



## PSYCHOLOGY OF CHILDREN WITH ATTENTION DEFICIT HYPERACTIVITY DISORDER

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### ABSTRACT

Despite the vast literature supporting the efficacy of stimulant medication in the treatment of attention-deficit/hyperactivity disorder (ADHD), several limitations of pharmacological treatments highlight the clear need for effective psychosocial treatments to be identified. A large evidence base exists for behavioral interventions, including parent training and school interventions, which has resulted in their classification as “empirically validated treatments.” Additionally, social skills training with generalization components, intensive summer treatment programs, and educational interventions appear promising in the treatment of ADHD. Given the chronic impairment children with ADHD experience across multiple domains of functioning, multimodal treatments are typically necessary to normalize the behavior of these children. The state of the ADHD treatment literature is reviewed, important gaps are identified (e.g., treatment for adolescents), and directions for future research are outlined within a developmental psychopathology framework.

**Keywords:** ADHD, behavior of these children, empirically validated treatments

The developmental psychopathology framework has as one of its initial considerations the developmental appropriateness of behavior. Developmental appropriateness is critical in arriving at a diagnosis of ADHD, setting appropriate goals for treatment, and appreciating environmental demands that are at play during any given developmental period. For example, many of the behaviors that characterize ADHD (e.g., difficulty sustaining attention, high activity level) are normative at certain stages of

The widespread use and evidence for the efficacy of stimulant medication are overwhelming. In fact, treatment effects of stimulants surpass evidence for pharmacological treatment of any other child psychiatric disorder. It is estimated that at least 85% of children diagnosed with ADHD are medicated with stimulants (Olfson, Gameroff, Marcus, & Jensen, 2003). Stimulant medication has been shown to have large, beneficial effects on a number of outcome measures, particularly measures of ADHD

Treatment for adolescents with ADHD

Although it is tempting and perhaps somewhat commonplace to apply the findings from the child treatment outcome literature to adolescents, this practice is not recommended. Numerous developmental and environmental changes characterize the transition from childhood to adolescence and therefore, it is unclear the degree to which treatments that are effective for children with ADHD are appropriate or effective for adolescents. Smith et al. (2000) consider six important developmental changes.

Predictors of treatment response

Although there is substantial evidence for the efficacy of behavior therapy in the management of ADHD, as with medication there remains great variability in the degree to which individual children improve as a result of behavioral treatment. A number of published articles (several from the MTA Cooperative Group) have investigated potential mediators and moderators of ADHD treatment effects, including child comorbidity, parental psychopathology, parental cognitions, socioeconomic status (SES),

The existing literature clearly supports the efficacy of behavior modification, namely behavioral parent training and classroom behavioral interventions, in the treatment of childhood ADHD, both alone and in combination with stimulant medication. Due to the large evidence base consisting of rigorous experimental investigations, behavioral parent training and behavioral classroom interventions have been designated “empirically supported” psychosocial treatments for ADHD.

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