**

# Attention Deficit Hyperactivity Disorder

# Pupils with Learning Difficulties

## Attention Deficit Hyperactivity Disorder

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| classroom_tip | Classroom-based tips (focus on instructional methods) |

1. **Restructure the environment and seat the pupil near you** so you can monitor his/her performance and behaviour (Garrick Duhaney, 2003; Harlacher, Roberts, & Merrell, 2006; Salend, Elhoweris, & van Garderen, 2003).
2. **Break assignments into small manageable chunks.** Be as clear as possible as pupils with ADHD tend to get overwhelmed when presented with lots of information. (Garrick Duhaney, 2003; Harlacher, Roberts, & Merrell, 2006; Salend, Elhoweris, & van Garderen, 2003).
3. **Use a timer to assist the pupil in learning to monitor his/her own work.** For example, you can say ‘you have 10 minutes to complete that task’ and set the timer at 10 minutes. Be careful in selecting a task that the pupil can actually finish in 10 minutes and provide him/her with positive feedback.
4. **Provide frequent opportunities to actively respond with ongoing instruction** and provide differential consequences for pupils’ behaviour (e.g., positive reinforcement such as praise and tokens for appropriate behaviour, ignoring inappropriate behaviour, and time out or response cost for inappropriate behaviour) (Garrick Duhaney, 2003; Harlacher, Roberts, & Merrell, 2006; Salend, Elhoweris, & van Garderen, 2003).
5. **Teach self-control to your pupils** (Pelham & Fabiano, 2008). There are several ways to do this, for example, taking into account activity 3, your pupil must finish his/her task in the specific time and then be allowed to do something else.
6. **Ask from your pupils to describe their own behaviour** and provide clear instructions and consistent reinforcement (Bicard & Neef, 2002; Reid et al, 2005). This can be done by asking them to write a story, or audio/video recording them during an assignment and then using this for discussion. (Be sure to respect the ethics code and get necessary permissions for audio-visual recordings.)
7. **Use correspondence training.** Correspondence training is a procedure in which children are reinforced for “do–say” verbal statements about what they had done previously and “say–do” statements describing what they plan to do (Shapiro, DuPaul, & Bradley-King, 1998).

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| school_tip | School-based practical tips (focus on instructional methods) |

### **Class Divisions / Arrangements**

If it is possible, **arrange the classroom or another space in school to be a relaxing environment** that pupils can use during breaks and lunch-time.

### **Community**

1. **Arrange weekly or fortnightly meetings between the parents and the staff** to discuss the pupils’ progress and to enhance the home-school collaboration. This will help to monitor progress and provide opportunities to discuss issues that might be related to the social life of the pupil, marginalisation, social interactions with peers, behaviour at home, and self-esteem (McCaleb, 2013).
2. **Collaborate with the parents and pupil to consider if and how they would like to share specific information on ADHD with peers.** If they wish to do this, consultation with health care providers, such as school or community health nurses, may be helpful.

### **Curricular Adaptations**

1. **Make curricular adaptations in terms of differentiating to the task** – make sure you inform the teachers to make the necessary adaptations to the tasks and responds to the various learning needs of the pupils and on the severity of each individual case. For example, based on a particular learning objective in the curriculum, a teacher might provide a single worksheet, which gets progressively harder (Hall, Meyer and Rose, 2012; BBC active, 2010).
2. **Make curricular adaptations in terms of resources** so that where possible you equip the classrooms in which there are pupils with ADHD with different materials and advanced technology, such as, tablets and projectors, so as to attain a single learning outcome (BDA, 2012)

### **Discipline**

1. **If the pupil is taking medication during the school day, discuss with the parents the possible side effects of these.** Follow school and/or jurisdictional policies and protocols in storing and administering medication. Reference: <http://www.learnalberta.ca/content/inmdict/html/adhd.html>]
2. **Be aware of the fact that often pupils with ADHD are highly sensitive and impulsive.** If a situation appears unfair to them they might become angry. Give them time to calm down, and then talks things through with them.

### **Educational Visits / Field Trips / Camps / School Exchanges / Trips Abroad**

**During an excursion assign an assistant – especially if the pupil is taking medication.** Provide clear guidance and information.

### **Other (Awareness Raising)**

**Arrange meetings with adults with ADHD** to talk to teachers and pupils to raise awareness regarding ADHD [Reference: Forlin, Sharma & Loreman, 2007]

### **Parents / Parents’ Associations**

1. **Arrange weekly or fortnightly meetings between the parents and the staff** to discuss the pupils’ progress and to enhance the home-school collaboration. This will help to monitor progress and provide opportunities to discuss issues that might be related to the social life of the pupil, marginalisation, social interactions with peers, behaviour at home, and self-esteem (McCaleb, 2013).
2. **If the pupil is taking medication during the school day, discuss with the parents the possible side effects of these.** Follow school and/or jurisdictional policies and protocols in storing and administering medication. Reference: <http://www.learnalberta.ca/content/inmdict/html/adhd.html>]
3. **Be aware that some pupils may be uncomfortable discussing or taking medications in the presence of peers.** Collaborate with the pupil and family to determine how to best support the pupil.
4. **Collaborate with the parents and pupil to consider if and how they would like to share specific information on ADHD with peers.** If they wish to do this, consultation with health care providers, such as school or community health nurses, may be helpful.

### **Safety**

1. **If the pupil is taking medication during the school day, discuss with the parents the possible side effects of these.** Follow school and/or jurisdictional policies and protocols in storing and administering medication. Reference: <http://www.learnalberta.ca/content/inmdict/html/adhd.html>]
2. **During an excursion assign an assistant – especially if the pupil is taking medication.** Provide clear guidance and information.

### **School Celebrations / Events / Activities**

Pupils with ADHD tend to be creative. **Include the pupils into school events by differentiating their role and contribution.** For instance, instead of memorising a poem, or dancing (if they have difficulties in coordination) take advantage of other talents such as drawing or constructing something for a school play.

### **School Purchases**

1. **Εquip the school with tablets and personal computers** so that technology can be used in teaching/learning social skills, and following rules (Jung, 2005).
2. **Make curricular adaptations by differentiating the resources available** for pupils with ADHD, for example, visual prompts/ posters in school showing the daily schedule and school-wide events (Hall, Meyer and Rose, 2012; BBC active, 2010).
3. **Make curricular adaptations in terms of resources** so that where possible you equip the classrooms in which there are pupils with ADHD with different materials and advanced technology, such as, tablets and projectors, so as to attain a single learning outcome (BDA, 2012)

### **Pupil Support**

1. Where possible, **ensure the provision of additional classroom support such as the presence of teaching assistant** to help pupils with ADHD to stay on track (BDA, 2012).
2. **Be aware that some pupils may be uncomfortable discussing or taking medications in the presence of peers.** Collaborate with the pupil and family to determine how to best support the pupil.

### **Teacher Professional Development**

1. **Provide training for teachers and SEN teachers** from external agencies (e.g., educational psychologist services and ADHD organisations.) related to the main difficulties of ADHD pupils in classes, the signs for early identification and assessment and practical tips for the teachers in order to support those pupils in the class (Rose, 2009). Focus the training on specific areas, such as, training on the design of learning activities that require a high response rate such as providing pupils with individual white boards, chalkboards, response cards or electronic tools so they can respond while working in large groups [Reference: <http://www.learnalberta.ca/content/inmdict/html/adhd.html>]
2. **Arrange meetings with adults with ADHD** to talk to teachers and pupils to raise awareness regarding ADHD [Reference: Forlin, Sharma & Loreman, 2007]
3. **Provide training on drama therapy/experiential learning** so teachers can use role playing with their pupils to teach them social skills and how to follow rules [Reference Jennings, 2013; Freeman, Sullivan & Fulton, 2003; De la Cruz, Lian & Morreau, 1998]

### **Technology**

1. **Εquip the school with tablets and personal computers** so that technology can be used in teaching/learning social skills, and following rules (Jung, 2005).
2. **Make curricular adaptations by differentiating the resources available** for pupils with ADHD, for example, visual prompts/ posters in school showing the daily schedule and school-wide events (Hall, Meyer and Rose, 2012; BBC active, 2010).
3. **Make curricular adaptations in terms of resources** so that where possible you equip the classrooms in which there are pupils with ADHD with different materials and advanced technology, such as, tablets and projectors, so as to attain a single learning outcome (BDA, 2012)

### **Supportive Literature**

**Definition:** “The essential feature of attention-deficit/hyperactivity disorder is a persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequent and severe than is typically observed in individuals at a comparable level of development” (American Psychiatric Association, 2000a, p. 85).

Some pupils with learning disabilities have difficulty attending to a task and/or display high rates of hyperactivity. Children who consistently exhibit these problems may be diagnosed with attention-deficit/hyperactivity disorder (ADHD). A high degree of **comorbidity** (two conditions occurring in the same individual) between learning disabilities has frequently been reported (Smith & Adams, 2006)

**Characteristics of pupils with ADHD:**

***Inattention***

* not attending to details
* difficulty sustaining attention to tasks or activities
* does not seem to listen
* does not follow through on instructions (e.g., starts a task but soon gets sidetracked)
* difficulty organising tasks and activities (e.g., work is messy and disorganised)
* dislikes tasks that require sustained mental effort
* frequently loses things
* easily distracted
* Often forgetful.

***Hyperactivity and impulsivity***

* Fidgeting
* Restlessness
* runs about or climbs on furniture, often excessively loud or noisy
* often “on the go” as if “driven by a motor”
* talks excessively, blurts out answers, difficulty waiting to take his or her turn, interrupts others
* acts without thinking (e.g., starts a task without reading or listening to the instructions)
* Impatient, rushes through activities or tasks, has difficulty resisting temptations.

(adapted from American Psychiatric Association, 2011c)

### **Websites and EU Reports**

<http://www.apa.org/topics/adhd/>

[https://www.psychiatry.org/patients-families/ADHD/what-is-ADHD](https://www.psychiatry.org/patients-families/adhd/what-is-adhd)

<https://www.adhsdeutschland.de/Portaldata/1/Resources/PDF/4_8_4_Politik/Anlage_4a_Mapping_(Englisch).pdf>

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Shapiro, E. S., DuPaul, G. J., & Bradley-Klug, K. L. (1998). Self-management as a strategy to improve the classroom behavior of adolescents with ADHD. *Journal of Learning Disabilities*, *31*(6), 545-555.

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