

ATTENTION DEFICIT HYPERACTIVITY DISORDER

ADHD

Most parents experience challenges with their child's behavior from time to time. Sometimes children may not listen, may have trouble paying attention, or may forget or lose their homework assignments. At other times, they might act or speak without thinking, or run around when it is not appropriate. However, children with Attention Deficit Hyperactivity Disorder often called ADHD, have behavior issues that make it difficult for them to function satisfactorily on a daily basis. This can have an impact on a child's academics, social interactions and self-esteem. Parents may find it stressful to cope with a child who has ADHD. Early diagnosis along with appropriate support and interventions, can help the family function more smoothly, in addition to providing the tools needed to live a happy and successful life.

Evaluating and Diagnosing ADHD

ADHD is one of the most common behavioral conditions of childhood and is estimated to affect approximately three to nine percent of school-age children, occurring more frequently in boys than in girls. The major symptoms of ADHD are inattention, hyperactivity and impulsivity. Children with ADHD may show signs of being inattentive much of the time, but this may go unnoticed if the children are not being disruptive in the classroom. Other children may have a pattern of being hyperactive and impulsive far more than others their age. Some children with ADHD may also have all three types of behavior.

ADHD is often classified into these three different types recognized by professionals:

- Inattentive
- Hyperactive/Impulsive
- Combined Inattentive/Hyperactive/Impulsive

The following symptoms are included in the diagnostic criteria for ADHD:

Symptoms:

Inattention

- Has a hard time paying attention to details
- Is easily distracted from work or play
- Make careless mistakes in school work
- Seems Disorganized
- Has trouble finishing tasks
- Does not seem to listen
- Loses things easily (i.e., toys, books, homework)

• Hyperactivity

- Often squirms and fidgets
- Talks excessively
- Is in constant motion; shows very high levels of energy
- May run or climb when it is not allowed
- Unable to stay seated at home or school

Impulsivity

- Has a hard time awaiting his/her turn
- Interrupts others
- Calls out answers before a question is complete

All children naturally display these kinds of behaviors sometimes, and it does not mean your child has ADHD. Sometimes it is hard for parents to tell if their child's behaviors are part of the normal process of growing up. Your child may be responding to stress at school or home. However, for some children their behavior becomes more than an occasional problem. In order to confirm a diagnosis of ADHD, the child's symptoms must:

- Interfere with functioning in more than one setting
- Be more severe than children of the same age
- Have been noted before the child is age 7 years
- Continue for more than 6 months and be more prevalent than most children at same developmental stage
- Make it difficult to function at school, home and/or social situations

Although there is no single test to diagnose this disorder, there are specific criteria that must be met to confirm the diagnosis. A child should first have an evaluation to rule out any medical conditions. A thorough assessment should include information about symptoms from the child's various environments – school, home, community and social settings. If you think that your child might have ADHD, it is important to talk with his or her pediatrician or seek a referral to a psychologist or psychiatrist for further evaluation.

Treating ADHD

Parenting a child with ADHD, or any disability can be stressful and even overwhelming at times. It is important to remember that with proper treatment, children with ADHD **can and do succeed**. Treatment is based upon a child's specific needs and personal history. Common treatments for ADHD include:

- Behavioral strategies and techniques such as consistency, use of positive reinforcement, problem solving, communication and self-advocacy skills
- Individual and family counseling
- Educational programs and intervention
- Medications such as stimulants, antidepressants or selective norepinephrine re-uptake inhibitors