

Supporting Gifted Students with ADHD: The Need-to-Knows

with *Lisa Van Gemert* | giftedguru.com

Symptoms:

These are the criteria for an ADD/ADHD diagnosis in the DSM-5

Inattention: Six or more symptoms of inattention for children up to age 16, or five or more for adolescents 17 and older and adults; symptoms of inattention have been present for at least 6 months, and they are inappropriate for developmental level:

- Often fails to give close attention to details or makes careless mistakes in schoolwork, at work, or with other activities.
- Often has trouble holding attention on tasks or play activities.
- Often does not seem to listen when spoken to directly.
- Often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (e.g., loses focus, side-tracked).
- Often has trouble organizing tasks and activities.
- Often avoids, dislikes, or is reluctant to do tasks that require mental effort over a long period of time (such as schoolwork or homework).
- Often loses things necessary for tasks and activities (e.g. school materials, pencils, books, tools, wallets, keys, paperwork, eyeglasses, mobile telephones).
- Is often easily distracted.
- Is often forgetful in daily activities.

Hyperactivity and Impulsivity: Six or more symptoms of hyperactivity-impulsivity for children up to age 16, or five or more for adolescents 17 and older and adults; symptoms of hyperactivity-impulsivity have been present for at least 6 months to an extent that is disruptive and inappropriate for the person's developmental level:

- Often fidgets with or taps hands or feet, or squirms in seat.
- Often leaves seat in situations when remaining seated is expected.
- Often runs about or climbs in situations where it is not appropriate (adolescents or adults may be limited to feeling restless).
- Often unable to play or take part in leisure activities quietly.
- Is often "on the go" acting as if "driven by a motor."
- Often talks excessively.
- Often blurts out an answer before a question has been completed.
- Often has trouble waiting his/her turn.
- Often interrupts or intrudes on others (e.g., butts into conversations or games).

In addition, the following conditions must be met:

- Several inattentive or hyperactive-impulsive symptoms were present before age 12 years.

- Several symptoms are present in two or more setting, (e.g., at home, school or work; with friends or relatives; in other activities).
- There is clear evidence that the symptoms interfere with, or reduce the quality of, social, school, or work functioning.
- The symptoms do not happen only during the course of schizophrenia or another psychotic disorder.
- The symptoms are not better explained by another mental disorder (e.g. Mood Disorder, Anxiety Disorder, Dissociative Disorder, or a Personality Disorder).

NEED TO KNOW: Gifted looks really ADHDish.

Strategies:

- Classrooms are structured so that rules and routines are well known by the students and consistently followed.
- Transitions among lessons and activities are smooth.
- The teacher is able to give the impression that the he or she is aware of all activities by students in the classroom.
- Minimize distraction where possible. For example, the student can be seated away from potentially distracting areas (such as doors, windows, and computers) or seated near another student who is working on a shared assignment.
- Organizing lesson plans and instruction in a way that minimizes interruptions.
- Increasing teacher awareness in the classroom by letting students know you are aware of their actions at all times.
- Work on the most difficult concepts early in the day (schedule hardest classes early).
- Give directions to one assignment at a time instead of directions to multiple tasks all at once.
- Post directions on board with bright boldness.
- Vary the pace and type of activity to maximize the student's attention.
- Keep the classroom organized.
- Have a "study station."
- Provide reminders. You can fight it, but you will not win. No one will. (Use Remind, wristbands, whatever it takes).
- Break tasks down to the smallest task that matters.
- Make eye contact with a [genuine] smile.
- Be consistent.

NEED TO KNOW: Think MACRO structure/MICRO change.

Resources:

My article on executive functioning: bit.ly/exec-func

National Resource Center on ADHD: help4adhd.org

ERIC search for academic articles: bit.ly/eric-adhd

Teaching Teens With ADD, ADHD & Executive Function Deficits: A Quick Reference Guide for Teachers and Parents by Chris A. Zeigler Dendy

ADHD in the Schools, Third Edition: Assessment and Intervention Strategies by George J. DuPaul, Gary Stoner, Robert Reid

How To Reach And Teach Children with ADD / ADHD: Practical Techniques, Strategies, and Interventions by Sandra F. Rief

The ADHD Workbook for Kids: Helping Children Gain Self-Confidence, Social Skills, and Self-Control by Lawrence Shapiro

Smart but Scattered: The Revolutionary "Executive Skills" Approach to Helping Kids Reach Their Potential by Peg Dawson and Richard Guare

Superparenting for ADD: An Innovative Approach to Raising Your Distracted Child by Edward M. Hallowell, Peter S. Jensen

Parenting Children with ADHD: 10 Lessons That Medicine Cannot Teach by Vincent J. Monastra

NEED TO KNOW: Be a source and support by developing rapport.