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ABSTRACT

This parent guide provides information concerning the diagnosis of attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD), explains how parents can be involved in diagnosis, and examines possible concerns of parents. Two case studies are included. Possible signs of ADD or ADHD are identified, as are additional criteria pertaining to how long the symptoms have persisted, the severity of symptoms, and the existence of school or relationship problems. Steps that may be taken if ADD or ADHD are suspected include: discussing concerns with the teacher, continue observing the child, trying interventions, and requesting a professional evaluation for the child. Key points to a comprehensive evaluation and helpful input parents can provide are addressed, along with the subsequent written report and conference explaining the findings. Possible interventions that may be recommended for the child who is diagnosed with these disorders are noted, and the parent is advised to keep records. Problems that may occur when parents and school disagree about the child's problem(s) and appropriate services are also addressed, and eight recommendations for parents whose child is diagnosed with ADD or ADHD are offered. (SW)

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# DOES MY CHILD HAVE ATTENTION DEFICIT DISORDER?

## How Parents Can Help in Diagnosis

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Help in Diagnosis**

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A total of 2,000 copies of this booklet were printed and distributed to ancillary staff in the local districts throughout Oakland County. Additional copies may be obtained by contacting Oakland Schools Psychology and Learning Clinic (810-858-1951). This cost for copies of this document are:

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## **DOES MY CHILD HAVE ATTENTION DEFICIT DISORDER?**

### **How Parents Can Help in Diagnosis**

If your son or daughter is having difficulties at home or in school with the following type of behaviors, it may be a sign that they have an attention deficit disorder:

- doesn't maintain attention as well as most classmates
- breaks rules at home and/or at school
- doesn't complete tasks or homework
- fidgets a lot, doesn't stay in seat
- acts without thinking, has lots of "accidents"
- "gets on everybody's nerves"
- doesn't get along well with other children
- poor organization of materials and time
- always slow to get ready and late to arrive
- gets excited and "out of control"
- uses poor judgment — always gets in trouble
- mind seems to wander
- gets "wound up" and won't stop
- doesn't mind well

These types of behaviors are common in most children to some degree. These behaviors also change in frequency and how they show up according to the age of the child. How can we tell if the behaviors are just part of being a child or are signs of Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD) without Hyperactivity? There are three questions to answer to see if the diagnosis of ADHD or ADD should be considered.

- 1) Have the behaviors occurred over a long period of time?
- 2) Are the behaviors considerably more frequent and severe than those shown by other children of the same age and sex? (i.e., an eight-year-old boy compared to another eight-year-old boy or a nine-year-old girl to another nine-year-old girl.)
- 3) Is the child having significant difficulty with performance at school and/or relationships with peers, parents and/or teachers?

If your child shows some of the types of behaviors listed and you answered yes to all of the above questions, the diagnosis of ADHD or ADD could be seriously considered.

**If you suspect that your child may have ADHD or ADD, what can you do?**

### **STEP # 1**

Contact your child's teacher in order to discuss your concerns regarding your child. In most cases, ADHD or ADD type behaviors will be present in the classroom if they are observed at home. There are some cases, however, where the behaviors are not severe at school and the teacher will not express concern even though the parents are at their wits' end.

### **Case Study # 1**

Joe is a bright nine-year-old who for years has been difficult for his parents to manage. In poor health as an infant, he was an irritable and demanding young child. His overly concerned parents always comforted him

and gave in to his demands. Joe has a long history of ADHD symptoms at home including over-activity, breaking rules, non-completion of tasks, being disorganized and demanding to have things his way. At school, Joe has had excellent teachers who have consistently shown him how to function in a group setting where rules are clear and always enforced in a fair and consistent manner. While Joe has his share of problems at school, his teachers have not viewed him as having severe problems either in terms of behavior or academic performance.

***Comment:***

In this case, it appears that Joe may have a mild to moderate form of ADHD that has responded well to excellent management techniques at school. Behavior and management problems are present at home. These problems appear to be more prevalent at home due in part to the management style of the parents. While a diagnosis of ADHD could occur in this instance, the primary problems appear in the home setting.

Joe is not typical of most children with ADHD. Behaviors that interfere with academic performance are usually more severe at school than at home. This is often due to the demands present at school including, for example:

- staying seated
- keeping quiet
- attending and concentrating on material that may have little interest for the child
- concentrating when there are many distractions in the room
- dealing with the social pressures in a large group of peers

**After you meet with the teacher to discuss your concerns, a decision should be made among choices like the following:**

- 1) Continue to observe your child's behavior and meet again to discuss possible actions.
- 2) Try interventions at home and/or school and meet later to discuss their effect.
- 3) Request an evaluation of possible ADHD or ADD by qualified personnel.

Often parents are first informed of the possibility that their child may have ADHD or ADD by a member of the school staff. Usually the parent is not surprised by the school staff's concern since the child is likely to display similar behaviors at home. Sometimes, however, the parents are surprised since they have not been concerned about the behavior at home.

### **Case Study #2**

Sue is an eight-year-old only child whose parents spend large amounts of time with her. Both parents are energetic, creative people who delight in Sue's boundless energy and enthusiasm. While they sometimes wish Sue would slow down so they could rest, they enjoy the spark and enthusiasm she brings to each new activity. They have noticed that Sue never stays with anything for very long, but they have no difficulty finding new things to engage her. When Sue's teacher reported to the parents that despite her high IQ she was not doing well with her schoolwork, they were surprised. The teacher reported that in the classroom Sue was restless, fidgety and often bothered her classmates. She seemed to have difficulty attending, was not completing assignments and often broke classroom rules. The teacher questioned whether Sue was a child with ADHD.



**Comment:**

While most children show more similarity between home and school behavior, cases like Sue's are not rare. She appears to be a child with mild to moderate attentional problems whose parents have accommodated her behaviors and, in fact, enjoy her spontaneity, liveliness and unpredictable quality. In the structured school setting, Sue's behavior is aggravated by the control necessary in a large classroom. She finds it difficult to sit quietly and is unable to attend and concentrate like her classmates. A diagnosis of ADHD could be appropriate, leading to a plan to modify the classroom environment and provide extra help and support to Sue. If an initial conference with your child's teacher leads to an agreement to seek an evaluation for ADHD or ADD, you will be a key person in providing the necessary information for an accurate evaluation.

Remember, ADHD or ADD is diagnosed primarily on the basis of observable behavior and developmental history. The following procedures, while helpful to the diagnosis, cannot be the only methods employed to make the diagnosis.

- psychological tests
- medical tests
- an interview of the child in an office.

**The key elements to an ADHD or ADD diagnosis are the following:**

- current observations of behavior in a variety of settings
- a detailed history of typical behavior starting from infancy.

Since current and past behavior are the key elements in the diagnosis, the information you provide, as the parent, will be vital to the diagnosis. Usually the current and former teachers are the other important sources of diagnostic information. Sometimes other persons who know the child well (or in the case of older children, self-reports) can also provide useful information.

### **Key points to look for in a comprehensive evaluation:**

- Are school mental health professionals (usually a school psychologist or school social worker) involved in the diagnosis?
- Were rating scales of behavior used with you and the classroom teacher?
- Has your child's physician ruled out physical factors that could cause behaviors that look like ADHD or ADD?
- Have you been interviewed by a member of the evaluation team?
- Did the evaluation team consider other reasons why behaviors that look like ADHD or ADD might be occurring (emotional problems, social or cultural differences, upsetting events that occurred recently, school expectations beyond the student's abilities).

As a key informant in the evaluation, your information will help ensure an accurate outcome to the evaluation.

**If working with the professionals doing the evaluation you can be most helpful by doing the following:**

- Gather materials or seek information that will help you recall your child's developmental and behavior history. This might include reviewing birth records, a "baby book," health records, or talking with other people who observed your child during prior years.
- Try to report information in an objective manner. Avoid any temptation to form a strong prior opinion about whether or not your child has ADHD or ADD as this will tend to bias your reporting of facts.
- Discuss confidentiality issues with the professional doing the evaluation. When you are comfortable that sensitive material will be held confidential, be open about sharing information you feel was significant in its impact on your child's behavior. Mental health workers are skilled at interpreting information but need your help in gathering the important information.
- Complete background information and rating forms carefully and thoroughly. The information you provide on these forms is very important to the evaluation.

When the evaluation is completed, the evaluation team will prepare a written report. You will be able to obtain a copy of the report. If you choose to keep a copy of the

report it should be handled as confidential material and kept in a private, secure place. In addition to the written report there will be a conference with the evaluation team and other concerned school personnel. At this conference the evaluation team will interpret their findings to you and you will have a chance to ask any questions you might have. **Make sure at this meeting that you understand the team's findings and recommendations.**

**At the conclusion of the conference you should be able to answer "yes" to the following questions:**

- 1) Is it clear to you whether or not the evaluation team has diagnosed your child as having ADHD or ADD?
- 2) Do you understand why the evaluation team has reached their conclusion?
- 3) Do you know how your child's behaviors and characteristics are affecting his performance at school?
- 4) Can you describe what changes will be made in the school program to meet your child's needs?
- 5) Are you aware of what you are expected to do to assist school personnel in their attempts to work effectively with your child?

If your child is diagnosed as having ADHD or ADD, school personnel can recommend a wide variety of changes in the school program. These changes can range from special education support services (in severe cases

where educational performance is significantly impaired) to minor adaptations in the regular school program. **It is helpful to your child if you understand and support the school's program.** Work closely with school personnel to achieve mutual understanding and acceptance of an intervention plan. This will make for good school/home cooperation, an important factor for the intervention program to succeed. If you have questions or concerns about the school's program do not hesitate to discuss them with the classroom teacher.

Sometimes the evaluation team will recommend school-based counseling or private counseling for your child and your family. Respond to this recommendation thoughtfully, keeping in mind that features like low self-concept, poor peer relationships, conflict with authority figures and emotional lability often occur simultaneously with and are apparently related to ADHD or ADD. Counseling and therapy are methods through which you and your child can learn to accommodate to this condition and avoid some of the unpleasant consequences that can occur as a result of ADHD or ADD. Your cooperation in seeking counseling for your child and guidance for yourself is important to the success of the overall intervention plan.

The evaluation team may recommend that you take your child to a physician for an evaluation of whether medication is indicated to treat the symptoms of ADHD or ADD. Most parents are rightfully very concerned about having their child on medication for this purpose. If such a suggestion is made, you should ask the team members to describe in writing what behaviors or characteristics they observe that might respond favorably to medication. This information, as well as the written report of the comprehensive evaluation, should be

provided to the physician if you agree to seek a medical consultation. Refer to our companion booklet *A Parent Guide to Understanding the Effects of Ritalin* for a further discussion of the specific medication Ritalin that is often prescribed for individuals with ADHD or ADD.

If your child is identified as having ADHD or ADD and a program of interventions is tried, it is important that you start a file to keep records.

Things you can keep in this file include the following:

- 1) Copies of written reports produced by the school. This would include evaluation reports, records of meetings, descriptions of intervention plans, report cards, progress notes and other correspondence.
- 2) Medical reports.
- 3) A dated written record of significant events including the timing of various interventions and significant changes in school performance or behavior.

Work closely with school personnel to document changes that occur in your child's behavior and school performance. This is important since this data is the primary basis to judge the effectiveness of various interventions, including medication. Changes in behavior and performance are best documented through dated material such as rating forms, school

papers or progress notes. Communicate findings on a regular basis to appropriate school personnel and the physician (if relevant) so that changes or modifications can be made in intervention programs. There are occasions when parents and school personnel are in disagreement regarding whether a student qualifies for educational accommodations and interventions based on ADHD or ADD. Such disagreement can occur in two ways:

- 1) The school personnel assert the student has ADHD or ADD and the parents disagree.
- 2) Parents think their child has ADHD or ADD, but the school personnel do not agree.

In either of these instances the parent can seek an independent evaluation to address the diagnosis of ADHD or ADD. Usually school personnel will not try to impose services on a student whose parent disputes the presence of ADHD or ADD. However, as a parent, you should carefully assess your position if the school personnel have suggested that your child has ADHD or ADD and you disagree. It may be advisable in this instance to seek an independent evaluation even if school personnel do not press the issue. The fact that the diagnosis was made should alert you that there are significant problems in the school setting. Whether the problems do or don't stem from ADHD or ADD, some interventions may be necessary before things will go better for your child.

If you feel your child has ADHD or ADD but the school district does not agree, you may seek an independent evaluation. If you are involved in such a disagreement, keep in mind that well-intentioned people can disagree

on many matters but still work together cooperatively. The school personnel and parents share a common interest — the welfare of students. By working together, even when there are areas of disagreement, many positive things can be accomplished.

If you seek an independent evaluation, work with school personnel to locate an evaluation resource that is not beholden to either the school district or parents. By selecting an independent resource respected by both parties, it is much more likely that the evaluation results will lead to agreement regarding the diagnosis and cooperation in carrying out recommendations.

**If your child is diagnosed as having ADHD or ADD, you should consider doing the following things:**

- 1) Continue to learn about ADHD and ADD by reading, talking to professionals in the field and talking with other parents. Be cautious about what you read and hear on talk shows and in popular magazines. These resources often must have stories with a "shock value" to maintain audience interest and therefore they seek out sensational stories with little or no attempt to confirm facts. You shouldn't buy a product based on unsubstantiated testimony — you ought to check it out by reading an unbiased resource such as *Consumer's Report*. Similarly, if you have questions about ADHD or ADD, seek out independent, unbiased research conducted by persons with no particular self-interest or "ax to grind."



- 2) Maintain a file with background history information, pertinent medical records, evaluation reports, school records and samples of your child's schoolwork.
- 3) Meet on a regular basis with school personnel to discuss your child's progress and the status of interventions that have been implemented at the school.
- 4) If your child is on medication, carefully monitor the use of the medication to see that it is being used as prescribed. Gather information from school observations and your own systematic records to better inform the physician about the apparent effects of the medication. Meet regularly with the physician to review the effectiveness of the medication and monitor any side effects.
- 5) Each time a new teacher enters your child's life, review with the new teacher the classroom implications of your child's condition.
- 6) Make sure that your child has an age-appropriate understanding of their condition. Often this is best accomplished by a joint meeting with a knowledgeable professional, the child and the parents.
- 7) Consider joining a parent support group where you can learn from other parents, share experiences and gain emotional support.
- 8) Be realistic about your child's condition. While ADHD or ADD is a significant disability, it should not become the focus of how you, your child or others view your child. Develop a realistic

understanding of the consequences of ADHD or ADD and resist the temptation to use the condition to explain all aspects of your child's behavior. Focus on your child's abilities and strengths and view the ADHD or ADD as just another of life's hurdles to overcome. Be confident yourself and instill confidence in your child so that he/she will feel that, with your support, he/she will meet life's challenges successfully:

## SUGGESTED READINGS

- Barkley, R.A. (1990). *Attention-Deficit Hyperactivity Disorder: A Handbook for Diagnosis and Treatment*. New York, Guilford Press.
- DuPaul, G.J. and Stoner, G. (1994). *ADHD in the Schools: Assessment and Intervention Strategies*. New York, Guilford Press.
- Goldstein, S. and Goldstein, M. (1989). *A Parent's Guide to Attention Deficit Hyperactivity Disorder in Children*. The Neurology, Learning, and Behavior Center, 670 East , Suite 100, Salt Lake City, Utah 84107.
- Parker, H. (1992). *The ADD Hyperactivity Handbook for Schools*. Impact Publications, Inc. 300 NW 70th Avenue, Plantation, Florida 33317 (305) 792-8944.

If you should have additional questions or concerns regarding educational and academic issues, please contact your local district school psychologist, school social worker, or school counselor.

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