

Introduction

A child's academic success is often dependent upon his or her ability to attend to classroom tasks with minimal distraction. This enables a student to acquire information, complete assignments, and participate in classroom activities and discussions.

When a child exhibits behaviors associated with ADHD, the effects may include difficulties with academics, self-control, and forming relationships with others. Using appropriate behavioral interventions can help to lessen the impact.



The content of this course is a modified version of Teaching Children with Attention Deficit Hyperactivity Disorder: Instructional Strategies and Practices, published by the U.S. Department of Education.



Introduction

In Illinois, every two years, certified school staff and administrators must receive training on the following topics:

- The current best practices on the identification and treatment of ADHD.
- The use of psychotropic or psychostimulant medication as treatment options for school-age children with ADHD.
- Non-aversive behavioral interventions that can be applied in the school setting for students with ADHD.

This course was developed to help educators complete this required training.



Introduction

This course addresses the following topics in relation to ADHD:

- A. Identifying Children with ADHD**
- B. Treatment of ADHD**
- C. Successful Instruction of Children with ADHD**
- D. Effective Behavioral Intervention**



A. Identifying Children with ADHD

Up to 5% of the student population in the United States has been diagnosed with ADHD. Most research suggests that the condition is diagnosed up to nine times more often in boys than in girls.

For years, ADHD was assumed to be a childhood disorder that became visible as early as age 3 and then disappeared with the start of adolescence. It is now known that the condition is not limited to children. While the symptoms of the disorder may change with age, many children with ADHD do not grow out of it.



A. Identifying Children with ADHD

ADHD Categories

ADHD behaviors are classified into two main categories: **poor sustained attention** and **hyperactivity-impulsiveness**.

Three subtypes of ADHD have been identified:

- **Predominantly inattentive** includes the symptoms of inattention with little signs of impulsivity or hyperactivity.
- **Predominantly hyperactive-impulsive** includes the symptoms of hyperactivity and impulsivity.
- **Combined types** includes the symptoms of both inattention and hyperactivity.



A. Identifying Children with ADHD

Symptoms

Children who have symptoms of **inattention** may:

- Be easily distracted, miss details, forget things, and frequently switch from one activity to another.
- Have difficulty focusing on one thing.
- Become bored with a task after only a few minutes, unless they are doing something enjoyable.
- Have difficulty focusing attention on organizing and completing a task or learning something new.
- Have trouble completing or turning in homework assignments.
- Often lose things needed to complete tasks or activities.
- Not seem to listen when spoken to.
- Daydream, become easily confused, and move slowly.
- Have difficulty processing information as quickly and accurately as others.
- Struggle to follow instructions.



A. Identifying Children with ADHD

Symptoms

Children who have symptoms of **hyperactivity** may:

- Fidget and squirm in their seats.
- Talk nonstop.
- Dash around; touch or play with anything and everything in sight.
- Have trouble sitting still during dinner, school, and story time.
- Be constantly in motion.
- Have difficulty engaging in quiet tasks or activities.



A. Identifying Children with ADHD

Symptoms

Children who have symptoms of **impulsivity** may:

- Be very impatient.
- Blurt out inappropriate comments.
- Show their emotions without restraint.
- Act without regard for consequences.
- Have difficulty waiting for things they want or waiting their turns in games.
- Often interrupt conversations or others' activities.



A. Identifying Children with ADHD

Diagnosis

There is no single test used to diagnose ADHD. A diagnosis of ADHD involves a health care professional gathering information from several sources, including school, caregivers and parents.



A. Identifying Children with ADHD

Diagnosis

To be diagnosed with ADHD, a child must display a combination of ADHD symptoms (hyperactivity, impulsivity, or inattention). The health care professional will also look at other factors. This set of criteria may include:

- **Severity of symptoms.** To be diagnosed with ADHD, the symptoms must have a negative impact on the student's education, relationships, or social life.
- **Onset.** Since ADHD starts in childhood, a doctor or therapist will look at how early the symptoms appeared.
- **How long symptoms have been present.** Symptoms must be present for at least six months before ADHD can be diagnosed.
- **When and where symptoms appear.** The symptoms of ADHD must be present in multiple settings, such as at home and school. If the problem only appears in one environment, it is unlikely to be caused by ADHD.



A. Identifying Children with ADHD

Diagnosis

Although many children are diagnosed with ADHD only, some have additional academic or behavioral diagnoses. For instance, approximately a quarter to one-third of all children with ADHD also have learning disabilities. Likewise, children with ADHD have coexisting psychiatric disorders such as anxiety or mood disorders at a much higher rate.



A. Identifying Children with ADHD

Diagnosis

Only a licensed medical practitioner can diagnose ADHD. Illinois law states that school medical staff, an IEP team, or a professional worker may *recommend that a student be evaluated by an appropriate medical practitioner*. School staff may consult with the practitioner with the consent of a parent or guardian.

According to Illinois law, a “professional worker” is limited to:

- Speech correctionists
- School social workers (and interns)
- School counselors & psychologists (and interns)
- School nurses (and interns)
- Registered therapists
- Professional consultants
- Special administrators or supervisors giving full time to special education (and interns)
- Behavior analysts
- Special education teachers



B. Treatment of ADHD

Current treatments for ADHD include medication and various types of psychotherapy.

Medications

The most common types of medication used for treating ADHD are **psychostimulants**. Psychostimulants produce increased levels of mental and physical energy, alertness, and an elevated mood by stimulating the central nervous system. Psychostimulants have been shown to provide the greatest improvement in the core symptoms of ADHD (inattention, impulsivity, and hyperactivity). Treatment with a psychostimulant is highly effective in 75 to 90 percent of children with ADHD.

Psychostimulants come in different forms, such as pill, capsule, liquid, or skin patch. They also come in short-acting, long-acting, or extended release varieties. In each of these varieties, the active ingredient is the same, but the medication is released in different ways into the body. Long-acting or extended release forms often allow a child to take the medication just once a day before school, so they don't have to take another dose at school.



B. Treatment of ADHD

Medications

Psychotropic medications may be prescribed for children and adolescents with ADHD. Psychotropic medications are substances that affect the brain chemicals related to mood and behavior. It is medication used for antipsychotic, antidepressant, antimanic, antianxiety, behavior modification, or behavioral management treatment purposes. The effects of psychotropics on children and adolescents are not yet fully understood.

Medications do not cure ADHD. Rather, they control the symptoms for as long as they are taken. Medications can help a child pay attention and complete schoolwork. It is not clear, however, whether medications can help children learn or improve their academic skills.

In Illinois, each school district is required to have a policy that prohibits disciplining a child if a parent or guardian refuses to administer or consent to administer psychotropic or psychostimulant medication to their child.



B. Treatment of ADHD

Psychotherapy

Different types of psychotherapy are used to treat children with ADHD. Behavioral therapy aims to help a child change his or her behavior. It might involve practical assistance, such as help organizing tasks or completing schoolwork, or working through emotionally difficult events. Behavioral therapy also teaches a child how to monitor his or her own behavior. Learning to give oneself praise or rewards for acting in a desired way, such as controlling anger or thinking before acting, is another goal of behavioral therapy.

Therapists may teach children social skills, such as how to take turns, share toys, ask for help, or respond to teasing. Learning to recognize social cues, such as facial expressions or a person's tone of voice, and understanding how to respond to those cues can also be part of social skills training.



C. Successful Instruction of Children with ADHD

Teachers who are successful in educating children with ADHD use a three-pronged strategy.

- 1. Evaluate the child's individual needs and strengths.**
Assess the unique educational needs and strengths of a child with ADHD in the class. Working with a multidisciplinary team and the child's parents, consider both the academic and behavioral needs, using formal diagnostic assessments and informal classroom observations. Assessments, such as learning style inventories, can be used to determine children's strengths and enable instruction to build on their existing abilities. The settings and contexts in which challenging behaviors occur should be considered in the evaluation.
- 2. Select appropriate instructional practices.**
Determine which instructional practices will meet the academic and behavioral needs identified for the child. Select practices that fit the content, are age appropriate, and gain the attention of the child.



C. Successful Instruction of Children with ADHD

- 3. For children receiving special education services, integrate appropriate practices into an Individualized Education Plan (IEP).** In consultation with other educators and parents, an IEP should be written to create annual goals and determine the related services a child may require, along with supplementary aids needed, to achieve the goals.

Integrate the educational activities provided to other children in your classroom with those selected for the child with ADHD.

Because no two children with ADHD are alike, it is important to keep in mind that no single educational program, practice, or setting will be best for all children.



D. Effective Behavioral Intervention

Children with ADHD often act immaturely and have difficulty learning how to control their impulsiveness and hyperactivity. Their behavior may resemble the behavior of a younger child. They may have problems forming friendships with other children in the classroom and may have difficulty thinking through the social consequences of their actions.

The purpose of behavioral intervention is to assist students in displaying the behaviors that are most conducive to their own learning and a productive classroom environment. Well-managed classrooms prevent many disciplinary problems and provide an environment that is conducive for learning.

Behavioral intervention should be viewed as an opportunity for teaching in the most effective and efficient manner, rather than as an opportunity for punishment.



D. Effective Behavioral Intervention

Effective teachers use a number of behavioral intervention techniques to help students learn how to control their behavior. The following set of generalized behavioral intervention techniques have proven helpful with students with ADHD:

- **Selectively ignore inappropriate behavior.** It is sometimes helpful for teachers to selectively ignore inappropriate behavior. This technique is particularly useful when the behavior is unintentional, unlikely to recur, or is intended to gain the attention of teachers or classmates.
- **Remove nuisance items.** Teachers often find that certain objects distract students with ADHD in the classroom. The removal of nuisance items is generally most effective after the student has been given the choice of putting it away immediately and then fails to do so.



D. Effective Behavioral Intervention

- **Provide calming manipulatives.** While some toys and objects can be distracting, some children with ADHD can benefit from having access to objects that can be manipulated quietly. Manipulatives may help children gain some needed sensory input while still attending to a lesson.
- **Allow for “escape valve” outlets.** Permitting students with ADHD to leave the classroom for a moment can be an effective means of settling them down and allowing them to return to the room ready to concentrate.
- **Activity reinforcement.** Students receive activity reinforcement when they are encouraged to perform a less desirable behavior before a preferred one.
- **Support.** Teachers can offer encouragement, support, and assistance to prevent students from becoming frustrated with an assignment.



D. Effective Behavioral Intervention

- **Parent conferences.** Parents have a critical role in the education of students, and this axiom may be particularly true for those with ADHD. As such, parents must be included as partners in planning for the student's success. Partnering with parents entails including parental input in behavioral intervention strategies, maintaining frequent communication between school and home, and monitoring the student's progress collaboratively.
- **Peer mediation.** Members of a student's peer group can positively impact the behavior of students with ADHD.



D. Effective Behavioral Intervention

Verbal Reinforcement

Perhaps the most important and effective behavioral intervention technique is the verbal reinforcement of appropriate behavior. The most common form of verbal reinforcement is praise. Praise should be given to a student when he or she begins and completes an activity or exhibits a particular desired behavior. Effective teachers praise children with ADHD frequently and look for a behavior to praise before a child becomes off-task.

Most effective teachers focus their behavioral intervention strategies on *praise* rather than *punishment*. Negative consequences may temporarily change a behavior, but they rarely change attitudes and may actually increase the frequency and intensity of inappropriate behaviors by giving misbehaving students attention.

Punishment may only teach children what not to do; it does not provide children with the skills that they need to do what is expected. Positive reinforcement produces the changes in attitudes that will shape a student's behavior over the long term.



D. Effective Behavioral Intervention

Verbal Reinforcement

The following strategies provide guidance for using praise:

- **Define the appropriate behavior while giving praise.** Praise should be specific for the positive behavior displayed by the student. Positive comments should focus on what the student did right and should reinforce the desirable behavior that the student displayed.
- **Give praise immediately.** The sooner that approval is given regarding appropriate behavior, the more likely the student will repeat it.
- **Vary the statements given as praise.** The comments used by teachers to praise appropriate behavior should vary; praise repeated over and over may lose its value.
- **Be consistent and sincere with praise.** Appropriate behavior should receive consistent praise. Consistency among teachers with respect to desired behavior is important in order to avoid confusion on the part of students with ADHD.



D. Effective Behavioral Intervention

Behavioral Prompts

Effective teachers use behavioral prompts with their students. These prompts help remind students about expectations for their learning and behavior in the classroom. Three prompts which may be particularly helpful are:

- **Visual cues.** Establish simple, nonintrusive visual cues to remind a child to remain on task.
- **Proximity control.** When talking to a child, move to where the child is standing or sitting.
- **Hand gestures.** Use hand signals to communicate privately with a child with ADHD.



D. Effective Behavioral Intervention

Skills Instruction

In some instances, children with ADHD benefit from instruction designed to help them learn how to manage their own behavior.

- **Social skills classes.** Teach children with ADHD appropriate social skills using a structured class. For example, you can ask students to role-play and model different solutions to common social problems. It is critical to provide for the generalization of these skills and create structured opportunities for a child to use the social skills that they learn. Offering such experiences to the general school population can positively affect the school climate.
- **Problem solving sessions.** Discuss how to resolve social conflicts. Encourage children to resolve problems by talking to each other in a supervised setting.



D. Effective Behavioral Intervention

Functional Behavioral Assessment

A Functional Behavior Assessment (FBA) is a systematic process for defining a problem behavior and identifying the environmental factors and surrounding events associated with the behavior.

When completing an FBA, the team works closely with the student to:

- Observe the behavior.
- Determine how often the behavior occurs.
- Identify and define the problematic characteristics of the behavior.
- Identify any actions or events that precede and follow the behavior.

The results of the FBA should be used to develop a behavioral intervention and support plan.



D. Effective Behavioral Intervention

Positive Behavioral Interventions and Supports (PBIS)

PBIS is an application of a behaviorally based systems approach that is grounded in research regarding behavior in the context of the settings in which it occurs. Using this method, schools, families, and communities work to design effective environments to improve behavior.

The goal of PBIS is to:

- Eliminate problem behavior.
- Replace the problem behavior with more appropriate behavior.
- Increase a person's skills and opportunities for an enhanced quality of life.



D. Effective Behavioral Intervention

Behavioral Contracts and Management Plans

Behavioral contracts and management plans are typically used with individual children, as opposed to entire classes, and should be prepared with input from parents.

To develop a behavioral contract or management plan, identify specific academic or behavioral goals for the child with ADHD, along with behavior that needs to change and strategies for responding to inappropriate behavior. Work with the child to cooperatively identify appropriate goals, such as completing homework assignments on time and obeying safety rules on the school playground. Take the time to ensure that the child agrees with the plan.



D. Effective Behavioral Intervention

Token Economy Systems

Token economy systems can be used to motivate a child to achieve a goal identified in a behavioral contract. For example, a child can earn points for each homework assignment completed on time.

In some cases, students also lose points for each homework assignment not completed on time. After earning a specified number of points, the student receives a tangible reward, such as extra time on a computer or a “free” period on Friday afternoon. Token economy systems are often used for entire classrooms.



D. Effective Behavioral Intervention

Tangible Rewards

Tangible rewards can be used to reinforce appropriate behaviors. These rewards can include stickers, such as “happy faces”, or privileges, such as extra time on the computer or lunch with the teacher.

Children should be involved in the selection of the reward. When children are invested in the reward, they are more likely to work for it.



D. Effective Behavioral Intervention

Self-management Systems

Self-management systems train students to monitor and evaluate their own behavior without constant feedback from a teacher.

In a typical self-management system, a teacher will identify the behaviors that will be managed by a student and provide a written rating scale that includes the performance criteria for each rating. Initially, the teacher and student will separately rate the student's behavior during an activity and then compare ratings. Positive reinforcement should be given if the ratings match or are within one point. If the ratings are more than one point apart, a teacher should review the rating scale and the performance criteria with the student.

With time, the teacher rating is removed and the student becomes responsible for the monitoring of their behavior.



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Source

U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs, *Teaching Children with Attention Deficit Hyperactivity Disorder: Instructional Strategies and Practices*, Washington, D.C., 2004.

