

**Maryland School Mental Health Alliance\***  
***Attention-Deficit/Hyperactivity Disorder (ADHD) in Children and Adolescents***  
***Information for Teachers and School Staff***

**Definition**

**Attention-deficit/hyperactivity disorder (ADHD)** is characterized by *developmentally inappropriate* levels of:

- Inattention (trouble focusing, getting distracted, trouble sustaining attention, making careless mistakes, losing things, trouble following through on things, poor organization, doesn't seem to be listening)
- Impulsivity (acting without thinking, interrupting, intruding, talking excessively, difficulty waiting for turns)
- Hyperactivity (trouble sitting still, fidgeting, feeling restless, difficulty engaging in quiet activities)

ADHD is a neurobiological disorder that affects 3 to 7 percent of school-age children. Until relatively recently, it was believed that children outgrew ADHD in adolescence as hyperactivity often diminishes during the teen years. However, it is now known that ADHD nearly always persists from childhood through adolescence and that many symptoms continue into adulthood. In fact, current research reflects rates of roughly 2 to 4 percent among adults.

There are three types of ADHD:

- ADHD Combined Type (trouble with inattention, hyperactivity and impulsivity)
  - "Classic ADHD"
- ADHD Predominately Inattentive Type (trouble with attention, sluggish)
  - Most common type, often picked up later than the other types
- ADHD Predominately Hyperactive Impulsive Type (trouble with impulsivity and hyperactivity)
  - Occurs more often in younger children

**Why do we care?**

Given the high prevalence of ADHD, **most classrooms will have at least one child or adolescent with ADHD.** Although individuals with this disorder can be very successful in life, without proper identification and treatment, ADHD may have serious consequences, including school failure, family stress and disruption, depression, problems with relationships, substance abuse, delinquency, risk for accidental injuries and job failure. Additionally, at least 2/3 of individuals with ADHD have another co-existing condition, such as learning problems, anxiety or behavior problems. Early identification and treatment are extremely important. **Teachers are often the first to notice the symptoms of ADHD.**

**What can we do about it?**

- **Refer the child or adolescent for an evaluation if ADHD is suspected.**
  - There are several types of professionals who can diagnose ADHD, including school psychologists, clinical psychologists, clinical social workers, nurse practitioners, neurologists, psychiatrists and pediatricians.
- **Once diagnosed, ADHD in children often requires a comprehensive approach to treatment called "multimodal" and includes:**
  - Parent and child education about diagnosis and treatment
  - Behavior management techniques
  - Medication
  - School programming and supports
- **Specific classroom strategies include:**

- Set up a school-home note system
- Be consistent
- Use praise and rewards frequently
  - Use at least five times as many praises as negative comments
- Ignore mild inappropriate behaviors that are not reinforced by peer attention
- Use commands/reprimands to cue positive comments for children who are behaving appropriately — that is, find children who can be praised each time a reprimand or command is given to a child who is misbehaving
- Allow frequent movement breaks
- Use multimodal teaching tools
- Use active tasks for learning
- Appropriate commands and reprimands
  - Use clear, specific commands
  - Give private reprimands at the child's desk as much as possible
  - Reprimands should be brief, clear, neutral in tone, and as immediate as possible
- Identify a peer buddy to help with organizational tasks
- Give the student a separate, quiet place to take tests
- Allow inattentive students extra time on tests
- Break large tasks down into smaller tasks
- Mix high-interest and low-interest tasks/topics

### **Key Resources/Links**

1. **National Resource Center on AD/HD: A Program of CHADD**, funded through a cooperative agreement with the Centers for Disease Control and Prevention.  
<http://www.help4adhd.org/index.cfm>
2. **Identifying and Treating Attention-Deficit/Hyperactivity Disorder: A Resource for School and Home** <http://www.ed.gov/teachers/needs/speced/adhd/adhd-resource-pt1.pdf>  
This U.S. Department of Education resource guide is designed for families and educators and provides information on the identification of AD/HD and educational services for children with AD/HD.
3. **Center for Children and Families, University of Buffalo**: Free downloadable forms and resources for clinicians, caregivers, and educators working with children ADHD  
[http://ccf.buffalo.edu/resources\\_downloads.php](http://ccf.buffalo.edu/resources_downloads.php)
4. **Teaching Children With Attention Deficit Hyperactivity Disorder: Instructional Strategies and Practices**: A guide developed by the U.S. Department of Education, Office of Special Education and Rehabilitative Services, Office of Special Education Programs, for educators working with students with ADHD  
<http://www.ed.gov/teachers/needs/speced/adhd/adhd-resource-pt2.pdf>
5. **ADHD.com**: <http://www.adhd.com/educators/educator.jsp>  
A website providing educators with information and tools regarding ADHD

*\*Developed by the Center for School Mental Health (<http://csmh.umaryland.edu>) in collaboration with the Maryland School Mental Health Alliance.*