

Part 2: Theoretical Background and Further Information

We can presume ADHD when first the difficulties have appeared in preschool age and currently they have persisted longer than six months (In: Vágnerová, 1999, p 83).

Symptoms:

Hyperactivity

Hyperactivity is an excessive compulsion toward action, activity which is ineffective and senseless. Strong emotional reactions, impulsive behavior, and sometimes a short span of attention are also typical for a hyperactive person. The frequency and intensity of such activities are raised compared other children. Because ADHD demands high levels of energy children with the disorder have problems controlling and managing their energy output as a result children it leads toward faster tiredness and irritability.

Impulsivity

Impulsivity is a tendency to react to stimuli without thinking, often in an appropriate manner. Impulsive children are first fixed to actual stimulation and eventually to actual satiation. They are not able to understand the consequences of their behaviour or to regulate their behaviour.

The variation of CNS function which is non-controllable by a hyperactive child has been often misinterpreted as motivation disturbance.

Hyper excitability

Hyperactivity is often connected with hyper-excitability what means enhanced emotional irritability, with lower tolerance towards stress. Hyperactive children have the tendency to react emotionally from one extreme to another, from euphoria and enthusiasm to moodiness. Becoming easily tired and having lower stress tolerance are related to typical self-control disturbances, demonstrating affectionate and sometime aggressive reactions.

Attention deficit

The typical symptoms are poor attention, higher tiredness, inability of longer and quality concentration. Hyperactive children pay attention to everything that is intercepted by the brain, many times non-selectively. That is why hyperactive children are non-systematic and disorderly (Vágnerová, 1999).

Social consequences of hyperactivity

The consequences of the difficulties mentioned above is that the hyperactive child can be seen as an undesirable and inconvenient individual who is negatively appreciated and mainly denied by most people. Some deviations in unsettled child personal development are secondary, caused by negative reactions of the community on his difficult behaviour. Because children with ADHD are more often denied, criticised, evaluated negatively and seen as failures they often feel deprived of emotional acceptance and social needs. Also their self concept is mainly negative and their self-esteem low. So we can see the behaviour which responds defending to one own identity (e.g. being pushy, noisy, aggressive).

These problems are usually reflected in the following areas: school; family; professional career; personal relationships; conflicts with society.

School problems

About 90% of children with ADHD have academic problems. They are not able to concentrate, they rush their work, make mistakes and often they do not finish tasks, their outputs are fluctuating. Subsequently, teachers see their failure as a lack of motivation or effort.

The other problem is their inability to keep social norms and to respect school norms because of disturbance in the field of self-regulation. Children are not able to delay any actual need of satiation. The consequence of this is that they are negatively evaluated by teachers due to "bad behaviour".

Family problems, professional problems

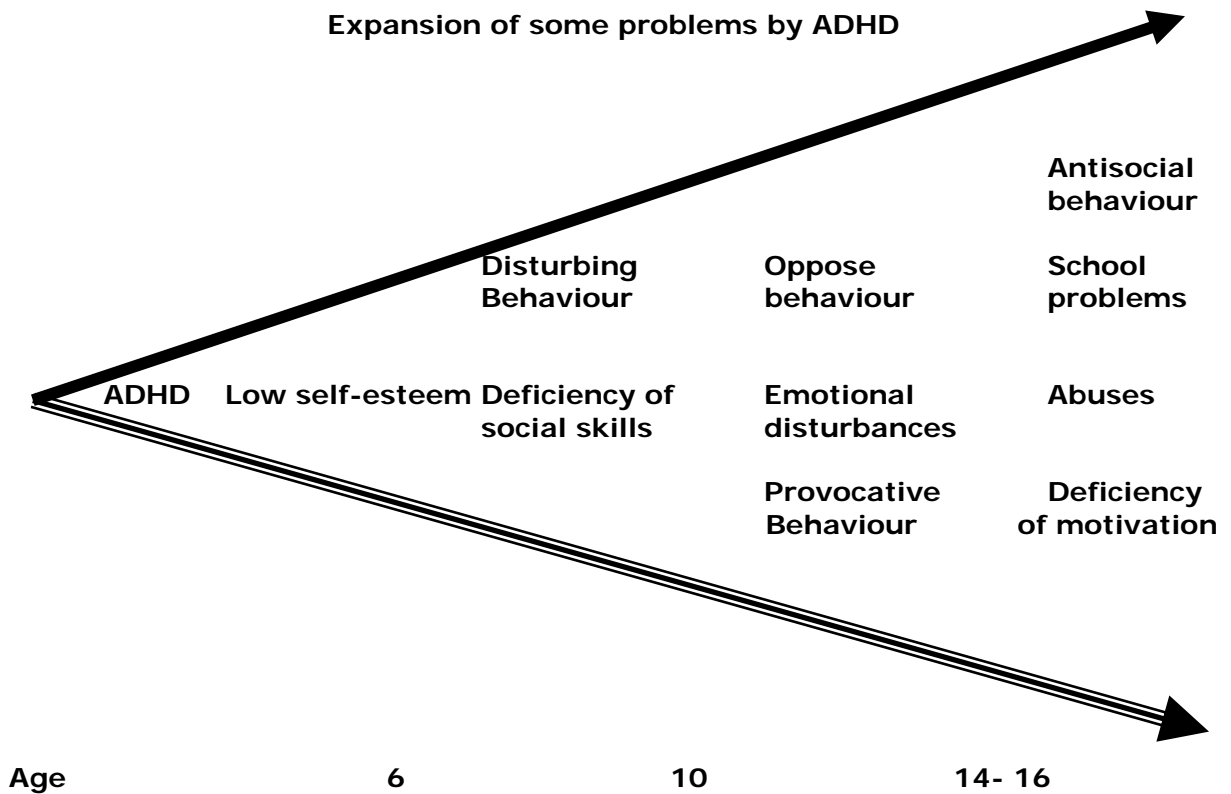
Problems in family are coupled with unfortunate rearing by parents. A child with a disposition toward over-activity and moodiness is stressed further by a mother who easily becomes impatient and resentful. The child is unable to cope with demands for obedience and the mother in particular becomes more negative and disapproving. The relationship between mother and child becomes a battleground. Under such circumstances the demands of school cannot be handled and so the behaviour of the child is often in conflict with roles in classroom.

The negative feedback, criticism and refusal by others stimulates self-defending reactions which reflect themselves as secondary stress and have consequences in the further development of the individual with ADHD. So, many problems are carried through to adulthood mainly in the areas of work, personal relationships and conflicts with society.

Individuals with ADHD often have a very negative attitude to school because of the reasons mentioned above. Therefore the main motive of their professional decisions is to dispose of school. The consequence of this is poor academic achievement. Also the impulsive nature, difficulties with self-control, low stress tolerance, disability of systematic activity and negative expectation reduce the probability of success in any professional role and escalate the risk of failure.

Impulsive, impetuous behaviour becomes more extraordinary in adulthood because we expect mature and responsible behaviour which is different from the behaviour of a child. We can assume that individuals with such difficulties and fixed ways of behaving will be less accepted as partners, they will have problems in any interpersonal relationships.

Teenagers and adults with ADHD often have deviations in personality and they have conflicts with society. About 60% of such people have problems with social adaptation, 25% are referred to special educational institutions or sadly, end up in prison. Their tendency to antisocial behaviour or self-destruction is higher than in other people. In adulthood some people with ADHD, mostly men, are more likely to abuse alcohol, gamble, and display antisocial behaviour and to have deficits in social and work-related behaviour (Oltmanns, Neale, Davison, 1995; Vágnerová, 1999).



(by Macák, 2007)

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