

Attention Deficit Hyperactivity Disorder (ADHD) is a neurological condition that involves problems with inattention and hyperactivity-impulsivity that are developmentally inconsistent with the age of the child. Children with ADHD are typically included in general education without being identified. Hence, they receive no intervention to meet their needs which usually makes them misunderstood by teachers and peers (Rief, S., 2003). Many different serious consequences and risks are associated with this neglect. These students experience school failure and dropping out; underachievement and underperformance at school and at work; rejection, ridicule, and punishment; and other problems (Barkley et al., 2002, in Rief and Heimburge, 2006). ADHD has been recognized widely in the United States since the 1980s but it became noticed in the Philippines only in the last two decades (Lewis-Morton, Dallos, Clempson, 2014).

The people's growing awareness of ADHD through articles in popular media and the notable increase of children with ADHD in the population have enabled parents and teachers to recognize the need for appropriate accommodation (Akbas, 2014). Often, the presence of the condition becomes apparent only after the child has been admitted to a regular school (Lewis-Morton, Dallos, and Clempson, 2014). Education laws in the country, particularly those concerning special education, make no mention of the condition. Therefore, no prior provisions for accommodations for these special learners are made by the law, the educational system, or the educator (Philippine Congress, 1992). Thus, a gap exists between what the child with ADHD needs and what the school gives to address his/her needs.

Many Filipino parents find it difficult to find a regular school that would readily accept their children with ADHD (Tumadiang, 2009). Often, school administrators and regular class teachers, particularly in private schools, resist admitting or keeping a child with ADHD (Bora, 2013). This situation can be attributed to a number of factors such as: (a) the lack of preparation on the part of the regular class teachers to best handle this kind of special learners (Snider, 2003), and (b) the need of the teachers to gain more skills to properly modify instructional aids/materials and the curriculum (Zentall, 2007).

These problems of the in-service teachers who find learners with ADHD in their regular inclusion classes are addressed through training programs and seminars that introduce to them the right interventions in the form of accommodations, modifications, and adaptations that are tailored to individual strengths, learning styles, and needs. An increasing number of such training programs are already available, complete with teacher's manuals and guidelines. The researcher was actually a member of a trainers' group that conducts this type of seminar.

The Individualized Accommodation Plan (IAP) is a much needed tool and resource guide for general education teachers on how to best accommodate students with special needs in their class (Barkley, 2008). In the inclusion program, general education has the main responsibility of providing the IAP in coordination with the parents and other essential professionals knowledgeable about the student. The IAP may also be applied to other students with milder impairments such as those with asthma, diabetes, dyslexia, dysthymia, heart disease,

and others whose needs can be addressed through adjustments and modifications in the regular curriculum.

Objectives of the Study

This study is part of a bigger study that developed a training manual for the Individualized Accommodation Plan for Students with ADHD. This study focuses on the needs of teachers in the inclusion scheme in order to accommodate well the students with ADHD.

Significance of the Study

This research contributed to the field of Special Education by producing the *Teacher's Training Manual for the Individualized Accommodation Plan (IAP) of Students with ADHD*. This product is meant for distribution to regular classroom teachers in inclusive schools. In addition, the research results can enhance the success of the inclusion program of children with ADHD and eventually other children with disabilities by facilitating their full acceptance in general education.

This research is both curriculum-development-based and program-based. It is based on curriculum development in that it is geared to the development of teachers' skills and teaching strategies to adjust the current curricular set-up and content to fit the strengths and abilities of children with special needs. On the other hand, it is program based in that it relies on the strict implementation to best accommodate students with ADHD.

When trained properly, regular class teachers can impact students with ADHD. The useful and relevant information acquired from this study may inspire and enable them to become better educators to children with ADHD. The training manual can help regular teachers become competent in handling students with ADHD. It shows

them practical means of providing the necessary accommodation, modifications, and adaptations needed by the student with ADHD.

Administrators/principals of regular schools nationwide can promote an organized system and policy for implementation, application, monitoring, and evaluation of the adjustments and changes appropriate for students with ADHD.

Parents who have children with ADHD can be given full assurance of the full acceptance of their children in general education despite their condition. This effort brings hope and relief for anxious parents of children with ADHD.

This study benefits the students with ADHD in general education. The proposed system to implement IAP will help overcome or minimize these barriers. It provides them access to learning opportunities appropriate to their strength and abilities.

Methodology

This study made use of data collected from an FGD among regular teachers with actual experience in handling students with ADHD and a questionnaire on teacher competencies. The objectives of the FGD were to investigate on the modifications/interventions/adjustments given to students with ADHD by the teachers in that school and to gather data about the teachers' needs to accommodate and teach these students in their class.

The second instrument was an expert-validated researcher-made questionnaire on teacher competencies required in implementing the IAP to children with ADHD. The researcher, in coordination with her research adviser, wrote items for the questionnaire. These

items were culled from textbooks and journal articles. Afterwards, these were expert-validated by three SPED practitioners who specialized in teaching students with ADHD.

The final phase of the study implemented a training program for the same teachers. This provided them with the necessary teacher competencies to manage and teach students with ADHD in class using the IAP as their guide. At the end of the training program, a researcher-made self-assessment questionnaire and a researcher-made training program evaluation questionnaire were administered to the teachers. The self-assessment questionnaire elicited data on the competency attainment of the participants in terms of (a) their awareness, understanding, and knowledge about IAP, (b) the teacher's plans to ensure that IAP is followed, and (c) their commitment to enhance the skills learned to teach and manage students with ADHD. The training program evaluation questionnaire gathered the participant-teacher's evaluation of the clarity, objectives, content, delivery, and the materials used in the training program.

Research Locale

The lone participating school in this study is located in Bulacan. It is a Montessori school offering pre-school to grade six, with a total enrolment of about 100 students in 2011-2012. The school agreed to participate in the study because its teachers were encountering difficulties in handling students with ADHD in their class. The school welcomed participation in the research as a kind of on-the-job training opportunity for their teachers to improve their teaching strategies that may eventually benefit their students with ADHD. Other schools were also invited to participate in this study but their respective school heads declined.

Research Participants

Eight regular class teachers were purposively selected to participate in the research. Only teachers who have had actual experience in teaching students with ADHD in the pre-school or elementary level were selected. They formed the first group which participated in the FGD. The teachers in this group answered a researcher-made questionnaire to identify the teacher competencies required in implementing the IAPs for children with ADHD. One more teacher joined the group as she was involved in supervision.

Research Instruments

The researcher prepared an open-ended discussion guide for use during the FGD in order to identify the modifications/adjustments/interventions given to students with ADHD and to determine the needs of teachers to competently handle these students. The *FGD Guide* provides suggested introductory remarks and procedures for the facilitator (the researcher). It has five questions for discussion in the course of the FGD: (a) the modifications/adjustments/interventions given to students with ADHD in the school; (b) the problems/difficulties encountered when implementing them; (c) what the teachers want to know about ADHD and related teaching strategies; (d) the teachers' knowledge and skill competencies in accommodating and teaching students with ADHD; and (e) training needed by the teachers to acquire knowledge and skills to implement a plan suited to the needs of children with ADHD in their class. In addition, other needs were identified through the one-shot administration to the same group of teachers of a researcher-made questionnaire on teacher competencies required in implementing the IAPs to children with ADHD.

Data Gathering Procedure

The researcher-made instruments were subjected to expert validation. FGDs and a one-shot administration of a researcher-made questionnaire were held among the principal and teachers of the school.

Results and Discussion

Based on the FGD, teachers would like to have background information about the nature, causes, and co-morbidities of ADHD, the legal basis for educating a child with ADHD, and various behavior management techniques.

The questionnaire identified needs in recognizing strengths of students with ADHD; knowledge about behavior management techniques needed in handling a large number of students (six students with ADHD) in a class; behavioral accommodations such as skills and strategies in addressing inattention and distractibility, hyperactivity, impulsivity, and aggressive behaviors, and handling temper outbursts and environmental accommodations; and knowledge about IAP and the procedures on how to develop, implement, review, and revise this plan.

Knowledge about the nature of ADHD

The responses of the teachers to the FGD indicate that seven of the teachers have insufficient information on the nature of ADHD. Some of their responses indicate that a person with ADHD "has an illness wherein a person or a child does whatever she/he wants" and that "it (ADHD) deals with many actions or moves that a child or a person can do." The correct responses came from the Elementary/SPED Principal and the Pre-school Class Adviser, both of whom have SPED background. The Elementary /SPED principal stated that ADHD "has something to do with the

absence of hormones in the brain which makes the child unable to control his actions, movements and impulsivity and is characterized by short attention span, impatience, jerky movements, and impulsivity; people with ADHD tend to act before they think." The Pre-school Class Adviser stated that ADHD "is a behavioral disorder initially manifested in childhood and that children with this disorder are hyperactive and impulsive and have problems with attention and concentration span. These may lead to academic problems and problems in emotional and social functioning."

Flick (1998) reiterated that problem situations may occur when a teacher has little understanding of ADHD and its resultant behaviors and when the teacher has little or no knowledge of strategies to effectively deal with problematic behaviors. He also emphasized that the teacher, as a result, "may resort to more drastic measures (e.g., punishing or ostracizing) to gain control, only to realize a continuing - or worsening - problem" (p. 249). He also added that the teacher may become quite defensive and may feel inadequate, overwhelmed, and overstressed about such situations. Classroom situations can be chaotic.

As for the cause of ADHD, some stated that it is caused by "heredity, exposure to toxic substances, injury to the brain from trauma, strokes, and brain tumors." The right response came from the Pre-school Class Adviser who said that "the cause has not been fully defined and a genetic predisposition has been demonstrated in identical twin and sibling studies."

Ashley (2005) provides clear enlightening answers to the questions on the cause of ADHD. She stated that "brain structure and functioning are suspected to

play a role in causing both ADD and ADHD” (p. 12). She added that “it is common to hear that ADHD is inherited or genetic” (p. 13).

Co-morbidities associated with ADHD

Based on the FGD, the participants wanted to identify some co-morbidities associated with ADHD as they have observed students with this condition manifest other problems. Two participants said that children with ADHD have learning disabilities.

Several conditions, such as being oppositional, co-exist with ADHD. It is very important to be aware that there is a high rate of “co-morbidity” with ADHD, which means that there are at least two co-existing conditions (Rief, 2005). Examples of these conditions that may co-exist with ADHD are Conduct Disorder, Anxiety Disorder, Tics or Tourette Syndrome, and Learning Disabilities, among others. The principal narrated how puzzled she is when it comes to these other conditions.

Legal bases of education of children with ADHD

The participants wanted to know if children with ADHD have the right to be educated and given special accommodation. They wanted to identify a specific law that they can cite as a legal foundation for educating such students. In the FGD, the Elementary/SPED Principal cited the Magna Carta for Persons with Disabilities (Republic Act 7277). Republic Act 9277 and the Philippine Constitution provide for equal education and the right to be educated.

Behavior management techniques

Knowledge about the behavior management techniques that can be used to address behavior problems of a child with

ADHD must be given to teachers for them to positively address these behaviors without having to resort to drastic measures. The teachers said that there are times when they do not know what to do. They have observed that the students with ADHD run around the classroom, are talkative, and have difficulty in maintaining focus on the lessons.

Students with ADHD are not aware of the consequences of their misbehaviors. The challenging behaviors exhibited by children with ADHD are rarely deliberate or willful because they are not even aware of their behaviors and how these affect others (Rief, 2003). The Math/Geometry/Geography teacher narrated her pertinent observation on the behavior of children with ADHD. The researcher observed that teachers are not prepared when it comes to attending to the consequences of the misbehavior such as the repeated acting up of the child with ADHD. This is evident in the narrative of the MAPE teacher. The researcher also observed that teachers lack the knowledge about the techniques on how to properly manage misbehaviors displayed by the child with ADHD thereby resorting to more drastic measures. Hames et al. (in Smith and Patton, 1998) suggested that accommodations can be made by setting up a behavior contract, instructing a student in self-monitoring of behavior, setting up social behavior goals with the student, and implementing a reward program.

Knowledge about the behavior management techniques in handling a large number of students with ADHD in class (six students in one class)

Support in the form of tools and strategies must be extended to all teachers who handle a large number of students with ADHD in class. It is not an easy task to teach many students with difficult and

challenging behaviors at the same time. This would always result in a very frustrating situation as in what the principal narrated.

The research site of this study has been admitting more students with ADHD because of the trend towards inclusion. However, it was observed that majority of the schools in the province where the research site is located, resist admitting students with ADHD. Often, school administrators and regular class teachers, particularly in private schools, resist admitting or keeping a child with ADHD in their school. This situation can be attributed to a number of factors. It can be the lack of preparation on the part of the regular class teachers to best handle this kind of special learners. It can also be the need to gain more skills to properly modify instructional aids/materials and the curriculum to fit these skills to the levels of this type of special learners in order to address their needs. For this reason, support must be provided to schools that are willing to admit them, an example of which is the employment of teacher aide/s or volunteers. Also, knowledge about some behavior modification techniques, such as behavior contract, token system, reward system, and response cost lottery, recommended by Flick (1998) can be used in handling a large number of students with ADHD.

Behavioral accommodations to address inattention and distractibility

Arranging the child's table so that it faces the wall is one of the principal's strategies to reduce distraction. It is applicable during testing or during activities assigned to the child alone. Parker (2005) explained that "during one-on-one situations when the child is being closely observed, attention span may seem quite normal" (p. 8).

Adams et al. (2009) found out that students with ADHD were more affected than those without ADHD in the virtual reality classroom that included simulated "real-world" auditory and visual distracters. Strategies to reduce distractions must be used during testing or when activities are assigned to them. The strategies that can be used to address inattention and distractibility can either be providing a privacy board to the student and/or permitting the use of earplugs or some other device to block out auditory distractions during exams or seatwork (Rief and Heimburge, 2006).

Parker (2005) stated that teachers need to think about how they can arrange students' desks considering that many classrooms are overcrowded. He recommended that teachers try to avoid seating students with ADHD near each other, near windows, by bulletin boards, or close to areas of the room where they are subject to more distractions. He further suggested that the best seating for a child with ADHD is "probably in close proximity to the teacher so that the student is easily accessible for teacher prompting, correction, or reinforcement, or near a good peer role model" (p. 85).

Behavioral accommodations to address hyperactivity

All the teachers said that hyperactivity is manifested by some of their students. They said that the students wiggle and squirm on their seats and roam around the classroom. They have observed that the students cannot even sit still. Parker (2005) stressed that hyperactivity is often at its worst in young children and tends to slow down as the children get older. Accommodations must be made to help students with ADHD deal with their excessive hyperactivity and restlessness. Some of these are being used in the school.

The challenging behaviors exhibited by children with ADHD are rarely deliberate or willful because they are not even aware of their behaviors and how these affect others (Rief, 2003). Accommodations to address hyperactivity and restlessness must be applied without having to resort to more drastic measures, like what the principal was planning to do, i.e., customizing armchairs to have locks so the child stays seated for a long time.

Behavioral accommodations to address impulsivity

All the research participants narrated that there are impulsive behaviors that need to be addressed. For example, a student with ADHD may just blurt out the answers in class without being called. Some students with ADHD get into trouble because they impulsively get things that belong to their classmates. There have also been disciplinary cases in the school wherein the student with ADHD hit someone who teased him. Parker (2005) explained that many children with ADHD have problems with impulse control. This refers to the child's inability to regulate emotions and behavior. He also observed that "others find their behavior annoying because they never seem to realize when enough is enough" (p. 8). For teachers to be prepared in situations wherein there are students with ADHD showing impulsivity, appropriate skills and strategies to address this behavior must be present. There are a lot of instances wherein the respondents had to deal with impulsivity. One of these was when the teacher lost focus and the child already cut something important.

One strategy that can be used to address the impulsivity of the student and to remind him beforehand of the proper behavior that he/she must display is by using a cue of behavioral expectations in pictures or a few simple words on his/her

desk (Rief and Heimburge, 2006). Teachers can make a picture of a boy cutting with a cross on it and a label showing not cutting of materials. Teachers can display this picture in front of his desk or table. Children with ADHD tend to have short-term memory problems by having difficulty remembering information in the here and now, and not remembering teacher requests, instructions, or multi-step directions (Zeigler Dendy, 2000).

Behavioral accommodations to address aggressive behaviors and temper outbursts

The research participants have observed that there are a few cases of students with ADHD who hit their classmates. They cannot control themselves when they get angry so they hit or curse their schoolmates or classmates. Except for the Elementary/SPED principal, the participants said that they do not know what to do and that they feel helpless in moments like these. Ramirez (2009) points out that some children with ADHD do not have the ability to control aggressive behaviors because the area of their brain that controls such behavior does not function properly. She adds that these children will actually enjoy engaging in risky behavior and may even look for conflict, erupt into fits of anger by lashing out physically, and also have difficulty controlling their speech and blurting out insults or foul language.

Several chaotic instances may occur in class involving students with ADHD with aggressive behaviors due to their lack of awareness of their misbehaviors' consequences. Cases of aggressiveness like boxing his peers for no reason, kicking, spitting on, and stabbing the back of a noisy classmate with a pencil were narrated by the principal.

Reif and Heimburge (2006) suggested that the teacher write a contract for the student's behavior which indicates goal/s and predetermined reward/s. Another option is to place visual prompts, such as a cue of behavioral expectations in pictures or a few simple words, on his/her desk. In this case, pictures reminding him to stop spitting or stabbing can be used and displayed in places that can be easily seen by the child.

Dowshen (2008) stated the findings from a new study about five tantrum styles that children with ADHD were more likely to exhibit. These are excessive aggression or destructiveness during tantrums, consistent tantrums (with 10-20 episodes at home or separate days within a month or more than five a day for multiple days at school or away from home), tantrums lasting a long time (25 minutes or more), trouble calming down after tantrums, and hurting themselves on purpose (by holding their breath, biting, scratching, head banging, or hitting themselves). Teachers must be equipped with skills and strategies to aid in calming, to avoid escalation of problems, and to intervene in a manner that helps the child/teen regain self-control (Rief, 2005, p. 130). The need for these was specified by the principal in her narration.

Rief and Heimburge (2006) emphasized the need for the teacher to look for signs of stress build-up and provide encouragement to alleviate pressure. The cause of stress and frustration must be identified through private conferences and closeness. If there is a need, the teacher has to adjust the factors that cause this misbehavior. To relieve stress and aid in calming, the student must do some physical activities like brisk walking, jogging, swinging, pushing/pulling, and pounding/manipulating clay, among others (Rief, 2003).

Environmental accommodations

The Elementary/SPED principal said that she locks up a student inside a custom-made resource room if the behavior is unmanageable. The principal further narrated her plan of preparing their resource room and making it look like a small detention facility called *bartolina* with the doors having holes on its grills that can be locked in case the teacher has to attend to her personal needs.

Mercado (2001, in Dizon, Sacris, and Mercado, 2001) explained that in inclusion, the regular class functions as a home base for all children regardless of the difficulties they experience. In this case, the negative effect of putting a child with special needs inside a room with a lock is being overlooked by the principal. This effect has a bearing on the emotional development of a child with special needs. A resource room must function as a calm, structured area wherein a child can be emotionally safe and periodic assistance is provided. Instead of having to resort to this drastic measure, a teacher can designate physical boundaries with colored masking tape on the carpet, floor, or tables (Rief, 2003). This is to acknowledge the need of the child to move in an area without the opportunity of disturbing other students in class.

Awareness and understanding about the IAP and the procedures on how to develop, implement, review, and revise this plan

The responses of the teachers to the researcher-made Questionnaire on Teacher Competencies in Implementing the IAPs for Children with ADHD indicate that the right response came only from the Elementary/SPED Principal, who stated that "IAP is the way or method by which the teacher handling the CSN modifies the lesson/curriculum for a child with ADHD

and that the teacher allows for some adjustments (in the seat plan, homework, quiz) to minimize distractions and to allow a child with ADHD to finish his tasks." The other participants provided inaccurate and insufficient facts about this plan, stating that it is "a daily or weekly plan of what he/she will be doing; a list of activities recommended to facilitate for students with ADHD to manage them well; an instruction plan for student's success addressing the student's access to the regular educational program as naturally as possible; and a goal setting."

Smith and Patton (1998) suggested that "school must use a separate system and set of forms for individualized accommodation plans from those used for IEP of students in the inclusion under Section 504" (p. 43). It is vital, therefore, that in implementing adjustments required to best accommodate children with ADHD in class, the teachers must have accurate facts about this plan containing these required adjustments and the procedures on how to implement, review, and revise the plan.

Application of a training program for teachers of students with ADHD

With the increasing number of enrollees with behavior problems, the FGD narratives and the teacher-made questionnaire proved that the school needs teaching personnel who are properly trained to manage the students with ADHD well.

This justified the application of a training program to equip new teachers with teaching competencies necessary to properly accommodate this type of students. The major problem encountered by regular teachers was the lack of preparation in handling special children; thus, the importance of teacher training

prior to its full operation was recommended (Cabigting, 2004).

Conclusions and Recommendations

The IAP is the guide for teachers to best accommodate students with ADHD in their class. This plan is used to enumerate the ways on how the teachers can adjust in class to promote better management and learning of students with ADHD.

The findings from this study revealed that there is a need for teachers to be oriented with background information on ADHD and the competencies required to best accommodate children with ADHD using the IAP as their guide. A training manual on the IAP of students with ADHD containing these required competencies was developed as the output of this study. If the IAP manual is distributed to schools that cater to children with ADHD in the inclusionary setting, they would be provided with better instruction and behavior management. There would be lesser behavior problems manifested by such students. Likewise, the IAP for children with other disabilities such as autism, learning disability, speech impairments, and the like are recommended to be drafted by future researchers. This would highly benefit students with disabilities enrolled in general education programs.

It is recommended that teachers be supplied with the competencies required in the implementation of the inclusion programs of children with ADHD. Regular teachers and administrators must undergo training on the teacher competencies needed for the implementation of the IAP for children with ADHD. When teachers and administrators are trained to accommodate students with ADHD, they can develop their potentials to succeed in school. Further, it is hoped that with the IAP, children with ADHD can be accepted

by their teachers and peers and can fulfill school requirements.

References

- Adams, R., Finn, P., Moes, E., Flannery, K. & Rizzo, A. (2009). Distractibility in attention deficit hyperactivity disorder (ADHD): The virtual reality classroom. *Journal of Neuropsychology*, 15(2), pp. 120-135.
- Akbas, S. (2014). Various ADHD-Associated Problematic Life Events in Parents of Children with ADHD Diagnosis. *Journal of Psychiatry and Neurological Sciences*. pp. 61-68. DOI: 10.5350/DAJPN2014270108
- Ashley, S. (2005). *The ADD and ADHD answer book: The top 275 questions parents ask*. Naperville, IL: Sourcebooks, Inc.
- Barkley, R. (2008). Classroom Accommodations for Students with ADHD. *ADHD Report*. Volume. 16 Issue 4, pp.7-10.
- Bora, P. (2013). The Problem with ADHD: Researchers' Constructions and Parents' Accounts. *International Journal of Early Childhood*, v45 n1 p11-33 Apr 2013
- Cabigting, O. M. (2004). *Involvement of regular teachers in mainstream programs of selected schools in Quezon City*. Unpublished Master's Thesis, University of the Philippines Diliman, Quezon City.
- Camara, E. (2002). *Program modifications for children and youth with special needs*. Manila: P'Mont Publishers.
- Chapter 6: Accommodations. (2001). Accessed April 8, 2009, at <http://www.parrotpublishing.com>
- Dizon, E., Sacris, C., & Mercado, M.S. (Eds.) (2001). *From segregation to integration: Mainstreaming/Inclusion of children with special needs in the regular class*. Quezon City: Special Education Area. UP College of Education.
- DuPaul, G. J., & Stoner, G. (2003). *ADHD in the schools: Assessment and intervention strategies*. (2nd ed.). New York: Guilford Press.
- Flick, G. L. (1998). *ADD/ADHD behavior-change resource kit: Ready to use strategies and activities for helping children with attention deficit disorder*. New York: The Center for Applied Research in Education.
- Honos-Webb, L. (2005). *The gift of ADHD: How to transform you child's problems into strengths*. Oakland, CA: New Harbinger.
- Hughes, L. & Cooper, P. (2007). *Understanding and supporting children with ADHD: Strategies for teachers, parents and other professionals*. London: Paul Chapman.
- Identifying and treating attention deficit hyperactivity disorder: A resource for school and home. (2003). Accessed August 18, 2007, at www.ed.gov
- Inclusion: Making education work for all students. (2006). Accessed August 18, 2007, at <http://bctf.ca/SEA/Inclusion>
- Kilcarr, P. J., & Quinn, P. O. (1997). *Voices from fatherhood: Fathers, sons and ADHD*. Bristol: Brunner/Mazel.
- Koga, N., & Hall, T. (2004). *Curriculum modification*. Wakefield, MA: National Center on Accessing the General Curriculum. Accessed May 8, 2012, at <http://aim.cast.org>
- Lewis-Morton, R. Dallos, R., Clempson, R. (2014). 'There is something not quite right with Brad...' The ways in which families construct ADHD before receiving a diagnosis. *Contemporary Family Therapy: An*

- International Journal*. DOI: 10.1007/s10591-013-9288-9.
- Maag, J. (2012). Functional assessment: A positive approach to misbehavior at school. *Great schools*, pp. 1-3. Accessed May 8, 2012, at <http://www.greatschools.org>.
- Magna Carta for persons with disabilities of 1992, RA 7277 (1992)*.
- Miller, L., & Newbill, C. (2006). *Section 504 in the classroom: How to design and implement accommodation plans* (2nd ed.). Austin, TX: PRO-ED.
- Parker, H. (2005). *The ADHD handbook for schools: Effective strategies for identifying and teaching students with attention-deficit/hyperactivity disorder*. FL: Specialty Press.
- Parker, H. (2000). *Problem solver guide for students with ADHD: Ready-to-use interventions for elementary and secondary students*. FL: Specialty Press.
- Philippine Congress. (1992). *Republic Act No. 7277- Magna Carta for Disabled Persons*. Manila.
- Ramirez, L. (2009). *How to control ADHD impulsive aggression in children*. Accessed May 8, 2012, at <http://www.articlesbase.com>
- Rief, S. F. (2005). *How to reach and teach children with ADD/ADHD: Practical Techniques, Strategies, and Interventions*. (2nd ed.). San Francisco: Jossey-Bass.
- Rief, S. F. (2003). *The ADHD book of lists: A practical guide for helping students and teens with attention deficit disorders*. San Francisco: Jossey-Bass.
- Rief, S. F., & Heimburge, J. A. (2006). *How to reach and teach all children in the inclusive classroom: Practical strategies, lessons and activities*. (2nd ed.). San Francisco: Jossey-Bass.
- Smith, T. E. C., & Patton, J. R. (1998). *Section 504: and public schools: A practical guide for determining eligibility, developing accommodation plans, and documenting compliance*. TX: PRO-ED, Inc.
- Snider, V. (2003). Teacher Knowledge of Stimulant Medication and ADHD. *Remedial & Special Education*. Volume 24(1). Pp. 46-57.
- Steven, D. (2008, January) Review "Temper tantrums in healthy versus depressed and disruptive preschoolers: Defining tantrum behaviors associated with clinical problems," *Journal of Pediatrics*. Accessed May 8, 2012, at <http://www.childrenscolorado.org>
- Thompson, S., Blount, A., & Thurlow, M. (2002). *A summary of research on the effects of test accommodations: 1999 through 2001 (Technical report 34)*. Minneapolis, MN: University of Minnesota, National Center on Educational Outcomes.
- Tumadiang, N. R. (2009). *Bullying and learners with attention deficit hyperactivity disorder in a regular school*. Unpublished Master's Thesis. University of the Philippines Diliman, Quezon City.
- Wilmshurst, L., & Brue, A. W. (2005). *A parent's guide to special education: insider advice on how to navigate the system and help your child succeed*. New York: AMACOM.
- Working towards inclusion. Accessed August 9, 2007, at <http://inclusion.uwe.ac.uk>
- Zeigler Dendy, C. (2000). *Teaching teens with ADD and ADHD: A quick reference and guide for teachers and parents*. Baltimore, MD: Woodbine House.
- Zentall, S. (2007). Professional Development for Teachers of Students with ADHD and Characteristics of ADHD. *Behavioral Disorders*. Volume 32 Issue 2, p78-93.