Coping Skills for Students with Attention Deficit Hyperactivity Disorder:

A Meta-Synthesis

David Brighton

Submitted in partial fulfillment of the requirements of the Master of Education in Special Education degree at the University of Alaska Southeast

RECOMMENDED:  

Thomas Scott Duke, Ph.D., Academic Advisor

APPROVED:  

Deborah Lo, Ph.D., Dean, School of Education

August 1, 2011
Abstract

Students diagnosed with Attention Deficit/Hyperactivity Disorder (ADHD) are often seen as problem students with little hope for academic success. It is common for these students to be medicated with a daily dosage of stimulants to help them function more appropriately in the classroom. This meta-synthesis identifies multiple ways to work with students with ADHD; effective interventions can help students with ADHD cope with their disorder and become more successful students.
1. Introduction

1.1. The problem

Attention Deficit Hyperactivity Disorder (ADHD) is defined by the American Psychiatric Association (2000) in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV-TR) as a Disruptive Behavior Disorder which manifests chronic and impairing behavior patterns of abnormal levels of inattention, hyperactivity, or their combination. These also symptoms must continue for six months or more. ADHD causes difficulty in a student’s behavior and their ability to focus on a lesson, but it does not have any limitation on their intellect. Yet students with ADHD often enter special education and teachers expect less of them. The student has a hard time getting work done which usually leads to lower grades.

Many students with ADHD have learned to compensate for the challenge of focusing on what they need to. With effort they can be just as successful as any other student in their classes. The goal of this study is to identify some of the skills and behaviors that can help students overcome the difficulty in learning that comes from ADHD (Mayo Clinic, 2009)

1.2. Author’s beliefs and experiences

As an educator of five years, I am well acquainted with the special education system. I co- taught middle school Utah History for two years – which gave me an in-depth look at the Individualized Education Program (IEP) process – and I have made many accommodations for students with a variety of exceptionalities. My desire to learn more about ADHD in specific came when my nine year old son was diagnosed as having ADHD.

He had been struggling in fourth grade, more than would be expected because of our move from rural Alaska. So we began looking into where his problems stemmed from. When we created my son’s IEP, I had the strong desire to understand more about his condition. As a
teacher, I am aware of the stigma that comes with the ADHD label. As I have worked with my son this past year, a desire to become a special education teacher grew inside of me. I want to work with exceptional students and help them reach their full potential in life. This desire has led to the following research questions.

- How and when can educational, technical, and medical interventions be used to help students with ADHD?
- What strategies can teachers use to improve instruction and adaptations for students with ADHD?
- Are there skills that educators can teach students with ADHD to help them perform better in a classroom setting?
- How can we teach students with ADHD skills that will help them be effective learners in spite of their disorder?

Over the years, I have encountered many educators that see ADHD as a stumbling block that is nearly impossible to overcome, and who believe these students cannot perform at the same level as regular education students. Having worked with many special education students over the years, I know this is not true. But when my son was diagnosed, it became personal. I knew how intelligent and capable he really is which inspired me to work with special education students because I know I will not make that mistake.

1.3. Purpose of this meta-synthesis

My goal in doing this research is to better understand how ADHD affects students and impedes the learning process. I also want to find out if there are any skills that students commonly learn to cope with ADHD. I am interested in how students discover these skills, how
they are implemented, and how I, as an educator, I can foster these skills to help more students with ADHD be successful learners.

2. Methods

2.1. Selection criteria

All 27 articles that are included in this meta-synthesis followed these criteria:

1. The articles were written about methods or interventions to help students with ADHD and/or learning disabilities.

2. The articles discussed skills that students with ADHD and/or learning disabilities could use to become better learners.

3. All articles came from peer-reviewed journals.

4. They were written between the year 1990 and 2010.

2.2. Search procedures

I conducted database searches and ancestral searches to locate articles for this meta-synthesis.

2.2.1. Database searches

I conducted Boolean searches of the Education Resources Information Center (ERIC, Ebscohost) database using the following search term combinations:

1. (“ADHD”) AND (“Parents”).


3. (“ADHD”) AND (“Inclusive Schools”).

4. (“ADHD”) AND (“Mainstreaming”).

The database searches yielded 22 articles that met my search criteria (Armstrong, 2004; Bauermeister, Berrios, Jimenez, Acevedo, & Gordon, 1990; Brim & Whitaker, 2000; D’Alonzo,
2.2. Ancestral searches

An ancestral search involves reviewing the reference lists of previously published works to locate literature relevant to one's topic of interest (Welch, Brownell, & Sheridan, 1999). I conducted ancestral searches of the reference lists of the articles retrieved through my database searches. These ancestral searches yielded five additional items that met the selection criteria (Bryan & Sullivan-Burstein, 1997; Callahan, Rademacher, & Hildreth, 1998; Carlson, Booth, Shin, & Canu, 2002; Salend & Gajria, 1995; Wolfe, Heron, & Goddard, 2006).

2.3. Coding procedures

I used a coding form to organize the information presented in the 27 articles. This coding form was based on: (a) publication type; (b) research design; (c) data sources; and (d) findings.

2.3.1. Publication type

The information I used in my research came in several different forms. Research studies utilize the scientific method to gather qualitative and/or quantitative data, and analyze it accordingly. Guides are written for practitioners, and are intended to help them implement specific strategies or programs. Descriptive articles relate experiences or observations, but are not the result of scientific study or analysis. Opinion pieces/position papers give the author's opinion on an issue, and may be biased by politics or policy. Annotated bibliographies are lists of articles about the same topic, and include a short summary of each one. Reviews of the
literature are also based on other works, but rather than listing out each one they summarize the information into a cohesive whole (Table 1).

2.3.2. Research design

I classified each article by research design separating them into three categories. Qualitative studies describe people’s experiences and often have a narrative, while quantitative studies analyze numbers and statistics. Mixed methods studies are a blend of both qualitative and quantitative research in a single study (Table 2).

2.3.3. Participants, data sources, and findings

I identified participants involved in each of the studies (e.g., insert examples). Also, I have identified the data sources which I analyzed for each study (e.g., insert examples). I then summarized the findings of each study (Table 2).

2.4. Data analysis

I employed a modified version of the Stevick-Colaizzi-Keen method previously used by Duke and Ward (2009) to analyze the 27 articles found in this meta-synthesis. I began by identifying significant statements in each article. The statements I found to be significant for this study addressed the following topics: (a) examining the effectiveness of self-monitoring; (b) exploring causality and effective Assessment for ADHD; (c) student motivation; (d) academic and behavioral strategies for students, parents, and educators; and (e) alternative ways of perceiving and treating ADHD. I made a list of non-repetitive, non-overlapping (verbatim) significant statements with (non-verbatim) formulated meanings. The formulated meanings represent my interpretation of each significant statement. Finally, I grouped the formulated meanings that I created from all 27 articles into theme clusters (or
emergent themes). These emergent themes represent the essence (or content) of the entire body of literature (Table 3).

3. Results

3.1. Publication type

I located 27 articles that met my selection criteria. The publication type of each article is delineated in Table 1. Nine of the 27 articles (33.3%) were position papers (Armstrong, 2004; Brim & Whitaker, 2000; Graham, 2007; Meyer & Kelley, 2007; Murray et al., 2008; Reason, 1999; Salend, et al., 2003; Sinha, 2005; Zentall, 2005). Eight of the 27 articles (29.6%) included in this meta-synthesis were research studies (Bauermeister et al., 1990; Callahan et al., 1998; Carlson et al., 2002; Dryer et al., 2006; Graham-Day et al., 2010; Heiman & Precel, 2003; Snider et al., 2003; Wolfe et al., 2006). Eight of the 27 articles (29.6%) were descriptive articles (Bryan et al., 1997; D’Alonzo, 1996; Harlacher et al., 2006; Hoyle, 2005; King, 2010; Salend & Gajria, 1995; Taylor & Larson, 1998; White, 1996). Two of the 27 (7.4%) articles found were reviews of the literature (Glass, 2001; Pelham et al., 2005).
<table>
<thead>
<tr>
<th>Author(s) &amp; Year of Publication</th>
<th>Publication Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Armstrong, 2004</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Bauermeister, Berrios, Jimenez, Acevedo, &amp; Gordon, 1990</td>
<td>Research Study</td>
</tr>
<tr>
<td>Brim &amp; Whitaker, 2000</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Bryan &amp; Sullivan-Burstein, 1997</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Callahan, Rademacher, &amp; Hildreth, 1998</td>
<td>Research Study</td>
</tr>
<tr>
<td>Carlson, Booth, Shin, &amp; Canu, 2002</td>
<td>Research Study</td>
</tr>
<tr>
<td>D’Alonzo, 1996</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Dryer, Kiernan, &amp; Tyson, 2006</td>
<td>Research Study</td>
</tr>
<tr>
<td>Glass, 2001</td>
<td>Review of the Literature</td>
</tr>
<tr>
<td>Graham, 2007</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Graham-Day, Gardner, &amp; Yi-Wei, 2010</td>
<td>Research Study</td>
</tr>
<tr>
<td>Harlacher, Roberts, &amp; Merrell, 2006</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Heiman &amp; Precel, 2003</td>
<td>Research Study</td>
</tr>
<tr>
<td>Hoyle, 2005</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Meyer &amp; Kelley, 2007</td>
<td>Position Paper</td>
</tr>
<tr>
<td>King, 2010</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Murray, Rabiner, &amp; Schulte, 2008</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Pelham, Fabiano, &amp; Massetti, 2005</td>
<td>Review of the Literature</td>
</tr>
<tr>
<td>Reason, 1999</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Salend, Elhoweris, &amp; VanGarderen, 2003</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Salend &amp; Gajria, 1995</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Sinha, 2005</td>
<td>Position Paper</td>
</tr>
<tr>
<td>Reference</td>
<td>Type</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Snider, Busch, &amp; Arrowood, 2003</td>
<td>Research Study</td>
</tr>
<tr>
<td>Taylor &amp; Larson, 1998</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>White, 1996</td>
<td>Descriptive Article</td>
</tr>
<tr>
<td>Wolfe, Heron, &amp; Goddard, 2006</td>
<td>Research Study</td>
</tr>
<tr>
<td>Zentall, 2005</td>
<td>Position Paper</td>
</tr>
</tbody>
</table>
3.2. Research design, participants, data sources, and findings of the studies

My research located eight studies that met my selection criteria (Bauermeister et al., 1990; Callahan et al., 1998; Carlson et al., 2002; Dryer et al., 2006; Graham-Day et al., 2010; Heiman & Precel, 2003; Snider et al., 2003; Wolfe et al., 2006). The research design, participants, data sources, and findings of each of these studies are delineated in Table 2.
### Table 2

<table>
<thead>
<tr>
<th>Authors</th>
<th>Research Design</th>
<th>Participants</th>
<th>Data Sources</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bauermeister, Berrios, Jimenez, Acevedo, &amp; Gordon, 1990</td>
<td>Quantitative</td>
<td>522 children and adolescents from public and private schools or day care centers</td>
<td>Gordon Diagnostic System (GDS) test results</td>
<td>• Gender and/or type of school (private vs. public) has no effect on the Incidence of ADDH or ADHD</td>
</tr>
<tr>
<td>Callahan, Rademacher, &amp; Hildreth, 1998</td>
<td>Quantitative</td>
<td>The parents of 26 sixth- and seventh-grade students from two middle school programs for at-risk youth</td>
<td>Student grades and parent questionnaires</td>
<td>• Both homework completion and homework quality increased significantly during intervention</td>
</tr>
</tbody>
</table>
| Carlson, Booth, Shin, & Canu, 2002      | Quantitative    | 25 children with attention-deficit/hyperactivity disorder combined type (ADHD/C), 13 children with ADHD inattentive type (ADHD/IA), and 25 nondiagnosed controls (NC) | Parent, Teacher, and Self-ratings | • ADHD groups consistently rated lower than controls in all areas examined  
• No differences were found by gender                                                    |
| Dryer, Kiernan, & Tyson, 2006           | Quantitative    | 670 participants; Psychologists, general medical practitioners, specialist pediatricians, occupational therapists, social workers, dieticians, primary school teachers, special educators, parents of children with a diagnosis of ADHD, and parents of children without a diagnosis of ADHD | Questionnaires; participant ratings of 46 characteristics and 29 causal explanations for ADHD | • Concentration/Attention problems were rated as most characteristic of ADHD, followed by behavior control, adjustment problems, low self-esteem, and [delayed] cognitive development  
• Brain Function was rated as the most significant causal factor of ADHD, followed by Home or School Environment, Psychological Problems, Toxins, and Brain Damage |
<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>Sample Description</th>
<th>Method</th>
<th>Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graham-Day, Gardner, &amp; Yi-Wei, 2010</td>
<td>Quantitative</td>
<td>3 10th grade students with ADHD</td>
<td>Observations</td>
<td>• On-task behavior increased, indicating a functional relationship between self-monitoring and on-task behavior</td>
</tr>
</tbody>
</table>
| Heiman & Precel, 2003                     | Quantitative | 191 college students with learning disabilities and 190 students without LD         | Questionnaires | • All students had increased success when using study aid strategies  
• Students without LD were more likely to use written strategies, while students with LD were more likely to use other strategies |
| Snider, Busch, & Arrowood, 2003           | Quantitative | Random sample of 200 general educators and 200 special educators from Wisconsin    | Survey results | • The majority of respondents agreed that stimulant medications help ADHD students function better in the classroom, with their studies, and in social interaction  
• Respondents agreed that teachers need more education about stimulants and their side effects  
• Respondents had relatively poor knowledge about the facts relating to ADHD and stimulant medication. Only 5 of 13 questions were correctly answered by more than half of the teachers. |
| Wolfe, Heron, & Goddard, 2000             | Quantitative | 4 male elementary students with learning disabilities                              | Observation work samples | • All students demonstrated increased on-task behavior when using self-monitoring.  
• The findings did not indicate a functional relationship between |
3.2.1. Research design

Eight of the eight studies (100%) included are quantitative studies (Bauermeister et al., 1990; Callahan et al., 1998; Carlson et al., 2002; Dryer et al., 2006; Graham-Day et al., 2010; Heiman & Precel, 2003; Snider et al., 2003; Wolfe et al., 2000).

3.2.2. Participants and data sources

The eight studies included in this meta-synthesis studied students with disabilities, students without disabilities, parents of students with disabilities, and teachers. Five of the eight studies (62.5%) in this meta-synthesis analyzed students with ADHD directly (Bauermeister et al., 1990; Dryer et al., 2006; Graham-Day et al., 2010; Heiman & Precel, 2003; Wolfe et al., 2000). One of the eight studies (12.5%) used data generated from parents and students (Callahan et al., 1998). One of the eight studies (12.5%) analyzed data generated from teachers (Snider et al., 2003). While one of the eight studies (12.5%) used data generated from students, teachers, and parents (Carlson et al., 2002).

There were a wide variety of data sources used in the studies in this meta-synthesis such as surveys, work samples, questionnaires, observations, scaled-based assessments, and grades/test results. One of the eight studies (12.5%) found in this meta-synthesis used survey results (Snider et al., 2003). Two of the eight studies (25.0%) found in this meta-synthesis analyzed grades and/or test results (Bauermeister et al., 1990; Callahan et al., 1998). Two of the eight studies (25%) used in this meta-synthesis used scaled-based assessment instruments (Carlson et al., 2002; Dryer et al., 2006). Two of the eight studies (25.0%) found in this meta-synthesis used data from questionnaires (Callahan et al., 1998; Heiman & Precel, 2003). Two of the eight
15 COPING SKILL FOR STUDENTS WITH ADHD

studies (25%) found in this meta-synthesis used data created from observations (Graham-Day et al., 2010; Wolfe et al., 2000). One of the eight studies (12.5%) found in this meta-synthesis analyzed work samples (Wolfe et al., 2000).

3.2.3. Findings of the studies

The findings of the studies included in this meta-synthesis can be summarized as follows:

1. Gender and the type of school which students attend have no effect on the incidence of ADHD. Brain function is the most significant causal factor of ADHD, followed by Home or School Environment, Psychological Problems, Toxins, and Brain Damage. It is also important to note that ADHD groups consistently rated lower than controls in all areas examined, and benefit from certain interventions.

2. Concentration/attention problems were rated as most characteristic of ADHD, followed by behavior control, adjustment problems, low self-esteem, and [delayed] cognitive development.

3. Both homework completion and homework quality increased significantly with interventions in place. Also students demonstrated increased on-task behavior when using self-monitoring indicating a functional relationship between self-monitoring and on-task behavior.

4. A majority of respondents to questionnaires agreed that stimulant medications help ADHD students function better in the classroom, with their studies, and in social interaction. Yet teachers do not know enough of the side effects of stimulant medications, and need to learn more about these drugs that are commonly taken by students with ADHD.

3.3. Emergent themes

Five themes emerged as I analyzed the 27 articles included in this review of the literature. The themes (or theme clusters) are: (a) examining the effectiveness of self-monitoring; (b)
exploring causality and effective assessment for ADHD; (c) student motivation; (d) academic and behavioral strategies for students, parents, and educators; and (e) alternative ways of perceiving and treating ADHD. These five theme cluster and their associated formulated meanings are delineated in Table 3.
### Table 3

<table>
<thead>
<tr>
<th>Theme Clusters</th>
<th>Formulated Meanings</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Examining the effectiveness of self-monitoring</strong></td>
<td>• Examining the effectiveness of self-monitoring for on-task behavior in students with mild disabilities.</td>
</tr>
<tr>
<td></td>
<td>• Examining the effectiveness of self-monitoring for homework completion, examining the relative effectiveness of parental-monitoring for homework completion, exploring the effectiveness of self or parent-monitoring on study skills, examining the effectiveness of self or parent-monitoring on classroom performance.</td>
</tr>
<tr>
<td><strong>Exploring causality and effective Assessment for ADHD</strong></td>
<td>• Exploring potential causes of ADHD, investigating the role of school environment in ADHD, considering the implications of formal diagnosis.</td>
</tr>
<tr>
<td></td>
<td>• Incidence of ADHD is rising, examine assessment practices for ADHD, determine the most useful factors to assess in making ADHD diagnoses.</td>
</tr>
<tr>
<td></td>
<td>• Diagnosing ADHD is important for student success, an appropriate IEP affects student success, parental involvement is crucial for student success.</td>
</tr>
<tr>
<td><strong>Student Motivation</strong></td>
<td>• Explore biological factors in motivation, examine the relationship of motivation to academic achievement in ADHD students.</td>
</tr>
<tr>
<td></td>
<td>• A teacher uses media (digital storytelling) to help keep students motivated and invested in school.</td>
</tr>
<tr>
<td><strong>Academic and Behavioral Strategies for Students, Parents, and Educators</strong></td>
<td>• Discussing classroom strategies for helping ADHD students, the strategies that help ADHD students help other students too.</td>
</tr>
<tr>
<td></td>
<td>• Discuss the characteristics of students who are both gifted and have ADHD, recommend practices to ‘reach and teach’ these students.</td>
</tr>
<tr>
<td></td>
<td>• Incidence of ADHD is rising, offer strategies for mainstream education teachers to help them with ADHD students in their classes.</td>
</tr>
<tr>
<td></td>
<td>• Examine the use of a daily report card (DRC) to facilitate other interventions for students with ADHD, determine the effect of use of DRC on their study skills and classroom performance as compared with no DRC</td>
</tr>
<tr>
<td></td>
<td>• Examine current research about ADHD, consider implications for practice based on research.</td>
</tr>
<tr>
<td></td>
<td>• Present guidelines for increasing homework completion rates among students with mild disabilities, (strategies: variety in homework assignments, increasing motivation, working with peers, routines, improving study skills and organizational skills, and involving parents).</td>
</tr>
<tr>
<td></td>
<td>• Present instructional techniques that will benefit ADHD students academically.</td>
</tr>
</tbody>
</table>
### Alternative Ways of Perceiving and Treating ADHD

- Review factors that improve attention for ADHD students, including medication, behavioral consequences, learning strategies, practice and self-monitoring techniques.
- Incidence of ADHD is rising, offer strategies for mainstream education teachers to help them with ADHD students in their classes.
- Homework strategies for students and parents to use.
- Supporting educators of students with ADHD with effective accommodations.

- "Learning disabilities" are not so much disabilities as different ways of doing things, these students often excel outside traditional classrooms, propose strategies for promoting success with these students in all settings.
- Examining cognitive therapy as an alternative to medication for ADHD, suggesting that medication only tames symptoms but does not improve grades, relationships, or behavior in the long term.
- Discuss brain function and how we learn, examine treating disabilities cognitively.
- Diagnosis rates of ADHD are increasing, questioning effectiveness of medication for ADHD, considering strategies other than medication.
4. Discussion

In this section I summarized the major themes that emerged in the 27 articles in this meta-synthesis. I also connected each theme to my professional experience as a special education teacher.

4.1. Examining the effectiveness of self-monitoring

There are many strategies for helping students with ADHD succeed academically, but many rely on teachers or parents to maintain them. One of the most effective strategies is to teach the student how to monitor him or herself. Since self-monitoring means that the student applies the strategy independently, it is an effective method for long-term success. Self-monitoring of on-task behavior has proven to be more effective than parental-monitoring, self-evaluation, or self-reflection.

Teaching students how to monitor themselves is one of the best ways I can help students with ADHD. As a special education teacher I will always work to find and implement interventions for all of my students, but if I can teach students to self-monitor they will not need interventions as much. I see this as the best possible situation for them. In a world where special education is seen as a negative label empowering students with skills to successfully work around their disability will serve them throughout their life. After all, not all teachers are good at, or even willing to make accommodations for students with disabilities, not to mention employers in the professional world. By learning to self-monitor students with ADHD can learn to function without allowing inattention or hyperactivity to deter their success.

4.2. Exploring causality and effective assessment for ADHD
There are a variety of theories about the causes of ADHD; most commonly identified are toxins (from food or environment), brain chemistry, and parental influence. Some researchers are now suggesting that a rigid school environment also contributes toward incidence of ADHD.

Several methods have been utilized to attempt to diagnose ADHD, but the most effective diagnostic method is to have the parents and teachers of the student fill out evaluations which are correlated to the DSM scale, such as the Behavior Assessment System for Children (BASC).

There is some disagreement about the implications of formal diagnosis: most professionals feel that diagnosis is a vital first step toward helping the student implement successful academic strategies, but some professionals feel that diagnosis leads to negative labeling and learned helplessness. These latter professionals propose implementing extra support and instructional strategies for all students, thus providing support to students with extra needs without setting them apart.

As an educator it is not within my purview to make a diagnosis of any student. I will leave that to those more qualified to make an official diagnosis. I do think it is important for myself and other educators to understand the importance of making good and valuable unbiased observations. Especially when I consider the most effective measure of diagnosis for ADHD is by gathering information such as the BASC. It is my goal to diligently observe and take notes of a student being considered for special education so that I can give the most fair and accurate report possible for that student. I want to help each student in the best way that I can, and by spending time in observations and recording my findings I feel I can do that for each of the students I work with.

4.3. Student motivation
One of the biggest concerns for students with ADHD is motivation. A motivated student can
hyper-focus and be very productive and successful, but an unmotivated student will be just the
opposite. Motivation affects the academic success of any student, but is especially of concern for
students who have difficulties in school because they have to put in more effort in order to
succeed.

ADHD is generally agreed to have a biological component. These students struggle
academically because their brains process things differently from their classmates. Rewards and
performance ultimatums are ineffective or minimally effective for motivating ADHD students,
because they are literally incapable of responding to them as a non-ADHD student would. More
effective strategies include: physical movement, focusing on accuracy and completion of tasks
rather than speed or volume of work, giving clear directions, assistance getting started, and peer
tutoring. One article described a teacher who excited and motivated his students by having them
create digital stories and then sharing them with their friends online.

I have always tried to get to know my students and get them excited about material by making
it relate to their personal lives. In my experience this helps them to focus more and retain
information better. Understanding some of the differences in ADHD students will help me to
work personally with them to keep them motivated. I can set up ways to help students get started
on their work. Understanding how difficult and frustrating transition can be I can try to limit
them in my class. Directions for assignments have traditionally been written on the board so all
students can read them in case they forgot or missed something, I think it will also help these
students to have them repeat directions back to me to ensure they understand what is being asked
of them. I also really like the idea of peer-tutoring and plan to continue using that where
appropriate with my students.
4.4. Academic and behavioral strategies for students, parents, and educators

There are a variety of strategies which can be utilized by students, parents, and educators to help students with ADHD succeed academically and socially. Most ADHD students particularly struggle with organization, so routines, planners, and other organizational aids are very helpful. Self-monitoring is a highly effective strategy for increasing on-task academic behavior. Direct instruction and modeling are useful for teaching appropriate social interaction, organization, and study skills. Support from both parents and teachers is fundamental, and regular communication between the two, via a Daily Report Card (DRC) or other method, is key for student success.

Since most ADHD students are in mainstream classrooms, (and some do not have formal diagnoses), it is ideal for all teachers to utilize these strategies with all their students. The study skills, organizational methods, and other supportive strategies that are so important for ADHD students are helpful for other students as well, so bringing these strategies into every classroom can only be beneficial.

As a general education teacher I have always stressed the importance of organization and study skills. Many schools give students planners to use. I have seen this to be very effective and plan to require my students maintain some sort of organization. Whether it be a traditional planner, a digital device, or even just daily scraps of paper to record assignments on; I think this will help students keep track of assignments better and turn more in on time. I have used daily report cards are a very effective way of keeping track of daily progress that students make for parents to see which they are not always aware of. The increased communication is very helpful to keep parents involved in what is happening at the school.

I think it is also important to keep a regular dialogue between teachers and parents of students with ADHD. These students can be very challenging at times and it is very helpful to share
successful strategies with one another. Also, I feel it is important to celebrate my students successes. Especially with students that tend to present regular behavior problems it is very important to keep positive communication going. I’ve found a simple phone call in the afternoon to praise a student’s good behavior makes a lasting impression on parents. It is my goal to regularly praise my students successes not just in class, but to make parents aware of them as well.

4.5. Alternative ways of perceiving and treating ADHD

Although ADHD is a very common diagnosis, there is disagreement about the best way to respond to such a diagnosis. Some professionals prefer to respond to it merely as a “difference” rather than a “disorder” because they perceive positive attributes in it. These professionals believe that the people and environments around the students need to change to meet the needs of the student, rather than asking the student to change to meet the status quo of the people and environments. Other professionals are comfortable with labeling ADHD as a disorder, but feel that since medication only addresses symptoms, it is not a good treatment solution. Some propose various forms of cognitive therapy, brain exercises, or other non-pharmaceutical treatments.

Again this is an area I will leave to parents and doctors. It is not my job as a teacher to make recommendations on types of therapy or treatment. If parents ask me my opinion I will refer them to their doctor for better advice than I can give. It is my feeling that the specific label that is given to a child is not important. What I feel is important is finding the best means to help this child learn and be as successful as possible. Each child I work with is a unique person, and in creating that students Individualized Education Plan (IEP) I will work with parents and other teachers to find the best ways for that student to realize all of the potential that lies within them.
Ultimately we all have individual strengths and weaknesses whether we fit a label or not, I will work with my students to use their strengths in order to overcome any weaknesses they may have.

5. Conclusion

Attention Deficit/Hyperactivity Disorder (ADHD) can be caused in many different ways. Whether it be toxins, brain chemistry, or environmental factors this disorder makes it difficult for students to perform well in a traditional classroom. Common effects of ADHD are inattention, lack of focus, and/or having excess energy to the point where it is difficult for the student to maintain a quiet non-distractive demeanor. ADHD is a common learning disability and diagnosis’s are on the rise. It is prevalent among both genders and across all school populations.

There are many common interventions for students with ADHD. Stimulant-medication is commonly used to treat the symptoms of ADHD, but there is a large debate over the value of using medication because it treats the symptoms of the disorder and not the disorder itself. Others feel that it is effective in helping students be more successful and therefore is a good thing. As a teacher I have chosen to stay out of this debate as I am not an expert in the field of medication. Other interventions have been very successful as well.

One of the most successful interventions found in this study is teaching students how to monitor themselves. By allowing them to monitor how well they are on task they learn how to stay on task more of the time. This effectively teaches them how to overcome the symptoms of ADHD that prevent them from learning. Other helpful interventions are improving their organizational skills, and daily report cards. Using these to keep regular communication up with parents can really help students to be more successful as well.
One more important aspect brought out in this meta-synthesis is keeping students motivated. Assigning projects that are new and exciting or allow for students to move around and use technology are all very helpful ways to keep students excited about what they are learning. It can also be very helpful to find ways to relate subject matter to the student's personal lives. By making what they are learning relevant to them they will also remember it better.

By applying the many different tools and strategies that I have learned through this meta-synthesis I feel that I will be more effective in teaching students with ADHD. It is my hope that I will be able to teach them skills like organization and self-monitoring that will help them to alleviate the difficulties caused by this disorder.
References


DSECTION =coping-and-support.


Welch, M., Brownell, K., & Sheridan, S. M. (1999). What's the score and game plan on teaming in schools? A review of the literature on team teaching and school-based

