Sample

Canadian Public Policy, Education Learning disability A.D.H.D

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Attention-Deficit/Hyperactivity Disorder (ADHD)

Introduction

It has been estimated that almost five percent of School aged children out of population of 2.1 Million in Ontario are suffering from Attention-Deficit/Hyperactivity Disorder (ADHD). Contrasting other disabilities like autism or learning disabilities the ADHD was not in the special education previously. The students with ADHD were not included in the special education policy and thus the students and parents were suffering as they could not get the necessary interventions at School suggested by the doctor. (Andrea Golden, 2012)

Recently Education Minister of Ontario has announced to accommodate the students with ADHD and thus relaxed the parents as previously parents were spending from their pockets on theirs children with ADHD. A memorandum has been posted on the Ministry of Education website in the name of School Boards saying "children with conditions such as "Attention Deficit Hyperactivity Disorder are entitled to special education supports and services if the condition interferes with their learning".

Current essay is a report on Canadian Public Policy as well current policy change that was accommodating students with ADHD in the School under special education. This step taken by the government is very positive and will have long lasting impacts on students with ADHD as well as relax their parents. In the beginning of the paper the author has focused on stating the conditions of ADHD. The author has also shed light on the problems and difficulties that ADHD children and their parents have to face in general and in classroom setting

After discussing the issue of ADHD in Ontario and the difficulties of parents and kids the author has focused on the policy issues. In the initial section there is a statement of the

problem, next the focus is on policy perspective and then there is a discussion on the benefits and costs for government as well as parents related to the recent announcement of the Ministry of Education.

The Statement of Issue

ADHD is defined within the medical community by the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM IV). According to Michigan State University's School Psychology Program (2004), the DSM IV lists three subtypes of ADHD: Attention-Deficit/Hyperactivity Disorder Predominantly Inattentive Type, Attention-Deficit/Hyperactivity Disorder Predominantly Hyperactive-Impulsive Type, and Attention-Deficit/Hyperactivity Disorder Combined Type. For each of these three subtypes there are five factors that must be present in order to conclude a diagnosis of ADHD: a) persistent patterns of inattention and/or hyperactivity-impulsivity must be more frequently displayed and is more severe than is typically observed in individuals at comparable level of development, b) some hyperactive-impulsive or inattentive symptoms must have been present before age seven years, c) some impairment from the symptoms is present in at least two settings (e.g., in school and at home), d) there must be clear evidence of interference with developmentally appropriate social, academic, or occupational functioning, and e) the disturbance does not occur exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorders and is not better accounted for by another mental disorder (e.g., Mood Disorder, Anxiety Disorder, Dissociative Disorder, or a Personality Disorder). Additionally, six or more of the following symptoms for inattention and/or hyperactivity-impulsivity must have persisted for at least six months.

In attention:

(a) Often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities

(b) Often has difficulty sustaining attention in tasks or play activity

(c) Often does not seem to listen when spoken to directly

(d) 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)

(e) Often has difficulty organizing tasks and activities

(f) Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework)

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

(h) Is often easily distracted by extraneous stimuli

(i) is often forgetful in daily activities

Hyperactivity-Impulsivity:

(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 in which it is inappropriate (in adolescents or adults, may be limited to subjective feelings of restlessness)

(d) Often has difficulty playing or engaging in leisure activities quietly

(e) is often ―on the go‖ or often acts as if ―driven by a motor

(f) Often talks excessively

(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)

Some research suggests ADHD is a biological disorder, ranging from complications with dopamine reuptake transporter genes to neurological chemical imbalances and even the effects of prenatal and prenatal nicotine exposure (Castellanos & Tannock, 2002). In addition to biological causes, researchers have also examined possible causes of ADHD such as the number of hours children watch television, their school environment (teaching methods, low self-esteem, boredom, etc.), toxins in the environment, and other psychological problems, such as depression and anxiety (Dryer, Kiernan, & Tyson, 2006). The parent-child relationship also has received attention as a possible source of children‘s negative behaviors, including such areas as hostile parenting, ineffective discipline, and parents‘mental health (Lifford, Harold, & Thapar, 2008; Poire & Dailey, 2000; Snyder, Cramer, Afrank, & Patterson, 2005; Yingling, 2004). These are all relational issues that come directly from varying communication patterns exemplified through parenting practices, the reason this study has chosen to focus on the communicative practices of parents with their children.

Yingling (2004) wrote about the relationship between parent and child and how it evolves from infancy to adulthood through relational dialogue. She asserted that parents are the ―primary agents of socialization and have the ―greatest influence on children‘s interpretations and management of emotions (p. 117). The reinforcement of parents‘expectations serves as a model of the parent-child relationship that provides the child with proper behavioral management skills. According to Yingling (2004), children who express their negative emotions through displays of anger are less likely to receive sensitive care giving, and by age two are often managed by the use of authoritarian discipline (p. 156). This type of discipline creates a defiant response from the child, which then leads to ―inconsistent parenting—first resisting, then giving in (p. 156). Conversely, if parents

comfort the angry or distressed child, the children are more likely to deal constructively with anger. Furthermore, Yingling (2004) contends that this authoritative style of parenting employs the kind of clear and consistent rules and limits that young children understand and appreciate, whereas authoritarian styles simply reinforce negative behavior.

Struggle by Human Rights Groups and Parents

For many years parents and human rights organization were struggling and pursuing government to declare ADHD as a disability and accommodate these children in public Schools. Research shows that symptoms of inattention, hyperactivity and impulsivity frequently lead children to struggle with work productivity and academic achievement, and often these symptoms may persist into adulthood (DuPaul & Stoner, 2003). Reports from parents and teachers indicate that children with ADHD underperform relative to their own abilities as well as compared to their peers. In all, approximately 80% of children with ADHD have been found to exhibit learning and/or achievement difficulties (Cantwell & Baker, 1991; Pastor & Reuben, 2002). Consequently, children with ADHD function approximately one standard deviation below their classmates with respect to achievement test scores (DuPaul & Stoner, 2003). Because of these challenges in academic performance and achievement, 56% of children with ADHD require academic tutoring (Barkley, 2006); approximately 30% get retained at least once in school (Barkley, 2006); and almost 50% are placed in special education for behavioral disorders or learning disabilities (Reid et al., 1994).

Due to all these difficulties parents were suffering as there was no support from government and no special educational plan for these children. The parent couldn't ask school administration to provide the required intervention as advised by the doctor in class room. Parents conveyed their voice to the government through different human rights organization and NGOs such as Family Alliance Ontario, The Ontario Federation of Home and School Associations; Center for ADHD Awareness (CADDAC) Canada.

Human rights organizations and parents have been asking to provide the ADHD children with the same kinds of support as is accessible to the students with autism and other learning disabilities and other conditions that restrict and cause hindrance in learning National Director of CADDAC Heidi Bernhardt described that she used to get daily calls from parents describing their difficulties. She also described that parents usually complained that their children cannot get the necessary interventions from School and classroom as suggested by doctors. Commenting on the recent decision by Ministry of Education she said that "This is definitely a step in the right direction"

Public Policy Canada: An Overview

Public policy is usually defined as the actions that government takes to secure specific outcomes rooted in the apparent requirements of the community. Mostly the public policy does not depend on evidence but on legal notion of "what is or is not in the public interest" (Dukelow, 2004).

Canada was the first country in western countries which introduced the Charter of Rights and Freedoms for individuals with disability in 1982. For this purpose the section (15)(1)(2) was included in the charter. Section (15) states that:

> (1) "Every individual is equal before and under the law and has the right to equal protection and benefit of the law without discrimination based on race, national or ethnic origin, color, religion, sex, age, or mental or physical disability."
>
> (2) Subsection (1) does not preclude any law, program or activity that has as its object the amelioration of conditions of disadvantaged individuals or groups including those that are disadvantaged because of race, national or ethnic origin, colour, religion, sex, age, or mental or physical disability. (Government of Canada, 1982)

The endorsement of this section caused challenges to the institutions as they were liable to provide programs and services to the individuals with disabilities. This challenge was more difficult for school systems as well as ministries of education all through the country. The purpose of the enactment of this charter was to make equality rights momentous by stipulations expressed in the pertinent provincial legislation, set of laws, and policies including those applied to the field of health, education, and social services.

One of the most significant areas has been the special education. In Canada the education is considered a public service and it is the responsibility of every province to provide this service to every citizen including persons with disability. It is the duty of the Provincial Ministry of Education to specify who entitlement for free education is as well as how the education for a child with disability will be ensured through the School acts or relevant policies. In addition the education regulations and policies related to special education policies explain the essentials as the methods through which students with disabilities will be educated. (Sussel, 1995).

In Canada provinces and territories have made legislations according to which parents are responsible to involve in the education of their children and to consult teachers and School administrators about the education program and the needs of their disable child. Also parents can request to reviewing the education plan of an educator that may have an affect on their child. Similarly many provinces have outlined particular procedures through they make sure that parents are consulted while making an individual education plan for their child usually named as IPP or Individualized Education Plan (IEP).

The objective of crating and enacting a public policy or legislation related to special education is to make sure that students with disabilities are getting high quality education according to their special needs and abilities (MacKay & Burt-Gerrans, 2003; MacKay & Sutherland, 2006). Yet as is discussed above children with ADHD were not considered to

deserve to get special attention and intervention at School. That is why many parents got the human rights groups and asked for assistance (Watkinson, 1999), while many others went to courts to complain regarding the application of special education public policies.

Policy Implications

At present Ministry of Education Ontario is providing assistance to the disable students through Ontario Student Assistance Program (OSAP). In addition the Ministry has established the Aboriginal Postsecondary Education and Training Bursary for the assistance of students with disability in pos-secondary education. There is also Ontario Disability Support Program (ODSP) for students with disability.

Current policy will impact the government as the expenditure will be increased. Schools will have to expand the facilities to the children with ADHD. As mentioned above the number of School age ADHD children in Ontario is 1.2 million in Ontario and to accommodate this population Government will need to increase the budget of the public Schools. At School level the facilities and staff will be upgraded to meet the requirements of this group. Yet it is a positive step because it is the duty of the government to provide educational facility for all its citizens on equal basis. The policy has been welcomed by parents and human rights organizations.

The policy has in particular has positive implication for parents as their ADHD children will be accommodated in School. This will be probe to be a great support for them financially and socially.

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