

Attention Deficit Hyperactivity Disorder
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WRITING SAMPLE
FIRST THREE LESSONS OF A TWENTY LESSON COURSE
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Course description:

Attention Deficit Hyperactivity Disorder (ADHD) effects millions of children and adults all over the world. Although it is considered a mental health issue by some medical practitioners, ADHD is actually a complex neurobiological disorder, thus, it cannot be treated by therapy alone. There are many excellent new stimulant and non-stimulant drugs which are effective and proven to help those who suffer with this disorder. Additionally, there are homeopathic and natural options available today that were not available in the past. ADHD is not caused by bad parenting, psychological trauma or drug/alcohol addiction. Although, ADHD is not purely a mental health disorder, psychological counseling (combined with medication) can assist by teaching behavior modification techniques. Having ADHD is not anything to be ashamed of, in fact, many creative, intelligent, successful, productive people have been diagnosed with this disorder. This course will cover many aspects of ADHD and will separate myth from fact.

There are ten comprehensive lessons written in an easy to follow, informative manner. The end of each lesson will provide you with multiple summary review questions and exercises so that you may effectively test your new knowledge. Use these self-test questions and exercises to determine whether you are ready to move on, or if you should review portions of the preceding lesson before taking the next step. Do not rush yourself. Take time to read all portions of the lessons and complete the exercises and self-tests. This course is appropriate for those who want to learn more about attention deficit disorder and attention deficit hyperactivity disorder.

LESSON 1

Definition ADHD

Introduction

ADHD is a diagnosis that is made for children and adults who display certain behaviors over an extended period of time. These ADHD behaviors and characteristics will be covered in Lesson Two. It is important to know that ADHD should be diagnosed by a professional and that the symptoms should be “chronic” and ongoing before seeking treatment. For all purposes regarding ADHD, the chronic behaviors should be continual and sustained over a long period of time and cannot be easily attributed to environmental factors such as moving, divorce, illness, death in the family, a new baby in the house, or a family crisis. All of these changes and situations, whether or not they are perceived as positive or negative can, and often do, cause ADHD like symptoms that usually pass over time on their own, or can be alleviated by family counseling. Keep in mind that big changes such as these can also aggravate ADHD symptoms in those diagnosed with the disorder. Turmoil and substantial change, while difficult for all people, is particularly difficult for those with ADHD.

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What is ADHD?

Attention deficit hyperactivity disorder (ADHD) is a chronic condition that effects millions of children and often persists into adulthood. ADHD includes some combination of problems, such as difficulty sustaining attention, hyperactivity, and impulsive behavior. Children with ADHD may also struggle with low self-esteem, troubled relationships and poor performance in school. While all children display these behaviors from time-to-time, those with ADHD display them over long periods of time; the behaviors are *constant, consistent, and persistent*.

Boys and men are three times more likely to be diagnosed with ADHD than girls and women, however, it is unclear why since girls and women are equally likely to have the disorder. ADHD is not a gender specific disorder, however, it does display differently in males than females.

ADHD symptoms may lessen in adulthood, or disappear altogether. It is believed that many of those with ADHD in childhood learn to self-modify behaviors and symptoms. Because of this, they are able to manage the negative consequences that often accompany the disorder. For instance, the inability to focus and stay still for long periods of time, as is required for educational purposes may be compensated for by performing tasks in shorter, more intense, bursts. As children grow into adults with ADHD, many, if not most, learn how to compensate for the disorder, thus, less adults are diagnosed than children.

While treatment won't cure ADHD, it can help tremendously with symptoms. Treatment typically involves medication and behavioral intervention and modifications. These components combined help those with ADHD control symptoms and manage the disorder so that they can lead productive, fulfilling lives.

What is the difference between ADD and ADHD?

During the last few years many different terms for children and adults with ADHD have been introduced and used. They were mainly influenced by American descriptions of the classification system used by the Diagnostic and Statistical Manual of Mental Disorders (DSM). ADD and ADHD are synonyms. The acronym ADD stands for “Attention Deficit Disorder” and the acronym ADHD stands for “Attention Deficit Hyperactivity Disorder.” Although, ADHD includes the term Hyperactivity, they are still classified as the same. While the disorder may have lesser and greater degrees of hyperactivity, it has been found that hyperactivity to some degree is a clear characteristic of its symptoms. So, one would not be diagnosed with the disorder if there are no symptoms of hyperactivity, even if they are minor and/or periodic.

ADHD (Attention Deficit Hyperactivity Disorder)

ADHD is the term used in the current Diagnostic and Statistical Manual of Mental Disorders (DSM) diagnostic criteria for this disorder.

ADD (Attention Deficit Disorder)

With or without hyperactivity ADD, Attention Deficit Disorder, is the older term from the DSM. Thus, in some older literature you will find this term as a synonym for ADHD. However, by all current standards ADD is no longer used to describe the disorder. This course will only use the acronym “ADHD” to describe Attention Deficit Disorder with or without high hyperactivity.

Conclusion

ADHD affects girls and boys and women and men equally; although boys and men are three times more likely to be diagnosed with the disorder. It is characterized by a set of symptoms that persist over a long period of time and which are **constant, consistent and persistent**. Symptoms include the inability to focus, lack of attention, hyperactivity and relationship problems. The acronym ADD is no longer used by the Diagnostic and Statistical Manual of Mental Disorders, and it has been replaced with ADHD.

Review Self-Test Questions

True/False: Decide whether the given statement is true or false based on the information provided in Lesson One:

1. ADD and ADHD are different disorders? True or **False**
2. ADD and ADHD are synonyms? **True** or False
3. Boys are more likely to have ADHD than girls? True or **False**
4. Adults are not prone to having ADHD? True or **False**
5. Medication and therapy can help manage ADHD? **True** or False

Multiple Choice Questions: Please select from those provided to answer each question.

1. DSM stands for:
 - a. Digital System Management
 - b. Diagnostic and Statistical Manual of Mental Disorders**
 - c. Diagnostic Synopsis Manual
 - d. None of the above

2. ADHD is an acronym for:
 - a. Attention deficit disorder
 - b. Attention deficit hyperactivity disorder**
 - c. Attention deficit hyperactivity disease
 - d. None of the above

3. ADHD effects which of the following:
 - a. Only boys and men
 - b. Only girls and women
 - c. Children and adults of both sexes**
 - d. All of the above

4. ADHD effects:
 - a. Males and females equally**
 - b. Mostly males and only few females
 - c. Mostly females and only few males
 - d. None of the above

5. For a diagnosis of ADHD to be made symptoms must be:
 - a. Periodic and annoying
 - b. Constant, consistent and persistent**
 - c. Associated with a current life change or event
 - d. None of the above

LESSON 2

Characteristics of Students with ADHD

Introduction

ADHD involves the basic processes related to orienting, focusing, and maintaining attention, and results in inadequate attention to tasks, both academic and social. Because of this it is difficult for students with ADHD to grasp all or parts of information given by teachers in classroom instruction. Students with ADHD may hear only part of an instruction or lecture and, thus, do not complete assignments or learn concepts completely or correctly. While all children get restless in the classroom and have periods of distraction, for ADHD students this is the rule rather than the exception. Often, students with ADHD have regular trouble staying still, they fidget, move around, get up from their seats, are easily distracted and zone out/tune out during classes. This creates problems with teachers and other students which often results in disciplinary actions being taken for behaviors that the ADHD student cannot control. On the flip side, ADHD students are often very imaginative and highly intelligent, so once they have learned a concept or grasped a theory, they are able to excel beyond their peers in putting their knowledge to good use. Many writers, artists, actors, inventors and successful entrepreneurs have ADHD. Children and adolescents face specific problems when it comes to school and academic success.

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What Teachers can do for Their ADHD Students

Although children and adolescents with ADHD deal with problems associated with their symptoms at home, at school they face special and often debilitating issues when it comes to education and learning. Of particular concern are subjects that are uninteresting to the ADHD student. While easily distracted in general, ADHD students find it especially hard to focus on concepts they do not like or that they find “boring.” Medication and behavior modification therapy helps students maintain focus even on subjects they find unappealing, but are necessary to a well rounded education.

The most important thing teachers of ADHD students can do to help them learn is to create a calm, predictable learning environment. ADHD students do well with order and structure. It is also important to recognize accomplishments and small milestones, giving frequent, small, steady praise will help the ADHD student stay on track and help build the confidence they need to continue on the right track. While other students can be given full direction and can pay attention to direction given in that manner, ADHD students need very clear, concise, bits of information at a time. ADHD students should be provided with frequent breaks. Since ADHD children, and indeed many children, learn better in the morning hours when they are fresh, plan for academic work to be accomplished early in the school day.

Like any student with special needs, parents and school administrators should not object to ADHD students receiving small accommodations such as these. If the parents of other students or the school administrators do object, it should be pointed out that these accommodations are no different than those which are made for students who have peanut, gluten or other food allergies,

or students who have vision problems or those who have hearing loss. While ADHD students need some special compensation, they do not need excessive attention such as those with learning disabilities or extreme physical disabilities. Many of these small compensations help the entire classroom, as they are effective teaching tools in and of themselves. ADHD students do not require separate, individualized learning, provided the parent of the ADHD child is working with him or her at home and is aware of and addressing the situation. Teachers of ADHD students should absolutely elicit the aid of the child's parent as much as possible and give them information that can be used to help their ADHD child learn and reach their full educational potential.

Tips for Teaching ADHD Students:

- Provide a calm environment.
- Post classroom rules that are plainly written and easily read.
- Give small, frequent praise for staying on track.
- Allow short, frequent breaks.
- Provide, clear, concise instructions for academic work.
- Have the ADHD student work in small, less distracting groups.
- Seat the ADHD student away from "high activity" distraction areas.
- Break complex instructions into smaller bits of information.
- Keep disciplinary measures to a minimum.
- If discipline is required, keep it short, neutral and to the point.
- Remember that praise works better than discipline for the ADHD student.

What Parents can do for Their ADHD Child Student

With help from parents, ADHD students can and will excel at school, even though their symptoms may cause them frustration on occasion. Parents can help most by reinforcing their classroom structure and following the teacher's plan at home. Providing a calm, predictable environment at home helps the ADHD child tremendously. While doing homework or working on school projects, parents should eliminate distractions.

Have your ADHD child do homework and projects in a quiet room or area of the home. Turn off TV's, computers and phones, if possible. Get homework done as soon after the end of the school day as possible and not during the dinner or bedtime rush. If a project is due, work on it immediately, don't let procrastination set in. Frantic last minute project completion can push an ADHD child into shut down mode, others thrive on the crunch and produce excellent work under frantic conditions, so knowing what works best for your child is key to coping with big school projects. Help your child get started and give him or her the assistance they need to begin the project. If the ADHD student has siblings, have them play outside during homework time or in a separate area of the home. Having a patient adult or older sibling help with homework and projects is also helpful. This does not mean that a parent or sibling should do the homework or project, but rather that they sit quietly nearby to assist with difficult assignments and/or help him or her stay on task. Providing positive feedback and small, frequent praise for completed work is also helpful. Do not compare your ADHD child with non-ADHD children, this will only frustrate

everyone. The ADHD child is not behaving this way to anger you or because they are willful or disobedient, they cannot control these behaviors without your help, love, understanding and guidance. The ADHD student is suffering from a neurological brain disorder which symptoms include inattention, the inability to maintain focus and hyperactivity. If you have not already taken therapeutic and/or medicinal measures to help your ADHD child, you may want to consider doing so. Lessons 7 and Lesson 8 speak more about these options.

Confronting the ADHD student with angry reprimands and long winded, condescending lectures when they are frustrated and/or distracted will make matters worse. Avoid these types of confrontations, even if you must leave the room because of your own frustration. Try to remember that while many ADHD students are able to focus better in the classroom environment many find it highly difficult to do school work at home. The immense volume of potential distractions causes ADHD children to lose focus at home. They are rarely IQ challenged and are often of above average intelligence. Talking down to an ADHD kid has about the same effect as yelling when in the presence of a blind person. They understand the work, probably better than their peers, however, performing what they see as mundane, boring, repetitive tasks is highly challenging. They will find any distraction more entertaining than being involved in a task they don't enjoy. When the ADHD student gets distracted, remove the source of distraction and remind him or her of the task at hand. Let him or her know that when the project/homework is completed that he or she may resume whatever activity they were interested in. Doing homework with an ADHD child is really challenging, it can take them hours to complete assignments that are completed by other children in minutes. With patience, small, frequent breaks and consistence, the ADHD child will master the organizational skills required to stay on task and continue to do so throughout his or her educational career.

Tips for Helping ADHD Students with Homework and Projects:

- Keep a calm, predictable environment at home when possible.
- Eliminate distractions during homework time.
- Don't reprimand.
- Provide positive feedback.
- Give short, frequent breaks.
- Provide homework guidance.
- Have your child start projects early.
- Remove distractions as they come up.
- Stay calm when your child gets frustrated.
- Be consistent and persistent to help teach organizational skills.

Conclusion

ADHD students have special needs and requirements, although not as many as students with other disabilities. With patience and a calm predictable environment at school and home teachers and parents can help the ADHD student overcome focus and attention issues that stem from their ADHD symptoms. ADHD students can and will learn organizational skills with the proper guidance. Lesson 7 and 8 will address therapies and medications that will further assist the ADHD student in their educational careers so that they can be effective learners of all required

subjects. Remember, your ADHD student/child is far from IQ challenged, they are attention challenged when it comes to topics they find boring or mundane. They need patience, love, support and understanding to gain mastery over required subjects that don't interest or engage them.

Review Self-Test Questions

True/False: Decide whether the given statement is true or false based on the information provided in Lesson Two:

1. ADHD students lose focus on purpose? True or **False**
2. ADHD students need a calm, structured learning environment? **True** or False
3. When ADHD students get distracted it helps to yell at them? True or **False**
4. ADHD students can learn organizational skills? **True** or False
5. When doing homework ADHD students need distractions? True or **False**

Multiple Choice Questions: Please select one from those provided to answer each question.

1. Teachers can help ADHD students by doing which of the following:
 - a. Using harsh discipline when they lose focus
 - b. Providing a calm, predictable learning environment**
 - c. Isolating them from other students
 - d. Embarrassing them in front of their classmates
2. Parents can help ADHD children at home by:
 - a. Providing a calm, predictable homework environment**
 - b. Getting angry when they lose focus
 - c. Allowing siblings to create a lot of distraction
 - d. Comparing the ADHD child to other children
3. When doing homework and projects which of the following helps the ADHD child:
 - a. A distraction free space
 - b. Assistance from an adult or older sibling
 - c. Gentle guidance
 - d. All of the above**
4. ADHD students lose focus in school and when doing homework because:
 - a. They are willful
 - b. They are disobedient
 - c. They have a neurological brain disorder**
 - d. They are trying to aggravate you
5. When parents and teachers work together ADHD students can and will:
 - a. Learn good organizational skills
 - b. Complete assignments and tasks on time and correctly
 - c. Overcome their inability to focus and pay attention
 - d. All of the above**

LESSON 3

Prevalence and Sub-Types of ADHD

Introduction

In the United States, ADHD affects from 3-7 percent of the population. Although, some estimates place the rate higher between 5-9 percent for children, and 4 percent for adults. While not astronomical in number, this is a large enough portion of the population to warrant attention and intervention. Some experts say that the disorder is under diagnosed, and yet others claim it is over diagnosed. As stated in the previous lesson, it is, however, diagnosed in boys three times more often than in girls, despite the fact that it is not a gender specific disorder. Types of ADHD vary depending on who is categorizing the differences between them.

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There are two prevalent schools of thought concerning ADHD types which we will cover in this lesson. The first is predominantly recognized by most medical doctors, psychiatrists and psychologists and comes from the American Psychiatric Association, those sub-types are as follows:

1. **Inattentive Type:** This is a prevalent type. It is hard for the individual to organize or finish a task, to pay attention to details, or to follow instructions or conversations. The person is easily distracted or forgets details of daily routines. Memory issues are prevalent with this type, and tasks must be repeated often for them to be internalized.
2. **Hyperactive/Impulsive Type:** This is a prevalent type. Hyperactive/Impulsive types display constant activity. The person fidgets and talks a lot. They cannot sit still for long periods of time. Smaller children may run, jump or climb constantly, older children and adults may move around a lot, get up and down and have a “need” to keep moving and be active. The individual also feels constantly restless and has trouble with impulsivity. Someone who is impulsive may interrupt others a lot, grab things from people, hit others when frustrated or speak at inappropriate times. It is hard for the person to wait their turn or listen to directions. A person with impulsiveness may have more accidents and injuries than others because of their constant movement and activity. Social problems are often an issue for this type.
3. **Combined Type:** Symptoms of the above two types are present in the person. Combined types can display all of the symptoms of Inattentive and Hyperactive/Impulsive Types or only some of each.

Which type of ADHD a person has should be decided by careful evaluation by a trained professional. There are medical practitioners and mental health care professionals who specialize in diagnosing ADHD and who are able to distinguish if the person falls into one of the above types, namely, Inattentive, Hyperactive/Impulsive and/or Combined. Pinpointing type may be important because it will help therapists find the right behavior modifications to work on with the ADHD person. It also helps decide which medications might work best for the individual.

In addition to “type” it also needs to be determined whether the ADHD person has collateral issues that result directly from the ADHD symptoms. Low self-esteem, depression, anxiety, drug and alcohol use and low frustration are only some of the collateral conditions that result from symptom behaviors. Although, ADHD sufferers cannot help their behaviors, often those around them believe that they can gain control if they try hard enough, thus they are frequently reprimanded and chastised for interrupting, not finishing tasks, being fidgety and impulsive and for not “paying attention.” Most people with ADHD do try to control the behaviors that upset those around them, and in failing to do so, they begin to feel hopeless and depressed and/or angry at themselves. The ADHD child and adult gets a lot of labels from those who do not understand the disorder. They are often called lazy, irresponsible, rude, hyper, difficult, stupid, annoying or selfish, along with other negative labels. It is important to realize that the ADHD person is none of these things, and that he or she may be trying very hard to gain control. If gentle guidance is offered rather than reprimands the ADHD child can be aware of and attempt to modify. Frequent praise and acknowledgement for their efforts (and it is an effort) to modify should be offered. Medication and therapy will also help tremendously with many ADHD symptoms.

Amen Classification Types of ADHD

Another theory on types of ADHD comes from Dr. Daniel Amen, who has done extensive work on the subject. His system of categorizing ADHD types is termed the *Amen Classification*. Amen is a medical doctor and a child/adult psychiatrist. His sub-types are based on brain scans of children with ADHD which are controversial in their results and his interpretation of those results. These types are not recognized by the APA or the AMA. Amen has written numerous books on the subject of ADHD and treats the disorder as well. His *Amen Classification* category sub-types of ADHD are as follows:

1. Classic Type: Inattentive, distractible, disorganized. Perhaps hyperactive, restless and impulsive.
2. Inattentive Type: Inattentive, and disorganized.
3. Over-focused Type: Trouble shifting attention, frequently stuck in loops of negative thoughts, obsessive, excessive worry, inflexible, oppositional and argumentative.
4. Temporal Lobe Type: Inattentive and irritable, aggressive, dark thoughts, mood instability, very impulsive. May break rules, fight, be defiant, and very disobedient. Poor handwriting and trouble learning are common.
5. Limbic System Type: Inattentive, chronic low-grade depression, negative, low energy, feelings of hopelessness and worthlessness.
6. Ring of Fire Type: Inattentive, extremely distractible, angry, irritable, overly sensitive to the environment, hypervocal, extremely oppositional, possible cyclic moodiness.

Most of Amen's types tend to paint a picture of irritability, negativity, anger and/or moodiness, which may not necessarily be the case with most ADHD patients. Many, if not most, of those with ADHD can be equally gregarious, cheerful and happy. Some psychologists believe that the irritability, depression and anger ADHD sufferers display stems from negative feedback that comes from authority figures, (parents, teachers, coaches, etc.) peers and siblings as a result of the effect of ADHD symptoms has on relationships and interactions with others.

Conclusion

The three main types of ADHD as recognized by most medical professionals are: 1. Inattentive, 2. Hyperactive/Impulsive and 3. Combined, which displays behaviors and symptoms from both prevalent types. None of these types recognize anger, hostility, obsessive dark thoughts or confrontation as a symptom of ADHD. In addition to these types, Dr. Daniel Amen has identified his own six types which are called the *Amen Classification* of ADHD. Most of Dr. Amen's types are described as having a "hostility" component. Many mental health care professionals disagree with this assertion and feel that associated anger, hostility and depression do not stem from the ADHD itself. Rather, these feelings are a result of collateral damage from ADHD behaviors and needs to be addressed separately. Alternatively, those who have ADHD may also have obsessive negative thoughts or mood swings, and may be suffering from additional mental health issues such as OCD or bi-polar disorder. Most experts agree that obsessive negative thoughts, hostility and angry confrontation are not indicative of ADHD itself. The fact that many, if not most, ADHD children and adults are equally happy, gregarious, fun, kind and cooperative clearly indicates that hostility, obsessive negativity and confrontational anger are not features of the disorder itself.

Review Self-Test Questions

True/False: Decide whether the given statement is true or false based on the information provided in Lesson Three:

1. Most people with ADHD do try to control their behaviors? **True** or False
2. Combined type includes characteristics of both prevalent types? **True** or False
3. People with ADHD are naturally hostile? True or **False**
4. Only people with ADHD are confrontational? True or **False**
5. Most of Dr. Amen's types include a hostility/depression component? **True** or False

Multiple Choice Questions: Please select one from those provided to answer each question.

1. How many sub-types does the APA categorization include:
 - a. **Three**
 - b. Two
 - c. One
 - d. Six
2. How many sub-types is included in Dr. Amen's categorizations:
 - a. Three
 - b. Two

- c. **Six**
 - d. Four
- 3. Most health care professionals and ADHD experts agree that:
 - a. **Hostility and depression are not a component of ADHD**
 - b. All ADHD people have anger and are hostile
 - c. ADHD people are also always bi-polar
 - d. None of the above
- 4. Some collateral effects of ADHD include:
 - a. Euphoria
 - b. **Depression, anxiety, low self-esteem**
 - c. Obsessive compulsive disorder
 - d. Bi-polar disorder
- 5. The prevalence of ADHD is higher estimated to be between:
 - a. 1-2 percent
 - b. 3-7 percent
 - c. **5-9 percent**
 - d. 4 percent