

# ATTENTION DEFICIT- HYPERACTIVITY DISORDER (ADHD) FACT SHEET FOR TEACHERS

## WHAT IS ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)?

**ADHD** is a biologically based behavioral disorder that affects between 3 and 6 percent of elementary-school aged children in the United States. According to the Diagnostic and Statistical Manual of Mental Disorders, Third Edition Revised, for a child to be diagnosed with **ADHD**, he or she must exhibit excessive and/or inappropriate overactivity, inattentiveness or impulsiveness for a period of more than six months. A child with **ADHD** may exhibit all of these traits, or just one or two, to be diagnosed with the condition.

## WHAT ARE THE BEHAVIORS OF AN ADHD CHILD IN THE CLASSROOM?

It is difficult to describe one profile of a child with **ADHD** in the classroom, since each child may have a different combination of a range of symptoms.

Generally children with **ADHD** are unable to sit still for any great length of time, or unable to concentrate or pay attention. **ADHD** children commonly fail to complete homework assignments, attend poorly to classroom instruction, often write illegibly, and frequently provoke others physically. Often the child suffers from a loss of self-esteem because of his or her inability to engage in normal classroom and playground activities. **ADHD** can result in great loneliness for the child also, as schoolmates and adults shun the uncontrolled behaviors.

## WHAT IS THE ROLE OF THE TEACHER IN ADHD DETECTION AND MANAGEMENT?

Most children with **ADHD** exhibit their behaviors in the classroom, which can lead to difficulties in their schoolwork and interpersonal relationships. If a teacher thinks a child may have the symptoms of **ADHD**, it is important that this be communicated to the child's parent and/or the school psychologist. Effective treatment is available for children with **ADHD** and can enhance their ability to make friends and to listen and attend in school, during a time in their life when learning is so vital. Additionally, appropriate treatment for the student can benefit the entire classroom environment by eliminating the disturbances often a result of unmanaged **ADHD**.

**ADHD** is a serious and legitimate disorder that warrants special attention and management. Communicating with the child's parents and health care professionals as well as understanding the symptoms of the disorder, can improve the child's feelings of self-esteem, social skills and ability to participate in the classroom.



## HOW IS ADHD TREATED?


Many of the leading specialists in **ADHD** care recommend multimodal therapy as the most beneficial treatment approach for children with **ADHD**. Multimodal therapy combines psychological counseling and special education and medication prescribed by the child's physician.



**For further information on  
ADHD contact:**


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## HOW IS ADHD DIAGNOSED?



In order to determine an accurate **ADHD** diagnosis, a team of child-care professionals must carefully evaluate a child over a period of time in a variety of settings. In diagnosing **ADHD**, the team works together to identify a broad and persistent pattern of **ADHD** behaviors that are negatively affecting the child's school, home and social environments.

According to the ADD Study Group convened by the State of Georgia in 1987, to diagnose **ADHD**, "the most adequate process will usually involve parents and professionals who are able to combine anecdotal information with, educational, psychological, and medical assessments across a variety of settings. This process may include a pediatrician, school teachers, a child psychiatrist a pediatric neurologist and the parents of the child."



Research now is being conducted at the National Institute of Mental Health (NIMH) in Bethesda, Maryland, using a new brain imaging instrument, the PET (positron emission tomography) scan. One recent study from the MIMH showed a significant difference in brain glucose metabolism between **ADHD** and non **ADHD** adults. Further research into the biological markers for **ADHD** continues and may lead to a more efficient diagnostic tool for physicians in the future.



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