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# Youth and AD/HD

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## What is AD/HD?

Called Attention-Deficit/Hyperactivity Disorder, AD/HD is still referred to by some professionals as ADD. It is a neurological developmental disability characterized by inattentiveness, impulsivity, and hyperactivity.

## What Causes AD/HD?

While the exact cause of AD/HD remains unknown, it appears that it may have genetic ties. When one family member has AD/HD, other family members are more likely to have it than families having no members with AD/HD. It is also thought that a chemical imbalance or deficiency of neurotransmitters in the brain may cause the disorder. It is not caused by bad parenting.

## What are the Types of AD/HD?

There are three types of AD/HD:

1. AD/HD Predominately Inattentive Type—mostly inattentive symptoms.
2. AD/HD Predominately Hyperactive-Impulsive Type—mostly hyperactive and impulsive symptoms.
3. AD/HD Predominately Combined Type—the most prevalent type. Equal amounts of symptoms from the two groups.

## What are the Symptoms of AD/HD?

### Inattentive Symptoms

- Trouble concentrating,
- Don't know where to start on a task,
- Often gets lost in the directions,
- Makes careless mistakes,
- Appears to not listen when directly spoken to,
- Difficulty organizing and sustaining tasks,
- Easily distracted.

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## **Hyperactivity Symptoms—most visible sign of AD/HD**

- Often fidgets with hands and feet,
- Squirms in seat,
- Leaves seat when not appropriate to do so,
- Runs or climbs excessively,
- Feels restless,
- Difficulty engaging in quiet play or leisure activities,
- Talks excessively.

## **Impulsivity Symptoms**

- Acting without thinking,
- Blurts out an answer before question is finished,
- Difficulty waiting for his or her turn,
- Interrupts or intrudes upon others.

## **How is AD/HD Treated?**

AD/HD can be treated by medication. However, side effects, such as tics, from these medications can be severe and unpleasant. Therefore, many people with AD/HD choose not to take medication. Behavior modification therapy is helpful for many individuals. While one does not “outgrow” AD/HD, the symptoms, especially those associated with the hyperactive type, may appear to lessen as one ages.

## **Important Issues for Extension Educators and 4-H Leaders to Consider:**

1. Have contact information for parents or guardians and the member’s doctor in accessible places. An example of this would be behind the child’s nametag and in the medical forms box in the main office at 4-H events. This form should include information such as what kinds of medications the child is taking, allergies, if any adaptive devices are used, and other health conditions.
2. Visit with the member and his or her parents about the member’s AD/HD. Questions that can be asked include: “What type of AD/HD do you have?”, “Are you taking medication for your AD/HD?”, and “What are the side effects of your medication?”
3. Educators and leaders who work with a member with AD/HD who seems to get lost in the directions or doesn’t know where to start, are encouraged to try breaking down tasks or activities into small pieces of directions. When the member is finished with the first set of directions, leaders can give them the next one, and so on.
4. Speak slowly when giving directions, and be prepared to repeat them. Try backing up what is said verbally, with a written source.
5. When a member seems out of control or way off track, leaders may get frustrated. Don’t take it personally and ridicule or harshly reprimand the member. Try to redirect the member back to the activity that he or she is supposed to be participating in.
6. Try to keep members with dyslexia away from potential distractions in a room when planning an activity. These places include doors and windows. Also take short breaks during a longer activity.
7. Members with AD/HD may have co-existing disorders such as learning disabilities and Tourette Syndrome. They may also suffer from anxiety and mood swings. Make sure it is understood what disorders affect the particular young person who is being worked with, and how it affects that person’s AD/HD and well being as a whole.

## **For More Information Contact:**

Children and Adults with Attention-Deficit/  
Hyperactivity Disorder  
8181 Professional Place, Suite 150  
Landover, MD 20785  
Phone: (800) 233-4050  
Web site: <http://www.chadd.org>  
(Web site active as of May 2, 2005)

## **Acknowledgements:**

Appreciation is extended to the following reviewers: Matthew Cavedon, trustee, National 4-H Council; Terri Dawson, director, Parent Information Center, Buffalo, Wyoming; Roger Tormoehlen, head, Department of Youth Development and Agricultural Education, Purdue University; and Karen C. Williams, associate professor and head Department of Family and Consumer Sciences, University of Wyoming.

Special thanks is also given to David K. Carson, former professor of Family and Consumer Sciences at the University of Wyoming, and Kent Becker, associate professor of Counselor Education at the University of Wyoming for comments on earlier versions of the articles in this series.

*Inclusive 4-H* coordinator, Randolph R. Weigel, professor and human development specialist, University of Wyoming Cooperative Extension Service.