

Living with Hyperactive Children

There has been a great deal of attention over the last several years regarding children with "Attention Deficit Hyperactivity Disorder". It has been estimated that approximately five percent of American children have ADHD, with boys far outnumbering girls. Children with this disorder exhibit some of the following behaviors:

1. Often fidgets with hands or feet or squirms in their seat.
2. Has difficulty remaining seated when required to do so.
3. Is easily distracted by extraneous stimuli
4. Has difficulty awaiting turn in a game or group situation.
5. Often blurts out answers to questions before they have been completed.
6. Has difficulty following through on instructions from others.
7. Has difficulty sustaining attention in tasks or play activities.
8. Often shifts from one uncompleted activity to another.
9. Has difficulty playing quietly.
10. Often talks excessively.
11. Often interrupts or intrudes on others.
12. Often shifts from one uncompleted activity to another.
13. Often loses things necessary for tasks or activities.
14. Often engages in physically dangerous activities.

These behaviors are usually present prior to age seven. All children exhibit some of these behaviors from time to time, though with ADHD children they will consistently demonstrate difficulties with both hyperactive behavior and difficulties sustaining attention. Parents of ADHD children often report disruptive behavior, non-compliance and failure of their children to pay attention as primary complaints. These children seem unable rather than merely unwilling to learn from their mistakes and to easily control their behavior. Socially it is not uncommon for ADHD children to be described as bossy, selfish and immature in their social interaction. They usually find more success in playing with children younger than themselves so their dominant behavior can be more readily accepted by that group.

The causes of ADHD are unclear, but probably have a neurological basis. Parents often feel a good deal of guilt believing that they have caused their child's difficulties. A diagnosis of ADHD requires careful consideration by both physician and psychologist. Frequently ADHD children are described as having a high threshold for pain, cry excessively during the first year or two of life, run instead of walk, have irregular sleep patterns, have difficulty being comforted and are extremely active.

Treatment for ADHD children sometimes involves the use of medication. Three fourths of the children with this diagnosis generally respond favorably to medication. That is, they seem able to sustain attention longer and are less restless and fidgety. Behavioral management programs both at home and school have also been very

effective. Some children with ADHD also have learning disabilities and need special instruction at school. Regardless of whether medication is used, consistency in approach, structure in the environment, and supervision on a continual basis are required to help the ADHD child manage his or her own behavior.

There are numerous books available on ADHD. If you feel your child may have some of the problems described here, do some reading, talk with other parents and your child's pediatrician as well as teachers. Additionally therapy is available to help you work out a behavior management program at home and to coordinate this program with your child's school.

Though ADHD is a serious problem, there is help available and it can be managed.

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Return to [Resources Page](#)