## Editorial

## **Review on ADHD Children and their Parents**

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Editor

Attention-deficit/hyperactivity disorder (ADHD) is a serious public health problem affecting a large number of children and adults. Difference in brain development and brain activity that affect attention. The ability to sit still and self control. ADHD can affect the child at school, at home and in friends. CDC conducts research to expand on what is known about ADHD. The information learned will improve knowledge about the factors that increase the risk for ADHD, as well as the causes, and best treatments, and will aid the development of resources to help people living with ADHD.

Attention deficit Hyperactivity disorder (ADHD) is among the most prevalent mental disorder in children and is characterized by three core symptoms of inattention, hyperactivity, and impulsivity. It is one of the most difficult diagnoses to categorize as evident form changing definition criteria observed in the revisions of Diagnostic and statistical manual<sup>1-3</sup>.

Kids with ADHD can face a lot of hardship – but their parents do too. These tips could help;

- Consistent negative messages not only impact children and teens with ADHD, but also their parents.
- Parents of children with ADHD have more frequent and less positive interactions with their child's school.
- Improved understanding of the nature of ADHD and the impacts will improve understanding and support.

CDC uses data from national surveys to understand the number of children with ADHD, other concerns and conditions they might experience, and the kind of treatment they might receive. Surveys that have data on children and on ADHD include; National Survey of Children's Health since 2016,

- National Survey of Children's Health 2003-2012,
- National Survey of the Diagnosis and Treatment of ADHD and Tourette Syndrome (NS-DATA),
- National Health Interview Survey,
- National Survey on Children with Special Health Care Needs

CDC's National Center on Birth Defects and Developmental Disabilities (NCBDDD) supported large community-based, epidemiologic studies of ADHD in the United States. These studies

- Enhance what is known about ADHD and the cooccurring conditions in children and
- Increase the opportunity to make the most informed decisions and recommendations about potential public health prevention and intervention strategies for children with ADHD

In 2016, the National Household Education Survey collected by the U.S. Census Bureau captured

information regarding educational involvement from parents of children with ADHD compared to parents without a child with ADHD. Results from this study found that parents with a child diagnosed with ADHD were more likely to receive phone calls from school about their child, and three times more likely to meet with a guidance counselor. It is safe to say that many of these calls, notes, and meetings were being used to address emotional, behavioral, or academic concerns within the classroom and are negative and stressful for parents.

Many parents who feel anxious prior to family gatherings, birthday parties, class field trips, or a simple trip to the playground. These situations can create anxiety for a parent who may anticipate a potential meltdown or conflict with peers and subsequent judgments from other parents or adults. Often this anticipatory anxiety or previous negative experiences can ultimately create avoidance. Similar to the school statistic, it may be that parents of children with ADHD have less opportunity to have fun, socialise, and receive support than other parents.

Research from the Journal of Abnormal Child Psychology identified that parents of children with ADHD experience higher stress levels, less satisfaction as a parent, and higher rates of depression than parents of other children. When a child or family feels included, supported, and understood, they fare better and we fare better as a community. A broader and more accurate understanding of ADHD as a deficit in regulation (attention, emotions, energy, other executive functions, etc.) vs. only a deficit in attention will help build more accurate interpretations of children's behaviour, more targeted and specific supports, and greater empathy for the challenges that people with ADHD face at teach day.

Parents of children with ADHD and also school teachers keep educating themself on ADHD.

It is not known what causes ADHD. ADHD is often seen in families, and genes appear to play a role, but other factors may contribute or make symptoms worse. For example, some environmental exposures have been linked to increased ADHD symptoms, but the evidence has been inconsistent. Knowing more about those factors would help with planning how to decrease the risk for ADHD. A comprehensive literature review of studies that investigate a large range of factors that might increase the risk for ADHD. The results will increase the ability of public health professionals to make the most informed decisions and recommendations about potential public health prevention strategies.

ADHD can cause problems in how well children do in school, in their ability to make and keep friends, and in how they function in society. Although there are treatments to improve ADHD symptoms, more information is needed about managing ADHD so that children can learn and grow into adulthood without being impaired by their symptoms.

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The criteria used to diagnose ADHD have changed over time. Researchers who study ADHD have used different definitions to diagnose ADHD. This has led to different estimates for the number, characteristics, and outcomes of children with the disorder. Although the exact causes of ADHD are not known, research shows that genes play a role, but other factors may contribute or make symptoms worse. There are many unanswered questions about ADHD, and there is more we need to learn about how ADHD affects people throughout their life.

The treatment costs of ADHD and the personal and societal costs can be significant. Researchers estimate that in the United States, \$31.6 billion is the combined annual cost for Health care for persons with ADHD specifically related to the diagnosis.

Health care for family members of persons with ADHD specifically related to their family member's diagnosis; and Work absences among adults with ADHD and adult family members of persons with ADHD.<sup>4</sup>

According to a research Gender differences were not found in impulsivity, academic performance, social functioning, fine motor skills, parental education, or parental depression.

However, compared with ADHD boys, ADHD girls displayed greater intellectual impairment, lower levels of hyperactivity, and lower rates of other externalizing behaviors; it was not possible to evaluate the extent to which referral bias affected these findings. Some gender differences were clearly mediated by the effects of referral source; among children with ADHD identified from non-referred populations, girls with ADHD displayed lower levels of inattention, internalizing behavior, and peer aggression than boys with ADHD, while girls and boys with ADHD identified from clinic-referred samples displayed similar levels of impairment on these variables.

ADHD is a chronic disorder with significant behavioral and emotional sequels. There is significant resistance and controversy regarding the use of stimulant medication both on part of physicians and parents<sup>5</sup>.

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