

# ATTENTION AND BEHAVIOR DISORDERS

*This chapter focuses on attention deficit hyperactivity disorder (ADHD) and oppositional defiant disorder (ODD). The two disorders are discussed together here because they may be confused with each other at times—indeed, they appear under the same classification in the American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders. The information here is intended to help readers distinguish between the two.*

## ATTENTION DEFICIT HYPERACTIVITY DISORDER

The fundamental features of ADHD are chronic inattentiveness and/or hyperactivity or impulsivity that is more severe compared to that of other people at the same age and stage of development.<sup>1</sup> ADHD is classified one of three ways: inattentive type, hyperactive-impulsive type, or combined type.

Behaviors and attitudes that are typical of *inattention* include failure to pay attention to details in schoolwork or work, difficulties paying attention while doing tasks and play, and not paying attention when being spoken to. Inattentive behaviors also include not following through with instructions, failing to finish tasks, and difficulties with organizing tasks. Teens with ADHD may have no interest in doing homework or other tasks that require a lot of attention, may forget about everyday things, and may be easily distracted by outside stimuli (for

example, a noise in the hallway or another student shuffling papers).<sup>2</sup>

Behaviors that can be described as *hyperactive* include fidgeting or squirming in place or leaving a chair when it is time to sit, and talking excessively. A child with hyperactive behaviors may climb or run around excessively and act as if she is driven by a motor; in adolescents and adults the outward behaviors may not be there, but they may experience feelings of restlessness.<sup>3</sup> *Impulsive* behaviors include difficulties waiting turns, blurting out answers out of turn or before questions have even been finished, and interrupting or butting in on others’ conversations or activities.

### Who Has ADHD?

It is estimated that 3 to 7 percent of school-age youth have ADHD.<sup>4</sup> Sometimes symptoms of ADHD are most visible in childhood and gradually lessen in adolescence and adulthood. ADHD seems to run in families, but any youth is at risk for developing ADHD. School factors, social factors, and family support all play a role in the extent to which ADHD negatively affects a person. A supportive environment can go a long way toward helping someone with ADHD succeed.

### Diagnosing ADHD

It can be difficult to diagnose ADHD, and it is often misdiagnosed. Children at different developmental stages exhibit different levels of activity, and it’s important to consider their stages of development

and weigh their behaviors against those of other children of the same age to get an idea of whether the inattentive, hyperactive, or impulsive behaviors are more severe than in other children of the same age. In order to obtain a medical diagnosis for ADHD, these symptoms must be present and cause difficulties in more than one setting, such as school, work, or home.

There is no medical test for ADHD, but a physician will likely do a medical examination to rule out other physical disorders that may have similar symptoms. Only trained professionals—physicians, psychologists, and licensed social workers or counselors—can give a diagnosis of ADHD. The process of getting a diagnosis of ADHD requires input from several people in the youth's life, including parents or caregivers and teachers. There will be questions and discussions about inattentive, hyperactive, and impulsive behaviors. Parents, caregivers, and teachers may be asked to complete a checklist of symptoms. A large number of people diagnosed with ADHD may also have other mental health diagnoses, so an accurate and professional diagnosis is essential for providing the best treatment and interventions for someone with ADHD.

### Positives about ADHD

Not everything about ADHD is bad. People with ADHD are sometimes stereotyped as running around like crazy and unable to control their own behaviors. This is far from the truth. People with ADHD are often vibrant and creative. They tend to be flexible and open to change.

## WHAT YOU CAN DO TO HELP

### Recommend an Evaluation

If you suspect a teen has undiagnosed ADHD, it is important to encourage the teen to get a medical evaluation (be sure to involve the parents or guardians as required), because there are several medical conditions with symptoms that mimic those

of ADHD, including lead poisoning, side effects of some medications such as those used to treat asthma, and thyroid problems.<sup>5</sup> A common but sometimes controversial way of treating ADHD is with medication. Even if medication is prescribed, most people with ADHD benefit a great deal from counseling or behavioral coaching. Even if you are not a medical or counseling professional there are many things you can do to support a teen with ADHD.

“People who actually have ADHD are less likely to admit they have it because it’s like you’re admitting you’re stupid. ADHD is referred to so much in a joking way, ‘Oh, I have ADD!’ and that takes away from the significance of how difficult it really is to live with ADHD. It’s not easy to have 600 things happening in your head at once, it’s hard to filter through all that. I had a lot of shame about the way I functioned as a teen with ADHD, I was really sensitive to any innuendo about me needing to be quiet—I didn’t have a lot of control about me talking about 25 things at once. Maybe my ADHD has been a gift, I get to absorb so much around me that maybe others can’t.” —Lori

### Be ADHD-Friendly

If you are a parent, teacher, or someone who works with teens with ADHD, you can set up an environment that is ADHD-friendly. First, relay your expectations in a clear and concise manner. If a teen

understands what is expected, it will be easier for her to comply. After you have given directions or explained your expectations, check to see if your message was heard. If you are planning activities or lesson plans, allow time for things other than sitting and listening (which can be very difficult for a teen with ADHD). Allow time for “stretch breaks” and hands-on activities.

If you are working with a teen who has symptoms of inattention, it is important to help him maintain focus by lessening distractions. People who do not have ADHD have fewer problems focusing on what is important; a person with ADHD can focus, but often he will focus on too many things at once. Turning off the TV, having conversations with others in a different room, and being in a space with few posters, open windows, or other visual elements are all easy ways of limiting distractions in the environment.

If the teen you are working with has symptoms of hyperactivity and impulsivity, bear in mind that sitting for long periods of time will be difficult for her. Also remember that while she is sitting down, she may fidget, squirm in her seat, or tap her foot rapidly. If these behaviors are not interfering with other people, it is best not to reprimand her for doing them. Teens with impulsivity may interrupt others and be quick to answer questions you haven't finished asking. Being patient and giving feedback about the appropriateness of this behavior can help them understand how their behavior affects others. Teens with ADHD are not usually fidgeting or interrupting to be rude: it is a symptom of their illness. Gently prompting and guiding their behavior to more appropriate channels will help them gain insight into their behaviors.

It is also vital to praise teens with ADHD for what they do well. Teens with ADHD are likely to feel frustrated with school and question their abilities. People with ADHD can be very creative, energetic, and fun; let them know about the good things you see, not just the frustrating things.

## OPPOSITIONAL DEFIANT DISORDER

The elemental feature of oppositional defiant disorder (ODD) is a pattern of negative, disobedient, and defiant behaviors toward authority figures.<sup>6</sup> In order to get a diagnosis of ODD, these behaviors need to be present for at least six months. The behaviors associated with ODD usually start at home, gradually worsen in severity, and spread into other venues (school and work) over time. Instances of negativity and defiance are natural in a teen's development; it is when the symptoms are substantially worse than the behaviors of a teen's peers that ODD can be diagnosed.

### Symptoms of ODD

Some of the negative and disobedient behaviors include having a short temper, being argumentative with adults, deliberately annoying others, and refusing to do what is asked or refusing to follow rules. Someone with ODD may blame others for her mistakes, be easily annoyed by others, be very angry, or be spiteful and vindictive. Again, many of these behaviors sound like “normal” teenage behavior; a diagnosis is made when these behaviors are severe enough to cause trouble at school, work, in social settings, or at home, are consistent, and last more than six months.

### Who Has ODD?

It is estimated that between 30 and 40 percent (and possibly as many as 60 to 65 percent) of all children with ADHD may also have oppositional defiant disorder.<sup>7</sup> There is often a spiral effect of worsening behaviors when dealing with a teen with ODD. By the time a teen with ODD reaches adolescence, he may have a history of school behavior problems that lead to social and academic problems. He may have alienated many of the adults and more positive peers in his life. These factors can lead to lowered self-esteem, which in turn can increase the number of or intensity of his oppositional behaviors. It can be very frustrating to

parent, teach, or work with someone with ODD, but there are things you can do to help a teen develop more positive behaviors.

## WHAT YOU CAN DO TO HELP

### Connect with Professional Resources

If you suspect that a teen has ODD, it is important to connect him and his family or caregivers with professional help, which includes a medical evaluation and counseling. Oppositional defiant disorder frequently coexists with other mental health problems, such as ADHD, depression, and anxiety. While medication is not usually prescribed for ODD alone, medication is sometimes appropriate for the coexisting disorder.

Individual outpatient counseling for the teen is recommended, especially in the earlier and milder stages of ODD. Many teens who end up in a group home or inpatient environment have a diagnosis of ODD. Sometimes the behaviors associated with ODD (especially noncompliance with rules) can eventually lead to legal problems and possible probation. Intervening early can hopefully decrease the likelihood of legal troubles or court-remanded counseling. Counseling for the teen may focus on new ways of dealing with anger, working on emotional regulation, and gaining insight into her oppositional behaviors. She may learn social skills and appropriate ways of addressing her feelings. Family counseling can help the teen and caregiver work together and provide outside support to a family that may very well be struggling. Another way professionals can help is by educating and supporting the adults who are raising a young person with ODD.

### RESOURCES

American Academy of Child and Adolescent Psychiatry (aacap.org).

Children and Adults with Attention Deficit / Hyperactivity Disorder (chadd.org). An organization dedicated to improving the lives of people affected by ADHD and ADD.

MisUnderstood Minds from PBS (pbs.org). Interactive activities that mimic ADHD.

*ADHD: Attention-Deficit Hyperactivity Disorder in Children and Adults* by P. H. Wender. London: Oxford University Press, 2002.

*Attention Deficit Disorder: A Different Perception* by Thom Hartmann. Grass Valley, CA: Underwood Books, 1997.

*The Edison Gene: ADHD and the Gift of the Hunter Child* by Thom Hartmann. Rochester, VT: Park Street Press, 2003.

*Taking Charge of ADHD* by R. A. Barkley. New York: The Guilford Press, 2000.

### NOTES

1. American Psychiatric Association Staff, *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed., text revision (Washington, DC: American Psychiatric Association, 2000).
2. Ibid.
3. Ibid.
4. Ibid.
5. Ibid.
6. Ibid.
7. M. Kuhne and R. Schachar, "Impact of Comorbid Oppositional or Conduct Problems on Attention-Deficit Hyperactivity Disorder," *Journal of the American Academy of Child and Adolescent Psychiatry* 36 (1997): 1715–1725.

## Things Teens with ADHD Can Do to Help Themselves

If you know you have ADHD, or if you find yourself having a hard time concentrating, there are several things you can do to help yourself. These helpful tips are adapted from [kidshealth.org](http://kidshealth.org):

**Sit at the front of the class**, or away from friends you are tempted to talk to.

**Tell your teachers or other adults** you work with about your ADHD—they can be more helpful if they know.

**Tell your friends about your ADHD.** Keeping your friends informed about ADHD may help them understand you better.

**Stay organized.** Keep a homework journal and schedule your time each day.

**Exercise.** Take breaks to do physical activities during school breaks and while doing homework.

**Practice relaxation techniques** or learn meditation.

**Remember the things you do well:** give yourself credit and don't get too down on yourself.

## Dealing with Teens Who Have Oppositional Defiant Disorder

**Choose your battles.** Teens with oppositional defiant disorder may want to break rules and engage in power struggles. Determine the things you are not willing to compromise on and set clear limits regarding them.

**See the positives.** What is he doing well? What are his positive qualities? Look for positives and praise the teen for those things. Someone with ODD gets a lot of feedback about what he does wrong—let him know when you appreciate the positive too!

**If you are getting frustrated or angry, take a break or a time-out.**

Let the teen know you need a minute or two before you can finish the discussion, and walk away from the situation for a moment. Not only will you avoid blowing up or saying something you regret, but you also model a good anger management skill.

**Take care of yourself.** A teen with ODD can be overwhelming to deal with at times. Schedule adult time away from the youth you work with so you can renew your energy.