ADHD – Myths and Facts
by Natalie J. Dahl, M.S., CCC-SLP

Sometimes, people use the term “ADHD” to label kids they see exhibiting “bad” behaviors or high energy levels. But do these people really know what ADHD is? There is often some confusion about this disorder – who has it, how it can impact life, where it comes from, and its treatment. The following myths and facts will clarify this confusion surrounding ADHD.

Myth #1 – Attention-Deficit Hyperactivity Disorder (ADHD) is not a real disorder.
FACT: ADHD is very real! It is a highly genetic, brain-based medical disorder that affects a child’s ability to regulate several brain functions and behaviors (or “executive functioning skills”) and is recognized as such by educational, medical, and psychological professionals. ADHD once known as Attention Deficit Disorder (ADD) was renamed “ADHD” in 1994. There are three different types of ADHD:

1. Inattentive: trouble paying attention, difficulty staying on task, apparent listening problems, difficulty following directions, problems with organization, avoidance of things that require mental effort, tendency to lose things, distractibility, and forgetfulness.
2. Hyperactive-impulsive: fidgeting/squirming, difficulty staying seated, excessive running, difficulty playing quietly, always seeming to be “on the go,” excessive talking, and interrupting/blurt out answers or comments.
3. Combined: the most common type; a combination of the first two types.

Myth #2 – ADHD is uncommon and only boys have it.
FACT: ADHD does not favor age, gender, IQ, religion, or socio-economic status. It affects about 10% of school-age children, and boys are three times more likely to be diagnosed than girls. To put this statistic into perspective, an average class size of 25 students may have 2-3 students with signs of ADHD.

Myth #3 – It is easy to diagnose ADHD.
FACT: Diagnosis requires an evaluation by a licensed pediatrician, psychologist, or psychiatrist. There is no single test that will detect ADHD. Instead, professionals conduct interviews and collect information for behavior and symptoms rating forms. To be considered for a diagnosis of ADHD, a child’s behaviors must (1) display before age 12, (2) be more severe than in other kids the same age, (3) last for 6+ months, and (4) negatively affect two or more areas of a child’s life (school, home, childcare, etc.).

Myth #4 – ADHD does not usually occur along with other conditions.
FACT: Approximately 2/3 children with ADHD have one or more coexisting conditions listed below:

- 50% have learning disabilities affecting reading, handwriting, concentration, and attention.
- 40% have Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD) characterized by acts of defiance, stubbornness, temper outbursts, and aggression.
- 30% have anxiety disorders and may experience excessive worry, fear, or panic.
- 20% have mood disorders, including depression and bipolar disorder. They may feel isolated, have low self-esteem, are irritable, and have rapidly changing moods.
- Sleep disorders affect people with ADHD two to three times more than those without ADHD.
Myth #5 – ADHD is harmless.

FACT: ADHD can impact the ability to function socially, academically, and at home. Undiagnosed and/or untreated ADHD can contribute to poor school success and graduation rates, decreased work productivity, poor relationships, overeating and obesity, difficulty obeying the law, and driving citations and accidents.

Myth #6 – ADHD is somebody’s or something’s fault.

FACT: ADHD is not caused by poor parenting, sugar, food allergies, TV, family problems, vaccines, or poor teachers or schools. It is nobody’s fault! The exact cause is unknown, but experts do know that it is highly genetic and brain-based. Research shows that some areas of the brain are 5-10% smaller in kids with ADHD. There are several risk factors linked to ADHD later in life, including smoking during pregnancy, premature delivery, very low birth weight, injuries to the brain at birth, gender, family history, and environmental toxins.

Myth #7 – ADHD treatment is simple.

FACT: There is no cure yet, but there are treatments available to help children successfully live with and reduce their symptoms. In most cases, professionals can treat ADHD with combinations of medication, behavioral therapy, parent education or training, and educational support. At home, there are several behavioral strategies that parents can implement to help children with ADHD:

- **Create a visual schedule.** Follow the same routine every day. Post a schedule of daily activities somewhere the child can see it. Then he/she won’t have time to ask questions throughout the day about homework, chores, soccer game, or mealtime.
- **Get organized.** If the child loses things easily, designate a specific place for backpacks, shoes, toys, and clothes. He/she will be able to find things more quickly and with less frustration.
- **Avoid distractions.** When the child is home, especially during homework and meal times, make sure to turn off all electronic devices (TV, tablets, cellphones, computers, radio, etc.) to allow your child to focus more easily.
- **Limit choices.** If the child is overwhelmed with making decisions, offer a choice between two options (e.g., outfits, toys, meals, etc.).
- **Change how you interact.** Make sure to give the child clear, brief directions in a positive and encouraging way, rather than nagging or making him/her feel guilty or confused.
- **Use goals and rewards.** Most children respond well to visual charts and trackers. Keep track of goals the child is working toward, track positive behaviors, and reward his/her efforts.
- **Discipline effectively.** Use time-outs or loss of privileges as consequences for inappropriate behavior instead of shouting or spanking.
- **Find a hobby or talent.** Feelings of accomplishment can increase self-esteem and social skills. Help the child find something to succeed in, such as learning an instrument or playing a sport.

There are many myths surrounding ADHD, but knowing the facts can help parents, educators, and the general public become advocates for children with this diagnosis. With the correct support and treatment, it is very possible for those with ADHD to live productive, successful, and happy lives.

**RESOURCES**


**Helpful Products**

The list of Super Duper® products below may be helpful when working with children who have special needs. Visit [www.superduperinc.com](http://www.superduperinc.com) and type in the *item name or number in our search engine*. If you’re viewing this Handy Handout on a computer, click the links below to see the product descriptions.

- **Following Directions Fun Deck**  
  Item #FD-59

- **Ask & Answer Social Skills Games**  
  Item #SOS-62