



A Study on ADHD problems of Primary grade children

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Abstract

The conceptual paper aims to give a broad view of the ADHD problems prevailing among the primary grade students. ADHD is considered to be a major threat to the learners. The primary goal of the research paper is to portray the signs and symptoms of ADHD and its impact on the psychological well being. The study also depicts the intervention procedures to be adopted in order to overcome the ADHD disorder. The diagnostic and prognostic measures to be formulated with the children affected with ADHD have also been enumerated.

Introduction:

Attention deficit hyperactivity disorder (ADHD) is a developmental disorder characterized by inattention, hyperactivity, and impulsivity. It is the most commonly diagnosed behavioral disorder of childhood, affecting 8 - 12% of school-aged children. Although many people sometimes have difficulty sitting still, paying attention, or controlling impulsive behavior, people with ADHD find that these symptoms greatly interfere with everyday life. Generally, these symptoms appear before age 7 and can lead to problems in school and in social settings. One- to two-thirds of all children with ADHD continue to have symptoms when they grow up. A diagnosis can be controversial, since there are no lab tests for ADHD, and no objective way to measure a child's behavior. There is no best way to treat ADHD; however, experts agree that taking action early can improve a child's educational and social development.

Need and Significance of the study

ADHD associated problems are now considered to be a major threat to the academicians and for the parents concerned. The statistics shows that currently 15 – 20% of children are affected with hyperactive disorder. There are various reasons for this type of threat. Majority of the parents perceive that the children with ADHD are being identified, they get mentally perturbed and further rearing of their wards gets affected. Once the children with hyperactive disorder are not treated the child cannot be physically and psychologically healthy. This kind of unhealthy situation should no more survive in our learned society. Therefore, as an educationist our primary goal is to reform the ADHD children with socially productive, committed and useful to the community.

Signs and Symptoms

A person is diagnosed with ADHD if they have at least 6 symptoms from the following categories, lasting for at least 2 months. In diagnosing children, the symptoms must appear before age 7, and pose a significant challenge to everyday functioning in at least 2 areas of life (usually home and school). Most children do not show all the symptoms, and they may be different in boys and girls (boys may be more hyperactive and girls more inattentive).

Inattention

- Fails to pay close attention to details or makes careless mistakes
- Has difficulty sustaining attention in tasks or play activities
- Does not seem to listen when spoken to directly
- Does not follow through on instructions and fails to finish tasks
- Has difficulty organizing tasks and activities
- Avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as school work)
- Loses things needed for tasks or activities
- Is easily distracted
- Is forgetful in daily activities

Hyperactivity and Impulsivity

- Fidgets with hands or feet or squirms when seated
- Does not remain seated when expected to
- Runs or climbs excessively in inappropriate situations (in teens or adults, may be feelings of restlessness)
- Has difficulty playing or engaging in leisure activities quietly
- Acts as if "driven by a motor"
- Talks excessively
- Blurts out answers before questions are completed
- Has difficulty waiting his or her turn
- Interrupts or intrudes on others

Inducing factors

No one is sure what causes ADHD. Although environmental factors may play a role, researchers are now looking to find answers in the structure of the brain.

Altered brain function -- Brain scans have shown differences in the brains of children with ADHD compared to those of non ADHD children. For example, many children with ADHD tend to have altered brain activity in the prefrontal cortex, a part of the brain known as the command center. This may affect their ability to control impulsive and hyperactive behaviors. Researchers also believe hyperactive behavior in children can be caused by too much slow wave (or theta) activity in certain regions of the brain.

Genetics -- ADHD seems to run in families.

Maternal or childhood exposure to certain toxins -- Women who smoke, drink, and are exposed to PCBs during pregnancy are more likely to have children with ADHD. Children who are exposed to lead, PCBs, or phthalates are more likely to develop the disorder.

Risk Factors

Risk factors for ADHD include:

Heredity -- children with ADHD usually have at least one first-degree relative who also has the disorder.

Gender -- ADHD is 4 - 9 times more common in boys than in girls. Some experts believe that the disorder is underdiagnosed in girls, however, and recent studies show no association between a child's sex and ADHD.

Prenatal and early postnatal health -- maternal drug, alcohol, and cigarette use; exposure of the fetus or infant to toxins, including lead and PCBs; nutritional deficiencies and imbalances; pre-term birth and low birth weight.

Prognostic and Diagnostic Procedure in the identification of ADHD

There is no objective test for ADHD, so making a diagnosis can be hard. Doctors may use a number of tests and observations. For this reason, it is crucial to make sure the doctor who evaluates you or your child is trained in diagnosing ADHD.

To evaluate a child, the doctor will take a complete medical history and do a thorough exam to check for conditions that may mimic ADHD, such as hyperthyroidism or problems with vision, hearing, and sleeping. Many symptoms show up at home or school rather than the doctor's office, so you may be asked to fill out questionnaires. Your child's teacher may be interviewed. Your doctor will try to determine not only how the child behaves but also where the behavior occurs and how long it lasts. Children with ADHD have long lasting symptoms that usually show up during stressful situations or situations that require sustained attention (such as schoolwork).

Diagnosing an adult with ADHD can be even more challenging. Because your symptoms would have appeared when you were young, your doctor may try to find out as much as possible about you when you were a child by getting information from your parents or former teachers. (If your symptoms are recent, you are not considered to have adult ADHD.) In addition to ruling out the other conditions mentioned above, your doctor may also check for depression and bipolar disorder, which can mimic ADHD.

Preventive Care

Since the cause or causes of ADHD are not known, there is no way to prevent the condition. However, pregnant women can avoid known risk factors, including cigarette smoke and known toxins. It can be managed with medication, behavioral therapy, and lifestyle changes.

Treatment Options

How to treat ADHD, particularly in children, is a controversial subject. Current treatment includes therapy or medication, or a combination of both. Studies show that medication by itself, without some kind of therapy, is not likely to improve a child's outcome in the long term. Family therapy, behavioral therapy, social skills training, and parent skills training are often used. Many parents investigate nutritional therapies (such as elimination diets or high-dose vitamins), but so far there is no clear evidence that these approaches are effective. Preliminary evidence indicates that homeopathy and mind/body techniques, especially biofeedback, may help improve behavior in children with ADHD.

Lifestyle

Parent skills training offered by specialized clinicians provides parents with tools and techniques for managing their child's behavior. Behavior therapy rewards appropriate behavior and discourages destructive behavior. It can be performed by parents and teachers working together with therapists and doctors. For example, older children with ADHD may be rewarded with points or tokens, or even written behavioral contracts with their parents. Creating charts with stars for good behavior may work for younger children. On the other hand, timeouts may discourage undesirable behavior. Other techniques include:

Setting rules that are easily understood, developmentally appropriate, and not unduly harsh

Avoiding repeated commands once the child has been reminded of the consequences

Disciplining the child before becoming too angry and frustrated

Following discipline with praise when the child follows the rules and behaves appropriately

In addition to behavioral intervention at home, changes in the classroom environment (or work, in the case of adolescents or adults) are significant parts of the treatment plan. Hyperactive children do best in highly structured circumstances with a teacher experienced in handling their disruptive behavior and capable of adapting to their distinctive cognitive style. Interactions with groups can be very challenging for a child with ADHD. Social skills training, appropriate classroom placement, and clear rules of engagement with peers are essential. Preliminary evidence suggests that computer-based attention training in schools is highly effective for students who have ADHD.

Adults with ADHD may benefit from behavioral therapies, including cognitive remediation, couple therapy, and family therapy

Complementary and Alternative Therapies

According to a recent survey, many parents use complementary and alternative treatments for their children with ADHD, with nutritional therapies being the most common. Although studies show conflicting results, if your child appears sensitive to certain foods, talk to your doctor about eliminating them for a brief period to see if his symptoms improve. Putting a child on any supplement or complementary or alternative therapy (CAM) diet should be done only under the supervision of your doctor.

Prognosis and Complications

As many as half of all children with ADHD who receive appropriate treatment learn to control symptoms and function well as adults. Research suggests that children who receive treatment that combines therapies such as medication, behavioral therapy, and biofeedback are less likely to have behavioral problems as they grow up. Nevertheless, studies show that ADHD persists into adulthood in 60 - 70% of people diagnosed with ADHD in childhood. In most cases, ADHD can be effectively managed throughout life.

Conclusion

Thus the paper concluded with the problems of ADHD children. The causative factors and the intervention procedures to be adopted are discussed in this thematic paper. Let the educational institutions and the special centers can take reformative remedies in order to overcome the problem of ADHD and to make the child a healthy individual to the society.

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