, which is about my 5 Cs approach and improving executive functioning skills. So make sure you download that. You can find me on social media. My handle is @drdoctor.sharonsaline, and please check out my website. It's newly revamped.

Laura Markham (39:32):

Wonderful. I can't wait. Great to talk to you, Dr. Saline. Thank you. Bye-bye.

Dr. Sharon Saline (39:38):

Bye.