

Daredevils and Daydreamers

Strategies for Students with ADHD

Outline

Students who are Inattentive, Impulsive, Distractible

- a) What to look for
- b) What questions to ask
- c) What to do

What is ADHD?

Characteristics of ADHD Learners

General Strategies

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Children with Attention Deficit Hyperactivity Disorder offer unique challenges to the adults that share in their lives. One misconception regarding ADHD is that these children are unable to pay attention to anything when in reality they pay attention to everything. Some describe these children as seeing the world through a wide-angle lens. These global thinkers enhance our world with their enthusiasm, spontaneity, and energy.

What is Attention?

Attention is a subset of skills that include:

- a) the **ability to focus on what is important**.
- b) the **ability to select what is relevant** from what is not. Children who have difficulty with selective attention may have difficulty with remembering details, experience problems with incidental learning, demonstrate fatigued attention, have difficulty concentrating on tasks for age appropriate lengths of time, show reduced ability to scan the environment and pick up cues, and concentrate inconsistently.
- c) the **ability to sustain** or persist and maintain one's attention to the task at hand.
- d) the **ability to resist distractions** so that the child is not influenced by external or internal stimuli. Children may be distracted by visual, auditory, tactile and social stimuli. As well many children are internally distracted. This free-flight distractibility can be described as a stream of thoughts that are related to each other but may lead the child to be off task.
- e) the **ability to shift or move attention** to subsequent activities as required. A child who can shift their attention is able to make a smooth transition from one activity to another.
- f) the **ability to divide or assign attention** to two necessary tasks. A child who can divide their attention can easily copy from the board and listen to directions at the same time.

Attention skills are developmental in nature. Educators should keep in mind the normal development of attention.

Through observation, educators can identify the types of attention difficulties a child might experience and in what circumstances they might appear. There are many reasons why children may experience difficulty attending. Careful consideration of the following factors may help teacher clearly pinpoint concerns:

- a) Just like adults children can become preoccupied with **social and emotional concerns** that affect their ability to concentrate on their schoolwork.
- b) Children who experience **difficulty processing language** or who are **English as Second Language learners** may have difficulty attending in the fast-paced verbal environment of the classroom.
- c) Children who experience difficulty processing auditory or visual information due to a **learning disability** may appear to be distracted or inattentive in a classroom.

- d) Children with **significant academic delays** may have difficulty concentrating on the task at hand.
- e) Children may have a **physical disability, medical or mental health condition** that has a co-existing attention difficulty. Tourette's Syndrome, Hypothyroidism, Fetal Alcohol Syndrome, and Depression are examples.

What is Impulsivity?

Impulsivity can be best described as "**acting before thinking**". Children who have difficulty with impulse control are poor problem solvers. They may have difficulty reading the cues from the environment, difficulty thinking ahead about possible outcomes, and choose the first solution that comes to mind. Impulsive learners may demonstrate inconsistent performance, lack self-monitoring skills, perseverate on irrelevant details, and fail to evaluate and learn from their mistakes.

As well, once impulsive children have learned and can verbalize appropriate problem-solving skills, they may not be able to consistently apply the skills in the immediate situation.

What is Hyperactivity?

Children who are hyperactive have levels of **motor activity** significantly higher than their peers. Children who are hyperactive have a great deal of difficulty regulating their motor activity to the demands of a situation. They are **chronically restless** which interferes with their ability to complete tasks.

All children are inattentive, distractible, impulsive and overactive at some time in their lives. **When these behaviors start to interfere with the following;**

- a) **the child's ability to learn,**
- b) **the child's ability to make and keep friends,**
- c) **the child's relationships within the family,**
- d) **the child's ability to control his/her emotions and behavior,**
- e) **the child's self-esteem;**

it is time to investigate further.

What is ADHD?

According to Russell Barkley (1990) a consensus definition of Attention Deficit Hyperactivity Disorder (ADHD) is:

Attention Deficit Hyperactivity Disorder is a developmental disorder characterized by developmentally inappropriate degrees of inattention, over activity and impulsivity. These often arise in early childhood; are relatively chronic in nature, and are not readily accounted for on the basis of gross neurological, sensory, language, or motor

impairment, mental retardation or severe emotional disturbance. These difficulties are typically associated with deficits in rule-governed behavior and in maintaining a consistent pattern of work performance over time.

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) Fourth Edition, 1994 classifies ADHD as a separate disorder. **A physician or a psychologist can only make a diagnosis of ADHD.** ADHD affects approximately three to five percent of the population. Most experts agree that at least one-third of children with ADHD may have co-existing learning disabilities or behavioral disorders.

The **possible causes** of ADHD are open to much speculation. Current medical research suggests that ADHD may be caused by differences in neurotransmitters, which are the chemical messengers in the frontal regions of the brain. Some research also suggests differences in the glucose uptake and oxygen utilization in the same regions of the brain. There appears to be a familial or genetic component to ADHD.

The DSM-IV provides medical professionals guidelines as part of the diagnostic process for ADHD. These guidelines are not intended to be used in isolation to diagnose ADHD but to provide a common language and a set of standards. The DSM-IV uses the term "attention deficit hyperactivity disorder" as the label for this disorder.

A physician or a psychologist can only make the **diagnosis of ADHD.** An assessment usually includes interviews with the child and parents to compile a comprehensive developmental history, behavior observations and rating scales, medical assessments, and other assessments such as psycho-educational assessments or neuropsychological tests.

ADHD symptoms typically change over the lifespan. Recent research suggests that one-third of individuals with ADHD appear to experience little difficulty into adulthood. The second third of adults with ADHD describe more difficulty in times of stress and the last third continue to have significant difficulty into adulthood. Factors that appear to make a difference include the level of family and educational support, the ability of the individual to learn coping strategies, the severity of the ADHD, and the number and severity of co-existing conditions. **Children with ADHD can be at risk for a number of conditions such as academic underachievement, anxiety, low self-esteem, social problems, substance abuse, and significant behavior problems.**

"Kids Say"

Compiled by students in ADHD Pilot Program, OCCSB 1991.

As knowledge is power, the following list is a brainstorm of ideas and facts from children who know.

People with ADHD get mixed up easily.

People with ADHD are impulsive, they act before thinking.

Sometimes it is like traffic jams in my brain, my thoughts are going so fast. Sometimes I have to move around a lot because I have too much energy. Computer and television are easier to pay attention to than schoolwork.

Sometimes it is hard to concentrate if you have ADHD especially if it is boring.

People are born with ADHD therefore it is not your fault if you have ADHD.

People with ADHD need to learn to slow down.

Sometimes other people in your family have ADHD.

Having ADHD doesn't mean that you are stupid, bad or lazy.

If you have ADHD, you learn in different ways than other people.

Sometimes I need extra help because it is hard to concentrate even when I try hard.

Usually you go to a special doctor to find out if you have ADHD.

People with ADHD get distracted easily. Noise really bothers me.

I have so many ideas in my head that it is sometimes frustrating because my pen can't keep up.

ADHD has to do with my brain but only the part that controls attention, the neurotransmitters. The rest of it is great.

Sometimes I get angry and frustrated easily.

Some people don't understand. What helps me most is when my teachers are on my side, when they understand.

Some people with ADHD get teased and get into trouble a lot. Sometimes I don't understand why.

Sometimes I get blamed for things.

My pills, Ritalin, help me concentrate but I know I am responsible for my behavior whether I take my pills or not.

Management of ADHD

The **Most effective management plan** for ADHD children represent a multimodal approach and include the following components.

- a) knowledge and understanding of ADHD by parents, teachers and children and its effects across environments.
- b) behaviour management
- c) environmental. strategies and accommodations
- d) curriculum and program. modifications to meet individual academic needs
- e) medical management when deemed necessary by parents and their family physician

Medical Management

The medical management of ADHD is the sole responsibility of parents in collaboration with their family physician. The medical management may include use of medication

and /or individual or family counseling There are a number of medications that are effective in the treatment of ADHD. Parents should ask their physician for specific information regarding the use, dosages and side effects of these medications. In addition there has been an increased use of naturalistic or alternative treatments for ADHD which many parents are now investigating. It should be understood that medical management is not a cure, but only one component of a interdisciplinary management plan.

The responsibility of educators is to provide support for children on medication. Teamwork and communication between home, school. and the physician is highly recommended. In terms of medication the following guidelines should be considered:

- a) educators should be familiar with the OCCSB Administration of Medication Policy
- b) the dignity and privacy of the student should be paramount in any school routine for the distribution of medication
- c) educators should be involved in providing feedback to families and physicians regarding the student's behaviours. Many physicians will provide checklists for teachers to complete.
- d) educators should be informed about the various medications and their side effects so that accurate reporting can be made. Educators should be strongly cautioned against suggesting to parents that their child should be on medication.
- e) educators should be respectful of parents' decisions to include or not to include medication as part of the treatment of their child's ADHD

The medication issue in the management of ADHD has raised much controversy in today's society. Putting aside our personal beliefs, it is the educator's responsibility to help the ADHD students and their parents understand that "Pills are not a substitute for Skills" . ADHD students need to understand that their medication is one of the tools that can help them be successful. As one student with ADHD said, " My Ritalin helps me pay attention, if I want to. It is up to me to be responsible for my words and actions. Personal power comes from within not from my pill. "

The ADHD Learner

The students with ADHD often

- have deficits in academic performance
- are trial and error learners
- are repeat offenders- they don't learn from their mistakes
- are not detail oriented- they need to see the whole picture
- are poorly organised and have weak planning skills
- have weaker in fine motor skills- handwriting
- miss cues from the social environment and may not recognise the effect of their behaviour on others

- are consistently inconsistent
- work to avoid or get rid of negative reinforcement
- may be able to verbalise the steps to solve problems but cannot consistently apply the skills
- are not intentional in their actions

Teaching Strategies for September and the Rest of the Year

- Helpful hints:**
- Preplan- Be Proactive
 - Communication System-Work as a Team
 - Focus on Strengths
 - Clear Behaviour Expectations
 - Belief of the Individual- Positive
 - Directed Teaching- Skill Development
 - Develop a System for Organisation- Follow Through
 - Modify Written Work Expectations
 - Act as a Coach or Mentor
 - Consistency but not Rigidity

Teaching Strategies for the Young ADHD Child

- organised environment- colour coding, labelling personal space
- preferential seating, eye contact
- flexible work areas
- lots of variety in presentation and application
- short activities, chunk material
- one direction at a time- provide visual cues, repeat, rephrase (hear, see, do)
- ignore minor fidgeting, provide ways to redirect energy
- child proof your classroom
- well planned schedule- visually presented, what comes next
- plan transitions- signals, quiet time
- educate vs punish- teach prosocial skills, observation skills
- system for time out
- praise, reinforce proximations (behaviour shaping)
- affirmation book
- skill development- fine motor, academics
- consistent routine, clear expectations
- patience, sense of humour, creativity

Teaching Strategies for Students in Elementary School

Attention Getters

- routine to get class attention- signal, cue
- emphasis on appropriate listening- Stop & Look, Sit Still, Think, Ask a Question
- eye contact

- pre-listening organisers- being prepared to listen, what to listen for
- proximity
- calling the child's name
- prearranged signal to remind child to focus
- repeat, rephrase instructions- have the student repeat the directions back to you
- reduce the number of directions
- making a list- providing a visual cue for directions
- teach ignoring distractions to the whole class
- teach observation skills - what should I be doing?

Building Self-Esteem

- Information about ADD- Knowledge is Power
- Identification of personal strengths and weaknesses - SELF AWARENESS
- Directed teaching of relaxation techniques
- Identifying fears or sources of anxiety and Problem-Solving - PREPARING FOR THE UNKNOWN
- Focus on positives to develop self-esteem, be realistic and honest about the difficulties
- Developing reflective thinking

Academic Boosters

- Identification of academic strengths and areas of difficulty- remediation of skills- COMPETENCY AND SELF CONFIDENCE
- Structuring the environment - consistency, routines, daily communication with home, variety of work stations, cuing systems for listening or transitions
- Identification of the student's preferred learning style
- Story planning or webbing for written language, editing strategies SPECIO- dictated stories, peer or volunteer transcribers
- Variety of learning activities- directed teaching, individualised programs, cooperative learning, centres
- Strategies that help students learn how to learn- memory techniques, reference guides, multiplication charts, cuing cards
- Directed teaching of organisational skills & time management- test taking, studying, setting up a notebook, how to use an agenda, estimating time, long range planning
- Activities to improve language skills- tracking conversations, auditory memory, cause-effect
- Use of computer or typewriter to enhance final products. Emphasis on quality versus quantity

Organisation - Am I Your Mother?

- spend time to go over daily schedule- posted
- routine for early morning- getting all their materials in place
- stress neat desk- use bins or boxes to keep track of belongings
- reduce number of books- colour code notebooks
- homework books, agendas- follow through

- daily task list or schedule
- seat child away from distractions
- provide a variety of work stations- office (study corral)
- seat child surrounded by positive role models
- plan academic subjects for morning or right after lunch
- frequent breaks in tasks, close monitoring, peer check or teacher check
- ease transition times- prepare... in 5 minutes it will be time for
- close monitoring for **task completion**
- chunking work into smaller segments with specific time frames and monitoring
- variety in the day
- homework- plan with parents- time frame, remember that child is not on medication usually in the evening, be realistic
- close communication with parents- consistency, cooperation, co-ordinate

Putting the Be Back in Behaviour

- routines, rules- few basic rules with specific consequences and rewards
- clear expectations- structure
- behaviour modification- simple checkmark system
- directed social skills teaching- classroom survival skills- listening, ignoring distractions, asking for help, following directions
- directed teaching- dealing with anger, frustration, mediation
- self-monitoring- Beep tape, self-talk, self affirmation
- problem-solving- looking at the facts, identifying the problem, possible solutions, consequences
- positive direction- telling the children what you want them to do instead of what not to do
- eye contact
- focus on accountability- self evaluation
- EXPECTATIONS!!!! (Incompetency, Non-compliance)
- Monitor yard behaviour- plan before going out- intervene and use problem-solving

What Doesn't Work/ Problem Areas

(or what needs modification & close monitoring)

- unstructured time- many choices, no direction, no monitoring
- confrontations
- ignoring everything in terms of behaviour
- transition times- changing activities, home time, recess time
- timed activities- especially if student feels rushed
- noise
- constant starting and stopping- class interruptions
- changes in routine
- a variety of highly exciting activities in the same day without quiet times
- yard (lunch, recess)

Difficulties for Teens with ADHD

Developmental challenge for independence combined with impulsivity, poor planning, and attentional problems lead to **poor choices and judgements**.

Associated risks include:

- *High incidence of auto accidents
- *Propensity to earlier **alcohol and substance use/abuse**
- *Though very minimal incidence, higher **suicide rate**
- *Unplanned pregnancy
- ***Secondary problems** such as Conduct Disorder

Continuation of **education performance problems** resulting from

- *Increased expectations for self-control and responsibility
- *Larger system, more classes, multiple teachers, less task supervision work against ADHD difficulties

Higher incidence of

- *grade retention
- *dropping out
- *suspension and expulsion

Some Coping Strategies for Teens and Adults with ADHD

Take notes, even if you think you know the material. This makes it easier to keep focused. Don't write word for word -use an outline. Key words, sketches.

Use a tape recorder for lecture and studying.

This way a student can listen to the tapes later, not only to fill in the gaps but also to help you study for tests and quizzes.

When necessary, ask the teacher or boss to repeat instructions, rather than guess.

Break large assignments or job tasks into small, simple tasks. Set a deadline for each task and reward yourself as you complete each one.

Each day, make a list of what you need to do. Plan the best order for doing each task. Then make a schedule for doing them. Use a calendar or daily planner to keep yourself on track.

Work in a quiet area. Do one thing at a time. Give yourself short breaks.

Write things you need to remember in a notebook with dividers. Write different kinds of information--like assignments, appointments, and phone numbers-in different sections. Keep the book with you all the time. Prioritize.

Set up a system of organization using color coding by subject area, especially with

materials that need to be stored in a school locker.

Post notes to yourself to help remind yourself of things you need to do. Tape notes on the bathroom mirror, on the refrigerator, in your school locker, or dashboard of your car- wherever you're likely to need the reminder.

Store similar things together. For example, keep all your Nintendo disks in one place, and tape cassettes in another. Keep cancelled cheques in one place and bills in another.

Create a routine. Get yourself ready for school or work at the same time, in the same way, every day.

Exercise, eat a balanced diet and get enough sleep.

Realize the importance of organizational skills, time management, stress **reduction and** ways to monitor their distractibility and stay focused.

Schedule regular physical exercise.

Maintain a sense of humor.

Eliminate negative self statements.

Avoid, reduce and eliminate alcohol or drugs

Enlist a friend to help finish tasks and remember commitments and to provide feedback.

Teacher Strategies for Teens and Adults in Class

- Seated at the front of the room and off to one side.
- Consistency is the key to helping ADHD learners.
- Academic assignments should be brief and feedback regarding accuracy immediate.
- Teacher-directed as opposed to independent seatwork activities is preferred.
- Lessons should be carefully structured and important points clearly identified.
- The rules must be well defined, specific and frequently reinforced through visible modes of presentation.
- Instructions should be short, specific and direct.
- Classroom and homework assignments may require modification.
- Encourage the use of books on tape and videos to support student-reading assignments.
- Alter testing and evaluation procedures -pretests, additional time, other test formats, quiet location.
- Check the design of materials.
- * Tests -typed, large font, clear dark and easy to read.

- * Instructions should always be next to the questions to which they relate **and visually stand out from** the test answers (multiple choice in particular).
- * Ensure test questions **are ordered in a logical, sequential** manner. No skipping between one section and another.
- Teach the student how to identify key words, phrases, operations signs in math and/or sentences in instructions and in general reading.
- Teach scanning for key information and how to highlight important selections.
- Across all subject areas, display and support the use of mnemonic strategies to aid memory formation and retrieval.
- Support alternate methods of outlining such as "mind-mapping" or "clustering".
- Use colors and shapes to help them organize.
- Try making things more visual or tactile and they may grasp them better.
- Many learners need background sounds from a radio, stereo, or television.
- Low intensity lighting is helpful.
- LD/ADHD are especially susceptible to extremes of cold and heat.
- Some students require being in motion to concentrate.
- Thinking works best when accompanied, by movements of the mouth. (i.e. chewing gum)
- Use a timer/signout approach for students who leave the classroom for their locker, drinking fountain and so on.
- Scheduling of academic instruction involving significant problem solving or intense concentration should be early in the day.
- Improve attention by presenting novel, interesting, highly motivating material.
- Provide consistent coaching from all teachers to support organizational skills, time management skills training, study skills training, test taking skills.
- Designate one teacher as the advisor/supervisor/coordinator/liaison for the student and the implementation of this plan, who will periodically review the student's organizational system and to whom other staff may go when they have concerns about the student; and to act as the link between home **and school**.
- Encourage the student to check-in with this advisor first thing each week to plan/organize the week and last thing each week to review the week and plan/organize homework for the weekend.