The methods of teaching deaf children with ADD and ADHD disorders: the applications and the implications

Tasha Goodrich
Master’s Project

The Methods of Teaching Deaf Children with ADD and ADHD Disorders: The Applications and the Implications.

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Abstract

The project will be focused on the exploration of the ways that the teachers use to deal with the deaf students that struggle with an additional disability in form of Attention Deficit Disorder. The teaching and learning strategies will be studied in order to determine the success rate, if any, by implementing the goals and results produced by the methods and the objectives associated with the lessons being taught at the time and to determine the willingness of the educators in working with such said disabilities. The experiences of the deaf students with the disorders will be documented as to gain a better understanding of the domestic and academic relationships surrounding those students. (Parent-teacher collaboration for example). The object of my thesis is to determine the success the techniques being employed and to document the success derived from using the approaches that aide the students with the disorders by basing on the feedback provided by the teachers and parents.
Introduction

The purpose of this study is to explore whether the traditional methods being used are used by teachers to aid students with Attention Deficit-Hyperactivity Disorder (ADHD) are effective. If they were not judged to be so, how does one develop more successful methods? There is another purpose to this study which is to collect information on the methods used by the teachers for the students with the deafness and such disorders. The relationship between both would show how deaf children learn and utilize various learning processes such as that of the cognitive approach.

The objectives would be as follows: (1) to establish a study that would ask questions about teaching and learning strategies when it comes to working with deaf students with the disorders, (2) to examine the effectiveness of the traditional methods and to see if there is reason to apply them to the learning processes of the deaf children. It is also the objective to examine whether there are any new ideas or methods other than the methods employed by the teachers. That is why it would be of essence to see if the teachers of the deaf have been actively keeping the methods in a constant use to maintain the successful management of the students’ learning activities and actively keep tabs on the students’ progress in those areas. By that, I mean to see if the teachers had taken the disorders under consideration and have planned the teaching lessons in accord with the students’ needs shaped by the disorders.

The purposes and objectives of this study imply the goals for the research. They emphasize the importance of developing an acknowledgment of the role ADHD plays in affecting the learning processes being experienced by the deaf. It can place stress upon both the learning and teaching process being experienced by the teachers and the
students. It may be a factor in determining the amount of materials being taught or being
learned. One goal, therefore, is to determine whether ADHD does have an effect on
learning abilities and teaching methods by determining the success of learning on the part
of the students. In addition, I will attempt to determine if there are teachers that do not
acknowledge the disorders when it comes to teaching children with ADHD (e.g., a
teacher may not follow the behavioral modifications closely, or may penalize a child for
ADHD behaviors that he/she cannot control). The importance of this research is to gain
an understanding of the role ADHD has in the learning processes of the children in
addition to their deafness. I do not label deafness as a form of disability since the works
of William Stokoe have proven the deaf to be a socio-linguistic cultural subgroup of the
society. But, for the sake of this paper, they are to be disabled in their ability to develop
several languages at the same time which has implications for diagnosis of ADHD. One
question that must to be addressed: is it the language barrier that leads to the
misdiagnoses of various learning disabilities including ADHD? This is an example of
several questions being asked during this research.

My suggested project will be a research study since new information could result
from examining several aspects of ADHD and its effects on deaf education in the aspect
of effective teaching and/or effective learning. First, there will be a mini-literature review
of the research in this area accompanied by the study of psychological applications of the
brain when it comes to learning and being taught. An attempt to describe how ADHD
affects one’s mental capabilities and one’s learning behavior will be made. Then an
attempt to study teachers’ use of environmental manipulation and behavioral
modifications and their collaboration with the parents of the children with ADHD will be
made by conducting a series of observations and interviews with all people involved (teachers, and parents). There would be a survey or questionnaire to be provided that covers the various aspects of learning and teaching approaches as the tools or the strategies of dealing with ADHD. This survey or questionnaire would also cover the actions on part of the teachers, parents, and the children as to set an observation of how the disorders are being dealt with. (See Appendices)

There will be also an attempt to study the success of either traditional methods that are being currently implemented by interviewing the teachers in this aspect and to see how they affect the learning possibilities for the students. In addition to establishing a literature review covering the psychological aspects of learning with ADHD, the literature review will also set forth the concepts that would form the basis for environmental management and behavioral modifications as seen in the teacher feedbacks.

A research report on the topics addressed above is the final product. This report will include, in a descriptive summary, the scientific study of the brain being affected by ADHD and the psychological aspects of ADHD in deaf children. The collection of data from the surveys or questionnaires will be presented in descriptive statistics to display the success rate of the methods being used, the relationships of teachers and the students, and that of teachers and parents. It will be based on interviews of the people involved. The details of this interview process will be decided as the study progresses. The results will hopefully reveal various strategies of teaching and learning and will include a comparison of a few cases with different experiences. In addition, there will be at least six sources
that describe the deaf experience with the struggle with ADHD as well as the experiences of teachers and psychologists working with ADHD.

To show an example of the literature review, at least four sources will be listed here related to deaf children with these disorders. The first two sources are related to deaf education. One is titled *Psychosocial Aspects of Deafness* written by Nanci A. Scheetz. This would be a useful tool in studying the psychological aspects of the deaf since it contains the information on varying approaches studied by the psychologists in terms of behavior, biology, the analyzing of psychology, as well as the social psychology and mostly importantly the cognitive approach. The works of Albert Bandura will be examined when it comes to discussing and understanding the social cognitive theory which states that imitation is the means by which individuals learn about the world around them. This theory is useful for understanding how children with ADHD respond in classrooms and such. The emotional intelligence theory set forth by Daniel Goleman is relevant to understanding how intelligence is shaped by confidence growth among deaf children with ADHD. It is believed that intelligence is shaped by the emotional attachment within oneself when it comes to having the capabilities of handling the challenges posed in life. It would be useful to apply this theory to these children with ADHD. Psychological matters are addressed in *Educating Deaf Students: From Research to Practice* by Marc Marschark, Harry G. Lang, and John A. Albertini. This book is very suitable when it comes to understand the development of the needs experienced by deaf children in various programs and school settings. Those needs will be in focus with the cognitive development, the foundation of learning which in turn would cover the visual learning approach mostly popularized by the teachers of the deaf recently. There are also
the issues of reading, writing, and literacy matters. As I earlier asked, if there are
misdiagnoses on the part of psychologists when it comes to identifying the learning
problems of students, is it because there are language barriers to learning that are
confused for ADHD?

In addition to these works that relate to the deaf, the works covering ADHD in
general will be covered. As I had mentioned, the Emotional Intelligence Theory set forth
by Daniel Goleman, and Journeys Through Adulthood: Discover a New Sense of Identity
and Meaning While Living with Attention Deficit Disorder by Sari Solden discuss the
struggle with the emotional issues that focus on managing or overcoming the symptoms
rather than learning to live effectively with the condition. Now think in terms of the
struggles being experienced by deaf children and/or adults. Do they have the same access
to the information as their hearing counterparts? Regardless, much of the struggle is with
identity as well as emotions that result from the struggles of every aspect of life. Another
book that would be of great use is Brain Literacy for Educators and Psychologists by
Virginia W. Berninger and Todd L. Richards. It describes the link between the brain and
literacy in terms of writing and reading capability development and it examines the
limitations of either academic learning or literacy learning in terms of biological and
educational grounds. Much of this will be discussed in biological terms. To make this
easy to understand, it is more about the mental development of learning. There will be a
look at the knowledge storage being built inside the brain as to recognize things
cognitively and it will be a great use in structuring a possible model of a typical deaf
student’s learning and as well as one with ADHD.
Literature Review

As it is that while the project is being done on the grounds of studying the deaf students with the aforementioned disorders, it is necessary to go over the basics of Attention Deficit Disorder. To address the definition of such disorder, I refer the Attention Deficit Disorder as a condition that creates lack of attention, hyperactivity, and/or impulsivity. It is recorded in a statistical study done by Kastrow and Kirst that an estimate is made that about two million of children are afflicted with these disorders. It is numbered at between two to seven percent of all school children nationwide. (Kastrow & Kirst-Ashman, 122-123).

While it is with difficulty to find a census of deaf children that is afflicted with those disorders, it is believed that there are hundreds or thousands of them as seeing that it is often a pre-existing or concurrent -existing disorder that is often associated with the deafness that in turn creates more challenging issues for the teachers and other school authorities to tackle with. In the body of works by Solden, the identity issues are the ones of the most affected areas when it comes to deal with the disorders as one makes the journey through his or her lifetime. The author has set forth the challenges being experienced as one goes through four stages as to follow as; 1) attempting to repair your identity through avoidance of evaluating one’s weaknesses and strengths as to get by public or personal situations without acknowledging his or her shortcomings, 2) reaching the true acceptance as to reach the end of denial stage and it is when one seeks the modifications or remedies to cover his or her shortcomings, 3) facing an identity crisis that often emerges out after taking steps to seek the acceptance of himself or herself and lastly, 4) resolving that identity crisis as
to grasp the full-developed abilities to seek the resistance to feeling inferior in his way or her way as to empower him or her. These are the gradual stages that often a person with the Attention Deficit Disorder has to go through in order to acquire his or her identity as a person with Attention Deficit Disorder while recognizing him or her to be a full person as well. (Solden, 47-147).

As the previous paragraph discusses the identity issues that would be associated with the Attention Deficit Disorder, it is in my belief that they play the crucial role in diminishing the deaf children's abilities to manage their identity growth due to many factors such as societal conditions, lack of communication often seen with their parents or guardians, and educational conditions being experienced in their schools. These would be also referred to several sections in the works of Scheetz. To provide few examples, it is found in a section dedicated to the role of a familial unit that often serves as a model reference for the identity of the deaf to be based on during the childhood. It is in agreement with the effects of the disorder it would have upon the personal growth (Scheetz, 20-21).

Also there is a section on the impact by the schools upon the deaf identity. This discusses the conditions that lead to a more successful development of an identity when being nurtured in terms of utilizing language and be given ample opportunities to obtain education through the use of language as the means of information delivery. Also the conditions that shape one's education are to be considered in terms of school settings, peer friendships, and mostly of all, the means of communicating. It is also found in that research that higher self-esteem leads to a higher success in having a strong educational foundation. (Scheetz, 35-39).
But to couple these educational conditions with the disorders, one cannot imagine how much the rate of success would be reduced if the social growth is not ample enough for these students due to the mere fact that these very disorders would create more barriers to grasping the control or the understanding of the social environment. This would be diminished through series of moves that make the allowance for the people with disorders to partake in their developing strategies of avoidance. It is often that these students with Attention Deficit Disorders are becoming experts in failure and goes to accept such a perspective on themselves but it is the embarrassment that they cannot stand. One of the factors that they attempt to avoid is the teachers themselves as they often create a lack of positive learning positive environment for the students with these disorders. By that, it is meant that the teachers would create conditions that force the students to feel that they are bound to fail and to feel the idiocy being seeded inside their minds.

With the above conditions, it is understood that developing teaching and learning strategies are of importance when it comes to meet with the students’ learning capabilities that would be barred by the disorders. In the works of Marschark, Lang, and Albertini, there are several to be found in the sections that relates to the attention span. With that in mind, it is understood that in order to maintain the students’ focus is in itself a difficult, if not impossible, challenge.

By discussing the challenges of capturing the students’ attentions, the subjects of gaining one’s attention, redirecting one’s attention, and switching one’s attention would be explored. By mentioning earlier the role of the family in a deaf child’s life, it is seen that the deaf parents have a variety of visual and tactile strategies for
communicating effectively with their young children while the hearing parents are not likely to discover such techniques spontaneously. It would be seen in same aspect as for the teachers through the same means of gaining attention by utilizing hand or body movements that would include touching, pointing, and to reduce communication as to force the child to realize the importance of communicating among other things that would be useful in managing the problems associated with Attention Deficit Disorder. By redirecting the attention, it would be felt that doing this repeatedly as to promote the importance of understanding the subjects or tasks placed before them. By doing that, they would more likely to remember complex visual signs such as visual aids being employed in the classrooms. However, by switching the attention, it would be that it sets forth stronger settings of learning by being more diverse in the approaches periodically. This allows for the constant changes in the deaf students’ daily experiences that influence their views and interactions with the world and among themselves. As to grasp the experiences of organizing their knowledge, one consequence of switching the attention as to switch between sources of learning (i.e. from a teacher to computer screen to an overhead projector) would be that it leads to more difficulties being posed against the learning opportunities for the students with Attention Deficit Disorders. (Marschark, Lang, and Albertini; 68-70, 117, 188).
Method

Participants

By sending out invitations to participate in my research earlier, only six teachers from National Deaf Academy based in Florida and Rochester School for the Deaf based in Rochester, New York had responded. In addition to those teachers that responded, only one parent of a student at Rochester School for the Deaf has participated in the parental section of the research. Throughout the data-collecting efforts, a lot of problems had been presented. I had mentioned that I had sent out the forms to many schools and had attempted to visit schools but had come up empty-handed because of their lack of responses. On other hand, the schools that I had contact with do not allow me to view the Individualized Educational Plans on the grounds of the privacy. That is when I attempt to illustrate the relationships between the teaching/learning methodologies and the ability to bring the requirements listed in the IEPS out.

Other problem is the questionnaire forms themselves. One hearing parent with a child that has a severe Attention Deficit Disorder wanted to do the form but she felt it was difficult to do. She did express verbally that it was difficult to deal with her child that had to end up attending a special school away from their home. But in the long run, she noticed that her child has improved in the aspect of behavioral modifications. In addition to that mother’s sentiments about the form, a teacher from Rochester School for the Deaf didn’t fully answer the questions presented in the form. She stated that it was difficult to do...therefore sharing that mother’s sentiments. It is due
to the fact that she would not understand the questions. In the conclusion, it does become difficult for me to analyze the data collection.

**Procedures**

By getting the professionals to participate in the study, I sent out a letter to NDA and RSD seeking permission to do my thesis study. If a candidate was willing to be a participant, they were to fill out the teachers' questionnaires form and send it either though e-mail or a hardcopy in the mail. The consent forms from the participants were collected from them prior to the observations. Attachments of parents' questionnaires form were sent out via e-mail, they send in the hardcopy in the mail.
NDA Teachers Data Collections

- Only two schools will be discussed here: National Deaf Academy and Rochester School for the Deaf. Every school will be discussed individually.
- Note: the answers provided here are in the exact wordings left by the teachers and parents. Nothing is changed.

1. **What strategies, if any, are you currently using with your student with ADD or ADHD disorders while teaching your content?**

   The first teacher had noted that for to successfully hold the students’ constant learning, the following tools are to be employed: frequent breaks, establish extra time for transition between classes, and ignore behaviors that do not impact the educational settings and to reduce the amount of distractions.

   **Teacher # 1:**
   - Allow frequent breaks
   - Allow extra time to transition between classes
   - Ignore behaviors that do not impact the educational settings
   - Reduce/minimize distractions

   **Teacher # 2:**
   During the hour and half class, I have multiple activities planned. Most are seatwork, but they change rather often to keep boredom at bay. Once in a while I will have the students stand up and play a movement game if they are all sleepy or not paying attention. One such game is Simon Says.

   **Teacher # 3:**
   With ADHD disorders, the classroom environment is structured specifically for learning. This means reducing environmental stimuli and creating organizational strategies for teacher/staff/and students to follow. Also, following a highly structured routine in which activities and transitions are predictable to allow for more on task and focused behaviors. Movement breaks and sensory integration strategies (sitting on a ball- T-Stoll, hand fidgets) are also beneficial to these students.

2. **How do the student(s) deal with the given learning styles that you had set up?**

   **Teacher # 1:**
   Some students struggle when given frequent breaks while other students ask for mini breaks depending on their needs (attention span). Before transitioning between classes, some students are reminded 15 minutes before class will be ending and they will be moving to the next class. These students require additional prompts to clean up and get ready to transition to the next class. Some of the students during
independent seatwork, group instruction rock back and forth in their chair, play with their pens/pencils, or play with a toy. If the students are paying attention and engaged in class then that behavior is ignored. Students with ADHD or ADD need to be seated near the teacher to help the student with cues (non verbally or verbally) to help the student to maintain focus and stay on task.

**Teacher # 2:**
The students do fairly well with these techniques. There is sometimes one or two that won't follow along, but that is to be expected.

**Teacher # 3:**
The students that I have used these strategies with do well. For example: One gifted child in the past was placed into my classroom with learning disabled and EMH students because of her hyperactivity and impulsivity. She would fall out of her chair every few minutes because of her wiggling. Given intensive sensory integration therapy, she benefitted. When working, she sat on a T-Stoll and improved her control of her body movements. Once she learned to do this, she was able to return to a regular classroom setting after a year.

3. **How successful were these strategies? If possible, print the before and after pictures of those students.**

**Teacher # 1:**
These strategies are ongoing in the classroom. For some students it is successful for a few days/weeks and then the following day/week it does not work at all.

**Teacher # 2:**
These students tend to provoke, fall asleep, or get distracted during a long activity. With a change of activities, they are better able to focus on the stuff they don’t’ like because something else will be soon to follow.

**Teacher # 3:**
I have found them to be quite successful, as I have found many students with ADHD have Sensory Deficits that are interfering with their focus. (Visual over-stimulation, Auditory distractions, Tactile sensitivity or desensitized, and an increased need for vestibular/ pro-receptive input).

4. **If so, why were these strategies successful? Or why were they not so successful?**

**Teacher # 1:**
It depends on the students and what is happening within their minds (Did the student get punished... Is the student upset with a classmate or a friend...? Is the student excited about something?)
Teacher # 2:
Answered in number 3.

Teacher # 3:
I feel that by allowing Sensory Stimulation, movement breaks, and having an organized environment structured to meet the needs of these students allows for an increased sense of control over them, leading to a higher level of self-worth in these students. When they feel good about themselves and can take control of their actions, they in turn want to continue to do well and apply themselves.

5. To what end do you proceed in terms of collaborating with parents, other educators or educational professionals to ensure that the children with ADD/ADHD disorders be afforded every available opportunities before them

Teacher # 1:
The teachers I work with speak with one another a few times a day about our students. We support each other and give each other advice/opinions and antidotes to help improve our classroom environment and our teaching strategies.

Teacher # 2:
We are a special school. Most of our students have ADD/ADHD or are simply hyper due to their level of emotional maturity.

Teacher # 3:
I have worked in the past with another teacher with an extremely hyperactive child, giving her hand fidgets, a ball to sit on (Similar to a Pilates ball), and structuring activities to be hands on that allowed her to increase focus. I feel that teamwork and analyzing the “Why’s” behind the behavior (What is causing the distractions, internally, externally, and what can be used to reduce them) creates for an environment that is “friendly” for the students to explore and grow in a classroom.

6. In reference to question #2 and #3, what factors that is essential to ensure the success of learning on part of the students with those disorders?

Teacher # 1:
It is important not to be “on top” of a student with ADHD/ADD. It is important to allow kids to be kids. As a teacher one cannot be extremely strict and rigid nor be passive with students with ADD/ADHD. These students need rules and a positive routine within the school day. They need to feel safe. As a teacher, one has to decide which behaviors distract the classroom and work with the student to minimize that behavior instead of constantly punishing/yelling at the student.

Teacher # 2:
The best way to keep ADD/ADHD students working is to keep them thinking. Idle time is bad.
Teacher # 3:
Ensuring that the environment and structure of the classroom and day take into consideration their unique needs and provide opportunities for multi-sensory, multi-modal tasks with positive feedback on what they do right.

7. On what grounds were these decisions based on in reference to question #6. Were they being guided on the specific abilities, such as the ability of comprehension?

Teacher # 1:
This decision was based on students who come from a broken home or students who are placed and bounced from foster care to foster care and have no “real” home.

Teacher # 2:
These decisions were made through observations, trail and error, and experience with the individual students.

Teacher # 3:
I again think that by analyzing the internal/external factors affecting the performance of children with ADHD, gives a new perspective on how to help the student themselves understand and find ways to cope with an adapt their own behavior based upon controlling sensory needs/input and visual distractions.

8. In addition to the given strategies, what other actions or roles do you take to ensure the successful learning environment for the students?

Teacher # 1:
This approach helps the students feel in control with their own decisions/behaviors instead of being told always “NO” or they cannot do something. As a teacher, I encouraged the students to try their best and be positive. Negatively does not help them learn and it just adds to their frustration.

Teacher # 2:
Visuals play a big part in our environment. I also allow the students that already know the material and are becoming bored take over the class and teach for a bit.

Teacher # 3:
By allowing for opportunities for students to see success by using their strengths and helping them understand and control their needs... By also becoming a facilitator for positive, meaningful interactions rather than continually “getting on a student’s case” for too much movement. By facilitating positive interactions and increasing their success, they in turn put more effort into themselves as well. This would answer number 9, with the positive experiences that they need to succeed.
9. What would make positive or negative experience for these students?

Teacher # 1:
Always telling students that they do not know how and thus doing the work for them. Students need to experience things and they cannot be just lectured at. Students with ADHD/ADD need hands on activities to allow them to learn though multiple modalities.

Teacher # 2:
A positive experience for these students would be to succeed in school academically or behaviorally. Any success, even a small one, is a positive. A negative experience would be if they were unable to pass a test or remember information even though they studied. Too much homework is a negative. Also, material at their level but that appears “babyish” is another negative.

Teacher # 3:
N/A

RSD Teachers Data Collections

1. What strategies, if any, are you currently using with your student with ADD or ADHD disorders while teaching your content?

Teacher # 1:
Don’t have them in class myself this year. I give suggestions to teachers. The strategies vary depending in needs. 1) Use a calendar/agenda (or pictures) to help with impulsivity. 2) Adults give prompts to attend. 3) Use a big ball to sit on helps them balance and focus.

Teacher # 2:
I break down to a specific area after that move on to the next.

Teacher # 3:
Staff proximity, smaller graphs (2:1/ 1:1), reminders, fidget toys if used properly

2. How do the student(s) deal with the given learning styles that you had set up?

Teacher # 1:
Varies- some don’t want to be “different,” from other kids- others like “special and appreciates the support”
Teacher # 2:
Each student has unique needs. Get to know individual’s needs especially learning styles. I try to accommodate their needs.

Teacher # 3:
N/A

3. How successful were these strategies? If possible, print the before and after pictures of those students.

Teacher # 1:
N/A

Teacher # 2:
Yes- role play, ask questions to check on student’s understanding

Teacher # 3:
N/A

4. If so, why were these strategies successful? Or why were they not so successful?

Teacher # 1:
If consistently applied and appropriate – successful

Teacher # 2:
Step by step

Teacher # 3:
N/A

5. To what end do you proceed in terms of collaborating with parents, other educators or educational professionals to ensure that the children with ADD/ADHD disorders be afforded every available opportunities before them

Teacher # 1:
Parents know kids best. Must have all involved to work together

Teacher # 2:
Work together, communicate weekly, and talk with the doctors.

Teacher # 3:
Diagnosed w/ ADHD was taken off meds by the parents- no availability for collaboration.
6. In reference to question #2 and #3, what factors that is essential to ensure the success of learning on part of the students with those disorders?

Teacher # 1:
Teamwork! Parent involvement if possible with outside community mental health

Teacher # 2:
Specific subject? Or, neurological/ learning process

Teacher # 3:
Give them a chance to move under appropriate conditions, say yes... if...

7. On what grounds were these decisions based on in reference to question #6. Were they being guided on the specific abilities, such as the ability of comprehension?

Teacher # 1:
More of look at individual needs. Team decision then recommendations or referrals to outside agencies.

Teacher # 2:
He/she demonstrates thought strategies we developed; help him/her to recognize his/her ADHD

Teacher # 3:
I don’t know how to answer this one.

8. In addition to the given strategies, what other actions or roles do you take to ensure the successful learning environment for the students?

Teacher # 1:
Reduce visual /stimuli- work in smaller groups, use room divider. Set up a point system, rewards, communicate with home and therapist.

Teacher # 2:
N/A

Teacher # 3:
References, planner, disciplinarians, reminder of choices, models

9. What would make positive or negative experience for these students?

Teacher # 1:
(Negative) – picking on for traits (other students) or use of embarrassment by adults
(Pos)- Very creative, friendly
Teacher # 2:
(Negative) – see himself/herself as a no good person because of ADHD.

Teacher # 3:
Too big of a question. I’m not sure what you want

Data Collections from the Parent

- This is from a deaf mother who works as a VR counselor in Rochester has a 4th grader child that has severe ADD/ADHD. He’s currently taking medications for his ADD/ADHD.

1. What, if any, were the strategies shared by the educators or professionals that provided the secure learning environment that is suitable in domestic settings?

In School:
1) A private room is given to the student during major exams such as the 4th Grade Reading test that occurred in February 2005. This helped keep feelings of insecurity to a minimum, especially when other kids are working faster than the student with ADHD and also allow minimal disruptions.
2) Extended time is given to a student during any exam.
3) Student is given more “assignments” or “chores” in classroom when there is evidence of student become restless or fidgety.
4) At times, student is allowed to get a time-out from finishing their assignment and given a choice of finishing the assignment the following day or at a later time.
5) School has been great in giving assignments that can be submitted a week after which allows for more time to do it at home at their own pace.
6) School has been good in allowing student to finish homework not done at home for whatever reason to be completed during lunchtime with the teacher if needed.

2. What strategies were being used to ensure that your child(ren) learn effectively and at same time to coordinate with their disorders?

1) At home, student is assigned a specific time to do his homework which allows for strict structure – something they really need
2) Assistance is given when an assignment is not clear. I use examples that are similar to help them get the hang of the task.
3) Student has his own space to do homework with least disruptions.
4) Student is allowed to break up assignments so that he doesn’t become bored with it and does a sloppily job of it.
3. How do the child(ren) respond to the methods being applied toward them in order to deal with their disorders and to encourage such an attempt at creating a positive learning environment?

1) Student has found it extremely helpful. There are less blow ups, less tempers, less competitive streak.
2) Student has learned to ask for help as needed without fear, has been more willing to finish assignments and has acknowledged what they find helpful.

4. Do you feel there is any success to these shared strategies? If so, why? Why not?

Yes- I feel student is able to better handle frustrations when teachers and parents work together in developing a “coping” system that works best for the student.

Admittedly, the teacher last year, who herself, had ADD was better in communicating and understanding the student’s need than the teacher this year who does not have ADD herself or maybe has had limited exposure with kids who have ADD/ADHD.

5. When it comes to doing assignments or projects as assigned by the teachers, how do these strategies affect their time of doing the school work at home in order to deal with these distractions around? (I.e. Television, computer games, or other issues such as sibling rivalry?)

Basically, the student has his own time to do this project. As a parent, I am strong advocate of structure and set an assigned time for the student to do this project without interruptions. In fact, I let the student know what time we or he would be working on this homework or project and insist he start doing it. Most of the time, I find that he starts doing the assignments or projects without being asked to because it’s a habit he has come to get used to.

6. In addition to the given strategies, what other roles or actions do you take to ensure the successful learning by the child(ren)?

As a parent, I find that I have to spend a lot of time advocating for the child, sometimes even going as far to push the teacher to be sure that she’s giving him what is needed. It is the parent’s responsibility to make sure that the same things are happening at home as they are at school and if there is a problem anywhere, it will not be solved by ignorance but by asking out right what needs to be improved, etc...

7. What would you feel that would make either positive or negative experience for the child(ren)?

I wish more teachers were as dedicated as the teacher last year with ADD. She put a lot of effort in making the classroom accessible and suitable for the student. She provided a lot of 1 on 1 time when needed and offered after school tutoring when
needed. The teacher was also very good at communicating constantly as a result, I was always aware of what was going on, what he was having trouble with, what issues he was having, etc... This year, I don’t know much as the teacher doesn’t communicate much.

**Descriptive Statistics**

As the above data collection was being discussed, some commonalities that were derived from the data collecting efforts were analyzed. The methodologies from the teachers were one of the main areas as to how to manage the students’ attention and to encourage them to participate in learning-related activities. They often mention the environment as one of biggest factors to deal with. In this, they come up with simple answers that are to be used in order to manipulate the classroom environment so there would be fewer distractions or less boredom. These answers were that of frequent breaks, movement games, among other things. To enforce sensory-physical activities in between also provide positive stimuli-related reinforcements that includes the usage of s-toll ball and/or change the activities for the students to keep them engaged. One example would be having a student take the teaching for few minutes if he or she has mastered the themes that are being taught. That is the common theme among the data collection.

Other common theme is how the students respond to the methods being employed by the teachers. Many responded positively to the methods being applied by the teachers because of the seized opportunities to break the boredom and to keep their minds engaged on the activities before them. For example, a physical game of Simon says would be quite popular among the students. By the accounting, it is
appropriately 95% successful with few expectations such as several students refusing to participate. This also echoes in the feedback provided by the parents that took note of the vast changes in the students’ behavior academically and domestically. It is seen that almost all the teachers had promoted the means of those approaches that are used to lessen the impact of the disorders upon the learning activities or styles because of the refreshing effectiveness being applied to the well-being of mentally activeness.

The third common theme is the working relationship between the parents and teachers. At least those that participate in the study are the subjects that are being discussed here. Again the manipulation of the environment is being emphasized here. There is some say in having an assigned space for the students to work in their home and it is ensured that there are no distractions occurring in the assigned area. The parents that participated in this study were receptive to the teachers’ suggestions in order to operate within the children’s educational needs as well as emotional needs. It is also useful to establish a structured time schedule and make the students stick to it because in time, it will become a habit for the students to have.

As we see in these commonalities which are 1) manipulation of the environment in order to make the classroom be less distracted, 2) the response of the students when the methods are being applied, and 3) the common methods were being used; questions must be asked to gain more understanding in possible future studies. For example; given the legislations that safeguard the private information of the students, this research would not gain the access to the Individualized Educational Plans; therefore there is a desire to know if the teachers have actually implemented the methods accordingly to the plans being composed based on the students’ needs. There
also needs to be a study to discover new strategies in managing the disorders with behavioral medications or environmental manipulation as we approach the first quarter of 21st century. For example, what technology is available in managing the classroom that would benefit the teachers, students with the afflicted disorders, and their classmates? And other question to be asked is whether there are any methods that are newer than traditional methods such as frequent breaks or stress balls. Have there been any attempts to make new trends in such an area?
References


Appendix A

Teachers:

1. What strategies, if any, are you currently using with your student with ADD or ADHD disorders while teaching your content?

2. How do the student(s) deal with the given learning styles that you had set up?

3. How successful were these strategies? If possible, print the before and after pictures of those students.

4. If so, why were these strategies successful? Or why were they not so successful?

5. To what end do you proceed in terms of collaborating with parents, other educators or educational professionals to ensure that the children with ADD/ADHD disorders be afforded every available opportunities before them.

6. In reference to question #2 and #3, what factors that is essential to ensure the success of learning on part of the students with those disorders?

7. On what grounds were these decisions based on in reference to question #6. Were they being guided on the specific abilities, such as the ability of comprehension?

8. In addition to the given strategies, what other actions or roles do you take to ensure the successful learning environment for the students?

9. What would make positive or negative experience for these students?
Appendix B

Parents:

1. What, if any, were the strategies shared by the educators or professionals that provided the secure learning environment that is suitable in domestic settings?

2. What strategies were being used to ensure that your child (ren) learn effectively and at same time to coordinate with their disorders?

3) How does the child (ren) respond to the methods being applied toward them in order to deal with their disorders and to encourage such an attempt at creating a positive learning environment?

4) Do you feel there is any success to these shared strategies? If so, why? Why not?

5) When it comes to doing assignments or projects as assigned by the teachers, how do these strategies affect their time of doing the school work at home in order to deal with these distractions around? (I.e. Television, computer games, or other issues such as sibling rivalry?)

6) In addition to the given strategies, what other roles or actions do you take to ensure the successful learning by the child (ren)?

7) What would you feel that would make either positive or negative experience for the child (ren)
Appendix C

Teacher Consent Form

Agreement to Participate:

I am doing a study to learn what learning strategies are the most successful for deaf students with Attention Deficit Hyperactivity Disorder. I would like to have your permission to include your students with these disorders in my study. Here is what I am planning to do. I will interview you, the teacher, to obtain information about the methods being used in teaching your student(s) and to assess how they are helping your child to learn. I will also interview you to learn which strategies and approaches you use and/or recommend for teaching your student and which you do not recommend and why. I will not interview your student. I will only observe your student in the classroom. Your student will not know that he or she is being observed unless you inform your child yourself. I will use this information to attempt to understand how deafness and ADHD in the same individuals influence the learning and teaching approaches being used and what new approaches might be worth trying in the future with students who are deaf and have ADHD. The information I collect will be kept confidential. Your student’s name and personal information will be not included in any report. It will not be shared with anyone except my research advisor who will also keep the information strictly confidential. I will only summarized information about the children as a group will be reported. I will be happy to share my observations of your student with you at the end of the study. You may withdraw your consent to have your student observed at any time and you may withdraw your consent to be interviewed at anytime. RIT does not require or expect you to participate in this study, and there are no consequences for your student if you do not participate.

Name: __________________________

Date: __________________________
Appendix D

Parent Consent Form

Agreement to Participate:

I am doing a study to learn what learning strategies are the most successful for deaf students with Attention Deficit Hyperactivity Disorder. I would like to have your permission to include your son or daughter in my study. Here is what I am planning to do. I will interview your child's teachers to obtain information about the methods being used in teaching your child and to assess how they are helping your child to learn. I will also interview you to learn which strategies and approaches you use and/or recommend for teaching your child and which you do not recommend and why. I will not interview your child. I will only observe your child in the classroom. Your child will not know that he or she is being observed unless you inform your child yourself. I will use this information to attempt to understand how deafness and ADHD in the same individuals influence the learning and teaching approaches being used and what new approaches might be worth trying in the future with children who are deaf and have ADHD. The information I collect will be kept confidential. Your child’s name and personal information will be not included in any report. It will not be shared with anyone except my research advisor who will also keep the information strictly confidential. I will only summarized information about the children as a group will be reported. I will be happy to share my observations of your child with you at the end of the study. You may withdraw your consent to have your child observed at any time and you may withdraw your consent to be interviewed at anytime. RIT does not require or expect you to participate in this study, and there are no consequences for your child if you do not participate.

Name: __________________________
Date: __________________________
Footnotes

1. Attention Deficit Disorder is a general term that includes the three categories found in the Diagnostic and Statistical Manual of the American Psychiatric Association (DSM IV, 1994): 1) Attention-Deficit/ Hyperactivity Disorder (Predominantly Inattentive Type), 2) Attention-Deficit/ Hyperactivity Disorder (combined type), and 3) Attention-Deficit/ Hyperactivity Disorder (predominantly Hyperactive-Impulsive Type).
**Table 1**

**DSM-IV criteria for symptoms of inattention**

1. Inattention: six (or more) of the following symptoms of inattentive have persisted for at least six months to a degree that is maladaptive and inconsistent with developmental level:
   
   (b) often fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities
   
   (c) often has difficulty sustaining attention in tasks or play activities
   
   (d) often does not seem to listen when spoken directly
   
   (e) often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions)
   
   (f) often has difficulty organizing tasks and activities
   
   (g) often avoids, dislikes, or is reluctant to engage in task that require sustained mental effort (such as schoolwork or homework)
   
   (h) often loses things necessary for tasks or activates, e.g., toys, school assignments, pencils, books, or tools
   
   (i) is often distracted by extraneous stimuli
   
   (j) is often forgetful in daily activities

(Brown, 1995)
Table 2

DSM-IV criteria for symptoms of Hyperactivity-Impulsivity

2. Hyperactivity-Impulsivity: six or more of the following symptoms of hyperactivity-impulsivity have persisted for at least 6 months to a degree that is maladaptive and inconsistent with developmental level:

*Hyperactivity*

(a) often fidgets with hands or feet or squirms in seat
(b) often leaves seat in classroom or in other situations in which remaining seated is expected
(c) often runs about or climbs excessively in situations where it is inappropriate (in adolescent or adults, may be limited to subjective feelings or restlessness)
(d) often has difficulty playing or engaging in leisure activities quietly
(e) is often “on the go” or often acts as if “drive by a motor”
(f) often talks excessively

*Impulsivity*

(g) often blurts out answers before questions have been completed
(h) often has difficulty awaiting turn
(i) often interrupts or intrudes on others (e.g., butts into conversations or games)

(Brown, 1995)