

ALN Webinar

(CHAIR)

Good evening everyone. I'd like to start by thanking you all for attending this evenings ALN webinar. According to Mayday (2023), A webinar is an online event where a speaker or speakers are able to engage with an online audience and deliver presentations. The audience is able to participate by asking questions and using a range of interactive tools that are available. Webinars allow people to collaborate in real time. Yousey (2023), believes webinars give people access to the industry's experts that may often be difficult to get in contact with and can provide others with the opportunities to directly learn from them, gain an insight and also ask any questions that may not be readily available through other means of information.

Could I please introduce you to our first speaker- Mrs Claire Thomas.

CLAIRE'S SPEECH

Thank you Claire.

Next on our agenda I will be discussing my chosen Additional Learning Need.

Additional Learning Needs, also referred to as ALN is described as children and young people who have physical, learning and or sensory needs which may make learning harder for them as opposed to other children. It is a legal term now used for children who may need specific support to have equal learning opportunities as other children in school. Additional

Learning Needs (ALN) replaced the Special Educational Needs (SEN) system in September 2022 (Dewis Wales,2023; Mentally Healthy Schools, ND).

This evening, we will be discussing Attention Deficit Hyperactivity Disorder, also known as ADHD. According to the NHS (2021), ADHD is a condition that affects children's behaviour. Children with ADHD can seem restless, they may act on impulse, and could also have trouble concentrating. However, Welsh Government (2019) argues that children with ADHD may not always display all three aspects of this and each symptom will vary depending on the severity. Sayal *et al* (2017) agrees with NHS (2021) and also adds that globally, an average of 5% of children have ADHD, while a further 5% minimum, struggle with the difficulties that diagnosed children suffer with, however due to their symptoms not reaching the threshold, they do not reach the full criteria for an ADHD diagnosis and do not qualify for any support in school or from outside agencies, despite their struggle with day to day life.

Cabral, Liu and Soares (2020) believe that ADHD in children is one of the most common neurodevelopmental disorders. They suggest that ADHD frequently persist into adulthood. Substance Abuse and Mental Health Services Administration also known as SAMHSA (2023) suggest that although there is no clear indication on what it is that causes ADHD, it is argued that a combination of environmental factors and genes are likely to affect the development of the condition.

Keire- Good evening Maria, could you clarify what you mean by environmental factors please?

Hi Keire, of course! So environmental factors are exposures to things such as pesticides or can even refer to where we work, live or behaviours, for example, poor diet and smoking (National Human Genome Research institute, 2024). Premature birth and low birth weight can be a vital environmental risk factor for ADHD as there is a lack of nutrient intake during gestation can impact on brain development (Núñez-Jaramillo, Herrera-Solís and Herrera-Morales, 2021; Hatch, Healey and Halperin, 2014).

It was argued that previous studies showed birth weight did not make up more than one percent of the variance in ADHD, which then prompted professionals to the conclusion of birth weight not representing as a major risk factor in the development of children with ADHD, and it was also argued that emerging evidence began to show that maternal stress and smoking during pregnancy was not exposing unborn babies to the risk of this condition (Pettersson *et al*, 2014; The National Child Traumatic Stress Network, 2016). However, Lui *et al* (2022), revealed in their research study that children whose parents smoked or were exposed to second hand smoke from one year before their pregnancy to the end of pregnancy were at a higher risk of developing ADHD as opposed to those children's whose parents never smoked.

There are many different ways to identify ADHD. There are 3 common symptom categories linked to it, these include:

- Inattentiveness- this is when children are easily distracted, forgetful and disorganized. This can often be misunderstood by teachers for laziness and disruptiveness (Wilcox, 2023).
- Impulsivity- When a child that has ADHD shows impulsivity, this refers to acting without thinking beforehand. Children will often be impatient and have trouble waiting in line or for their turn, which can be misconstrued as rudeness (Healthlink BC, 2022).

- **Hyperactivity-** A child who has ADHD will tend to be always on the go, and rarely able to sit still. They will tend to talk excessively, and, in the instances they are still, they tend to fidget often (Great Ormand Street hospital, 2016).

Linsey- Maria can I ask, on many occasions I find myself having to advocate for children where practitioners believe that these symptoms are just due to the children's ages and may not agree that there is a possibility of ADHD please, are there any ways we can overcome this?

Good evening Linsey, thank you for bringing this issue up. Unfortunately, this is a common barrier when it comes to ADHD. There are many misconceptions and barriers when dealing with diagnosis and treatment of children who have this condition. Unfortunately, according to Ward, Kovshoff and Kreppner (2021) there is a large gap in practitioner training and understanding of ADHD, especially if it is undiagnosed in the child. It can be beneficial to remember that in order to gain a diagnosis of ADHD it should come as a multiagency approach. Parents, schools, and other healthcare professionals should all be working together to gain a full picture of the child. The diagnosis will be based on a strict criterion. Children must have more than six symptoms of hyperactivity, impulsiveness, and inattentiveness, and they must be present for more than six months, otherwise it can be linked to age and stage of the child (Wales psychiatry centre, 2022).

Ward, Kovshoff and Kreppner (2021) also suggest that practitioners play a vital role in the social and academic development of children and yet often they lack the knowledge and understanding of additional learning needs such as ADHD. Despite this lack in training, they are often involved in referrals and questionnaires for greater insight on the child's possible condition, and are seen as reputable and reliable sources, and unfortunately this may not always be the case.

However, Welsh Government (2021) is now offering free training courses for continuous professional development via HWB, which all school staff in Wales have access to, that can help practitioners gain an insight to a range of additional learning needs and how best to understand them.

You are speaking up for children when they are unable to speak up for themselves. You are ensuring their rights are being respected and that they are fully aware of them (Barnardo's, N.D; Unicef, N.D). In order to educate the world on ALN we need more practitioners like you. Thank you Linsey.

Claire- What are the common misconceptions of ADHD Maria?

Hello Claire, so according to a vast amount of research, one of the biggest misconceptions is that ADHD is down to inadequate parenting. Shaprio (2021) believes that ADHD is not a result of poor parenting and suggests that while this condition does tend to run within families, it is a result of nature not nurture. It is a brain-based condition of behavioral inhibition. However, according to Setyanisa *et al* 2022 there is a notable relationship with certain parenting styles and ADHD in children. They argue that a lack of parental attention through parenting in young children has the possibility of increasing dopamine levels in a child's brain, which can be one of the causes of hyperactivity and can increase their risk of developing ADHD. Moreover Teixeira, Marino and Carreiro (2015) will argue that while inadequate parenting or the lack of parental attention can have an effect and aggravate the symptoms of ADHD in children, it is not the cause of the condition itself.

Feil *et al* (2016) believe that with early diagnosis and early intervention for children as young as pre-school age can have a positive impact with significant overall improvement. Their research showed a broad range of parent and teachers reporting this noticeable improvement. According to Youssef (2021) if ADHD is left untreated it can escalate rapidly to school problems, criminality, unemployment, and substance misuse. Therefore she believes that early diagnosis intervention can be crucial, which makes links to Feil *et al*'s (2021) research. Unfortunately, according to Swansea Bay University Health Board (2023) the waiting time for children to be assessed for ADHD is 113 weeks, thus making early diagnosis not possible.

Apryl- So what can we do to help support these children if an early diagnosis is not available?

I'm glad you've asked this Apryl. According to Shire (2018) because children with ADHD display symptoms of inattentiveness, impulsivity, and hyperactivity, this can often make traditional school life more difficult for them. They may often struggle socially, academically, or sometimes both. Children with ADHD can often present with a large task of teaching and managing the said child effectively and successfully.

I would like to introduce the term Forest School to tonight's webinar. The forest school association, also known as the FSA (N.D) describes forest school as an inspirational learning process, that is learner-led and offers unique opportunities for holistic growth and development. This learning style supports theorists such as Piaget and Vygotsky who believe that deep, meaningful learning is done through play, supported risk taking and exploration. They suggest that confidence and self-esteem is also developed through learner inspired, social, hands-on experiences in a natural environment (Nair, 2019, p 1-38).

It is argued that learner led sessions and physical activities in an outdoor environment can help support learners with ADHD, more than a traditional classroom setting therefore outdoor forest schools tend to be more suitable for children with this condition. It is also suggested that forest school can help to reduce anger levels and help children to not feel as stigmatized or isolated in the outdoor environment as their symptoms are not as apparent outside, compared to a classroom environment (BroadTree Forest school, N.D).

Research suggests that when children with ADHD feel hyperactive or restless they can release pent up energy through physical activities. Moreover, Forest school is designed to be inclusive with all individual children's needs in mind regardless of their specific needs or backgrounds, which in turn, supports article 3 of the right of the child. (BroadTree Forest school, N.D; ESP Play, 2021; Willowbrook, 2022; UNCRC, N.D).

Unfortunately, according to Learning through Landscapes (N.D) although this Scandinavian, Reggio Emilia style of learning is a fast-growing phenomenon, it can also be costly. Sessions can be expensive to send children with ADHD to and due to the recent cost of living crisis this may not always be an option for a lot of families. However, according to Education Wales (2023) in line with the new curriculum for Wales and the curriculum for funded non-maintained nursery settings, it is recommended that a fundamental part of the PGCE curricula should include outdoor learning. School staff should also receive learning opportunities for outdoor learning pedagogies such as forest school, making it regularly accessible for children of all ages to experience on a regular basis.

By introducing outdoor learning into the PGCE curricula and bringing Forest school into mainstream school's this allows children with Additional Learning Need's such as ADHD to be able to access the same opportunities as other children without the need of being placed into a special unit. This follows Additional Learning Needs and Education Tribunal (Wales) Act 2018, chapter 3, section 51 which states the local authority have a duty of care to favour education for children with additional learning needs be in mainstream schools where possible.

In conclusion, ADHD is said to be one of the most common additional learning needs in children. Children with ADHD will often show more than six symptoms that will be present for a period of more than six months. The cause of this condition is believed to have genetic and environmental factors (NHS, 2021; SAMHSA, 2023). Early diagnosis and intervention proves most effective for this condition, however with the state of our current waiting times this is not always possible (Feil *et al*, 2016; Swansea Bay University Health Board, 2023). A possible strategy that can be used for children with ADHD is hands-on, physical activities that are learner-led and take part in an outdoor environment, therefore Forest school sessions could be beneficial to these children to help them feel included, and help them to focus in a different way as opposed to what classroom settings expect of them (BroadTree Forest school, N.D).

I'd like to thank you all for listening, and I do welcome any more questions before we move on.

We now move on to Keire.

Thanks Keire, can we please turn our attention to Linsey.

Diolch Linsey, and finally we have Apryl.

Can I finally take this moment to thank all of our presenters this evening for their very knowledgeable and educated presentations, and also thank you to you as an audience. It has been a pleasure to chair this webinar. Are there any further questions.

Diolch, Nos da.

Critical analysis of ADHD.

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What is ADHD?

It is believed that ADHD is one of the highest neurodevelopmental disorders in childhood. Although it is usually diagnosed in early childhood, it carries on into adulthood. Whereas many children tend to show many signs of ADHD, they often grow out of these, however a child that has ADHD does not (National Center on Birth Defects and Developmental Disabilities, 2023). There are many different factors that can cause ADHD. Substance Abuse and Mental Health Services Administration also known as SAMHSA (2023) believe that ADHD can be caused by genetic factors that can be inherited through family genes, and environmental factors such as exposure to pesticides and low birth weight due to smoking and unhealthy lifestyle habits such as diet (Núñez-Jaramillo, Herrera-Solís and Herrera-Morales, 2021; Hatch, Healey and Halperin, 2014). However, according to Great Ormond Street Hospital for children (2016) believe that previous studies and theories that relate to ADHD, suggest that diet and exercise are not linked to ADHD and hyperactivity.

Identification and diagnosis.

There are many different ways to identify ADHD, common symptoms include:

- Inattentiveness.
- Impulsivity.
- Hyperactivity.

In order to gain a diagnosis of ADHD it comes as a multiagency approach. Parents, schools and healthcare professionals should all be working together to gain a full picture of the child and to carry out a complete mental state examination. A diagnosis for children will be based and depend on a strict criteria. Children must have more than six symptoms of hyperactivity, impulsiveness and inattentiveness, and they must be present for more than six months.

(NHS 111 Wales, 2023; Wales psychiatry centre, 2022)

Common barriers and misconceptions.

According to the University of Nottingham (N.D) there are many misconceptions and barriers when it comes to ADHD.

- Poor diet- It is often believed that excessive sugar and food additives cause ADHD, however these only influence for children who also suffer with certain food sensitivities.
- Social backgrounds- It has often been believed that ADHD comes from under privileged or low-income backgrounds. Although ADHD may be triggered by the environmental factors, it exists in all socio-economical groups.
- Bad parenting- Although it has been argued in the past that ADHD is a result of bad parenting, there is research to argue that there are genetic differences in the neural activity pathways in a child's brain.

French, Sayal and Daley (2018) believe that there is a lack of understanding, awareness and experience when it comes to ADHD in the UK. They suggest that there is a gap in training with this disorder, causing a lack in confidence about ADHD and its treatment, as opposed to countries like America where ADHD has been studied extensively over the past four decades, resulting in a detailed understanding of the condition and its Characteristics, leading to more positive outcomes for children who live with it thanks to the wide range of services and therapies that are available (Hawthorne, N.D)

Forest School and ADHD.

Learner led sessions and physical activities in an outdoor environment can help support learners with ADHD for a number of reasons. These include:

- Forest school reduces anger levels as opposed to traditional school environments.
- Children do not feel as stigmatized or isolated in the outdoor environment as opposed to inside a classroom.
 - Releases pent up energy.
- Inclusive and designed with all individual children's needs in mind regardless of needs or backgrounds, which supports article 3 of the right of the child.

(BroadTree Forest school, N.D; ESP Play, 2021; Willowbrook, 2022; UNCRC, N.D)

Conclusion.

ADHD is said to be one of the highest neurodevelopmental disorders in childhood. Children with ADHD are unable to grow out of their symptoms unlike neurotypical children. Although it was suggested that previous studies believed diet and exercise did not play a part in ADHD, it is now believed that ADHD although primarily a genetic condition, environmental factors such as exposure to pesticides and low birth weight due to smoking and unhealthy lifestyle habits are a risk factor to the condition. ADHD consists of 3 main Categories; inattentiveness, hyperactivity and impulsiveness, and in order to gain a diagnosis a strict set of criteria should be followed, with more than six symptoms for a period of six months or more must be present. According to research some misconceptions with the condition is that it is down to bad parenting, social backgrounds and poor diet choices, and it is believed that in the UK this is where the lack of training and understanding can be detrimental to future outcomes in comparison with America, where understanding and awareness is more detailed. Researchers believe forest school is an opportunity for all children, neurodivergent or neuro typical to release pent up anger and energy, reducing the risk of feeling stigmatized and isolated. Having the chance to experience learner lead, physical activities outdoors can be beneficial to children with ADHD.

(National Center on Birth Defects and Developmental Disabilities, 2023; Núñez-Jaramillo, Herrera-Solís and Herrera-Morales, 2021; Hatch, Healey and Halperin, 2014; Hawthorne, N.D; French, Sayal and Daley, 2018; BroadTree Forest school, N.D; ESP Play, 2021; Willowbrook, 2022; UNCRC, N.D).

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