

Teachers lack the training to help children with ADHD, new poll finds

- **Almost half of teachers polled have not been trained to teach children and young people with ADHD**
 - **Two-thirds of teachers worry that children with ADHD face exclusion**
 - **One in five would not refer a child believed to suffer with ADHD**

Almost half of teachers have not been trained to teach children with Attention Deficit Hyperactivity Disorder (ADHD), despite the Government prioritising mental health in young peopleⁱ, according to an independent poll of teachers published todayⁱⁱ.

Most teachers (72%) believe that ADHD – which affects up to 5% of schoolchildrenⁱⁱⁱ – impacts on a child’s life chances, but 42% have not been trained to help these children. Almost two-thirds (65%) of teachers worry about a child with ADHD being excluded from school and over half (58%) are concerned about children with ADHD being bullied, the ComRes poll of 800 primary and secondary teachers found. Overall, 68% of teachers thought that children with ADHD performed worse at school.

ADHD is a neurodevelopmental disorder with symptoms including inattention, impulsivity and hyperactivity.^{iv} It is often diagnosed in childhood but, without appropriate support, can have a serious impact on an individual’s education, work and social life.^v Research has found that 39% of children with ADHD experience exclusion from school.^{vi}

The findings will add to growing fears that ADHD in children is being seriously under-diagnosed, with teachers lacking the knowledge, confidence and skills to help pupils suspected of having the condition. Over half of teachers polled (55%) reported teaching a higher number of children who they suspect may have ADHD than those who have received a confirmed diagnosis.

Only a few weeks ago the National Institute for Health and Care Excellence published its [draft guideline](#) on ADHD^{vii} in which it renewed its call for the Department for Education to provide more education about ADHD for trainee teachers amid concerns that around half of all cases of ADHD in children were undiagnosed.^{viii}

The poll also comes as the Government prepares to publish its long-awaited Green Paper on children’s mental health and the Care Quality Commission continues its review of child and adolescent mental health services.

The findings send out a clear message that teachers need to receive training on common mental health conditions, including ADHD, to help them recognise and manage these in classrooms, and equip them to refer children for further specialist support where appropriate.

Adam Boddison, the Chief Executive of the National Association for Special Educational Needs (NASEN), said:

“These findings confirm what teachers have long been telling us about the need for more professional development so that they can put in place effective provision for children with ADHD in their classrooms. These statistics reveal that while teachers are hugely invested in improving the life chances for children with ADHD, they do not always feel equipped to give them the support they need. I welcome the increased focus on ADHD for trainee teachers and would encourage a similar focus for qualified teachers to improve teachers’ confidence in identifying and meeting the needs of all children.”

Dr Tony Lloyd, the Chief Executive of the ADHD Foundation, said:

“Children with ADHD are being woefully let down. Despite the very best efforts of teachers, there is a fundamental lack of support for children with ADHD which is having a detrimental impact on their life chances. We know that without the right support, children with ADHD are more likely to be excluded and bullied, and are more likely to face unemployment and commit crime later in life. I hope these findings serve as a wake-up call that urgent action is needed to help and support these children to reach their full potential.”

Notes to Editors

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About the poll

ComRes, an independent research agency, was commissioned by Shire Pharmaceuticals Limited to conduct a poll of teachers regarding their views on ADHD in children they have taught. The research was conducted in accordance with MRS Guidelines, the BH&IA Legal & Ethical Guidelines, the ABPI Code of Practice and Data Protection legislation. All information provided is confidential and anonymous.

In total, 803 teachers answered the poll. Of these, there were equal numbers of primary and secondary school teachers spread across the United Kingdom. Different levels of seniority were also polled to ensure an equal spread.

Other findings from the poll included:

- Many of the teachers polled did not recognise some important symptoms of ADHD, for example impulsive behaviour (41% did not recognise) or difficulty with organisation (74%)
- 21% did not agree that ADHD is a mental health condition
- 74% agreed that ADHD is not well recognised or understood within society
- 23% would not refer a child they suspected of having ADHD to a health care professional
- 69% said their school has a good structure in place to support a child/student who has been diagnosed with ADHD

About ADHD

ADHD is a neurodevelopmental disorder characterised by three core symptoms: inattention, impulsivity and hyperactivity. ADHD is caused by structural and functional abnormalities in the brain that have been clearly identified, and these abnormalities vary between individuals.^{ix} Up to 95% of cases are estimated to be caused by genetic factors^x and around one in three people with ADHD have at least one parent with symptoms^{xi}. Delays in diagnosis have been clearly shown to be detrimental to a child's development, exaggerating poor educational, behavioural, and psychological outcomes, and greatly increasing the risk of depression and low self-esteem in the long-term^{xii}.

About Shire Pharmaceuticals

Shire is the leading global biotechnology company focused on serving people with rare diseases and other highly specialised conditions. We strive to develop best-in-class products, many of which are available in more than 100 countries, across core therapeutic areas including Haematology, Immunology, Neuroscience, Ophthalmics, Lysosomal Storage Disorders, Gastrointestinal / Internal Medicine / Endocrine and Hereditary Angioedema; and a growing franchise in Oncology.

Our employees come to work every day with a shared mission: to develop and deliver breakthrough therapies for the hundreds of millions of people in the world affected by rare diseases and other high-need conditions, and who lack effective therapies to live their lives to the fullest.

www.shirepharmaceuticals.co.uk

ⁱ UK Government, 'Prime Minister unveils plans to transform mental health support'. Accessed September 2017 via: <https://www.gov.uk/government/news/prime-minister-unveils-plans-to-transform-mental-health-support>

ⁱⁱ **Link will be available to the poll results on Com Res website**

ⁱⁱⁱ Department of Education, Schools, pupils and their characteristics, January 2016. Accessed September 2017 via:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/552342/SFR20_2016_Main_Text.pdf.

^{iv} National Institute for Mental Health, Attention Deficit Hyperactivity Disorder. Accessed September 2017 via: <https://www.nimh.nih.gov/health/topics/attention-deficit-hyperactivity-disorder-adhd/index.shtml>

^v ADDISS, ADHD: Paying Enough Attention? A research report investigating ADHD in the UK. Accessed September 2017 via: www.addiss.co.uk/payingenoughattention.pdf

^{vi} O'Regan F. Persistent disruptive behaviour and exclusion. *ADHD in Practice*. 2009. 1(1):8-11

^{vii} National Institute for Health and Care Excellence, Attention deficit hyperactivity disorder: diagnosis and management. Accessed September 2017 via: <https://www.nice.org.uk/guidance/GID-CGWAVE0798/documents/short-version-of-draft-guideline>

^{viii} *Daily Telegraph*, 'ADHD being missed in girls because they are not as 'disruptive' Nice warns'. Accessed September 2017 via: <http://www.telegraph.co.uk/science/2017/09/06/adhd-missed-girls-not-disruptive-nice-warns/>

^{ix} Purper-Ouakil D et al. Neurobiology of Attention Deficit/Hyperactivity Disorder. *Pediatr Res* 2011; 69(5): 69R-75R.

^x Blum K et al. Attention-deficit-hyperactivity disorder and reward deficiency syndrome. *Neuropsychiatr Dis Treat* 2008; 4(5): 893-918.

^{xi} Royal College of Psychiatrists. Attention Deficit Hyperactivity Disorder in Adults. Accessed August 2017 via: <http://www.rcpsych.ac.uk/healthadvice/problemsdisorders/adhdinadults.aspx>

^{xii} Young S et al. The experience of receiving a diagnosis and treatment of ADHD in adulthood: a qualitative study of clinically referred patients using interpretative phenomenological analysis. *J Atten Disord*. 2008; 11(4): 493-503.