



Motivating the Child with Attention Deficit Disorder

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"Sometimes I just get all scribbly."

—Nine-year-old boy with ADD, as quoted by Maureen Neuville

One of the factors that can have a substantial impact on a child's academic performance and his degree of motivation is attention deficit disorder (ADD). This debilitating disorder affects the child's ability to focus and control his behavior. These are the two factors that contribute most significantly to a child's daily progress and performance in the classroom. School is quite literally a stacked deck for the child with ADD.

I often use an analogy to help people better understand the needs of ADD children. Recall if you will your junior high school science class. You probably were required to spend countless hours peering into microscopes in order to observe the single-celled amoebas and paramecia as they gyrated endlessly on the glass slides. You were taught that these creatures never slept, rested, or stopped. They were involved in a constant, vigilant search for food and nutrition.

So it is with the child with ADD. However, this child is not searching for nutrition; he is searching for stimulation. The ADD child needs stimulation to the same degree that you require oxygen. He simply cannot function without it.

In fact, if the child is not provided with stimulation, he will create stimulation by acting out or disrupting his environment in some way. Again, this is not being done for any negative reason. He is creating excitement because he needs it.

When viewed from this perspective, it is easy to see the impact that ADD would have on a child's academic progress and his motivation to succeed. Because the skills that he lacks are precisely the skills he needs in order to progress in school, he begins to develop negative associations regarding the learning process. He may be continually blamed, reprimanded, and censured for behavior that is beyond his control. He begins to feel angry, resentful, and frustrated. This frustration is exacerbated by the fact that ADD children are often exceedingly bright, and they are well aware of the discrepancy between their potential and their performance.

Current research by the Council for Exceptional Children indicates that nearly 10 percent of school-aged children struggle with ADD. The majority of these students also have some sort of academic learning disability, so their inability to sit still in class is complicated by their difficulty in mastering the content of the curriculum. These children tend to fail at a rate 250 percent higher than their peers without ADD, and nearly half of them will be required to repeat a grade in elementary or middle school. When these factors are considered, the link between ADD and motivational problems is easily understood.

Our knowledge of ADD has expanded significantly in recent years. In the 1980s, the disorder was associated with three basic symptoms: hyperactivity, distractibility, and impulsivity. Current research demonstrates clearly that these three symptoms represent the literal tip of the iceberg and that there are numerous concomitant symptoms and traits that impact greatly upon the child's academic and social performance.

Success in school requires children to pay attention to assigned tasks and expectations. Children with ADD have significant difficulty sustaining attention, particularly during rote, repetitious, or prolonged tasks that are not particularly novel, entertaining, or stimulating.

Success in social situations requires children to complete three basic tasks consistently: listen, follow direction, and wait their turn. If a child is able to accomplish these simple procedures, he will likely enjoy social success. However, for the child with ADD, these "simple" skills are greatly compromised. For the ADD child, "simple" is not always "easy."

The key to motivating the child with attentional problems is to modify and adjust the learning environment. Often, teachers will invest significant time and effort in attempting to change the child. Their time might be better spent trying to change the policies, practices, and procedures that they are using with the child.

If you consider the skills and abilities that a child requires in order to succeed in the classroom, and then consider the deficits and weaknesses inherent in ADD, you will recognize that a significant mismatch exists. The expectations of the classroom are in direct conflict with the limitations of the child. Consider the following:

Classroom Expectations	ADD Symptoms That Interfere
"Wait until you are called on."	
"Don't interrupt."	
"Keep your hands to yourself."	
"Stay in line."	Impulsivity
"Take your time."	
"Read the directions carefully."	
"Sit still."	
"No pencil tapping."	
"Stay in your seat."	Hyperactivity
"Play/talk/work quietly."	
"Stop fidgeting."	
"Keep your desk/book bag orderly."	
"File your homework."	Organizational problems
"Where's your pen/pencil/ruler/glasses?"	
"Drill, drill, drill!"	
"If at first you don't succeed..."	Low frustration level
"Be patient."	
"How many times have I told you..."	
"Don't you remember what happened last time?"	Inability to learn from experience
"Follow the rules!"	
"Arrive on time."	
"Adhere carefully to due dates."	Impaired sense of time
"Estimate how long it will take you to..."	
"Figure it out yourself."	
"How would you solve this problem?"	Difficulty with sequencing, prioritizing, analyzing, synthesizing
"What's your solution?"	
"Don't forget to..."	
"Always remember to..."	
"Memorize this."	Memory deficits
"The due date was..."	
"Come prepared."	
"Watch those careless mistakes."	
"Listen closely."	Inattention

"Pay attention."

"Follow the main idea."

"You should have finished that by now."

"You seem to be able to do it when you want to."

Inability to sustain effort

"Great start, but then you fell apart."

"Unacceptable handwriting."

When all of the above is considered, it becomes clear that the ADD child and the traditional classroom basically represent a mismatch. In order for the child with ADD to be successful — and, therefore, motivated — the teacher must make significant adjustments in her policies, procedures, and expectations. Basically, if the child cannot learn in the way we teach, we must teach in the way he learns.

For the child with ADD, his performance and his motivation are influenced by three major factors: his degree of interest in the activity, the difficulty of the activity, and the duration of the task. He will have significant difficulty with tasks that require organization, planning, inhibition, self-monitoring, and sustained effort.

The implications of this are readily apparent and it is easy to see that many traditional classroom activities will be inappropriate for this student. Included among these are: heavy emphasis on work sheets, independent work, long-term assignments, extended silent reading, and multistep tasks. Conversely, active, collaborative, spirited activities are very likely to motivate and inspire the child.

As much as possible, the curriculum should be stimulating and relevant to the child's life experiences. Research has shown that a curriculum that is irrelevant to the student's social and economic interests generally results in disruptive behavior, poor academic performance, limited progress, and dropping out. It is extraordinarily difficult for a child with ADD to remain engaged in a curriculum that is not interesting or challenging. These children live very much in the present. Therefore, long-term goals and rewards (e.g., grades and report cards) are often ineffective motivators.

Dr. Edward Hallowell, a Boston-based psychologist and author of *Driven to Distraction*, crystallized how important the present is to children with ADD. He explains that in the world of ADD children, there are basically two time frames — now and not now.

Friday Afternoon

Teacher: Be sure to read chapter 4 for Tuesday's quiz.

ADD Child: Tuesday? That's Not Now.

Tuesday

Teacher: This is the quiz on chapter 4.

ADD Child: Uh-oh. That's Now.

This Now/Not Now worldview causes great frustration for the child, his teachers, and his parents, and must be seriously considered when designing activities and approaches for motivating the child with ADD.

The child with ADD will respond more positively to a curriculum that allows him choices and options. He will also be more likely to participate actively in tasks when there is a degree of creativity and novelty (e.g., presenting a history review using a Jeopardy! game). In order to maintain the motivation of this child, the teacher must simultaneously consider what is being taught and how it is being taught. The

content alone is unlikely to hold the child's attention or motivation for an extended period. The content should be stimulating and relevant; the presentation should be creative, colorful, multimodal, and enjoyable.

Among the specific teaching strategies that may foster the child's motivation are:

- Provide a structured, predictable environment.
- Give simple single-step instructions.
- Simultaneously provide verbal and visual input (e.g., dictate instructions as you write them on the board).
- Provide modified testing and assessment procedures.
- Offer the child positive reinforcement, praise, and encouragement.
- Teach note taking, outlining, and other useful study skills.
- Assign the child a seat within close proximity of the teacher but away from high-traffic areas.
- Clearly outline rules, limits, and expectations. Post them.
- Avoid overloading the child with information, data, or instructions that he is unable to process.
- Allow for occasional breaks to let the child relax and reenergize.
- Institute a "study buddy" or "good neighbor" system wherein a classmate may assist the child with organization and preparation.
- Utilize a cue or a private signal that you can send to the child if her behavior or attention is beginning to deteriorate.
- Divide large, complex tasks into smaller, manageable segments. For example, if the child is assigned twenty math problems, give them to him five at a time. As he completes one set, give him the next five. This will be less intimidating and overwhelming. Gradually, increase the length of the segments.
- "Legitimize" the child's need for movement and activity by designing classroom activities that allow and encourage movement.
- Require that the child maintain an assignment notebook, and assist her with this task.
- Assist the child in getting started on a task and then encourage him to complete it independently.
- Give the child as much notice as possible if a major change or transition is coming.
- Establish a daily checklist communication system to ensure ongoing contact between home and school.
- Provide the child with a basic course syllabus to assist her in organization and planning.
- Provide him with two sets of textbooks. One set remains at home to facilitate homework, while the second set stays in school. This strategy ensures that he has the necessary materials in both settings.
- Make organization of books, desk, locker, and book bag a regular routinized part of her day. She

should be assigned to spend a few minutes organizing at the beginning, middle, and end of the school day. Be aware that she may need assistance with this. Merely telling her to "straighten out your book bag" will not be effective.

- Be sure that you have the child's attention before giving him a direction or instruction. This can be done by calling his name or using a hand signal. After the instruction has been given, ask him to repeat it back to you prior to carrying it out. Many ADD children are adept at appearing to understand when, in fact, they do not.
- Remain mindful of the three levels of instructional material:
 - **Independent Level:** Child can read the material at 97% accuracy and comprehend at 90% accuracy.
 - **Instructional Level:** Child can read the material at 90 to 96% accuracy and comprehend at 75% accuracy.
 - **Frustration Level:** 90% or below in reading accuracy and below 75% accuracy in comprehension. Reading is halting, slow, and laborious.
- Independent Level work should be assigned for homework and seat work. Material at a child's Instructional Level should be teacher-directed or monitored. Material at the Frustration Level should not be assigned.
- Never take good behavior for granted. Praise and reinforce the child for not interrupting, for working patiently, remaining in his seat, staying on task, cooperating.
- Remember that hyperactive behaviors during seat work (e.g., drumming fingers, pencil tapping, squirming in seat, fidgeting) are actually a release for the child's hyperactivity. Unless the movements are distracting or disruptive for others, ignore them. If it doesn't make a difference, what difference does it make?
- Do not emphasize quality and quantity simultaneously. Lengthy, complex assignments are exceedingly difficult for the child with attentional problems. It is better to assign five math problems and emphasize/expect accuracy than to assign twenty problems that will overwhelm the child and result in twenty inaccurate responses.
- Provide the child with a study carrel or a quiet section of the classroom where she can go when she needs a distraction-free area to study or memorize. Allow other students to have access to this area so it is not viewed as punitive or negative by the class.
- Remember that the child with ADD can become easily frustrated and this frustration greatly impacts his motivation. Stress, pressure, and fatigue can initiate and increase these feelings of frustration. Be aware of the child's tendency to become frustrated, and take proactive steps to avoid or diminish anxiety-producing situations.
- Provide this child with several (e.g., ten to fifteen) seconds to respond to verbal questions. It may well take him that long to process and comprehend the question. Whenever possible, supplement verbal questions with visual input.
- Try alternative methods of assessment, such as oral testing or demonstration testing. Written tests and assessments will present particular difficulty for children with attentional problems

because of the children's language and organizational weaknesses.

- Be certain that the child has the materials she needs before she begins a task.
- Carefully observe the child in order to determine when the child is particularly focused and attentive (e.g., early in the day, after recess, before lunch). Schedule his most difficult and challenging assignments and activities at these times.
- Follow difficult activities with more interesting or rewarding activities. ("Joseph, when you finish the math work sheet, you can feed the gerbil.")
- Avoid attributing moral or judgmental reasons for the child's inconsistency and impulsivity. Remember that these behaviors occur through no fault or choice of the child's. Accusatory feedback is counterproductive. Don't blame the victim.
- Provide the ADD child with ample opportunities to show divergent, creative, and imaginative thinking and to receive recognition for originality.
- Allow the child to doodle or squeeze a soft ball. Some children with ADD are better able to focus and attend when they are doing something with their hands during quiet activities (lectures, discussions, story time, videos).
- When giving instructions, be sure that you have the child's focused attention and ask her to paraphrase the instruction before beginning the task. Many children with ADD may also have difficulty with auditory processing. This disorder makes it exceedingly difficult to understand and follow oral directions. These students will also have difficulty taking notes from lectures, so it may be useful to provide her with class notes.
- Encourage the child to focus his attention on the task at hand, and reinforce appropriate behavior when it occurs. These students have significant difficulty working independently and have a tendency to procrastinate and dawdle. These behaviors can be disruptive for the class and frustrating for the teacher.

Teachers and parents should view attention deficit disorder as a pervasive and complex disorder that impacts nearly all of the child's activities and interactions. The child's impulsivity ("Ready, fire, aim!") can present serious safety concerns; his distractibility makes it extraordinarily difficult for him to understand and follow instructions; his memory difficulties make even rote learning troublesome; his executive processing problems (ability to plan and prioritize) present great challenges when he attempts to plan simple daily activities; his organizational deficiencies cause him tremendous problems with homework, household tasks, and long-term projects.

The neurological causes and the medical treatment of ADD continue to be sources of research, experimentation, and debate. However, educators have developed methods and strategies that have proven successful with these children. Teachers and parents should remember the two most important words when dealing with these special children: "support" and "challenge." The adult should continually challenge the child by presenting him with activities designed to improve his behavior and his learning, while simultaneously providing him with the support that he requires to meet these goals. Support without challenge is meaningless. Challenge without support is equally ineffective.

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Attention deficit disorder (ADD) is a neurological disorder that causes a range of behavior problems such as difficulty attending to instruction, focusing on schoolwork, keeping up with assignments, following instructions, completing tasks and social interaction. Problems Often Associated With ADD. ADD may also involve hyperactivity with behavior problems. Children with ADD without the hyperactivity component may appear to be bored or disinterested in classroom activities. They may be prone to daydreaming or forgetfulness, work at a slow pace and turn in incomplete work. Their assignment may look disorganized as well as their desks and locker spaces. Behavior intervention may counter the child's forgetfulness. Diagnosis.