

## What is Attention Deficit Hyperactivity Disorder?

Attention Deficit Hyperactivity Disorder (ADHD) is a complex neuro-developmental disorder which affects a person's ability to exert age-appropriate self-control. It is known as ADHD but can present with or without the Impulsivity/Hyperactivity. There are three classifications: ADHD (Inattentive type), ADHD (Hyperactive/Impulsive type) and ADHD (Combined type). ADHD is often associated with having difficulty with emotional regulation and executive functioning (such as planning, problem solving and organisational skills). Common difficulties include:

- Social clumsiness
- Poor co-ordination
- Disorganisation
- Insatiability
- Variability (mood swings)
- Poor self-esteem
- Specific Learning Disabilities
- Language difficulties

People with ADHD have little control over these behaviours as they stem from underlying neurological differences. They arise due to an impaired ability to inhibit and regulate attention, behaviour and emotions; to reliably recall information in the moment; to plan and problem solve; to self-reflect and self-monitor; and to self-soothe.

## Did you know?

- ADHD can cause significant functional disability throughout the lifespan and in all areas of life

- Without appropriate intervention ADHD can lead to significantly unfavourable outcomes
- ADHD affects one in 25 Australians, that's around 1 million people
- ADHD is frequently misunderstood and contrary to prevailing myths is under-diagnosed
- ADHD occurs in virtually every social class and ethnic group
- Boys are six times more likely to be referred for help than girls
- ADD/ADHD can be a hereditary condition

## Is ADHD a new condition?

ADD was first described almost 100 years ago. Terms previously used to identify the condition include "minimal brain damage", "minimal brain dysfunction", "hyperkinesia" and "hyperactivity child syndrome".

The term "Attention Deficit Disorder" was first used in the 1970's and in 1980 the term was used by the American Psychiatric Association in their Diagnostic and Statistical Manual (DSM-III).

The DSM-5 criteria for ADHD indicates 'people with ADHD show a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development' ([www.cdc.gov](http://www.cdc.gov)).

There are 2 groups of symptoms in ADHD:

### Inattentive symptoms:

- not paying attention to details, or making careless mistakes in schoolwork

- having difficulty remaining focused in class, conversations or reading
- avoiding tasks that take continuous mental effort (for example, homework)
- not following through on instructions, a tendency to start but not finish tasks
- having difficulty organising tasks, activities, belongings or time being easily distracted or daydreaming
- losing things
- not seeming to listen when spoken to
- being forgetful with everyday tasks, such as chores and appointments

#### Hyperactive-impulsive symptoms:

- fidgeting and squirming
- running or climbing in situations where it is inappropriate, leaving their seat in class
- talking non-stop
- interrupting conversations, games or activities or using people's things without permission
- blurting out an answer before a question has been finished
- having difficulty playing quietly
- having difficulty waiting their turn
- leaving the seat in class or in other situations where sitting is expected
- being constantly in motion, as if 'driven by a motor'

- struggling to play or do tasks quietly

#### **How is ADHD diagnosed?**

There are clear criteria used to diagnose ADHD. If your child has 6 or more symptoms for at least 6 months to a degree that it interferes with their everyday life, they may be diagnosed with ADHD. These symptoms are outlined in the Diagnostic and Statistical Manual of Diseases (DSM-5).

In order to diagnose ADHD in adulthood, it needs to be established that the symptoms began in childhood.

To make a diagnosis of ADHD, a specialist will need to follow strict criteria. These include that the ADHD symptoms:

- began before the age of 7 and have persisted for 6 months or more
- are present in more than one setting (for example, both school and home)
- have caused significant impairment, at school, home or socially
- are unusual for the child's age and developmental level
- are not better explained by another mental or physical condition, family circumstances or stress

A comprehensive assessment is necessary to confirm a diagnosis of ADHD to exclude other conditions. Assessments should also determine if other conditions exist such as Conduct Disorder (CD), Oppositional Defiant Disorder (ODD), Tourette's Syndrome or Learning Disabilities.



## Treatment of ADD/ADHD

There are several different options for the treatment of ADHD, depending on the specific needs of each child and family.

Treatment may involve different health professionals, including a doctor, psychiatrist, paediatrician, child psychologist. Ideal treatment may include the following:

- Behaviour management (eg social skills training, time management, anger management, modelling and role-play exercises, incentive-based motivation)
- Educational management
- Programs for LD (if appropriate)
- Medical management (eg. medication)
- Other therapies as required by the individual (eg. diet, speech therapy, occupational therapy, physiotherapy)

Stimulant medications have been thoroughly researched for many years and have been shown to be safe and to greatly improve concentration, impulse control and hyperactivity in about 4 in 5 children with ADHD. The doses used to treat ADHD are not addictive and do not cause withdrawal symptoms. However, they can cause side effects like loss of appetite and difficulty falling asleep. For children who may experience side effects from these medicines, non-stimulant medicines are also available.

Psychological treatments, such as behavioural therapy, parenting skills and assistance with emotional regulation may help a child develop strategies and skills for learning and controlling their behaviour.

Encourage involvement in other activities such as sport, drama, special-interest clubs or groups.

The best outcomes are achieved by early detection and appropriate collaborative management.

*Read and learn as much as you can and it will help you and your family ADDRESS the problem and become an informed advocate for your child.*

### References / Links:

<https://www.adhdaustralia.org.au/>

<https://www.healthdirect.gov.au/attention-deficit-disorder-add-or-adhd>

<https://adhd.foundation.org.au/>

<https://www.adhdaustralia.org.au/resources/australian-resources/>

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*This LDC Fact Sheet was originally compiled by members of the LDC Management Committee 2010 (updated by Andrew Greenfield 2021)*

