

A Critical Examination of ADHD. Identification, Barriers, and Support Strategies

What is ADHD?

According to the National Institute of Mental Health (2021), Attention-Deficit/Hyperactivity Disorder (ADHD) is a developmental disorder characterised by persistent hyperactivity, inattention, and impulsivity. This academic poster critically explores the identification and diagnosis of ADHD, analyses the effect of ADHD-related obstacles, and thoroughly examines support strategies suited for children with ADHD. Given this, according to Drechsler et al. (2020), the diagnosis ADHD is a complex process that includes clinical evaluations, behavioural observations, and cooperation between educators, parents, and professionals in the medical field.

ADHD DIAGNOSTIC

Behavioural Observations

According to DePaul et al. (2016), behavioural observations play an important role in identifying and diagnosing ADHD since they provide immediate information about an individual's everyday activities. One of their strengths is their ecological validity since observations are performed in natural contexts, such as classrooms, and reflect real-world behaviours. Moreover, this strategy permits medical professionals to observe ADHD-related behaviours, which improves evaluation accuracy. However, since observations depend on the observer's judgment, there is subjectivity and a possible bias in interpretation. Furthermore, behaviours observed under specific situations may not wholly represent the complexities of ADHD symptoms, requiring a comprehensive, multimodal examination for a more accurate diagnosis, according to Chandler (2011).

Diagnostic Criteria (DSM-5):

According to the CDC (2023), the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) is an essential tool for detecting and diagnosing ADHD. Moreover, its standardised criteria constitute a strength, offering professionals a similar language, improving diagnostic uniformity, and promoting communication among medical professionals. However, Martin et al. (2015) claim that relying simply on symptom checklists has limits, possibly oversimplifying the varied character of ADHD, and that may result in overdiagnosis or underestimating variations in symptom presentation. Additionally, regardless of its usefulness, the DSM-5 should be used in combination with a complete, multimodal examination to achieve a deep understanding and correct diagnosis of ADHD.

Multimodal Assessment

According to DuPaul et al. (2016), multimodal assessment, which incorporates several sources of information, is considered a complete technique for detecting and diagnosing ADHD. Its strengths include its capacity to capture the many presentations of ADHD symptoms across different circumstances, offering a more holistic perspective. Moreover, the diagnosis accuracy is improved when clinical interviews, neuropsychological evaluations, and reports from parents and teachers are combined. However, Hinshaw and Arnold (2014) argue that organising information from many sources may be difficult, resulting in inaccuracies and possible biases. Despite limitations, the technique remains necessary for a nuanced assessment of ADHD and informed decision-making in clinical settings.

BARRIERS

Medical Module

According to Sayal et al. (2018), ADHD barriers in children, which include medical and social aspects, substantially influence their well-being, academic performance, and general development. Moreover, in the medical module, there are still challenges with accurate diagnoses and access to suitable treatment because ADHD evaluations are subjective, and there is a risk of overdiagnosis or underdiagnosis, which affects the accuracy of prevalence numbers. As a result, Bussing et al. (2012) claim that differences in healthcare access and treatment accessibility may prevent children from obtaining immediate and complete medical care, aggravating the long-term effects of untreated ADHD symptoms. Moreover, the medical approach to ADHD care requires finding a balance between symptom control and an in-depth understanding of the child's well-being.



(Sharifah, 2019)

Social Module

According to Bussing et al. (2012), in the social module, the stigma associated with ADHD is a significant obstacle for children. Stereotypes and unfavourable attitudes affect social judgment and discrimination. These social difficulties may have a negative impact on a child's self-esteem, social interactions, and general psychological development. Therefore, Langberg et al. (2013) argue that social barriers negatively impact educational environments. Given this, inadequate support for afflicted students might result from differences in teacher awareness of ADHD and the implementation of necessary adjustments, and this misunderstanding may lead to academic underachievement, more stress, and an increased probability of dropping out.

SUPPORT STRATEGIES

Outdoor Activity as a Supportive Approach for Children with ADHD

According to Mathers (2022), nature-based therapy, outdoor play, and multisensory experiences are all examples of outdoor physical activity interventions. This strategy is based on the concept that spending time in nature and participating in physical activities outside helps improve concentration, control of emotions, and overall well-being.

Benefits of Outdoor Physical Activity

Recent research, such as the work of Fjørtoft (2022), has highlighted the cognitive and emotional advantages that children with attention-deficit/hyperactivity disorder (ADHD) may experience from engaging in physical activity outside. Moreover, according to Kuo and Taylor (2020), exposure to natural environments has been linked to greater attention and an amelioration in the symptoms of hyperactivity, while Taylor and Kuo (2021) claim that nature's multimodal stimulation promotes sensory processing and regulation.

Play Therapy in Nature

According to Bundy et al. (2019), incorporating play therapy in natural settings has earned recognition as an effective intervention, as play therapy encourages children to participate in unstructured, creative play, developing self-regulation and problem-solving abilities. Similarly, the Theory of Loose Parts, developed by Nicholson (1972), highlights the significance of unstructured play and creativity in reducing impulsive behaviour.



(The Canadian Wildlife Federation, 2022)

In conclusion, identifying and diagnosing ADHD requires various methods, each with strengths and limitations. Furthermore, outdoor activity, including play and nature-based therapies, offers promise as a support tool for children with ADHD. However, to overcome these obstacles, schools, employers, healthcare professionals, and society need to collaborate to increase awareness, decrease stigma, and adopt inclusive practices.