



UNDERSTANDING AND SUPPORTING ADHD IN SECONDARY SETTINGS.

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What is ADHD?

A neurodevelopmental condition.

Symptomology- Inattention, Impulsivity and Hyperactivity- executive functioning and working memory.

Emotional regulation- developmental delay 2-3 years.

Myth of over-diagnosis.

What is ADHD?

A Attention.

D Deficit? Dysregulation. (hyperfocus)

H Hyperactivity.

D Disorder? Condition.

Impact on educational attainment.

Avon Longitudinal study of 640 boys followed from age 3- 16- led to a 10 point reduction in GCSE scores.

(Washbrook, Propper & Sayal 2015)

COMRES survey of 800 teachers-
October 2017:

55%: Have reported concerns about
possible undiagnosed ADHD.

74% did not know that learners with
ADHD have difficulties with
organisation and planning.

Coping strategies.

The Adolescent brain.

Pushing at the boundaries.

More high risk behaviours – Prefrontal cortex-self-monitoring is developing last.

More extreme emotions.

Seeking out new experiences, risks, sensations-pronounced with ADHD.

Increased self-consciousness, possible feelings of inadequacy, mental health risks.

Challenges of Key Stage 3 and above.....

Higher expectation of independence. More autonomy, less teacher oversight.

Executive functioning skills- the brain's ability to manage thoughts and actions- thinking about goals, consequences for actions, planning, evaluating progress and shifting plans as necessary.

(Russell Barkley.)

More demands on Time. Time management skills.

Study skills- Note taking, test taking, impaired working memory.

More difficult schoolwork, homework.

How does ADHD progress through adolescence?

Depends upon the demands made on the individual by their environment.

Experience of education to date.

Self management or coping strategies learned, mental health, social skills, self-esteem and environmental factors.

ADHD in Adolescents.

Teenagers with ADHD whose bodies are growing and developing similarly to their peers, are doing it at a "younger" emotional level.

Reduction in hyperactivity for some but inattention, impulsiveness remain major difficulties.

ODD traits could develop-(30%- 40%) More parent-teen conflict (Edwards G 2001.)

ADHD in Adolescents.

Non-compliance with medication or erratic use.
Side effects. (weight loss, sleep) Growth deficits.

Difficult peer relationships. Rejection Sensitive
Dysphoria. Parenting. MH issues.

Increased risk of academic failure, school refusal,
expulsion, teenage pregnancy and criminal
behaviour.

Co-morbidity.

The likelihood of a child with ADHD also having:

Learning disability (including dyslexia, dyscalculia, dysgraphia): 46%

Conduct disorder (including ODD): 27%

Anxiety or depression: 32%

Autism spectrum: “significant majority.”

60% of CYP with Tourette’s syndrome have significant ADHD traits.
(Larson 2011)

The six key strategies.

1) Understanding what ADHD is and isn't.

2) Plan around Attentional arousal, Exercise, Reward, Mentoring, Concentration and building Competencies.

3) Support for Executive functioning. Assistive Technology.

4) Interventions to support Emotional Dysregulation.

5) Working with parents.

6) Celebrating Neurodiversity.

Intensive and structured daily exercise- mental health.

Movement reviews.

Attentional activation and arousal. “Look for the hooks,” (attentional arousal) what do you know already, find their questions- this becomes the lesson. Aim for engagement at all times, structure with variety. Movement based learning activities.

Supported reward.

Dopamine- Reward- Motivation- Persistence.

Support for Executive Functioning.

The Environment. Peripheral distraction. Externalisations. *“Externalise what is not happening internally.”*

Tactile resources. Assistive technology. Planning friendly.

Prioritise Working Memory (recall strategies) 3 Rs of memory- Repetition, Rehearsal and Review (Baddeley 2003) and Time Management.

Prioritise and externalise Self management.

Prioritise Talk with Structure. Tannock (2007)

Strategy Instruction. Groves Scott (2011)

Skill	What does it mean?	What does it look like when weak?
Impulse Control	Thinking before acting.	May say inappropriate things and engage in risky behaviour.
Emotional Control	Can describe feelings and keep them in check.	Can over-react and find criticism hard.
Flexible thinking	Can adjust to the unexpected.	Get frustrated when asked about something new or from a different angle.
Working memory	Can keep information in mind.	Trouble remembering instructions, even with supports.
Self monitoring	Can judge how they are doing.	Surprised by a bad mark and get upset.
Planning and prioritising	Can decide upon a goal and can plan to meet it.	Cannot decide what is important for completing a task.
Task initiation	Can take action to get started.	Difficulty starting or where to begin.
Organisation	Can keep track of things physically and mentally.	Lose train of thought as well as possessions.

Pre-reading and whilst reading strategies.

Pre-reading- “Thought-gathering” activities. Attentional arousal.

Multisensory resources, provide general information, scan in advance, previews, story/text maps.

Make predictions, “Reading detectives.”

KWL: K- already known, (key words, sentences) W- want to know, L- add when new information is learned.

Whilst reading- Follow Along Reading. Pairs reading. Echo reading.

“Windowing,” Timelines, Plot charts, Prediction charts, check lists with evidence/ quotes, favourite part graph, character webs.

Reading comprehension strategies.

Externalisations. *“Externalise what is not happening internally.”*

Bullet points.

Graphic organisers (Mind Map) : 1) structured, sequential 2) with specific functions .i.e. compare and contrast explanation.

3 column strategy.

Stop and List (Graham and Harris 2005) - goal setting, organisation built in.

Stop- Think of the purpose (audience, content)

List- Brainstorm, selection, numbering. (link to paragraphing)

9 Memory strategies.

1) ENCOURAGE QUESTIONS AND MAKE LEARNING EXCITING.

Encouraging the learner to ask questions helps ensure he or she is developing a deeper comprehension of the topic. Your response.

2) CREATE RHYMES AND SONGS.

Help the learner make a rhyme, poem, or song from the information he or she is learning. Our brains are wired to remember music and patterns.

3) ENCOURAGE ACTIVE LEARNING.

Have discussions about different topics, asking the learner what he or she thinks. This encourages students to keep the information in their minds for longer periods.

9 Memory strategies.

4) USE VISUAL AIDES.

Create flashcards that include words or images—these can be used for matching exercises or to practise word definitions.

5) HAVE THE LEARNER CHILD MAKE HIS OR HER OWN EXAMPLES.

Connecting material in a meaningful way helps the learner remember the information.

6) CREATE MIND MAPS.

Building connections between words and topics helps young people actively engage with the material and develop a deeper understanding, which is an important part of memory.

7) MAKE A LIST OF KEYWORDS FOR AN IDEA OR SUBJECT.

Create a word list and use it to build associations between each of the words and concepts. The more distinct the associations, the easier they'll be for the learner to remember.

9 Memory strategies.

8) ASK THE LEARNER CHILD TO TEACH YOU

Encourage your child to explain the information he or she is learning to you (or a sibling or friend). Make it a challenge to see how much he or she can remember if appropriate.

9) USE ALL THE SENSES

Use sight, touch, and sound—read aloud, look at pictures, have a conversation, and use props. This helps engage the learner child with the material in more than one way, making it easier to connect with the material.

KEY TAKE AWAYS.

- 1) Whole school approaches to individual support, supporting the symptomology.
- 2) Build learning around the A in ADHD.
- 3) *“How do I feel about myself, living with ADHD?”* Build confidence, resilience, strategies and competencies.
- 4) Raise the profile of ND- celebrate, normalise, challenge.

ADHD Friendly School Award.



The Six ADHD Friendly Schools Pledges.

- 1) To work with the ADHD Foundation and provide a training session on ADHD for your whole staff team.
- 2) Regular opportunities for learners to have access to physical activity during the school day.
- 3) Opportunities for learners to learn and practice self-calming strategies.
- 4) To provide tactile resources for all learners with ADHD.
- 5) Produce a display and an assembly for the whole school/ college celebrating the achievements of people living with ADHD.
- 6) Set up a Parent/ Carers support group.