

OFFICE OF DISABILITY SERVICES
INFO PAGE

ATTENTION DEFICIT DISORDER (AD/HD)

Attention deficit disorders are characterized by serious and persistent difficulties in attention span, impulse control, distractibility, and/or hyperactivity-impulsivity. **ADD** is the generic term for **Attention Deficit Disorder**, but the official nomenclature, according to the American Psychiatric Association, is **Attention Deficit/Hyperactivity Disorder (AD/HD)** which is more commonly used in education.

The term **AD/HD** is used to indicate **three** types of attention deficit disorders:

Undifferentiated Attention Deficit Disorder: The primary and most significant characteristic is inattentiveness. (Individuals may seem to be daydreaming). Students appear to be quiet and passive. These students tend to be overlooked more easily in the classroom, and may be at a higher risk for academic failure than those with the other types of AD/HD.

Attention Deficit Disorder with Hyperactivity-Impulsivity: The main characteristic is hyperactivity and impulsivity. Students tend to fidget and squirm, have trouble staying in their seats, and talk excessively. These students appear to be always "on the go". They often interrupt others, don't wait their turns, and intrude on others.

Combined type: Students show characteristics of both the Undifferentiated and Hyperactivity-Impulsivity forms of AD/HD.

All students with an attention deficit disorder, regardless of type, manifest problems with organization and distractibility.

Although there is no one definitive cause of **AD/HD**, the commonly suspected causes have included:

- heredity
- biochemical imbalances
- chromosomal abnormalities

Heredity appears to represent the most identifiable cause, as a positive family history of AD/HD symptoms is a common finding.

According to the *Diagnostic and Statistical Manual of Mental Disorder-Fourth Edition (DSM-IV)*, **AD/HD** is a chronic disorder that begins in infancy (although it may not have been formally diagnosed) with the onset of symptoms being present before the age of seven years old. Children were thought to have outgrown **AD/HD** by the time they reached puberty, but current research indicates that a significant proportion of diagnosed children continue to manifest symptoms throughout adolescence and adulthood.

Additionally, DSM-IV states that some of the following symptoms must occur and must be pervasive in at least two settings, such as at home, school or work:

- disorganization
- procrastination
- verbal impulsivity
- search for high stimulation
- problems with self-esteem
- a tendency toward addictive behavior
- underachievement
- lack of tenacity with tasks
- distractibility
- intolerance for boredom
- inaccurate self observation

Students with **AD/HD** have tremendous difficulty getting or keeping themselves organized. It is frequently found that these students start numerous projects concurrently, but never really complete any of them. This tendency and a lack of understanding of the characteristics of **AD/HD** can create a multitude of problems for **AD/HD** students in their abilities to function within the academic parameters of college.

Sources: Chapter on "Attention Deficit Disorder", Handbook for Tutor Training for Students with Learning Disabilities, published by Tyler Junior College under Carl Perkins, 1994 grant.

Diagnostic and Statistical Manual of Mental Disorder-4th edition, published by the American Psychiatric Association, 1994.

For more information, contact your Campus Office of Disability Services.