ATTENTION DEFICIT DISORDER

INCLUSIVENESS

" More and more, the concept of ADD as a disorder is being qualified by inclusion of a string of positive qualities - such as creativity, high intelligence, ability to do many things at once, an aptitude for small business entrepreneurship, and a powerful intuitive sense."

- Susan Burgess

The Aim of Scouting is to promote the development of individuals, enabling them to grow and take their place in society as active citizens. As we move forward with the Canadian Path we are much more aware of each individual's personal progression, inclusive of their varying abilities. This inclusiveness within Scouting uniquely positions us to play an important role in modifying community attitudes and behaviour towards individuals with identified needs; it starts with Scouts.

Please use this guide for a better understanding of youth with Attention Deficit Disorder; how as Scouters, we can make a difference through simple interventions, program modifications and knowing where to get help when needed.

DESCRIPTION

Attention Deficit Disorder (ADD), also, formerly Attention Deficit Hyperactivity Disorder (ADHD), is a psychiatric disorder of the neurodevelopmental type, in which there are significant problems of attention and/or hyperactivity and acting impulsively that are not appropriate for a person's age.

CHARACTERISTICS/BEHAVIOURS

Youth diagnosed with ADD may exhibit some of the following characteristics or behaviours:

Trouble Concentrating and Staying Focused:

- "Zoning out" without realizing it, even in the middle of a conversation
- Extreme distractibility; wandering attention makes it hard to stay on track
- Difficulty paying attention or focusing, such as when reading or listening to others
- Struggling to complete tasks, even ones that seem simple
- Tendency to overlook details, leading to errors or incomplete work
- Poor listening skills; hard time remembering conversations and following directions

Disorganization and Forgetfulness:

- Poor organizational skills; extremely messy and cluttered
- Tendency to procrastinate; trouble starting and finishing projects
- Chronic lateness
- Frequently forgetting dates, commitments, and deadlines
- Constantly losing or misplacing items
- Underestimating time to complete tasks

Impulsivity Characteristics:

- Frequently interrupting/talking over others
- Poor self-control
- Blurt out thoughts that are rude or inappropriate
- Have addictive tendencies
- Act recklessly or spontaneously without regard for consequences
- Have trouble behaving in socially appropriate ways (such as sitting still during a meeting)

Emotional Difficulties:

- Sense of underachievement and low self-esteem
- Doesn't deal well with frustration
- Easily flustered and stressed out
- Irritability or mood swings
- Trouble staying motivated
- Hypersensitivity to criticism
- Short, often explosive, temper



Hyperactivity or Restlessness:

- Feelings of inner restlessness, agitation
- Tendency to take risks; craving for excitement
- Getting bored easily
- Racing thoughts
- Can't sit still; fidgety
- Talking excessively and interrupts often
- Doing a million things at once

IN A SCOUTING SITUATION

- Redirect inappropriate behavior, rather than focusing on misbehaviour
- Insure that the youth can be seated when giving out information rather than having the youth standing for long periods of time
- Strive not to talk for too long or too much at the youth; ask yourself the questions... "Am I talking to them or am I talking with them?" "Do I have them engaged?"
- Remember to keep the information/instruction short, simple, clear and concise in other words... "Get in Get out!"
- Rotate the Scouters on the team often when interacting with the youth, as it helps to give variety, and a change of pace and/or leadership style
- Gain input from the youth when planning short range and long range programs
- Avoid lectures, sarcasm, youth comparing, or authoritarian approach
- Keep away from punitive behavior
- Avoid yelling and threatening at all costs; it announces that you have lost control
- Assign a skilled Scouter to support/shadow the youth when required, to redirect inappropriate behavior
- Assist in sourcing another willing youth member to lend brief support to work/interact with the youth with ADD
- Watch your body language e.g., glaring, crossed arms, angry facial expressions, looks of frustration
- Have the youth with ADD repeat back in their own words what they understood from your message/request
- When required, role play problems and possible solutions
- Focus on positive behaviors more and provide encouragement and praise
- Focus on self-esteem building; providing a simple nod, wink, smile, or touch on the shoulder can be very powerful
- Point out alternative choices for positive behavior rather than confront negative ones
- If changes are to occur in a routine, advise the youth well ahead of time
- Set behavior rules out with the youth and keep them simple and clear adhere to Code of Conduct

PROGRAM MODIFICATION SUGGESTIONS

- When youth are disruptive in the circle, horseshoe or other formation, relocate their position in the formation to assist in ending the disruptive behavior (i.e., beside their Sixer, Patrol Leader or a Scouter)
- End activities on a high note, do NOT drag them out
- Control the environment for distractions
- Keep the rhythm/pace moving
- Provide opportunities for the youth to take on a responsible, leadership role
- Have the youth with ADD record simple notes
- Avoid unstructured activity time for youth with ADD unless adequately supervised
- For focused skill work and instruction, small groups are more effective than larger ones
- Likewise, smaller periods of instruction time are better than longer periods; provide for five minute check in time with a Scouter
- Break tasks into smaller segments and assign tasks one step at a time
- Give "cues" for example, "I'm looking for good listeners"
- Schedule most demanding tasks for earlier in the day; youth on medication may see it wear off as the day goes on
- Provide for a plan that offers stimulating re-enforcers such as genuine praise, encouragement, and words of approval

FURTHER ASSISTANCE

This Info Sheet is a resource guide only and is not intended to be therapeutic, diagnostic, medical, or legal advice. Our best source of assistance for youth with identified needs is the youth's parents or caregivers; the information provided is designed to support the relationship that exists between a youth and his/her parents or healthcare providers and the Scouters involved with the youth.

SOURCES

http://www.helpguide.org/, Attention Deficit Disorders – CMHA, Canadian ADHD Resource Alliance, and material adapted and used by permission of The Scout Association (UK), Scouts Australia, and Scouting Ireland

