**Attention Deficit Hyperactivity Disorder (ADHD) Tip Sheet**

What is ADHD?

ADHD is a disorder of the brain that is characterized by patterns of inattentive, hyperactive, and/or impulsive behaviors. A child can be diagnosed with ADHD-Inattentive Type, ADHD-Hyperactive Type, or ADHD-Combined Type. The behaviors include the following:

* Inattentive: A child who is primarily inattentive may struggle to stay on task, give up easily, have difficulty focusing on given information, and have trouble staying organized. They may be exhibited in the following ways:
  + Make careless mistakes
  + Not paying attention even when being spoken to directly
  + Easily sidetracked
  + Difficulty understanding directions, especially in sequence
  + Avoid tasks with sustained mental effort
  + Lose belongings frequently
  + Forgetful
* Hyperactive: A child who displays hyperactivity may move constantly, as though they are driven by a motor. They may fidget or talk excessively and appear restless—even when they are supposed to be engaged with an activity. When a child exhibits hyperactivity, it is assumed that they are also impulsive.
* Impulsive: A child who is impulsive does not think before they act, which can be potentially dangerous. They may also be unable to react appropriately to delayed gratification. The child may have social skill deficits due to being overly intrusive. Finally, they are apt to make decisions without considering the ramifications.

How can I help?

Children who experience ADHD need assistance coping with situations they face daily. It is important they learn how to monitor their own behavior so the child needs praise for acting as desired and negative feedback when their behavior is undesired. It is important to implement clear and consistent expectations and structured routines to help the child understand what is expected. The child should be guided in waiting their turn to interject in conversations, in asking for help, and how to respond to jokes, teasing, and puns.

**Strategies for Attention:**

* Give instruction near the child
* Make regular eye contact with the child and request that they make eye contact in return
* Give time-related reminders (I.e. “We have about \_\_\_\_ minutes left of this task...)
* Implement stretch breaks and opportunities for relaxation
* Ask questions to check for understanding
* Ask the child to repeat expectations

**Strategies for Memory:**

* Break skills into small, manageable parts
* Set goals with the child to teach prioritization
* Structure time consistently to help the child move from one activity to the next

**Strategies for Raising Self-Esteem:**

* Instead of telling the child that you noticed they were easily distracted, tell them, “I noticed that you have a very high level of awareness in class.” Use positive descriptions to explain to the child and their families what you’re noticing
* Avoid telling children what is NOT required—instead tell them what you require (Behavior: Talking while you’re talking—Avoid: “STOP Talking!”--Instead: “Use your listening ears!”)
* Encourage “ANT-Eaters” to counter “Automatic Negative Thoughts” (ANTS).

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| **ANT** | **ANT-Eater** |
| I am so bad at this. | I still have more to learn. |
| I am such a failure. | I have succeeded before and now I have an opportunity to try again. |
| You never listen to me. | I’m frustrated because you are not listening right now, but you’ve listened to me before and I know you will again. |
| You/he/she/they don’t like me. | I don’t know what they’re thinking, but maybe they’ve just had a bad day. |
| Everyone will laugh at me. | I feel nervous, but I’m prepared to do my best and that’s what really matters. |
| I’m so stupid! | Some of the decisions I make aren’t very good, but I am smart. |
| It’s all my fault we lost. | I can take responsibility for my part and look for ways to improve, but we are part of a team. |

*If we can get children to recognize their negative thoughts and replace them, we can help them change the brain on a chemical level—leading to a happier, healthier life.*

* Use peer mentors to encourage children to help each other

Note: Self-esteem is covered here because children with ADHD frequently have self-image or self-confidence issues because they struggle throughout their entire day, until they learn compensatory strategies and can self-regulate. Then, even after they’ve learned strategies and have the ability to implement them, there are many variables that prevent them from doing so. Fatigue, hunger, thirst, level of interest, etc. all contribute to effective implementation.

Sources:

<https://www.nimh.nih.gov/health/topics/attention-deficit-hyperactivity-disorder-adhd/index.shtml>

<https://scips.worc.ac.uk/subjects-and-disabilities/dance-ddp_adhd/>