

AD(H)D and boys

a largely manufactured problem?

Wendy Fidler explores the latest research into Attention Deficit Disorder and asks whether modern, western culture be causing this escalating crisis for our boys?

Sami Timimi, consultant child and adolescent psychiatrist, analysed cross-cultural beliefs about children's behaviour and suggested that modern western culture has many features that should concern us. In *Naughty Boys: Anti-social Behaviour, ADHD and the Role of Culture* Timimi argues that the current epidemic of ADHD is a symptom of something going wrong in our culture, rather than reflecting a massive increase in children with a neurological deficit.

In 2008, the National Institute for Health and Clinical Excellence (NICE) published guidelines for the diagnosis and management of ADHD.

Key recommendations from the UK guidelines (to be reviewed in 2011) include:

- Specialist ADHD teams to develop age-appropriate training programmes for the diagnosis and management of ADHD for professionals who have contact with people with ADHD.
- Healthcare professionals should offer parents or carers of pre-school children with ADHD a referral to a parent-training/education programme as the first-line treatment.
- Teachers who have received training about ADHD and its management should provide behavioural interventions in the classroom
- Parents/carers of children and young people with ADHD plus moderate levels of impairment should be offered group parent-training/education, either on its own or together with a group treatment programme (cognitive behavioural therapy [CBT] and/or social skills training).
- School-age children and young people with severe ADHD should be offered drug treatment as the first-line intervention. Parents should be offered group-based parent-training/education. Drug treatment for children and young people with ADHD should form part of a comprehensive treatment plan that includes psychological, behavioural and educational advice and interventions.

The NICE guidelines avoid several key issues, including:

- why a diagnosis of ADHD is given mainly to boys
- an understanding of ADHD 'behaviours' cross-culturally.

Different cultures have different beliefs about normal or deviant behaviour, and what are appropriate child-rearing techniques. The NICE emphasis on parenting classes as a first-line intervention effectively imposes views of childhood and child-rearing on communities that have differing and well-functioning alternative views. Conversely, it is modern western,

ADHD is a common behavioural disorder in children and young people estimated to affect up to 3% of school-age children and young people in the UK, and about 2% of adults worldwide. It usually starts in early childhood and some people will continue to have ADHD as adults. Severe ADHD is sometimes known as 'hyperkinetic disorder'. The symptoms of ADHD include:

- Inattentiveness – unable to concentrate for very long or finish a task;
- hyperactivity – fidgety and unable to sit still;
- impulsiveness – speaking without thinking about the consequences

It is an extremely distressing disorder, affecting the person as well as their families and carers. The National Institute for Health and Clinical Excellence (NICE)

Boys

Mainly diagnosed with ADHD

- 'Acting out' in school
- Constantly fidgeting and wriggling
- Calling out inappropriately
- Standing up for no reason
- Class and homework disorganised
- Difficulty staying focussed on schoolwork
- Good attention to construction toys and computer games

Girls

Mainly diagnosed with ADD

- Daydreaming at home and school
- Gazing out of the window
- Twiddling or sucking strands of hair
- Forgetting homework and school books
- Poor organisation
- Poor concentration
- Generally very bright
- No poor behaviour



Boys will be boys – and they need to take risks; courtesy of Eagle Peak Montessori, Walnut Creek, CA

culture where childhood behaviours have become most problematic.

Why are more boys diagnosed with Attention Deficit than girls?

More than a million children have been diagnosed with attention deficit in the US. Until recently the disorder was thought to be four to nine times



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What causes ADHD?

As yet, there is no known definitive cause for ADHD

- Certain receptors in the brain, which should normally respond to the neurotransmitter dopamine, appear not to work effectively; this could be because dopamine is not being produced in sufficient levels.
- Ritalin is the best known drug used to treat ADHD; it works by making more dopamine available and curbs symptoms such as hyperactivity and behavioural problems.
- Functional Magnetic Resonance Imaging (fMRI) of the brains of boys with ADHD shows they have a smaller prefrontal cortex – the brain's 'command centre' and smaller caudate nucleus and globus pallidus – which translate the commands into actions.
- ADHD may be genetic: one third of all fathers with ADHD have children with the disorder. Identical twins have at least 75% chance of sharing the same trait.

more prevalent in boys than girls; ADHD has long been thought of as a boy's problem, but experts increasingly agree that the disorder is widely under-diagnosed in girls.

Paediatrician William Sears, author of *The ADD (Attention Deficit Disorder) Book*, explains that whilst boys are more likely to 'act out' in school, becoming either the class clown or a discipline problem, girls are more likely to be withdrawn and 'spacey'.

Girls tend to be inattentive rather than hyperactive and therefore less disruptive in school and at home. As a result, many girls with ADD go undiagnosed or are mistakenly believed to suffer from anxiety or depression.

Hyperactive boys tend to be referred for evaluation between ages five and seven, whereas most girls are aged eleven or more when they are referred. At this age previously well-functioning girls transitioning to secondary school can be overwhelmed by the complexity of the curriculum, classroom changes, larger classes and increased homework. These girls begin to fall back academically due to their increasingly obvious disorganization; they also begin to struggle socially.

The 'Restorative Environment'

In *Last Child in the Wood*, Richard Louv recalls the work of environmental psychologists Stephen and Rachel Kaplan. The Kaplans organised a two-week activity wilderness project following which participants reported experiencing a sense of peace and an ability to think more clearly; being in

nature they said was more restorative than the challenging physical activities.

This positive effect or 'restorative environment' was greater than the Kaplans had predicted. They posited that too much directed attention leads to 'directed attention fatigue' marked by impulsive behaviour, agitation, irritation and inability to concentrate. Directed-attention fatigue occurs because neural inhibitory mechanisms become fatigued by blocking competing stimuli.

"If you can find an environment where the attention is automatic, you allow directed attention to rest. And that means an environment that's strong on fascination."

Perhaps our modern, western children just need more time with nature.

Boys will be boys – and we must let them take risks during play

In his book, *No Fear: Growing up in a Risk Averse Society*, Tim Gill argues that children's lives are becoming ever more scheduled, controlled and directed, and

Agence française de sécurité sanitaire des aliments (Afssa), the French food safety organisation, issued a report on the safety of Bisphenol A ('BPA') on February 5 2010 mirroring an advisory note issued by the US Food and Drug Administration in January 2010. There are significant concerns around the presence of BPA in plastic (including feeding bottles) used in the worldwide food and drinks industry; Canada banned BPA in October 2008. Afssa are particularly concerned about the impact of BPA on pregnant and feeding mothers and the subsequent presence of ADHD type problems particularly in young girls.

that their childhood is being undermined by the growth of risk aversion. This restricts children's play, limits their freedom of movement, corrodes their relationships with adults and constrains their exploration of physical, social and virtual worlds.

Gill believes that children and young people have the potential to be more resilient, capable, creative and able to learn than we give them credit for. He believes that if children are to enjoy and make the most of their lives, modern, western society must reconsider its values about what a healthy childhood looks and feels like. ■

References:

- Kaplan, R., Kaplan, S. and Ryan, R. (1998), *With People in Mind: Design and Management for Everyday Nature*, Island Press, Washington DC
- Louv, R. (2009), *Last Child in The Woods: Saving our Children from Nature-Deficit Disorder*, Atlantic Books, London
- Sears, W. (1998), *The ADD Book: New Understandings, New Approaches to Parenting Your Child*, Little, Brown Book Company, London
- Timimi, S. (2005) *Naughty Boys: Anti-social Behaviour, ADHD and the Role of Culture*, Palgrave Macmillan, Basingstoke, Hampshire
- Agence française de sécurité sanitaire des aliments (Afssa) <http://www.afssa.fr/>
- NICE ADHD Guidance : www.nice.org.uk/CG72.
- US Food and Drug Administration: <http://www.fda.gov>

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