

# ADHD and School Accommodations

## (Elementary and Secondary Levels)



*Attention deficit disorder with or without hyperactivity (ADHD) is a neurological condition that can lead to problems with regulating thoughts (inattention), movements (restlessness), behaviours (impulsivity) and emotions (emotional hyper-reactivity). ADHD affects from 5% to 8% of children.*

### Impacts of ADHD in School

Students with ADHD often:

- Have difficulty concentrating in class.
- Make careless mistakes.
- Need more time to read texts and to revise their work. This can slow them down.
- Read over instructions too quickly, fail to look over their work and would do much better if they managed to slow down.
- Have difficulty following along with the teacher and lose the thread when reading.
- Have difficulty extracting and synthesizing information.
- Have messy handwriting.
- Take longer to get on task and have problems finishing work on time.
- Hand in late or incomplete assignments.
- Forget their school materials or schoolwork.
- Are unable to keep their schoolbags in order, and their workspaces are so upside down that they misplace school materials or work to be handed in.
- Perform inconsistently in school and are viewed as failing to meet expectations. *Compared with the general population, children / teens with ADHD have significantly more trouble not only with initiating tasks but also with sustaining the mental effort required to finish them. This can confuse their teachers and family members and may come across as a lack of motivation or interest. Some of these children end up getting discouraged and drop out of school. On average, ADHD is associated with one year of academic delay compared with other students with the same potential.*



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**An intervention plan must be developed when ADHD interferes with learning.** As professionals, psychologists, neuropsychologists and physicians can recommend that school accommodations be implemented. It is up to the school team and parents to get together to develop an intervention plan that includes classroom accommodations.

### **ADHD Assessment Process**

While ADHD is not a learning disability in itself, it may affect the learning process. It is important to **differentiate ADHD from a learning disability** because school accommodations, while sometimes similar, are specific to each condition. Learning disabilities, language disorders and motor disorders can affect students' attention capacity and academic performance. When students do not fully understand instructions or information or have difficulty writing, they cannot keep pace in class, they lose focus and they may engage in disruptive behaviour.

A low IQ will decrease students' learning abilities. Such students seem more immature for their age and have more trouble functioning in all the spheres of their lives. Students with high intellectual potential (giftedness) learn faster than the rest of the group and may engage in seemingly hyperactive behaviour to fight off boredom. In addition, these students are at greater risk of dropping out of school if their minds are not stimulated enough.

- *A psychometric assessment is essential in order to identify students' learning disabilities and to test their IQ. Speech therapists can assess language skills, while occupational therapists can assess motor skills.*

Everyone who has difficulty concentrating or who fidgets does not necessarily have ADHD. A clinical diagnostic assessment is performed by a physician who will seek to identify the symptoms specific to ADHD. The clinician then measures the functional impacts of ADHD to decide on the need for treatment and the choice of treatment. It is essential to look for associated problems in order to establish a personalized and effective treatment plan.

- *It is very important to obtain collateral information from observers who know the student well. Parents and teachers provide invaluable insight during the assessment process.*

Neuropsychological tests alone do not help establish a diagnosis. Rather, these tests help to qualify and quantify the cognitive deficits that need to be worked on in therapy and that require the use of coping strategies. These tests can also help confirm or eliminate other possible diagnoses.



## Treatment for ADHD

People who have ADHD do NOT act this way ON PURPOSE. They have a neurobiological deficit affecting the regulation of their executive functions. As a result, they need help in order to adapt their coping strategies and to change their environments to help them compensate for the impacts of ADHD. Medical treatment can be offered in some cases, especially when coping strategies do not alleviate ADHD.

## Applying Effective Coping Strategies

To help understand the impairments related to ADHD, we can compare the information circulating in the brain to a road network. Studies on the brain function of people with ADHD have revealed impaired functioning in the areas responsible for inhibiting or controlling certain behaviours (called “executive functions” in medical jargon, which help people start their cars, put on the brakes, change directions and choose the right of way on the road).

In ADHD, the road communications network appears defective, as if there were no stop lights and road signs along the way and as if the cars had faulty starter and brake systems. Scientists have hypothesized that some of the information transmitters that trigger dopamine and norepinephrine may be impaired.

Treating ADHD starts with confirming the diagnosis and educating people about it. It is essential that people with ADHD, their families, relatives and caregivers, as well as their teachers and the entire school team, have a good understanding of ADHD.

### ➤ Understanding ADHD makes it possible to apply effective personalized coping strategies.

**At home**, parents must become their child’s coach by helping them to organize their living areas, giving them reminders to reduce their forgetfulness and assisting them in planning their daily lives. This is a very demanding job. These coping strategies must be applied every day, given that ADHD is a chronic condition. It is similar to wearing glasses. It is not enough to know where they are. You have to make sure to wear them.

Adapting daily routines is very enabling. Applying them consistently is a daily challenge. The following infosheets provide a few practical ideas for children with ADHD (see the article “ADHD: Tips and Tricks for Young People” in the August 2013 edition of *Le Médecin du Québec*).



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You can also explore the tips provided on these websites: [www.attentiondeficit-info.com](http://www.attentiondeficit-info.com) and [www.cliniquefocus.com](http://www.cliniquefocus.com).



Basic Tips for Helping Children/Teens with ADHD



Attention Strategies with Pictograms



Daily Routines



Tips and Tricks for After-School Time



Tips and Tricks for Homework Time

**In school**, children will also need help on a daily basis. Parents must lobby for their child to ensure that the right accommodations are properly applied. Teachers are in a good position to support and equip children with ADHD. For good school-family collaboration, it is useful to involve a liaison (special education teacher, psychoeducator, psychologist, resource teacher, homeroom teacher) to help with developing the strategies and with applying them on a daily basis while ensuring the open exchange of information.

Here a few **winning strategies for the classroom**:

- Place students with ADHD in the front, near the teacher and other well-focused children.
- Repeat instructions more often and make sure that they fully understand them before they get on task.
- Agree on a discreet sign with students that will bring them back on task if they become distracted or overactive.
- ➔ *Giving distracted students more time will be effective only if the person supervising them closely structures their work (e.g., dividing the task into smaller chunks, giving them breaks between the different steps, and reviewing the task).*
- To provide daily help to younger students who forget their schoolwork or homework, check the contents of their schoolbags, their assigned schoolwork, and the papers they need to take home, and help them with their agendas for planning longer projects.



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- Encourage forgetful or scatter-minded children to always carry around their agendas, watches, supplies and computers (if they have one) in a single place: a child-friendly and ergonomic schoolbag. *The more they are asked to change the contents of their schoolbags or to leave their things in different places, the more likely they will become disorganized. In elementary schools, it is very enabling to assign them a specific shelf or a storage basket.*
- *In more severe cases, it is necessary to develop an intervention plan in order to determine coping strategies for any residual difficulties.*
- *General tasks may need to be adapted according to their level of difficulty.*
- *Dr. Russell Barkley, an internationally renown specialist, reports that it is not effective to have students finish their uncompleted class work at home. In fact, when students get too far behind because of the number of exercises to do, it is often more useful to give them fewer exercises and to make sure that they clearly understand what they are being asked to do.*

Bonita Blazer, PhD, and Dr. Mary-Ann Ager have identified the most effective strategies to use with ADHD students, as reported by teachers, and have grouped them into three types of coping mechanisms (physical, instructional and behavioural). Below is a summary of them (used with the authors' permission):

### **Physical accommodations**

- **Provide a structured environment.**
  - Post schedules on the board.
  - Post classroom rules.
  - Provide preferential seating (near the teacher, between well-focused students, far from distractions).
  - Organize their workspace.
  - Use colour coding for their notebooks, etc.
- **Provide a private work space**
  - A quiet study area
  - An extra seat or table
  - A standing work station
  - A “time out” place



**Provide learning centres**

- Reading corner
- Listening centre
- Hands-on work area

**Instructional accommodations**

**Repeat and simplify instructions**

- Keep oral instructions clear and simple.
- Give examples.
- Regularly ask the child to repeat back the instructions.
- Make eye contact.
- Demonstrate how to approach the task.

**Provide written instructions**

- On the board
- On a worksheet
- Train students to write down homework assignments in their notebooks.

**Repeat and simplify instructions**

- Keep oral instructions clear and simple.
- Give examples.
- Regularly ask the child to repeat back the instructions.
- Make eye contact.
- Demonstrate how to approach the task.

**Use educational technology**

- Tape recorder
- Tape-recorded reading and homework assignments
- Computer or laptop
- Multisensory manipulation tools

**Modify test procedures**

- Distraction-free room
- Extra time
- Extra credit options (e.g., creating and answering their own questions)



## Behavioural accommodations

- ❑ **Use positive reinforcement**
  - Positive oral or written feedback
  - Reward and incentive systems
  - Assign tasks that can be successfully achieved
  - Private signals to refocus the student
  - Role playing situations
  - Weekly one-on-one time
  
- ❑ **Be consistent**
  - With rewards and consequences
  - With academic expectations
  
- ❑ **Promote leadership and accountability**
  - Assign tasks they can perform well
  - Name them as student of the week/month
  - Give them responsibilities
  
- ❑ **Specify goals and provide incentives as reinforcement**
  - Provide concrete goals and a timetable
  - Develop a reward system
  - Develop incentive charts for work and behaviour
  - Use student contracts
  
- ❑ **Communicate with parents and other teachers**
  - Use letters, meetings, phone calls, e-mail
  - Give progress reports
  - Use school staff members as support and find an ally
  - Arrange conference meetings

- It is essential to remember that these strategies must be applied on a daily basis and that easing up on them is associated with the heavy rebound of the child's difficulties.
  
- These are coping strategies: they do not cure ADHD but allow children to better develop their potential by increasing their ABILITY to do things.



## ADHD Medication and School

When ADHD symptoms remain an issue, medication may be considered. Following up on treatment effectiveness and side effects requires time and involves collecting information from the person affected, their families and helpers (such as the school team).

Medication acts a little like a pair of biological eyeglasses by improving the brain's ability to focus. Just as eyeglasses can help people make out words but cannot teach them to read, ADHD medication can help reduce symptoms but does not in itself allow students to make up for academic delays when ADHD interferes with learning and it cannot correct an underlying learning disability.

**N.B.: Academic performance cannot be used as an indicator to detect ADHD or to prove the effectiveness of medication.**

Standard pharmacotherapy consists of non-stimulants or else amphetamine-based or methylphenidate-based psychostimulants.

The doses must be gradually adjusted under medical supervision. When the right dose has been achieved, clinical response occurs within a few days for psychostimulants and within one to two weeks for non-stimulants.

- For further information, read the infosheets in the TIPS section: [www.attentiondeficit-info.com](http://www.attentiondeficit-info.com) and [www.cliniquefocus.com](http://www.cliniquefocus.com).



ADHD: Medication



Management of the Side Effects of ADHD Medication

Some products are short-acting; others act all day. When children with ADHD take a specific medication, it is important to try to coordinate the daily periods when it is most effective with those when ADHD has a functional impact. The following shows the average duration of action of selected ADHD medications:

Medication	Duration of action
Psychostimulants	
Dexedrine tablets and Ritalin	3 to 4 hours
Dexedrine spansules	6 to 8 hours
Biphentin, Concerta, AdderallXR	10 to 12 hours
Vyvanse	13 to 14 hours
Non-stimulants	
Strattera	Effects lasting up to 24 hours
Intuniv XR	Effects lasting up to 24 hours

The medications listed above are from 50% to 70% effective for ADHD. These medications are generally well tolerated. However, all medications may cause side effects. Doctors and pharmacists are the best ones to answer any questions you may have.

- *Coping strategies are often easier to apply when the medication is effective. They work in synergy to obtain an overall clinical effect. General tasks may need to be adapted according to the level of difficulty.*
- *Taking medication does not mean that coping strategies should be cast aside. These must be maintained as long as required to compensate for children's functional impairments. Once the symptoms are less intense, children with ADHD can focus more on developing their potential.*

In Québec, people with ADHD can receive support and information from PANDA (Personnes Aptes à Négocier avec le Déficit d'Attention) and from the AQETA (Association Québécoise des Troubles d'Apprentissage).

You can find a host of practical tips and suggestions at [www.cliniquefocus.ca](http://www.cliniquefocus.ca) and [www.attentiondeficit-info.com](http://www.attentiondeficit-info.com).