Increasing Academic and Behavioral Success for ADHD Students in the Primary Classroom

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INCREASING ACADEMIC AND BEHAVIORAL SUCCESS FOR
ADHD STUDENTS IN THE PRIMARY CLASSROOM

Project Report
Presented to
The Graduate Faculty
Central Washington University

In Partial Fulfillment
Of the Requirements of the Degree
Master of Education
Master Teacher

by
Sandra Kay Munoz
June 2008
ABSTRACT

INCREASING ACADEMIC AND BEHAVIORAL SUCCESS FOR
ADHD STUDENTS IN THE PRIMARY CLASSROOM

By

Sandra Kay Munoz

June 2008

The purpose of this project was to develop a teacher's handbook that provides primary classroom teachers with effective classroom interventions and strategies that would improve behavioral and academic success in students who experience ADHD. To accomplish this purpose, a review of current and relevant resources was conducted on topics that included best practices, strategies, techniques and interventions concerning classroom management of ADHD students.
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According to recent research (American Psychological Association, 2000), three to five percent of children in the United States are diagnosed with Attention-Deficit Hyperactivity Disorder (ADHD). According to the Surgeon General’s report (2003), ADHD is a neurobehavioral disorder that interferes with a student’s ability to stay on-task and to exercise age-appropriate inhibition (cognitive and/or behavioral). Cognitive warning signs of ADHD include failure to listen to instructions, inability to organize oneself, talking out, difficulty completing assignments and having trouble paying attention to and responding to details, all of which lead to poor academic performance. Behavioral warning signs include low-frustration tolerance, temper problems, stubbornness, persistence, peer rejection, and poor self-esteem. A common component seen in many ADHD children is the devaluation and dislike of academics, which is linked to behavior problems. It is estimated that 4.4 million youth ages 4-17 have been diagnosed with ADHD by a healthcare professional.
Statement of Problem

Students with ADHD bring unique behaviors into the classroom, such as disorganization, aggression, and low-frustration tolerance. Classroom management is one of the most challenging aspects of teaching, and many teachers enter the profession unprepared to meet the challenges of teaching in today’s mainstreamed classrooms. As a veteran teacher, I hear beginning teachers say that they are not qualified to meet the challenges that await them when they enter the classroom. Inexperienced teachers, who do not have an understanding of students with ADHD will have difficulty managing the classroom successfully and providing effective behavioral interventions. Without effective interventions, ADHD behavior patterns will impede a student’s education by limiting his/her acquisition of new skills and hindering the development of positive teacher and peer relationships.

Studies show that approximately two-thirds of children with ADHD have or will develop at least one other co-existing condition (Pierce, 2003). The presence of other disorders, such as Oppositional Defiant Disorder and learning disabilities, heightens student difficulties. It is estimated that 30 to 60 percent of students with ADHD also have Oppositional Defiant Disorder behaviors (Rief, 2005). Rates of learning disabilities that coexist with ADHD have been reported to range from 12 to 60 percent (AAP, 2000). Students with ADHD are generally 30 percent or more behind typical students in social skills and organization. These students need more structure, more frequent positive
consequences, and accommodations in order to succeed academically (Barkley, 2006).

The learning experience of other students in the classroom is often hindered if a student with ADHD is not given the necessary intervention and support (Barkley, 2006).

**Purpose of Project**

The purpose of this project was to create a handbook that would help primary teachers identify how, when, where and why a student is inattentive, impulsive or hyperactive. This handbook will also provide strategies, techniques and interventions that teachers can use to engage the attention of students with ADHD. With effective interventions, behaviors, as well as social relationships and academics will improve. With effective classroom management, teachers will be able to focus more time on teaching and less time on classroom disruptions.
Limitations to the Project

Educators using ideas from this handbook must be willing to devote extra time assessing students, developing intervention plans, individualizing strategies, and being consistent in their implementation. Intervention plans must be balanced in terms of proactive and reactive strategies. Literature indicates that educators tend to rely on reactive strategies, e.g., punishment-based approaches to address behavioral difficulties of children with ADHD and related disruptive disorders (DuPaul & Weyandt, 2006). Educators will need to reconsider their strategies and implement more proactive measures, which rely on positive reinforcement. Proactive strategies may differ from what a teacher currently uses; therefore, he/she would need to be receptive to changing the way he/she interacts with students who have ADHD (DuPaul & Weyandt, 2006).

Educators must be willing to involve parents, specialists, para-educators and students in order to effectively implement behavioral, academic and social interventions. A school based intervention plan involving several participants is a crucial component for success (Barkley, 2006).

The techniques, strategies and interventions in this project were focused on students in the primary grades, although they may be used or modified for older students. Some, but not all, of the strategies have been implemented by this researcher.
Definition of Terms

Antecedent:
Students misbehave for a number of reasons. An antecedent is a trigger, which causes a behavior to occur. Certain conditions, times of day, settings, activities, events, and people can be triggers to misbehavior (Reif, 2005).

Attention-Deficit/Hyperactivity Disorder (ADHD):
ADHD is the most common neurobehavioral disorder of childhood. ADHD is also among the most prevalent chronic health conditions affecting school-aged children. The core symptoms of ADHD include inattention, hyperactivity, and impulsivity. Children with ADHD may experience significant functional problems, such as school difficulties, academic underachievement, troublesome interpersonal relationships with family members and peers, and low self-esteem (American Academy of Pediatrics, 2000)

Class Wide Peer Tutoring (CWPT):
A time tested, research proven, effective program that enhances the acquisition of academic skills. The traditional CWPT program is a systematic and fun instructional strategy that actively engages an entire classroom of students at the same time. CWPT is a comprehensive procedure that is based on reciprocal peer tutoring and group reinforcement to accelerate the process of learning and practicing basic academic skills (http://www.specialconnections.ku.edu)
Computer-Assisted Instruction:
The use of computer based software programs designed to supplement teacher instruction and provide additional exposure to academic material, (Ora & DuPaul, 2002).

Instruction Modification:
A proactive strategy in which changes are made to the actual assignment in order to target a child’s academic needs. For example, a teacher may divide a student’s assignment into thirds and/or provide more frequent deadlines for assignments (Harlacher, Roberts & Merrell, 2006).

Learning Disabilities:
Learning disabilities are academic difficulties experienced by children and adults of average to above-average intelligence. People with learning disabilities have difficulty with reading, writing, mathematics, or a combination of the three. These difficulties significantly interfere with academic achievement and/or daily living. It is estimated that about 10 percent up to 50 percent of ADHD children may have a learning disability (Flick, 1998).
Neurobehavioral Disorder:

ADHD is a Neurobehavioral Disorder characterized by pervasive inattention and/or hyperactivity-impulsivity which results in significant functional impairment (Centers for Disease Control and Prevention, 2003).

Oppositional Defiant Disorder:

Oppositional defiant disorder (ODD) is defined by the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV), as a recurring pattern of negative, hostile, disobedient, and defiant behavior in a child or adolescent, lasting for at least six months without serious violation of the basic rights of others.

Proactive Strategies:

Proactive strategies involve a change in conditions (e.g., teacher behavior) before a specific behavior occurs. The purpose of this type of intervention is to prevent problematic behaviors from occurring and to increase the likelihood that an alternative, more appropriate behavior will be exhibited (DuPaul & Weyandt, 2006).
Reactive Strategies:

The most common form of reactive strategies involves negative reprimands from the teacher and/or removal from the classroom. An exclusive reliance on punishment-based interventions is rarely effective for children with ADHD and related disruptive disorders (DuPaul & Stoner, 2003).

Response Cost:

The loss of a reinforcer, contingent upon inappropriate behavior. The procedure may involve a child’s losing tokens for inappropriate behavior, in addition to earning them for appropriate behavior (Barkley, 2006).

Time Out:

A procedure that involves the withdrawal of positive reinforcement contingent upon inappropriate behavior (Barkley, 2006).

Peer Tutoring:

An instructional manipulation strategy in which two students work together on an academic activity, with one student providing assistance, instruction, and feedback to the other, Greenwood’s study (as cited in Harlacher, Roberts, & Merrell, 2006).
Attention-Deficit Hyperactivity Disorder (ADHD) is a behavioral disorder characterized by three core behaviors: hyperactivity, inattention and impulsivity (APA, 2000). Included within the core behaviors, there may be other associated characteristics such as disorganization, poor peer relations, aggressive behavior, poor self-esteem, attention-seeking behavior, daydreaming, poor coordination, memory problems, and persistent obsessive thinking (Flick, 1998).

ADHD typically emerges early in life and is a chronic disorder that places children at higher than average risk for academic, behavioral, and social difficulties in school settings (DuPaul & Stoner, 2003). In fact, poor school outcomes (e.g., failing grades, grade level retention, and dropout) are among the most ubiquitous difficulties associated with ADHD (Barkley, 2006). It is critical for educators and other school personnel to be aware of effective interventions for students with this disorder and to advocate for their use across school and home settings.

To succeed in school, a student must have the ability to attend to tasks in order to acquire information, complete assignments and participate in activities. If a student has trouble staying on task, speaking out of turn, completing tasks and getting along with peers, the student will be prone to academic and behavioral difficulties (Barkley, 2005).
It is imperative to identify the unique needs of students with ADHD so that appropriate behavioral, social and/or academic interventions can be developed to meet their individual needs.

This review of literature will be divided into subject areas that include the following: (1) early signs, behavioral characteristics, and identification of students with ADHD (2) individualized behavior management and interventions, (3) daily report cards and home/school collaboration, (4) academic interventions, (5) classroom arrangement and accommodations, and (6) other considerations.

**Early Signs, Behavioral Characteristics and Identification of Students with ADHD**

According to the DSM-IV-TR (2000), ADHD can be diagnosed in a child after the behavior has been present for a minimum of six months and the child demonstrates at least six or more of the identified behaviors prior to the age of seven years (Fewell, 2002). There are three subtypes of ADHD. The first subtype is the Combined Type, which describes children who exhibit at least six inattention and at least six hyperactive-impulsive symptoms. The second subtype is Predominately Inattentive and should be used if six or more symptoms of inattention have persisted for at least six months. The third subtype is Predominately Hyperactive-Impulsive Type and should be used if six or more symptoms of hyperactivity-impulsivity have persisted for at least six months. (DSM-IV-TR, 2000).
Diagnostic Criteria for Attention-Deficit/Hyperactivity Disorder

The year 2000 Diagnostic & Statistical Manual for Mental Disorders (DSM-IV-TR) provides criteria for diagnosing ADHD. The criteria are presented here in modified form in order to make them more accessible to the general public. They are listed here for information purposes and should be used only by trained health care providers to diagnose or treat ADHD.

DSM-IV-TR Criteria for ADHD

I. Either A or B:

A. Six or more of the following symptoms of inattention have been present for at least 6 months to a point that is disruptive and inappropriate for developmental level:

Inattention

1. Often does not give close attention to details or makes careless mistakes in schoolwork, work, or other activities.

2. Often has trouble keeping attention on tasks or play activities.

3. Often does not seem to listen when spoken to directly.

4. Often does not follow instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions).
5. Often has trouble organizing activities.

6. Often avoids, dislikes, or doesn't want to do things that take a lot of mental effort for a long period of time (such as schoolwork or homework).

7. Often loses things needed for tasks and activities (e.g. toys, school assignments, pencils, books, or tools).

8. Is often easily distracted.

9. Is often forgetful in daily activities.

B. Six or more of the following symptoms of hyperactivity-impulsivity have been present for at least 6 months to an extent that is disruptive and inappropriate for developmental level:

**Hyperactivity**

1. Often fidgets with hands or feet or squirms in seat.

2. Often gets up from seat when remaining in seat is expected.

3. Often runs about or climbs when and where it is not appropriate (adolescents or adults may feel very restless).

4. Often has trouble playing or enjoying leisure activities quietly.

5. Is often "on the go" or often acts as if "driven by a motor".

6. Often talks excessively.

**Impulsivity**

1. Often blurts out answers before questions have been finished.
2. Often has trouble waiting one's turn.
3. Often interrupts or intrudes on others (e.g., butts into conversations or games).
4. Some symptoms that cause impairment were present before age 7 years.
5. Some impairment from the symptoms is present in two or more settings (e.g. at school/work and at home).
6. There must be clear evidence of significant impairment in social, school, or work functioning.
7. The symptoms do not happen only during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorder. The symptoms are not better accounted for by another mental disorder (e.g. Mood Disorder, Anxiety Disorder, Dissociative Disorder, or a Personality Disorder).

Based on these criteria, three types of ADHD are identified:

1. ADHD, Combined Type: if both criteria 1A and 1B are met for the past 6 months,
2. ADHD, Predominantly Inattentive Type: if criterion 1A is met but criterion 1B is not met for the past six months,
3. ADHD, Predominantly Hyperactive-Impulsive Type: if Criterion 1B is met but Criterion 1A is not met for the past six months (DSM-IV-TR, 2000).

Despite these specific criteria, there is no test for ADHD. Therefore, evaluation of children suspected of having ADHD needs to be a multidisciplinary process (Fewell, 2002). A diagnosis should be based on a complete medical examination and history,
information gathered through interviews with a number of people who know the child, observations made in different naturalistic settings at different times, and scores on parent and teacher rating scales, such as Connors’ Teacher and Parent Rating Scales (Fewell, 2002). Rebecca R. Fewell, PhD, (2002) has listed referral guidelines to consider in the following tables, including early signs for possible ADHD and referral guidelines to help educators.

Table 1. Early signs of possible ADHD

- Acts before thinking
- Changes activities frequently
- Has a short attention span
- Fails to focus and follow directions
- Distracts easily
- Has difficulty staying on task

Table 2. Referral guidelines for possible ADHD

<table>
<thead>
<tr>
<th>Refer when behavior...</th>
<th>Wait and watch when behavior...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has been observed for at least 6 months</td>
<td>Is recent and inconsistent</td>
</tr>
<tr>
<td>Is a problem in several settings</td>
<td>Appears at a single place or time</td>
</tr>
<tr>
<td>Occurs during independent and group settings</td>
<td>Occurs primarily during group times when prolonged sitting is required</td>
</tr>
<tr>
<td>Cannot be explained by other circumstances or disabilities</td>
<td>Could be a result of recent life events</td>
</tr>
<tr>
<td>Interferes with learning</td>
<td>Indicates child is acquiring skills</td>
</tr>
<tr>
<td>Affects peer relationships and social development</td>
<td>Demonstrates appropriate friendships and interactions</td>
</tr>
<tr>
<td>Is inappropriate despite clear, consistent age-appropriate expectations</td>
<td>Varies in the presence of different adults in the child’s life</td>
</tr>
<tr>
<td>Appears out of the child’s control</td>
<td>Appears purposeful or attention-getting</td>
</tr>
</tbody>
</table>

Individualized Behavior Management and Interventions for Students with ADHD

Teachers are often frustrated with the disruptive and challenging behaviors of many students with ADHD. It is important to build a large repertoire of strategies and skills to effectively address and manage those behaviors in the classroom. Students with ADHD typically need closer monitoring, a higher rate and frequency of feedback, and more powerful incentives to modify their behavior than average children (Reif, 2005).

In Grad L. Flick’s “Behavior Change Resource Kit,” he describes a typical behavioral program, which incorporates a sequence of three components or events that together form the basis for development of a comprehensive behavior management program. These three components are A for Antecedent Events, B for Behavior, and C for Consequences. Reif (2005) calls these three components the “ABC’s of Behavior.”

Prior to any behavior occurring, there are antecedents to that behavior. Antecedents are typically the events or conditions that trigger the misbehavior. Certain conditions, times of day, settings, activities, events, and people can be triggers to misbehavior. By teacher awareness of common triggers (or antecedents), to problematic behaviors, teachers can be proactive and make adjustments that may prevent or significantly reduce the chance of many behavioral or academic problems from occurring. The best management involves anticipating potential problems and avoiding them through careful planning (Reif, 2005).
Behavior is always something that can be observed and measured (Reif, 2005).

The function of a behavior is the purpose it serves the student (i.e., what the student gets from it). To determine a behavior's function, we need to observe what is happening in the classroom before and after it occurs. This information-gathering procedure is called a functional assessment (Barbetta, Norona, Bicard, 2005). An Antecedent-Behavior-Consequence (ABC) chart can be used as a functional assessment tool. An example of an ABC functional assessment form is shown below,

<table>
<thead>
<tr>
<th>What Happened Before?</th>
<th>Behavior</th>
<th>What Happened After?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Task requested</td>
<td>Talk-outs in class</td>
<td>Get/obtain</td>
</tr>
<tr>
<td>Academic task too easy</td>
<td>Noncompliance</td>
<td>Adult attention</td>
</tr>
<tr>
<td>Academic task too hard</td>
<td>Verbal aggression</td>
<td>Desired activity/item</td>
</tr>
<tr>
<td>Academic task unmotivating</td>
<td>Inappropriate language</td>
<td>Peer attention</td>
</tr>
<tr>
<td>Academic task long</td>
<td>Disruptive</td>
<td>Avoid/escape</td>
</tr>
<tr>
<td>Academic unclear</td>
<td>Not completing work</td>
<td></td>
</tr>
<tr>
<td>Teacher reprimand</td>
<td>Fidgeting</td>
<td></td>
</tr>
<tr>
<td>Asked to go somewhere</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer teasing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer encouragement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: “Classroom Behavior Management: A Dozen Common Mistakes and What to do Instead,” by Patricia M. Barbetta, Kathleen L. Norona, David F. Bicard, 2005,

*Preventing School Failure, 49(3), p. 11-21.*
A functional assessment gives a picture of the misbehavior by including the environmental antecedents and the consequences in its description (Alberto & Troutman, 2003). Once we determine the function of a misbehavior (why it occurs), we need to teach and reinforce an appropriate replacement behavior that serves the same function as the misbehavior. For instance, if a functional assessment reveals that a student acts out during math class, a change in how or what was taught may be in order. The problem might be that the student is missing some prerequisite math skills. By reviewing those prerequisite math skills, the teacher could reduce the student’s frustrations and acting out, and maximize his/her learning (Barbetta, et al. 2005).

Many times, an ABC analysis is all that is needed to determine a functional assessment. For complex behavior problems, a more detailed, multifaceted functional assessment may be needed. At those times, teachers should contact a behavior-management specialist or school psychologist (Barbetta, et al. 2005).

Russell Barkley, (2006) has identified nine classroom management principles for teachers to use in their classroom: (1) Rules and instructions must be clear, brief, and often delivered through more visible and external modes of presentation. (2) Consequences must be delivered more swiftly (ideally, immediately). (3) Consequences must be delivered more frequently. (4) The type of consequences must often be of a higher magnitude, and more powerful. (5) An appropriate and often richer degree of incentives must be provided within a setting or task to reinforce appropriate behavior before punishment can be implemented. This means that punishment must remain within
a relative balance with rewards, or it is unlikely to succeed. “Positives before negatives” is the order of the day for children with ADHD. (6) The reinforcers or rewards that are employed must be changed or rotated frequently in order to maintain the power or efficacy of the program in motivating appropriate behavior. (7) Anticipation is the key. Teachers must plan ahead in their management, particularly during transitions and changes that are about to occur. Teachers should prompt children to recall the rules of conduct in an upcoming situation and recall what the rewards and punishments will be. (8) Children must be held more publicly accountable for their behavior and goal attainment. Their behavior is less regulated by internal information; therefore, they need more external cues about their performance demands. Students need to be monitored more closely and be provided with consequences more often across the day for behavioral control and goal attainment. (9) Behavioral interventions, while successful, only work while they are being implemented, and even then they require continued monitoring and modification over time for maximal effectiveness. If a student responds initially to a well-tailored program, but gradually the response deteriorates, then the program needs to be modified.

A teacher’s approval, appreciation and respect for a child with ADHD can go a long way toward enhancing the teacher-student relationship. Praise and other forms of positive teacher attention (i.e., happy faces, smiles or nods) have documented positive effects on students with ADHD (Barkley, 2006). Withdrawal of positive teacher attention contingent upon undesirable behavior (i.e., active ignoring) can decrease inappropriate
behavior. According to U.S. Department of Education (2005), verbal reinforcement is the most important and effective way to help children learn how to control their behavior. The Department of Education (2005), also recommends that the following strategies when using praise: (1) praise should be specific and focus on what the student did right, (2) praise should identify the desirable behavior, (3) praise should be given immediately so the behavior will be repeated, and (4) teachers should vary their statements of praise so they will not lose their value.

**Token programs** use secondary reinforcers to provide students with immediate reinforcement for appropriate behavior. Tokens may be in the form of tickets, points, chips, class money, or stickers. Tokens are portable, so they can be administered in any situation and can usually be distributed immediately following desirable behavior (Barkley, 2006). When a designated number of tokens are earned, they may be exchanged for a primary reinforcement, such as a treat or a highly valued activity (Reif, 2005). Tokens provide students with frequent and immediate reinforcement needed to sustain desired behaviors. Students not only receive tokens for appropriate behavior, but tokens are also taken away for inappropriate behavior (Flick, 1998).

Another token intervention is called Response Cost (Flick, 1998). Response cost involves the loss of a reinforcer contingent upon inappropriate behavior (Barkley, 2006). With this intervention, the student is given all the reinforcements initially (i.e., student starts the day with 20 tokens). When he/she makes a mistake, a token is taken away. At the end of the day, if the student has the designated number of tokens left, a
reward is earned. A record is kept daily so that the criteria can be adjusted to accommodate the child’s improvement (Flick, 1998). Token programs should focus on one or two target behaviors; expectations for improvement should be reasonable and attainable for the student. The teacher should consistently implement the program and choose rewards that are of value to the student (Reif, 2005).

An alternative to token programs is **time-out**, but this should only be used if positive reinforcement is not effective when used appropriately. Time-out is best used for behaviors that would be classified as aggressive, or acting out behaviors such as hitting/kicking, or loud complaints/name-calling. Time-out is a process whereby all opportunities to get reinforced are withdrawn (Turner & Watson, 1999). Barkley (2006) defines time out as a procedure that involves the withdrawal of positive reinforcement contingent upon inappropriate behavior. To be effective, time-out procedures should be (1) implemented only when there is a reinforcing environment to be removed from, (2) implemented when the function of the child’s disruptive behavior is to gain teacher or peer attention, (3) implemented swiftly following a rule infraction, (4) applied with consistency, and (5) employed for the smallest amount of time (e.g., 1-5 minutes) that proves effective (DuPaul & Stoner, 2003). The amount of time spent in time-out is usually set according to the child’s age (i.e., one minute for each year), so a ten year old may receive a ten-minute time out (Flick, 1998). Once certain criteria are met, such as being quiet and cooperative for a specified time, the child returns to the class. Time-out works only if there is something positive to which the child can return (Flick, 1998).
Self-monitoring is used as an individualized intervention plan that involves the student evaluating and recording his/her own behavior (Alberto & Troutman, 2006). The teacher and student agree on one to three behaviors for the student to monitor (e.g., complete work, stay in seat, or not talking out). The student would be given a form to rate his/her behaviors on a Likert-scale (e.g., 1 = excellent, 3 = okay, 5 = poor) indicating how well he/she did. The student and teacher then compare lists. Initially, students would be given points for matching teacher ratings and given rewards for their points. Over time, the student would be able to report a rating that matches the reality of his/her behavior. Eventually, the teacher would be able to phase out her/his recording, leaving the behavior monitoring to the student (Harlacher, et al., 2006). Self-monitoring techniques are usually phased out when the student is consistently demonstrating favorable change (Alberto & Troutman, 2006).

A self-monitoring program developed by Harvey Parker is called The Listen, Look and Think Program (Parker, 2000). It includes a cassette beep tape and self-monitoring forms. The tape runs during selected times of day. When an intermittent beep is heard on the tape, the child asks himself/herself, “Was I paying attention?” The child puts a checkmark indicating yes or no and then is expected to return to his/her work. Giving a periodic signal or beep can make the child more aware of being “on” or “off” task. Research has shown the effectiveness of this procedure: once it has been reinforced and practiced it then becomes automatic (Flick, 1998).
Daily Report Cards and Home/School Collaboration

Home-based contingency management procedures, based on the child’s behavior and/or academic performance at school, can be used as an effective supplement to classroom-based behavior change systems (DuPaul & Stoner, 2003). These procedures have many benefits. First, the child receives daily feedback as to his/her performance in the classroom. Second, parents receive daily information, thus providing an ongoing forum for teacher-parent communication. Finally, for children experiencing difficulties, this schedule of communication is preferable to waiting for a parent-teacher conference (DuPaul & Stoner, 2003).

Barkley, (2006) recommends the following guidelines when developing a daily or weekly report card that is sent home to parents: 1) The teacher should select important target behaviors, and include one or two positive behaviors, so that the child will earn points during the beginning of the program. 2) The teacher should vary the number of targets from as few as one to as many as seven or eight. Barkley recommends that teachers targeting a few behaviors when a program is first being implemented in order to maximize the child’s likelihood of success 3) The teacher should develop ratings for each target behavior that are descriptive (e.g., poor, fair, good) and clearly define the targets from the beginning to ensure their understanding of and cooperation with the procedures. (4) Teachers should monitor student behavior and give frequent feedback. In this way, students’ difficulties early on can be modified later in the day. (5) The teacher needs to be certain there is a consistent system for translating the report card into reinforcements.
at home. The teacher and parent should communicate frequently. If a parent asks about a negative rating, the teacher should keep the conversation brief and focus on positive ratings. (6) Teachers should involve parents in planning the daily report card from the beginning to ensure their understanding of and cooperation with the procedures. Furthermore, goals and procedures should be modified by the teacher on an ongoing basis in accordance with student progress or lack thereof (Barkley, 2006). Following is an example of a report card from Barkley's Handbook.

**Daily Report Card**

Name:_________________________ Date:__________________

Rating: 2 = Very Good, 1 = OK, 0 = Needs Improvement

<table>
<thead>
<tr>
<th>TARGET BEHAVIOR</th>
<th>9:00 - 10:00</th>
<th>10:00 - 11:00</th>
<th>11:00 - 12:00</th>
<th>12:00 - 1:00</th>
<th>1:00 - 2:00</th>
<th>2:00 - 3:00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Followed directions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Completed assignments</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interaction with peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Points earned: ________

Comments: ____________________________________________________________
As with any management strategy, attention to the details of identifying target behaviors and reinforcers, linking the two and monitoring, would be critical to successful outcomes (DuPaul & Stoner, 2003).

Academic Interventions

Many students with ADHD experience significant academic difficulties, and given that many young children enter school with below average skills, academic intervention strategies should be addressed as early as possible (DuPaul & White, 2005). One intervention called Peer Tutoring has been found to be effective in improving the academic performance and classroom behavior of children with ADHD. Models of peer tutoring share the instructional characteristics that are known to enhance the sustained attention of students with ADHD. These characteristics include instruction that involves a one-to-one student-teacher ratio/arrangement, self-paced instruction determined by the learner, continuous prompting of academic responding, and frequent immediate feedback about quality of performance (Barkley, 1998).

Class-Wide Peer tutoring may also be used in classrooms which include students with ADHD. This form of peer tutoring includes the following components: (1) division of the class into teams, (2) formation of tutoring pairs among classmates within each team, (3) students taking turns tutoring each other, (4) tutors being provided with academic scripts (e.g., math problems with answers, (5) praise and points being delivered contingent on correct answers, (6) errors being corrected immediately along with an
opportunity for practicing the correct answer, (7) the teacher monitoring tutoring pairs and providing bonus points for pairs who are following prescribed procedures, and (8) points being tallied by each individual student at the conclusion of each session (DuPaul & Stoner, 2003). Tutoring sessions typically last 20 minutes with an additional 5 minutes for recording of student progress and putting materials away. Interestingly, earned points typically are not exchanged for backup reinforcers. Rather, at the conclusion of each week, the team with the most points is applauded by the other team (DuPaul & Stoner, 2003).

**Computer-assisted instruction** has been recommended for increasing the on-task and work production behaviors of students with ADHD (DuPaul & Stoner, 2003). Computer-assisted instruction is designed to supplement teacher instruction and provide additional exposure to academic material. Computer-assisted programs can be well suited for engaging students with ADHD (DuPaul & Stoner, 2003). For example, these programs typically include clear goals and objectives, highlighting of important material, simplified tasks, and immediate feedback regarding accuracy. Many computer-assisted programs have game-like formats. Children with ADHD would be encouraged to be attentive to this type of teaching method. The use of computer-assisted instruction has resulted in improved academic performance and substantial reductions in off-task behavior (Ota & DuPaul, 2002).

**Instructional modification** is a proactive strategy in which changes are made to the actual assignment in order to target a child’s academic needs (Harlecher, et. al,
2006). Pfiffner and Barkley’s study, as cited in Edwards (2002) provide recommendations for altering academic tasks for students with ADHD, which include (1) matching tasks to the child’s abilities; (2) increasing the stimulation qualities of a task (e.g., color, shape, texture) to enhance attention; (3) using a variety of presentation formats and materials related to the task; (4) making academic assignments brief by reducing longer tasks into smaller steps (e.g., math sheets and number of pages to be read before answering relevant questions) and providing more immediate feedback after task completion; (5) allowing for brief physical exercise after academic periods; and (6) scheduling the majority if not all academic subjects for the morning. Barkley (2006) also recommends providing task-related choices to increase on-task behavior and work productivity. Choice-making is typically implemented by providing a student with a menu of potential tasks in a particular academic subject area from which to choose. For example, if the student is having difficulty completing independent math assignments, he/she would be presented with several possible math assignment to choose from. The student would be expected to choose and complete one of the tasks listed on the menu during the allotted time period. Thus, while the teacher retains control over the general nature of the assigned work, the student is provided with some control over the specific assignment (Barkley, 2006).

The use of instructional modifications have been shown to result in decreased disruptive behavior, increased task engagement, and increased academic and behavioral performance for students with ADHD (DuPaul & Stoner, 2003).
Classroom Arrangement and Accommodations

Classroom seating arrangements are an important factor when making accommodations for students with ADHD. Flick (1998) recommends a traditional desk arrangement in rows rather than students grouped or sharing a table. Typically, for students with ADHD, who are easily distracted, a face-to-face group formation is not recommended (Reif, 2005). Disruptive and/or distracted students often do better in individual desks rather than at group tables. This structural suggestion assumes that a traditional row-seating pattern is both feasible and supported by teachers, administrators, and students. However, current trends toward cooperative learning have reduced the practicality and popularity of this arrangement (Carbone, 2001). Teachers who dislike the traditional row seating can still find ways to make room for the suggested strategies. Teachers can still create quiet stimuli-reduced areas by allowing students to move to a peaceful corner or designated area of the room if needed. Teachers may provide “office areas” or “study carrels” for seating options during certain times of the day as needed (Reif, 2003).

Probably one of the most common classroom interventions involves moving a disruptive student’s desk away from others to an area closer to the teacher. This procedure not only reduces the student’s access to peer reinforcement of his/her disruptive behavior, but also allows the teacher to monitor the student’s behavior more effectively (Barkley, 2006). If possible, the child’s desk should also be positioned away from distracting areas, such as a window, pencil sharpener, or high traffic areas (Carbone,
Another proactive strategy is to surround the child with well-behaved, attentive students. This placement will automatically encourage positive peer relations. Additional opportunities for peer interaction can be arranged by placing tables in the back of the classroom for cooperative learning activities (Carbone, 2001). Altering the physical environment can help students who are easily distracted.

There are several guidelines for rule setting that, when followed, help create orderly, productive classrooms for teachers to teach appropriate social skills along with the academic curriculum (Barbetta, et al., 2002). Ideally, classrooms should have four to six rules; too many rules make it difficult for students to comply and for teachers to enforce. Benefits are seen when students actively participate in selecting rules. When students play an active role, they are more inclined to have rule ownership (Barbetta, et al., 2002). Reif, (2003) has the following recommendations for rules: (1) teachers should spend time teaching the rules and modeling all behavioral expectations, (2) rules should be posted in at least one visible area, (3) teachers should teach the rules with examples and role play rules in action, (4) the students should review and practice the rules frequently throughout the school year, and (5) teachers should communicate the rules and expectations to parents in writing. Another characteristic of effective rules is that they are stated positively. Positively stated rules are “do” rules. Do rules provide information about how to behave, for example, “Raise your hand before speaking.” Conversely, negatively stated rules or “don’t” rules tell students what not to do and encourage teachers to attend to student rule breaking. An example of a don’t rule is “Don’t call
out” (Barbetta, et al., 2002). In a study by Babyak, Luze and Kamps (as cited in Barbetta, et al., 2005), it was stated that teachers should consistently carry out the consequences of noncompliance of classroom rules or they will mean very little to students. If students follow rules, teachers should verbally praise them and provide additional reinforcement as needed (e.g., tokens, stickers). Teachers should make clear the consequences for following and not following the rules. If a consequence for fighting with a peer is the loss of recess, then teachers must make certain that they follow through (Barbetta, et al., 2002).

Other Considerations

The trend in education has been to ignore the need for increased activity levels by cutting down on the time allocated for physical exercise. At Tukwila Elementary, the teachers were asked to give up their mid-morning recess time so that academic time could be maximized. In truth, students are better able to focus when their need for physical activity is addressed, particularly those who may have attention problems (Gunzelmann, 2008). Having students run in place or do jumping jacks as part of the daily schedule may help reduce stress, enhance alertness, and provide an opportunity for students to be active with permission (Flick, 1998).

Yoga is another alternative that shows promise as an intervention for students with ADHD (Peck, Kehle, Bray, Theodore, 2005). Yoga incorporates physical postures,
breath control, mental concentration, and relaxation, which result in feelings of calmness. Jensen and Kenny (2004) reported that boys with ADHD decreased their hyperactivity, impulsivity, and inattention after completing a yoga program. Singleton, in *Yoga for You and Your Child* (2004), teaches the postures of rocking the boat, rocking chair, dead bug, tiptoe tree, windy tree, helicopter, puppet, and others. This book is designed for parents and teachers to use with children and is recommended by Reif (2005).

Music can be effective and helpful for creating a mood, motivating, signaling, and using during transitional times in the classroom. Through music, children can greatly improve their abilities in critical and analytical listening skills, focus/concentration, and responding to specific directions and prompts (Reif, 2003). Some examples of using music during transitional times may include: “When you hear the drum for the first time, table 3 may get up and return their books to the bookshelf” or “When you hear the birds in this song start chirping, come quietly to the rug.” Visualization activities in response to listening to musical selections can be integrated with writing, drawing, and oral activities (Reif, 2005). Music that gets you from one place to another, for example, marches are excellent for teaching children the discipline of moving their bodies appropriately; it requires focusing and counting.

DePorter, Reardon, and Singer-Nourie (as cited in Reif, 2005) share the following information and recommendations: (1) teachers should look for upper register instruments (flutes and violins), which bring a lighter tone, and may be useful during early morning and afternoon learning. (2) To help students after stressful situations,
teachers should experiment with the sound of piano, cellos and violas. (3) Music will also help mask "white noise" (the hum of lights, voices in an adjacent room). Teachers should set the music’s volume at a level that is just perceptible when there is silence in the room. (4) In general, teachers should choose musical selections for the classroom that are instrumental. Only music for breaks and special effects should contain lyrics. (5) Research has shown that learning is easier and quicker when the learner is in a relaxed, receptive state. The heartbeat of a relaxed individual is sixty to eighty beats per minute. Much of Baroque music closely matches the relaxed heartbeat of a human being. In an optimal learning condition, Baroque’s melodic chord structures and instrumentation will assist the student in accessing an alert yet relaxed state (DePorter, et al., 1999). A comprehension list of musical selections will be included in the handbook of this project.
CHAPTER THREE
PROCEDURES

My interest in students with ADHD began at the inception of my teaching career as a special education teacher nearly thirty years ago. As a resource teacher, I was always searching for ways to manage my classroom in order to enhance students’ academic and behavioral success. The students who have challenged me, and continue to challenge me, were my inspiration for this project. ADHD was an ideal choice for my project because of my interest in it.

Research for this project began with a search through educational journals. I searched for material that was practical, relevant and useful for classroom teachers. The criterion I used for selecting material were (1) that techniques and strategies were research based, (2) that research had been peer reviewed and (3) that procedures were considered “best practices.” When I found an article that met my criteria, I would further search from the references that were cited in the article. From these sources, I looked for other periodicals and books that contained information that pertained to my project. I ordered some handbooks that were referenced in articles from Amazon. I ordered and checked out textbooks from Central Washington University’s library.

I foresee this handbook being distributed through our fulltime social worker at Tukwila Elementary School. He is the first person teachers seek when there are problems with a student. Hopefully, this handbook will be an additional resource that will be
beneficial for teachers who need assistance with classroom management and/or managing student behavior.
CHAPTER FOUR

THE PROJECT
Increasing Academic and Behavioral Success for ADHD Students in the Primary Classroom

Ideas in this handbook were complied by Sandra Munoz as partial requirements for the Degree of Master of Education, Central Washington University, 2008
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Preface

As a veteran teacher, I have often heard beginning teachers talk about their struggles and challenges pertaining to classroom management and managing students who are inattentive, impulsive or hyperactive. It is my hope that beginning teachers will be able to use this handbook as a resource, and be able to utilize information, techniques and strategies to help their students succeed in their classroom. Forms, checklists, resources and ideas will also be provided to help teachers make decisions about students. This handbook will be divided into the following sections: (1) early signs, behavioral characteristics, and identification of students with ADHD, (2) individualized behavior management and interventions, (3) academic interventions, (4) classroom accommodations and expectations, (5) daily report cards and home school collaborations, and (6) other considerations.
Please note:

These pages have been redacted due to copyright restriction.

Chapter 4, pages 40 – 135: These pages have been redacted due to copyright concerns or restrictions.
Appendix I

Music Recommendations
Music for a Calming Effect

There selections are especially useful after recess, P.E., and other more active times of the day:

- Barber, Samuel. "Adagio for Strings" from String Quartet no 1, op. 11
- Beethoven, Ludwig. "Fur Elise" (piano, approximately three minutes)
- Bizet, Georges. "Berceuse" from *Children's Games (Jeuz d'Enfants)*
- Copland, Aaron. "Appalachian Spring Suite," Sections 1, 6, 7, 8
- Debussy, Claude. "Clair de Lune" (stringed instruments, approximately three minutes)
- Delibes, Leo. "Waltz" from *Coppelia* (stringed instruments, approximately two minutes)
- Halpern, Steve. *Spectrum Suite* (fourteen different colored-themed songs each approximately three to five minutes long)
- Holst, Gustav. "Jupiter" from *The Planets* (stringed section, approximately one minute)
- Mendelssohn, Felix. "Nocture" from *Midsummer Night's Dream*
- Mozart, Wolfgang Amadeus. "Adagio for Glass Harmonica"
- Mussorgsky, Modest. "Bydilo" ("The Oxcart" excerpt from *Pictures at an Exhibition*)
• Offenbach, Jacques. “Barcarolle” from Tales of Hoffman (approximately three and one half minutes)

• Puccini, Giacomo. “The Humming Chorus” from Madama Butterfly

• Saint-Saens, Camille. “The Aquarium” from Carnival of the Animals (approximately two minutes)

• Saint-Saens, Camille. “The Swan” from Carnival of the Animals (approximately three minutes)

• “Sakura,” a traditional Japanese folk song (performed on koto, approximately one minute)

• Smetana, Bedrich. “The Moldau” (approximately eleven and one half minutes)

• Wagner, Richard. “The Pilgrim’s Chorus” from Tannhauser (trombone section)

Additional Recommendations for Calming and Relaxing

• “Four Seasons” by Vivaldi

• “Water Music” by Handel

• “Brandenburg Concertos” by Bach

• “Wind Shadows” by Kim Robertson

• “Music for Relaxation” by Chapman and Miles
Nontraditional Music for Calming and Relaxing

- **Environments:** set of CDs by Syntonic Research Inc., including The Psychologically Ultimate Seashore; Optimum Aviary; Ultimate Thunderstorm; Gentle Rain in a Pine Forest; Summer Cornfield (sound of crickets and other insects); Wood-Masted Sailboat; A Country Stream; Pacific Ocean; Caribbean Lagoon

- **Music for Relaxation:** sets of CDs, including Song of the Dolphins, Soothing Waterfalls, Summer Evening Serenade, Thundering Rainstorm (all enhance with music), Entertainment Media Partners, 2002

- **Sounds of Tropical Rain Forest,** Gentle Persuasion, SPJ Music, 1999

Other Artists for Relaxing/Calming

David Arkenstone, Keola Beamer, Jim Chappell, Kenny G, Adam Geiger, Nicholas Gunn, Steven Halpern, Georgia Kelly, Kiraro, Mars Lasar, Hillary Stagg, George Winston, Zamfir

Music for Moving from Here to There

Moving from out of the classroom, back to the classroom:

- Berlin, Irving. “Alexander’s Ragtime Band”

- Chopin, Frederick. “Polonaise” in A-Flat Major

- Elgar, Sir Edward. “Pomp and Circumstance,” March no. 1 in D major
• Gould, Morton. “American Salute”

• Herbert, Victor. “March of the Toys” from *Babes in Toyland*

• Rodgers, Richard, and Hammerstein, Oscar. “Oklahoma-Finale” from *Oklahoma*

• Sousa, John Phillip. Any of his marches

• Verdi, Giuseppe. “Grand March” from *Aida*

Moving from “here to there” within the classroom

(for example, from the reading circle to seatwork):

• Bolling, Claude. Bolling suite for Cello, “Galop” only, performed by Yo Yo Ma

• Saint-Saens, Camille. “The Elephant” from *Carnival of the Animals*

• Satie, Erik. “The Hunt” from *Sports et Divertissments*

• Tchaikovsky, Peter Ilyich. “Dance of the Reed Flutes” from *The Nutcracker Suite*

• Thomson, Virgil. “The Walking Song” (Acadian Songs and Dances) from

*Louisiana Story Orchestral suite* (approximately two minutes)

Music for Transitional Times

These selections may be used to signal change from one activity to another, such as math to reading or from science to recess preparation:

• Any concerto (baroque or classical) music for trumpet(s) performed by

Wynton Marsalis (largo, adagio, or andante movement only)
• Bach, J.S. “Air”
• Copeland, Aaron. “Fanfare for the Common Man” (approximately three
  minutes)
• Denver, John. “Annies’s Song”
• Telemann, Georg Philipp. “Overture in D Major for Oboe and Trumpet”
  from Fifth Movement, “Adagio” only
• Torelli, Giuseppe. “Concerto in D Major for Trumpet, Strings, and Basso
  Continuo” from Movements 1, 2, and 3, only the “Adagio” sections
• Vivaldi, Antonio. “Andante” from Concerto in D Minor for Two
  Mandolins
• Williams, John. “Star Wars Suite” (theme from the movie Star Wars)

Note: A teacher may wish to dismiss students for recess, lunch, or other transitional time
with music that has a repetitive theme. For example, Duke Ellington / B. Strayhorns’
recording (or other recording artists’) for “Take A Train” has a main theme that repeats
at least six different times. Students can be taught to listen to the music and identify each
time the theme repeats itself. The teacher may assign as follows: Group 1 may line up
the third time you hear the theme. Group 2 may line up the fifth time you hear the
theme,” and so on.

All musical recommendations in this Appendix came from Sandra Reif’s Handbook,
“How to Reach and Teach Children with ADD/ADHD – Practical Techniques, Strategies
and Interventions” 2005.
References


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CHAPTER 5
SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

Today’s general education teachers function in classrooms that include students with differing abilities, including students with ADHD. Many teachers enter the profession unprepared to meet the challenges of teaching in today’s mainstreamed classrooms. Classroom management is one of the most challenging aspects of teaching. The handbook prepared for this project was intended to help beginning teachers manage their students in the classroom and to maximize student learning. The interventions and strategies listed in the handbook can be used for all students, but they have been shown particularly effective with students diagnosed with ADHD.

Conclusions

This project attempted to provide a resource for primary teachers who teach in inclusive classrooms. The focus of the handbook was to present teachers with forms, checklists and practical techniques to assist them in managing the classroom successfully, thus enabling students to reach their highest potential. The techniques suggested in this handbook require additional teacher time and commitment, but hopefully the techniques will result in better outcomes for all involved.
Recommendations

As I did research for this project I realized that many teachers, including myself, need additional training to implement effective behavioral programs. I would encourage teachers to read journal articles and books written by leading experts in the field of ADHD such as Russell A. Barkley, George J. DuPaul, Gary Stoner and Sandra Reif. I would also encourage teachers to attend workshops and training sessions that involve classroom management and/or behavioral interventions for students with ADHD.

For beginning teachers I would recommend a token/response cost program. From experience, I know that this type of program is successful. The tokens/tickets are tangible and students quickly learn the cause and effect of earning and losing tickets/tokens. With teacher consistency and clear expectations, most students are able to manage their behavior successfully. On occasion, I have used an additional incentive such as a chart on the student’s desk. I had one particular student who was monitoring “talking out” without raising her hand. Having the chart on her desk gave her the extra visual reminder that she needed. She had made significant progress and liked seeing her progress. I wanted to phase out the use of the chart, but she did not want to relinquish it, saying she liked seeing how she was doing. Obviously, the chart was very reinforcing for her. In addition to behavior modification at school, her parents also were also utilizing a reinforcement program at home. When parents are involved and see the benefits of the school-home connection, great things happen and goals are accomplished.
References


