

Attention Deficit Hyperactivity Disorder (ADHD)

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INTRODUCTION

Ronald, de Bode and Polderman (2021) state that ADHD is a neurodevelopmental condition that impacts the lives of around 5% of children. Agha *et al.* (2020) say that despite this, ADHD is subject to stigma due to a lack of awareness and education on the disorder. As a result, an ADHD diagnosis can be a challenging time for the child and their family. The NHS (2021) explain that ADHD is categorised into two categories, the first category being inattentiveness (issues with focus) and the second category being hyperactivity and impulsiveness.

Identification and Diagnosis

Athanasiadou *et al.* (2020) supports Ronald, de Bode and Polderman (2021) and says that ADHD is a neurodevelopmental condition that affects people worldwide. Furthermore, Athanasiadou *et al.* (2020) add that symptoms of ADHD often present in the early stages of a child's life.

The NHS (2021) explain that the common behaviours of a child with ADHD are:

- Limited attention span (will lose concentration easily).
- Difficulty keeping still (this will be more noticeable in a calm environment).
- Talking excessively and being interruptive to others talking.

Bhandri (2021) highlights that ADHD is usually first identified by school staff early in a child's life. School staff are usually the first to see the symptoms as ADHD is usually more obvious in a school setting when children are required to concentrate on work, but teachers cannot diagnose ADHD, but they can raise concerns. As well as the school identifying issues, the NHS (2021b) say that parents can identify symptoms and ask their GP for a child to be referred to a specialist who has the ability to confirm official diagnosis. However, Villines (2021) explains that while ADHD is mostly diagnosed at a young age, there are many cases where people are not diagnosed until adults. Moreover, Halliwell (2016) may disagree with such a late diagnosis and says that early identification and diagnosis can benefit the lives of the individual and their family as support can be put in place.

Martin (2018) explains that **1 in 20** children are diagnosed with ADHD during their school years and highlights that for every **1 girl** diagnosed, there are between **3 to 7 boys** diagnosed. Furthermore, ADHD foundation (2022) also state that ADHD is more commonly diagnosed in boys at a ratio of around **1:6**. Venkata (2013) created a graph to show the clear gap between ADHD diagnosis in boys and girls.

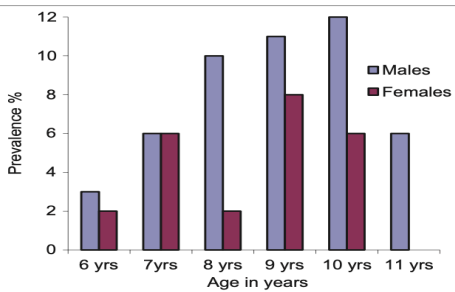


Figure 3: Distribution of ADHD among different age groups in males and females

(Source: Venkata, 2013)

Strategies

Peterson (2020) suggests that an effective strategy to help manage and support a child with ADHD in a classroom is by implementing an **ADHD Reward System**. This is a specific and organised system that is created and deployed to increase and praise positive behaviour, which is beneficial to a child with ADHD who is usually told they are doing something wrong. Twinkl (No date) agrees with this strategy and states that it has proven effective to support and manage children with ADHD in the classroom. A reward chart also shows a child with ADHD that the practitioner has recognized them engaging in positive behaviour and hopefully motivates the child to continue with the positivity. Twinkl (No date) also add that the ADHD reward system can be tailored to goals that the practitioner would like the child to achieve. An example of this system is below. However, Peterson (2020) adds that some people may disagree with this system as it rewards children for doing what they are supposed to do.

	Monday	Tuesday	Wednesday	Thursday	Friday
I shared with others and waited when it was my turn					
I stayed in my seat or close to my seat as I worked					
I let my teacher know if I needed a short break to refresh					
I controlled my temper and tried to calm myself when I needed to					
I listened to my teacher's and followed instructions					

(Source: Twinkl, No date)

Barrier: Knowledge and Attitudes towards ADHD

Murtani *et al.* (2020) conducted a research project, in which they found that practitioners and community attitudes towards ADHD showed lack of knowledge and poor attitudes towards the disorder with **58.9%** of practitioners/teachers showing minimal knowledge of how the disorder affects children and the best ways to support children with ADHD. However, Bolinger, Mucherah and Markelz (2020) highlight that there is limited research that specifically looks at the knowledge teachers/practitioners possess on ADHD. Then again, they carried out their own research and concluded that while teachers were somewhat knowledgeable on ADHD, they had limited theories on how best to manage ADHD in the classroom environment.

Youssef, Hutchinson and Youssef (2015) are of the position that practitioner knowledge and attitudes towards children affected by ADHD play a significant role in the life of a child with ADHD. They explain that a child with ADHD will inevitably cause disruption to a classroom, but it is the practitioner's role and responsibility to deploy strategies that will enable them to thrive and achieve good outcomes. However, Dessie *et al.* (2021) may argue that is unfair to expect practitioners to accept this responsibility when in a study they conducted, they found that **77.8%** of practitioners had never received specific training for managing ADHD, even though **63.8%** of participating practitioners actively worked with children with ADHD.

Ewe (2019) is in agreement with Murtani (2020) and also believes there are poor attitudes towards children with ADHD in education. She conducted research and found that these poor attitudes accompanied by a lack of knowledge impact the child, as more children with ADHD reported feeling distant from their teacher, compared to that of their non-ADHD peers.

Conclusion: ADHD is a neurodevelopmental condition as stated by Athanasiadou *et al.* (2020). The NHS (2021) explain that ADHD presents itself as a child having a limited attention span and being interruptive. It is these behaviours that Youssef, Hutchinson and Youssef (2015) say leads to poor attitudes towards ADHD from teachers/practitioners. However, they also state it is the teacher's role to support a child with ADHD. This can be achieved through the use of an ADHD Reward System, as suggested by Peterson (2020). However, this strategy may face criticism as some people believe it is rewarding children for doing what is expected of them.

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