

# Behaviour Management or Management Behaviour?

*A sociological study of Attention Deficit Hyperactivity Disorder (ADHD) in Australian and American secondary schools*

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## Recommendations & Findings

### Recommendations:

1. There has been a growing awareness of the difficulties faced by adolescents with ADHD. There is evidence to suggest that this is due to the social and academic difficulties associated with ADHD not being treated in primary years. While this project recommends the implementation of the multi-modal approach at any time, it emphasises the importance of early intervention to prevent significant adolescent problems with ADHD.
2. There has been a dramatic increase in the coverage of ADHD in the media. There is evidence to suggest that many adolescents are concerned by the extreme portrayals in the media, but still feel that being diagnosed ADHD will help them at school. In research interviews most participants referred to themselves having “mild ADHD” as a way to negotiate these concerns. This project recommends that public attention be drawn to the fact that current interventions are adequate to allay most of the difficulties associated with ADHD if adequately resources and implemented early by appropriately trained professionals.
3. There has been a growing recognition that the school is the environment in which most difficulties with ADHD are experienced. Due to increasing demands in the classroom environment without an associated increase in teacher support, many teachers are faced with a decision between meeting the needs of the many or the extensive needs of the few. This project recommends further funding to schools to increase teacher training and student ratios, thus enabling teachers to meet the ADHD guidelines circulated by the various state education departments.

4. In contrast to the United Kingdom, in Australia and the United States there is a distinct emphasis on the expertise of the medical profession in treating ADHD. There is evidence to suggest that this emphasis seriously devalues the expertise of other professionals required by the multi-modal approach (e.g., educators). This project recommends greater emphasis on the expertise of professionals other than medical practitioners in the diagnosis of ADHD and implementation of the multi-modal approach.
5. There has been a recent growth in medication use alone to treat ADHD. There is evidence to suggest that this is due to reluctance by state governments to commit resources to make multi-modal treatment of ADHD available, affordable and accessible. This research project recommends that state governments set up agencies to ensure and monitor that all young people receive the full range of professional services for ADHD within 3 months of commencing medication use.

A full report on this project can be found on the web:

<http://www.ozemail.com.au/~bjpross/adhd.html>

## Key Findings:

1. Participants often described themselves having 'mild ADHD'. This reveals that while they did not experience ADHD symptoms as severely as media reports would imply, they felt they still needed special assistance in the school environment.
2. While all participants maintained that ADHD had a biological cause, most asserted that the difficulties they faced were social in nature and experienced primarily in response to the school environment. Difficulties ranged from poor organisation, difficulty making friends and low self-esteem, through to suicidal thoughts, violent outbursts and ongoing depression.
3. Despite the multi-modal treatment approach being recommended by medical authorities and assurances from governments that this approach was available to all young people with ADHD, all participants used solely medication and expressed surprise to discover treatments other than medication for ADHD.
4. Participants highlighted large class sizes and rushed curriculum as key factors in learning difficulty and significant barriers to teachers providing adequate support.
5. Participants expressed concern that while the media was important in raising public awareness about ADHD, most reports were sensationalised and did not represent the experience of the majority of students with ADHD.
6. Both teachers and participants claimed that traditional educational interventions in classrooms are highly effective with ADHD, but often education structures and pressures on teachers hamper the implementation of these interventions.
7. Teachers often feel they cannot simultaneously meet both the needs of individual and the whole class in the current educational environment. These feelings are exacerbated by the problems associated with ADHD.
8. While amphetamine medication was effective for most participants in primary school, the effectiveness of this medication declined throughout adolescence. Increasingly concerns became social and academic in nature which further highlighted the need for the early use of multi-modal interventions.
9. Participants from lower class schools tended to be diagnosed more for the hyperactivity, while participants from middle to upper middle class schools tended to be diagnosed more for inattention.
10. The survey of all amphetamine use for ADHD by people under 18 years in Adelaide found that medication use was more likely in areas of low income and employment.
11. There are no specific policies relating to ADHD in Australian schools, and the most common difficulty expressed by parents, teachers and participants is the significant gap between services theoretically available under other policies and services that are practically available.

