

ADHD

Resources

- ADHD-Building Academic Success
- Suggested Classroom Interventions for Children with ADD and Learning Disabilities
- Lazy Kid or Executive Dysfunction?
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ADHD: Building Academic Success

By: Appalachia Educational Laboratory (1997)

If human potential were determined at birth, we would have little need for schools. However, we know that environment plays a powerful role in individual growth. We create schools to develop that potential and broaden opportunity.

As schools attempt to help all students meet new goals for learning set by state and national standards, education policy makers, administrators, and teachers must determine how to create learning environments that nurture those students who fail to learn in traditional school settings. This brief will examine how the mismatch between school environments and children with ADHD contributes to school failure, and will review suggested changes in policy and practice that can help schools become places of growth and development for all students, including those with ADHD.

ADHD and school failure

For children with ADHD, "school too often starts with failure ... and goes downhill from there."¹ With failure rates double to triple those of other children, about 50 percent repeat a grade by adolescence.² Thirty-five percent eventually drop out of school and only 5 percent complete college.³ One study found that, by age eleven, 80 percent were at least two years behind in reading, writing, spelling, and math.⁴ Even children with normal to superior intelligence show "chronic and severe underachievement."⁵

Unusually high suspension and expulsion rates further compromise school achievement and completion. A long-term study found that 46 percent of children with ADHD had been suspended and 11 percent had been expelled.⁶ Taken together, expulsion and dropout rates approach 50 percent – an alarming statistic, since children with ADHD compose up to seven percent of the population.⁷

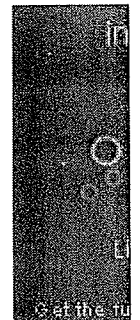
The three main characteristics of ADHD – inattention, impulsivity, and hyperactivity – can interfere with academic performance. Children with ADHD pay attention to what is novel or stimulating and may have trouble focusing on important information rather than on extraneous details or background noise. They may be unable to sustain attention, especially during repetitious, rote, or prolonged tasks, or in situations of decreasing novelty. Hyperactivity – motor and verbal – will probably be seen as misbehavior when children are expected to sit quietly. Finally, impulsivity causes difficulty in any task requiring a delay: raising hands to answer questions, reading or listening to directions, asking questions to clarify information, planning, and organizing.⁸

Deficiencies in executive brain functions tied to motivation, analysis, goal-setting, and problem-solving can seriously impair

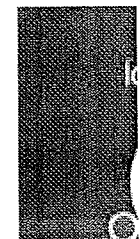
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Schools' response to academic failure

Well-meaning programs to help failing children often consist of trying to change the child to fit the school environment. They may pull children out of the classroom, apply some sort of remedial strategy, then attempt to reinsert them successfully into the original situation and setting. Or schools retain children in a grade with hopes that they will catch up to the prescribed learning sequence the next time around.

While a few intervention programs have demonstrated success (e.g., Robert Slavin's Success for All), many remedial strategies are ineffective.²¹ Too often, they assume that the child is the problem. This one-sided view not only isolates the child from the context of the learning environment, but it also precludes the exploration of environment-based solutions.¹⁴ Certainly, many frustrated teachers have experienced environmental constraints (limited time, lack of resources, and too many other students) when attempting to meet individual learning needs. Reeve warns, "unless the school environment is altered to make it match the unique constellation of needs presented by students with AD[H]D, negative outcomes will continue."¹ Surely, schools should consider both the learner and the learning environment when planning intervention strategies.

School-child relationships: a transactional model

A transactional model of school-child relationships shifts the main work of educators away from correcting deficiencies in special-needs and at-risk children to accommodating weaknesses while "designing instructional environments that match [their] strengths."¹⁴ This model raises the issue of schools' readiness to teach children with diverse needs, as well as children's readiness to learn.¹⁸

A transactional, two-way model of school performance encourages schools and families to meet halfway to share responsibility for children's learning. Through collaboration, schools, families, and community support systems can improve the fit between children and school environments to increase the probability of success.

Multimodal treatment: sharing responsibility for learning

Experts recommend multi-modal treatment for ADHD – a combination of academic, behavioral, and medical interventions to help children succeed at home and school. Multimodal treatment requires teamwork and assumes shared responsibility for school success. It involves a child's parents or caretakers, health-care professionals, and school personnel – teachers, administrators, special educators, and school psychologists – working together to design effective intervention plans that address individual weaknesses and build on strengths.

Interventions may include giving information and training to parents and teachers about ADHD, behavior modification techniques, counseling, social skills training, medication, and classroom accommodations. To meet schools halfway, families can seek information, training, and counseling, as well as possible drug therapy for the child; and they can communicate and

average – they do not address learning problems. Modified behaviors, moreover, do not automatically generalize to other settings. Research has shown the following types of behavior modification to be effective for students with ADHD.²³

- Positive reinforcement the place to start when developing plans ranges from frequent positive feedback (praise) to token reward systems, in which children can earn treats and privileges for specified behavior.
- Behavior reduction strategies negative feedback; short, immediate reprimands; and redirection effectively reduce undesirable behaviors and should be used along with positive reinforcement.
- Response cost, which combines positive reinforcement (earning tokens that can be exchanged for privileges or rewards) and punishment (deducting tokens for undesirable behavior), can increase on-task behavior and work completion.
- Correspondence training rewards children for matching their words (intentions) to actions: they promise to complete a task, then do it; or do the task, then report it.²⁴

Modifying test delivery

Children with ADHD may have problems with executive function and written language, so they may better demonstrate knowledge of material through oral testing, performance testing, or other alternative demonstrations of accomplishment. Students can be provided extra time to complete tests or quiet testing areas away from distractions.

Tailoring homework

Children with ADHD may benefit from modified or shorter assignments. Even older students may need help managing their time and keeping track of assignments, textbooks, and other instructional materials. Daily assignment sheets that parents can monitor at home, subject dividers and pencil pouches for notebooks, an extra set of textbooks to keep at home, and assistance planning and executing long-term assignments can boost homework completion.

Reducing class size

Barkley¹⁰ recommends small classes for children with ADHD. He says that "12-15 is ideal, while 30-40 is unmanageable." Other strategies for lowering the pupil-adult ratio include using classroom aides, team teaching with resource personnel, and enlisting parent volunteers.

One-on-one tutorials

Class-wide peer tutoring – which pairs students for drill-and-practice activities – has been shown to be effective for children with ADHD. It provides them the immediate feedback they need, while reducing demands on teachers' time.²⁵

Since fostering self-esteem is critical to their treatment, children with ADHD need to develop and recognize their increasing

dropping out, and rebellious behavior. To be intrinsically motivating to any student, curricula need to be "interesting, challenging, and providing opportunities for initiative and creative effort."²¹ Many observers echo these sentiments regarding children with ADHD. Barkley³⁰ says that interesting, challenging, and meaningful experiences are more apt to keep children with ADHD motivated and engaged. Since students with ADHD function in the realm of the immediate, he says, they may not work for delayed rewards such as grades: the reward must be in the task itself.³¹

Weaver says that offering children with ADHD "meaningful learning experiences" helps them focus and concentrate.¹⁷ Her research has shown that children with ADHD respond well to a meaningful, whole-language curriculum that "offers ... choice and ownership, and that supports learners in taking more responsibility for their own learning and their behavior." She then supplies organizational and other support to individual students as needed.

Kohn¹⁹ favors a constructivist, student-centered curriculum that allows students to choose alternative assignments, connects learning to real-life experiences, and embeds less interesting tasks in more appealing activities. A curriculum that emphasizes collaboration, content, and choice, he says, internally motivates students to learn and reduces the need for rewards and punishments to stimulate interest and control behavior.

- Collaboration promotes learning through active interaction with information and other people. An increasingly popular form of classroom collaboration cooperative learning has been shown to engage students and increase achievement. Experts^{16,17,32} recommend cooperative learning for students with ADHD.
- Content, in Kohn's discussion, includes both what is taught and how it is taught. Kohn believes that many school tasks are "not worth doing" because they overemphasize rote memorization, discourage creativity, and fragment information. This combination can be disastrous for children with ADHD, who, because of their biologically driven need for stimulation, have little tolerance for boredom.³² Instead, he supports a curriculum that relates topics to students' lives and concerns, involves children through inquiry and meaningful experiences, and teaches responsibility and problem-solving through real-life applications.
- Choice, or self-determination, is critically linked to motivation. Kohn, like Weaver, advocates involving children in substantial decisions about their learning, from a choice of reading and writing assignments to alternative ways to demonstrate learning.

To promote interest and increase the social and economic relevance of curricula, policy-makers have proposed incorporating real-world experiences into the curriculum, integrating vocational and academic instruction, and developing school-to-work programs and apprenticeships.²¹

Instruction

Research has shown that instructional strategies from the

will allow them to participate.³⁹ Eligible students with ADHD are currently provided modifications such as extra time, separate testing areas, and the use of calculators on college entrance and General Equivalency Diploma (GED) examinations.

Organization

Part of the misfit between schools and at-risk children may result from mixing economics and education--using free market values of competition and survival of the fittest (or "smartest")⁴⁰ to achieve the mutually exclusive goal of universal excellence. As in many Olympic events, classroom time is one variable that separates the winners from the losers.

As the National Education Commission on Time and Learning⁴¹ reports, time "governs how material is presented to students and the opportunity they have to comprehend and master it," so that "the boundaries of student growth are defined by schedules for bells, buses, and vacations instead of standards for students and learning." The Commission believes that "fixing [this] design flaw" opens the door for needed reforms: accommodating young children at different levels of readiness; radically changing teaching and learning by encouraging practices like block scheduling, team teaching, and integrating disciplines; ending the practice of grouping children by age; adjusting classrooms to meet the individual student's needs and learning styles - "offering more frequent breaks, providing more opportunities for hands-on learning, encouraging group work"; and allowing more individualized instruction.

Research shows that schools' scheduling practices affect students' attention and activity levels. Children's ability to remain on task and their need for breaks naturally varies according to age and developmental level. Organizing instruction and breaks around students' developmental needs could help maximize concentration, reduce inappropriate activity, and improve time on task for all children, including those with ADHD.¹⁴

Lack of time in school also limits teachers' opportunities for planning, collaboration with others--including peers, parents, and support personnel--and staff development. Multimodal treatment for students with ADHD requires that teachers have this extra time within the school day, yet in reality, few do.

Organizational constraints influence other decisions about teaching and learning that adversely affect children with ADHD. For instance, class size may help determine choice of teaching methods and learning activities, as anyone brave enough to do anything with 25-30 children can imagine. Understandably, teachers may choose to assign independent seat work rather than attempt collaborative, hand-on activities. They make this choice as much for management and crowd control as for educational benefit, of course, but a preponderance of seat work exacerbates the symptoms of students with ADHD and does little to promote genuine learning for anyone.

Policy makers have proposed new organizational strategies to increase support for at-risk students. To combat impersonalization at the secondary level caused by large schools and frequent class changes, they have created smaller academic units within large schools ("schools within schools") and

expectations. We need to take a hard look at how we can reach and teach^{>43} them where they are.

Endnotes


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Suggested Classroom Interventions For Children With ADD & Learning Disabilities

Children with attention deficit disorder and/or learning disabilities can be a challenge for any classroom teacher. This page provides some practical suggestions that can be used in the regular classroom as well as the special education classroom. By looking through a given list of interventions, a teacher will be able to select one or more strategies that are suited to a specific child in a specific environment.

- [Ideas for Attention Deficit Children](#)
- [Strategies for Cognitively Impulsive Children](#)
- [Suggested Classroom Accommodations for Specific Behaviors](#)
- [Books and Materials For Helping Kids & Teens With ADHD](#)
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Ideas for Attention Deficit Children

Children whose attention seems to wander or who never seem to "be with" the rest of the class might be helped following suggestions.

1. Pause and create suspense by looking around before asking questions.
2. Randomly pick reciters so the children cannot time their attention.
3. Signal that someone is going to have to answer a question about what is being said.
4. Use the child's name in a question or in the material being covered.
5. Ask a simple question (not even related to the topic at hand) to a child whose attention is beginning to wander.
6. Develop a private running joke between you and the child that can be invoked to re-involve you with the class.
7. Stand close to an inattentive child and touch him or her on the shoulder as you are teaching.
8. Walk around the classroom as the lesson is progressing and tap the place in the child's book that is currently being read or discussed.
9. Decrease the length of assignments or lessons.
10. Alternate physical and mental activities.
11. Increase the novelty of lessons by using films, tapes, flash cards, or small group work or by having a child teach others.
12. Incorporate the children's interests into a lesson plan.
13. Structure in some guided daydreaming time.
14. Give simple, concrete instructions, once.
15. Investigate the use of simple mechanical devices that indicate attention versus inattention.
16. Teach children self monitoring strategies.
17. Use a soft voice to give direction.
18. Employ peers or older students or volunteer parents as tutors.

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Strategies for Cognitively Impulsive Children

Some children have difficulty staying with the task at hand. Their verbalizations seem irrelevant and their performance indicates that they are not thinking reflectively about what they are doing. Some possible ideas to try out in this situation include the following.

1. Provide as much positive attention and recognition as possible.
2. Clarify the social rules and external demands of the classroom.
3. Establish a cue between teacher and child.
4. Spend personal discussion times with these children emphasizing the similarities between the teacher and the child.
5. Get in a habit of pausing 10 to 16 seconds before answering.
6. Probe irrelevant responses for possible connections to the question.
7. Have children repeat questions before answering.
8. Choose a student to be the "question keeper."
9. Using a well known story, have the class orally recite it as a chain story.
10. When introducing a new topic in any academic area, have the children generate questions about it before providing them with much information.
11. Distinguish between reality and fantasy by telling stories with a mix of fact and fiction and asking the child to critique them.
12. Assign a written project that is to contain elements that are "true," "could happen but didn't," and "pretend to happen."
13. Do not confront lying by making children admit they have been untruthful.
14. Play attention and listening games.
15. Remove un-needed stimulation from the classroom environment.
16. Keep assignments short.
17. Communicate the value of accuracy over speed.
18. Evaluate your own tempo as teacher.
19. Using the wall clock, tell children how long they are to work on an assignment.
20. Require that children keep a file of their completed work.
21. Teach children self talk.
22. Encourage planning by frequently using lists, calendars, charts, pictures, and finished products in the classroom.

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Suggested Classroom Accommodations for Specific Behaviors

When you see this behavior

1. Difficulty following a plan (has high aspirations but lacks follow-through); sets out to "get straight A's, ends up with F's" (sets unrealistic goals)

2. Difficulty sequencing and completing steps to accomplish specific tasks (e.g. writing a book report, term paper,

Try this accommodation

+Assist student in setting long-range goals: break the goal into realistic parts.
 +Use a questioning strategy with the student; ask, What do you need to be able to do this?
 +Keep asking that question until the student has reached an obtainable goal.
 +Have student set clear timelines of what he needs to do to accomplish each step (monitor student progress frequently).

+ Break up task into workable and obtainable steps.
 + Provide examples and specific steps to accomplish task.

organized paragraphs, division problem, etc.)

- | | |
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| 3. Shifting from one uncompleted activity to another without closure. | + Define the requirements of a completed activity (e.g. your math is finished when all six problems are complete and corrected; do not begin on the next task until it is finished). |
| 4. Difficulty following through on instructions from others. | + Gain student's attention before giving directions. Use alerting cues. Accompany oral directions with written directions.
+ Give one direction at a time. Quietly repeat directions to the student after they have been given to the rest of the class. Check for understanding by having the student repeat the directions. |
| 5. Difficulty prioritizing from most to least important. | + Prioritize assignment and activities.
+ Provide a model to help students. Post the model and refer to it often. |
| 6. Difficulty sustaining effort and accuracy over time. | + Reduce assignment length and strive for quality (rather than quantity).
+ Increase the frequency of positive reinforcements (catch the student doing it right and let him know it). |
| 7. Difficulty completing assignments. | + List and/or post (and say) all steps necessary to complete each assignment.
+ Reduce the assignment into manageable sections with specific due dates.
+ Make frequent checks for work/assignment completion.
+ Arrange for the student to have a "study buddy" with phone number in each subject area. |
| 8. Difficulty with any task that requires memory. | + Combine seeing, saying, writing and doing; student may need to subvocalize to remember.
+ Teach memory techniques as a study strategy (e.g. mnemonics, visualization, oral rehearsal, numerous repetitions). |
| 9. Difficulty with test taking. | + Allow extra time for testing; teach test-taking skills and strategies; and allow student to be tested orally.
+ Use clear, readable and uncluttered test forms. Use test format that the student is most comfortable with. Allow ample space for student response. Consider having lined answer spaces for essay or short answer tests. |
| 10. Confusion from non-verbal cues (misreads body language, etc.) | + Directly teach (tell the student) what non-verbal cues mean. Model and have student practice reading cues in a safe setting. |
| 11. Confusion from written material (difficulty finding main idea from a paragraph; attributes greater importance to minor details) | + Provide student with copy of reading material with main ideas underlined or highlighted.
+ Provide an outline of important points from reading material.
+ Teach outlining, main-idea / details concepts.
+ Provide tape of text / chapter. |
| 12. Confusion from written material (difficulty finding main idea from a paragraph; attributes greater importance to minor details) | + Provide student with a copy of presentation notes.
+ Allow peers to share carbon-copy notes from presentation (have student compare own notes with a copy of peer's notes).
+ Provide framed outlines of presentations (introducing visual and auditory cues to important information).
+ Encourage use of tape recorder.
+ Teach and emphasize key words (the following..., the most important point...,etc.). |
| 13. Difficulty sustaining attention to tasks | + Reward attention. Break up activities into small units. |

- or other activities (easily distracted by extraneous stimuli)
14. Frequent messiness or sloppiness.
15. Poor handwriting (often mixing cursive with manuscript and capitals with low-case letters)
16. Difficulty with fluency in handwriting e.g. good letter/word production but very slow and laborious.
17. Poorly developed study skills
18. Poor self-monitoring (careless errors in spelling, arithmetic, reading)
19. Low fluency or production of written material (takes hours on a 10 minute assignment)
20. Apparent Inattention (underachievement, daydreaming, not there)
21. Difficulty participating in class without being interruptive; difficulty working quietly
22. Inappropriate seeking of attention (clowns around, exhibits loud excessive or exaggerated movement as attention-seeking behavior, interrupts, butts into other children's activities, needles others)
23. Frequent excessive talking
- Reward for timely accomplishment.
- + Use physical proximity and touch. Use earphones and/or study carrels, quiet place, or preferential seating.
 - + Teach organizational skills. Be sure student has daily, weekly and/or monthly assignment sheets; list of materials needed daily; and consistent format for papers. Have a consistent way for students to turn in and receive back papers; reduce distractions.
 - + Give reward points for notebook checks and proper paper format.
 - + Provide clear copies of worksheets and handouts and consistent format for worksheets.
 - + Establish a daily routine, provide models for what you want the student to do.
 - + Arrange for a peer who will help him with organization.
 - + Assist student to keep materials in a specific place (e.g. pencils and pens in pouch).
 - + Be willing to repeat expectations.
 - + Allow for a scribe and grade for content, not handwriting. Allow for use of comp typewriter.
 - + Consider alternative methods for student response (e.g. tape recorder, oral rep etc.).
 - + Don't penalize student for mixing cursive and manuscript (accept any method of production).
 - + Use pencil with rubber grip.
 - + Allow for shorter assignments (quality vs. quantity).
 - + Allow alternate method of production (computer, scribe, oral presentation, etc.).
 - + Use pencil with rubber grip.
 - + Teach study skills specific to the subject area - organization (e.g. assignment calendar), textbook reading, notetaking (finding main idea / detail, mapping, outlining), skimming, summarizing).
 - + Teach specific methods of self-monitoring (e.g. stop-look-listen).
 - + Have student proof-read finished work when it is cold.
 - + Allow for alternative method for completing assignment (oral presentation, taped report, visual presentation, graphs, maps, pictures, etc. with reduced written requirements).
 - + Allow for alternative method of writing (e.g. typewriter, computer, cursive or printing, or a scribe).
 - + Get student's attention before giving directions (tell student how to pay attention, look at me while I talk, watch my eyes while I speak). Ask student to repeat directions.
 - + Attempt to actively involve student in lesson (e.g. cooperative learning).
 - + Seat student in close proximity to the teacher.
 - + Reward appropriate behavior (catch student being good).
 - + Use study carrel if appropriate.
 - + Show student (model) how to gain other's attention appropriately.
 - + Catch the student when appropriate and reinforce.
 - + Teach student hand signals and use to tell student when and when not to talk.

- + Make sure student is called when it is appropriate and reinforce listening.
24. Difficulty making transitions (from activity to activity or class to class); takes an excessive amount of time to find pencil, gives up, refuses to leave previous task; appears agitated during change.
- + Program child for transitions. Give advance warning of when a transition is going to take place (now we are completing the worksheet, next we will ...) and the expectation for the transition (and you will need...)
- + Specifically say and display lists of materials needed until a routine is possible. List steps necessary to complete each assignment.
- + Have specific locations for all materials (pencil pouches, tabs in notebooks, etc.).
- + Arrange for an organized helper (peer).
25. Difficulty remaining seated or in a particular position when required to
- + Give student frequent opportunities to get up and move around. Allow space for movement.
26. Frequent fidgeting with hands, feet or objects, squirming in seat.
- + Break tasks down to small increments and give frequent positive reinforcement for accomplishments (this type of behavior is often due to frustration).
- + Allow alternative movement when possible.
27. Inappropriate responses in class often blurted out; answers given to questions before they have been completed.
- + Seat student in close proximity to teacher so that visual and physical monitoring of student behavior can be done by the teacher.
- + State behavior that you do want (tell the student how you expect him to behave).
28. Agitation under pressure and competition (athletic or academic)
- + Stress effort and enjoyment for self, rather than competition with others.
- + Minimize timed activities; structure class for team effort and cooperation.
29. Inappropriate behaviors in a team or large group sport or athletic activity (difficulty waiting turn in games or group situations)
- + Give the student a responsible job (e.g. team captain, care and distribution of score keeping, etc.); consider leadership role.
- + Have student in close proximity of teacher.
30. Frequent involvement in physically dangerous activities without considering possible consequences
- + Anticipate dangerous situations and plan for in advance.
- + Stress Stop-Look-Listen.
- + Pair with responsible peer (rotate responsible students so that they don't wear out!).
31. Poor adult interactions. Defies authority. Sucks up. Hangs on.
- + Provide positive attention.
- + Talk with student individually about the inappropriate behavior (what you are doing is..., a better way of getting what you need or want is...).
32. Frequent self-putdowns, poor personal care and posture, negative comments about self and others, low self-esteem
- + Structure for success.
- + Train student for self-monitoring, reinforce improvements, teach self-questioning strategies (What am I doing? How is that going to affect others?)
- + Allow opportunities for the student to show his strength.
- + Give positive recognition.
33. Difficulty using unstructured time - recess, hallways, lunchroom, locker room, library, assembly
- + Provide student with a definite purpose during unstructured activities (The purpose of going to the library is to check out...the purpose of...is...).
- + Encourage group games and participation (organized school clubs and activities).
34. Losing things necessary for task or activities at school or at home (e.g. pencils, books, assignments before, during and after completion of a given task)
- + Help students organize. Frequently monitor notebook and dividers, pencil pouch, locker, book bag, desks. A place for everything and everything in its place.
- + Provide positive reinforcement for good organization. Provide student with a list of needed materials and locations.

35. Poor use of time (sitting, starting off into space, doodling, not working on task at hand)

- + Teach reminder cues (a gentle touch on the shoulder, hand signal, etc.).
- + Tell the student your expectations of what paying attention looks like. (You look like you are paying attention when...)
- + Give the student a time limit for a small unit of work with positive reinforcement for accurate completion.
- + Use a contract, timer, etc. for self-monitoring.

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Lazy Kid or Executive Dysfunction?

By: Tracy Landon and Linda Oggel (2002)

Do you have a student who seems incredibly lazy? Intentionally forgetful? Absolutely unmotivated? Deliberately late? Do you feel like a broken record? Constantly asking where his homework is? Constantly asking him to clean out his desk? Constantly asking her to pick up stuff around her desk? Do you have a student who is chronically distracted? Are you repeating directions to get the student back on task when he gets distracted? Do you have a student who knows the information but can't seem to communicate it to you in a logical sequence? Do you ask a question and get an answer that's related but not quite connected to the question? If so, it might be that the student is not using these behaviors intentionally.

One of the least studied and most frequently overlooked contributors to academic and behavioral problems is a problem in the frontal lobes of the brain known as executive dysfunction (Parker, 2001). Students with executive dysfunction have problems of a neurobiological nature that particularly affect "planning, flexibility, organization, and self-monitoring (Ozonoff, 1998, p.282). These students may have "difficulty picking a topic, planning the project, sequencing the materials for a paper, breaking the project down into manageable units with intermediate deadlines, getting started, and completing the activity. And because these students frequently underestimate how long something will take, they'll generally leave the project until the night before it is due" (Packer, 2001, p. 2). Just imagine how difficult it would be if you had trouble organizing your time, materials, belongings, thoughts or any combination of these!

If you believe your student has executive dysfunction (also called executive function deficits—called "executive" because the tasks are often the responsibilities of a company executive), consider helping the student to organize himself. Begin by developing a relationship with the student that is emotionally supportive. Emphasize that you want the student to succeed. Help the student to understand his problems and that there are strategies he can use to organize him/ herself. For example, you could say, "Kids with executive function problems have difficulty in certain areas. There are many ways you can help yourself. Let's talk about the areas and supports. Then you can choose which ways to help yourself." Then describe the following potentially troublesome areas and potential supports that are identified in the shaded area. (Linda Parker, 2001):

Managing time

- Use time management techniques such as the use of

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Managing work

- Use a checklist to guide you through an independent assignment. Include items such as: get out pencil and paper, put name on paper, put due date on paper, read directions, ask teacher to further explain if needed, do work, put work away in note-book in appropriate section (e.g., to do tonight, to do this week), write assignment on assignment sheet, get teacher to sign, take home and complete work.
- Finally, have the student identify which strategies she would like to try using and get started. Consider meeting with the student after a week to evaluate her use of the strategies. Be sure to praise the student's progress rather than focusing on areas of continued disorganization. In addition, suggest that student's family be included so that they can help him or her continue the strategies at home.

As the educator you can support the student (and others) by making some changes in the classroom. Some suggestions (Stokes, 2001, pg. 6) you can implement include:

- Maintaining a highly structured classroom.
- Using a written (visual) schedule to keep the student focused and "on task" so that he or she can complete tasks as independently as possible.
- Giving written directions whenever possible (dry erase boards, index cards, etc.) rather than auditory prompting.
- Giving fewer problems/questions on worksheets and/or creating boxes next to each question so the student can check it off as it is answered.
- Making the classroom as distraction free as possible (away from windows, doors or favorite activity areas).
- Keeping assignment folders in specific and consistent places.
- Using a visual calendar for both school and home to help the student anticipate events.
- Using a visual timer to help the student understand time constraints.

Also, if you suspect a student has executive dysfunction, consult with your school psychologist. While executive function deficits are most commonly associated with Autism Spectrum Disorder, they also are known to occur in students with ADHD, Fragile X Syndrome, conduct disorder, obsessive-compulsive disorder, traumatic brain injury, and schizophrenia (Ozonoff, p. 277). Although there are currently no agreed-upon protocols that constitute a battery of tests for executive dysfunction, several tests have been used in research that seem to tap into aspects of the disorder. These include the Matching Familiar Figures Test (Waterhouse & Fein, 1982), Wisconsin Card Sorting Test, and various computerized tests. For more information on tests and their purposes, see the resources at the end of this article.

Teach your student with executive dysfunction to organize himself. In addition, provide support by making some adaptations in your classroom and in your interaction style. Remember that



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Memory Tips for Students

By: Anne Hoover (2009)

As exam time approaches students with learning disabilities often find themselves overwhelmed with the amount of information they need to remember. Teachers wisely tell their students to review in each subject as they go along through the semester.

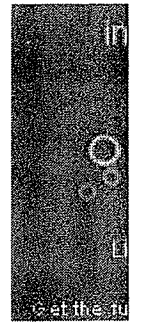
Research tells us that if we review information within 24 hours of learning it, we are much more likely to remember it in the long run. Well thought out homework is designed with this kind of review in mind. Each student should choose strategies for memorization that fit their own learning styles.

- **Sort Information:** Help your retrieval system by putting new information into categories. You can group by dates, people, formulas, etc. It may help to make a chart as you study.
- **Frequent review:** Studying new information the same day you heard or read it will improve memory significantly. A small review each day is essential if you have memory problems.
- **Use humor or exaggeration:** Information stays in memory longer if it is related to something novel and interesting. Make up something funny or exaggerated that ties in to what needs to be memorized.
- **Explore the senses:** Try learning the information visually, verbally, and kinesthetically (with movement) and find which sense works best for you. Some people need to combine two or more senses.
- **Color code:** By using colored pens, highlighters, post-it notes and flags, index cards, etc. you can make an impression on your memory. This is a way of sorting information for storage as you assign colors.
- **Make visual aids:** Draw pictures or cartoon characters, graphs, tables, charts, time lines, etc. to aid memory. Even simple stick figures and drawings are useful if you are a visual learner. Pay attention to pictures, charts, etc. in textbooks.
- **Rehearse aloud:** Verbal rehearsal is an effective memory tool. Study with someone or use a tape recorder to say aloud what needs to be memorized.
- **Make it physical:** Adding a physical activity such as pacing, jumping, throwing a ball, or writing enhances the memory for many people. Typing or rewriting notes is a very effective memory device for people who need to learn kinesthetically.
- **Turn memory practice into a game:** Make cards to match words and definitions, math facts to answers, etc. and play a memory game by turning over two cards at a time. Time yourself to see how long it takes to match all the cards. The act of making the game also helps memory.

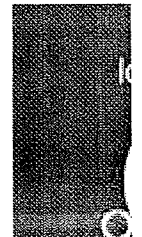
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Understanding Children's Hearts and Minds: Emotional Functioning and Learning Disabilities

By: Jean Cheng Gorman (1999)

Emotional aspects of learning disabilities

Abrams (1986) stated, "The vast majority of children with learning disabilities have some emotional problem associated with the learning difficulty" (p. 190). Traditionally, however, educators have placed priority on the diagnosis and remediation of learning disabilities (Hiebert, Wong, & Hunter, 1982). Empirical data suggest the critical need to treat emotional aspects of learning disabilities. Here are startling findings:

Learning disabilities have been found to occur in approximately 4.7 % of children and adolescents. (Fristad, Topolosky, Weller, & Weller, 1992).

However, Peck (1985) found that 50% of children under age 15 who committed suicide in Los Angeles County over a 3-year period had been diagnosed as learning disabled.

As mainstreaming and inclusion become increasingly pervasive, it is especially important for all teachers to understand the interaction of emotional concerns and learning disabilities and the impact of that interaction on children's functioning. Indeed, Sabornie (1994) suggested, "Educators' lack of concern for social- affective problems among pupils is analogous to educational neglect" (p. 268).

Need for purposeful strategies

Promoting wellness in children requires purposeful attention and intervention in both educational and emotional arenas. Although it is not always possible to determine which of the two factors is responsible for a child's performance, it is important to keep in mind the types of possible interactions to best determine intervention strategies.

Discerning interactions

The interaction of emotional functioning and learning disabilities is complex and not always clearly discernible in a given situation. Regarding the well-documented link between depressive illness and learning difficulties, Livingston (1985) stated that it is difficult to discern whether depression causes or worsens learning difficulties, whether learning difficulties put children at risk for

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expressed more loneliness, felt less integrated in the schools, and were victimized (e.g., physically assaulted, had their possessions removed) more often than were other students. These findings suggest that the emotional effects of learning disabilities make life in school more difficult for children with learning disabilities than for their peers without disabilities.

Anxiety

Learning disabilities have also been linked to greater anxiety in children. For example, Margalit and Zak (1984) found that children with learning disabilities have higher levels of anxiety than do their peers without disabilities. Specifically, they tended to feel more often that events beyond their control were happening to them. Increased levels of anxiety are also reflected in more frequent somatic complaints by students with learning disabilities (Margalit & Raviv, 1984).

Depression

Researchers have consistently linked depression to children with learning disabilities. Fristad et al. found the presence of learning disabilities among a sample of clinically depressed hospitalized children to be seven times higher than in the general population. Other researchers have also noted the high "comorbidity" of learning disabilities and depression (Bender & Wall, 1994; Livingston, 1985; Peck, 1985). Fristad et al. suggested that the "additional difficulties experienced by [depressed] children [with learning disabilities] in the classroom may be due to the stress and frustration caused by their learning disabilities" (p. 57).

Attempts to cope

The mechanisms by which emotional issues arise are not clear, but researchers have postulated some causal means. Chandler (1994) suggested that some emotional adjustment disorders result from "attempts to cope with a difficult learning process and the resultant failure, frustration, and feelings of incompetence that those attempts engender" (p. 162). For some, "school achievement has become equated with self-competency, and the loss of competence has led to feelings of inadequacy, depression, withdrawal and an uncaring attitude" (p. 163). For others, "poor school performance [leads] to dependency and learned helplessness as a maladaptive style of coping" (p. 163).

A case example of a child who has difficulties with spatial organization and poor graphomotor skills illustrates the negative effects that learning disabilities may have on emotional functioning.

Joel's "carelessness"

Joel, a fifth grader, was consistently turning in "sloppy and careless" work. Although his reading was above grade level, the quality of his written work was well below that expected of children his age. He lost points on math tests because he misread the numbers he had written on his worksheet. This wasn't surprising, because the numbers were hardly recognizable. Joel's

areas, are probably sufficient to cause major learning problems in nonacademic areas as well" (Bender & Wall, 1994, p. 323).

Ineffective social behavior

Students with learning disabilities often demonstrate more problems in social competence than do their peers without disabilities. Sabornie (1994) found that general education teachers consistently rated the social behavior of students without disabilities as higher than that of students with learning disabilities. Similarly, Hiebert et al. (1982) reported that teachers rated students with learning disabilities as "behaving in less socially acceptable ways" than their peers (p. 340).

Resulting sadness and anxiety

Undoubtedly, this reduced social competence, whether actual or perceived, results in emotional concerns for these children. For example, whether they lack friends, get into fights, or feel they are misunderstood, children with learning disabilities most likely will experience additional confusion, sadness, and anxiety that may already be present as a result of the learning disabilities themselves.

The example of Margaret, a 9-year-old girl, illustrates the potential for learning disabilities to exacerbate existing emotional concerns .

Margaret's "stumbling"

Margaret had been plagued with social and academic difficulties ever since nursery school. At that time, her teachers voiced concern about her comprehension of spoken language. When asked a question or told to do something, her response was often "What?" or an inappropriate action. In first grade, she had unusual difficulty learning her classmates' names. She also tended to describe a person rather than giving him or her a name (e.g., "the lady in the art room" instead of "Ms. Smith, the art teacher"). Margaret often spoke hesitantly, stumbling over words and saying, "You know what I mean." She misused pronouns and prepositions, saying "him" for "her" and "under" when she meant "over." Margaret's first-grade teachers also had concerns about her difficulty following directions and her slowness in mastering basic reading and spelling skills.

In second grade, Margaret showed slow progress in reading and spelling. She was still struggling with basic reading and subtraction the following year. In fourth grade, her spelling was still rudimentary, and she was having trouble understanding what she read. Most of all, she hated having to express her ideas either orally or in writing.

In school, Margaret increasingly become a loner and was not well-liked by either peers or staff. In part, this seemed to be due to her difficulty communicating. Margaret's parents seemed particularly concerned over her lack of close friends, as Margaret was never invited to any of her classmates' birthday parties. (Adapted from Novick & Arnold, 1995, p. 163.)

Analysis. Margaret's language-based learning disabilities not only

child. For example, the child may feel she is "stupid," and may turn her hatred onto herself, continually misbehaving and provoking reproach. In addition, failure may serve as a defense, "failing in order to rid oneself of the anticipation of failure" (p. 190). Children who display acting-out behavior are often seen as having behavioral problems. They may act out in class, get into fights with other children, display defiance toward teachers, and exhibit other disruptive behaviors.

Distracting the teacher

Some children may intentionally or unintentionally distract their teachers from their learning difficulties by their disruptive behaviors. For example, Abrams (1986) recounted the experience of one child who "'willed' herself to think about a million different things' whenever it was time for a reading lesson and the inevitable pain of failure" (p. 193). Her teacher saw her as merely "hyperdistractable."

Whether a child is unintentionally or deliberately acting out, it is easy for teachers to note the behavioral problems, particularly if there are external circumstances that can account for emotional disturbance, and not to consider the possible role of learning difficulties. The case example of Edward illustrates that the salience of emotional factors may overshadow a child's cognitive difficulties.

Edward's "acting out"

Edward was the middle child in a family of three boys being raised by a young single mother. He lived in a run-down inner city apartment building that was known to have frequent drug activity. When he attended a half-day preschool, he seemed to enjoy playing by himself more than with others. At home, this was also true in relation to his brothers or neighbors. In fact, he was able to occupy himself quietly and happily for hours on end. However, everything about first grade was a disaster. Edward hated his teacher and tended to ignore her, sometimes even threatening her when she asked him to do something he did not feel like doing. His attitude was that school was "stupid." Edward became the class bully early on and often got into fights. As a result, he was frequently sent out of the classroom, but this did not seem to significantly affect his behavior. By the end of the year, Edward was reading at the third- grade level, but his math had not advanced beyond kindergarten skills. (Adapted from Novick & Arnold, 1995, p. 71)

Analysis. Because Edward seemed to do well in preschool but began to have noticeable difficulties in first grade, it is tempting to believe that emotional factors (e.g., separation anxiety) may be the cause of his difficulties. His trying home situation may also be thought to account for his unacceptable behavior in school. In cases such as these, any academic problems may be seen as resulting from emotional concerns. The large discrepancy between Edward's reading and math abilities, however, suggests that he had a learning disability that was not given sufficient attention. It is possible that Edward learned to avoid situations where his learning problems would be manifested.

Twelve-year-old William was getting poor grades, particularly in math, largely due to "careless" work. His teachers maintained that this was merely a sign of William's laziness, his not taking school seriously enough, and his lack of desire to succeed. But his parents knew that William spent hours on the simplest homework assignment. He impressed them as a child trying very hard to do his best. Often, he would redo an assignment multiple times in order to "make it look right." On these occasions, William appeared to be absurdly perfectionistic, despite his typically disappointing results. (Adopted from Novick & Arnold, 1995, p. 72)

Analysis. William's perceptual learning disability made math particularly demanding because mastery of math requires spatial organization. This difficulty, however, was exacerbated by his perfectionistic traits, which did not allow him to complete an assignment until he had aligned all the numbers and problems perfectly. The amount of effort William put into making his homework and schoolwork "look nice," perhaps in an effort to conceal his learning disability, reduced the amount of energy he had for dealing with other academic consequences of his disability.

Alternatively, a child's emotional concerns may affect the teacher so that the teacher's ability to deal with the child's learning disability is lessened. For example, a child may repeatedly act out, may whine and complain, or may sulk and withdraw. Abrams (1986) observed that "the same frustration and anger that have been experienced by the parent in his relationship with the child may also be felt by the teacher, and as with the parent, may serve to bring about an inflexible approach to the child that will lessen the teacher's effectiveness" (p. 189). This may be seen in the form of reduced patience, inability to think of alternative ways to interacting or teaching, and reduced attention to the child in general.

What's a teacher to do? The possibility that the child's emotional responses affect the teacher's functioning must be explored, because this interaction may seriously affect a child's ability to deal with learning difficulties. Talking with other teachers and school staff about personal frustrations with specific children can be helpful in increasing the teacher's coping abilities.

Emotional health can enhance school performance of students with learning disabilities

In contrast to the negative relationships between emotions and learning disabilities, there is growing evidence that emotional states may positively affect the performance and relationships of children with learning disabilities.

Effect of positive feelings

Bryan et al. (1996) reported that positive "affective states" have been found to increase performance on various tasks, such as memory, computation, and discrimination tasks. In addition, their research indicated that inducing positive feelings in children facilitated the learning of new information. The authors

Shalema began to look forward to her times with the student teacher, and became increasingly eager to read the few sight words she knew. Shalema also began to take out her preprimer books during reading period and read to herself. One day, Shalema's mother came to the class and reported that Shalema had asked her to buy books to read at home, and that they had been sitting down after dinner each night to read. She had come to class to report that Shalema read her first book. Encouraged by this news, the teacher announced to the class that Shalema had made great progress, to which the class responded by spontaneously giving her thunderous applause.

Analysis. Shalema struggled to catch up to her peers and continued to have difficulty in reading. Her change in self-perception, however, as well as the positive feedback from her teacher and classmates, increased Shalema's desire to learn to read. This self-motivation was crucial to her overcoming her difficulties.

What's a teacher to do? Teachers may find that words of encouragement and genuine belief in the child's abilities produce more change than expected.

Final thoughts

In his study of general and special education teachers, Sabornie (1994) found that "the regular class teachers' rating of social competence [of students with and without learning disabilities] proved to be the best single discriminator [of social-affective variables], showing that these teachers should be counted on to determine who may or may not need social skills instruction" (p. 277). Sabornie suggested that all teachers, and perhaps general education teachers in particular, have the potential to be instrumental in addressing the complex interaction of emotional concerns and learning disabilities for children with learning disabilities in their classrooms. Sabornie further stated:

Educators should be cognizant of the different types of social and affective problems they are likely to confront in students with learning disabilities. (p. 277)

Inevitably, a combination of interactions between emotional issues and learning disabilities may be at work in any given situation, and it may be impossible to definitively identify the causes of poor performance or inappropriate behavior. Nevertheless, having a clear understanding of the different mechanisms of interaction can be helpful in selecting priorities and strategies for intervention.

Resources

Resources for educating children with learning disabilities

Bender, W. (Ed,) (1995). Learning Disabilities: Best practices for