

## INTERPERSONAL FACTORS ASSOCIATED WITH THE DEVELOPMENT OF ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

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### ABSTRACT

*The study investigated interpersonal factors (socioeconomic status and family types) influencing the development of attention deficit hyperactivity disorder (ADHD) among secondary school students. The design for the study is ex-post-facto. The population for the study is 80 participants who showed symptoms towards developing the disorder. Attention Deficit Hyperactivity Disorder Diagnostic Instrument was used to collect data. Two hypotheses were formulated for the study. The data collected were analyzed using t-test statistics. The analysis showed that, socioeconomic status (SES) significantly contributed to the development of ADHD while, family type does not have any influence on the development of ADHD. Based on the findings, it was recommended that; school psychologists, counselors, special educators, social workers and teachers should be familiar with the symptoms of ADHD especially among secondary school students such that their therapy will be effective.*

**Keywords:** Interpersonal factors (Socioeconomic status and Family types, Attention Deficit Hyperactivity Disorder (ADHD)

### INTRODUCTION

Attention Deficit Hyperactivity Disorder (ADHD) is a neurobehavioural developmental disorder. It is primarily characterized by the co-existence of attention problems and hyperactivity with each behaviour occurring infrequent alone. Attention-deficit hyperactivity disorder has been called many names: hyperactive child syndrome, hyper-kinesis, minimal brain damage, and minimal brain dysfunction. Research published before 1980 refers to the disorder as hyperactivity instead of attention deficit hyperactivity disorder. The diagnostic statistical manual (DSM-IV) distinguished between attention deficit disorder with and without hyperactivity. That distinction has been abolished in the DSM-III-R, which calls it attention deficit hyperactivity disorder (ADHD) because almost all victims are hyperactive (Achenbach, 1982). The diagnosis of ADHD requires the presence of six or nine symptoms of inattention and six or nine of hyperactivity and impulsivity that have persisted for at least six months. Symptoms of inattention includes such things as difficulty sustaining attention in tasks of play activities or is often easily distracted by extraneous stimuli, symptoms of hyperactivity and impulsivity include such things as runs about or climbs excessively in situations in which it is inappropriate or interrupts or intrudes others for example, butts into conversations or games (American Psychiatric Association, 1994). ADHD is a neurological disorder that creates information processing challenges among those individuals affected by it (American Psychiatric Association, 1994). In other words, those with ADHD think differently and at times, less clearly than other people without ADHD. These thought difficulties often lead people to respond differently to events that occur. For example, when a child enters an ongoing playgroup, most children will observe the newcomer. However,

children with ADHD might not be aware that the peer is new to the group, thinking instead that they do not observe the peers and may not observe people and things that appear suddenly in their environment (American Medical Association, 1998). The idea that hyperactivity is a disorder not associated with brain damage describes hyperactive child syndrome as an environmentally-based problem caused by faulty parenting for example, if a woman smokes, takes drugs, drinks a lot of alcohol, or is much stressed while she is pregnant, these things can affect the baby's brain. Children with a low birth weight seem to be more likely to develop ADHD much later in life. Brain diseases, trauma during birth, head injury and passive smoking can also increase the chances of a child developing ADHD (Chess, 1960).

ADHD produces symptoms that are characterized by distractibility, hyperactivity, poor impulse control, and forgetfulness. The attention deficit component of ADHD refers to inattention, or difficulty focusing for a long period. The hyperactivity portion of ADHD is used to describe behaviours that are restless, agitated, and difficult to resist. Hyperactive individuals often appear as if they need to make a response. They are always in constant motion and frequently make excessive noise. Although impulsivity is not included in the diagnostic label, it is also considered a characteristic of the disorder. When impulsivity is paired with hyperactivity, they appear to act without prior thought or intention. Impulsive behaviours include being rude and aggressive resulting in accidents. Individuals with ADHD tend to exhibit some characteristics such as daydreaming, restlessness, or thoughtlessness. It is therefore important to understand the differences between normal behaviour and the disorder. The individuals get into trouble because of boundless energy, impulsivity, and an inability to stick to a task. Interactions with playmates are compromised because of fighting and inability to cooperate, with others. As a result, the home needs to be "child proofed" to protect valuables and reduce the risk of harm. Accidents are therefore common, for example, poisoning from ingesting dangerous liquids. The slightest lapse in parental vigilance can result in untold consequences. Hence, parents are exhausted always trying to keep the child occupied and safe.

One factor that influences the development of ADHD is the socioeconomic status. Research indicates that children and teens brought up in poverty stricken homes have a much greater chance of not only having ADHD in the first place but, carrying it forward into adulthood. Many of these households consist of parents who are either unemployed or underemployed and because of their financial conditions are unable to schedule regular medical checkups for either their children or, for themselves (Hawkins, 2010). Socioeconomic status is relevant to all realms of behavioural and social science, including research, practice, and education. It affects overall human functioning: our physical and mental health, the neighbourhood in which we live, our daily activities, and our access to resources. Its effects can be observed across the life span. Variance in socioeconomic status, such as disparities in the distribution of wealth, income, and access to resources, mitigate social and health problems which may involve the development of ADHD (Goodman, 1999).

One of the basic components of the society is the family. The family is the first institution for the socialization of the child and from where the child learns cooperation and adequate child rearing practices. This is the first family unit for the child (Macionis and Plummer, 2007). Eke (2000) defined a family as a social unit or group characterized by common residence, economic co-operation and reproduction. The family therefore includes adults of both sexes, two of whom maintain a socially approved sexual relationship with one or more children owned or adopted by them. Families could be nuclear, extended, single parent, and step families. Edoh (1984) further observed that, a nuclear family is one in which the father, mother, and children are the only members of the family, and they all live together. In this

type of family, children are dependent on their parents for their education and well-being. And extended family according to Edoh (1994) is one in which distant relations are linked to the unit. These relations include; aunts, uncles, cousins, nephews and nieces. In this type of setting love is extended or prolonged.

Berndth (2007) stated that, the single parent family has been one of the fastest growing types in most parts of the world. Single parent family has come into existence as a result of divorce, dissertation, death, separation and illegitimate births. Children from such families may suffer from guilt and loneliness, feelings of anger to mention a few. Young ones in single parent families' contend with intense emotions due to their parents' abrupt departure or death. For many adolescents, the absence of one of the parent's seems to have profound negative effect on them.

Stepparent family comes into existence as a result of either a parent's divorce or death. Children in this type of family are found not to be well adjusted at school. They manifest behaviour problems and perform poorly at school, and their behaviour is like those of single parent families. The Children tend to react negatively if one of their divorced parents remarries and they become part of a new family described as step family. Problem arises because children at this stage of development are expected to be under authority to be carefully monitored. And because in step parent's family, monitoring is inadequate, the children suffer from a number of behavioural disorders. This study intends to examine the interpersonal factors associated with the development of ADHD among school pupils.

## **OBJECTIVES OF THE STUDY**

The objective of the study is to find out the interpersonal factors associated with the development of ADHD. But in specific terms, the study intends to find out:

1. Whether family type contribute to the development of ADHD among children.
2. Whether socioeconomic status contribute to the development of ADHD among children.

## **HYPOTHESES**

1. There is no significant difference between nuclear and extended family types influencing the development of ADHD among children.
2. There is no significant difference in the development of ADHD between children from high and low socio-economic status.

## **RESEARCH METHODS AND PROCEDURES**

This study involved 80 participants diagnosed as possessing the symptoms of ADHD in the public primary schools studied. All ADHD children identified with the symptom were used, thus there was no sampling. An adopted instrument designed by Wair and Duveen (1994) Attention Deficit Hyperactivity Disorder diagnostic instrument (ADHDDI) was used to collect data ADHD, while demographic inventory was used to obtain personal information about the socioeconomic status of participants. The ADHD instrument contained 15 items. The instrument was used to assess and identify the social skills that participant's lacked that could easily predisposed them to develop ADHD. The instrument had a reliability of 0.85.

## **Data Analysis**

Data collected was analyzed using t-test statistics.

**Hypothesis 1:** There is no significant difference between nuclear and extended family type in the development of ADHD

**Table 1. Showing the influence of nuclear and extended family types on the development of ADHD**

<i>Family type</i>	<i>N</i>	$\bar{X}$	<i>Std.Dev.</i>	<i>Crit-t</i>	<i>Cal-t</i>	<i>df</i>	<i>P</i>
Nuclear	45	43.84	7.66	2.00	.695	78	NS
Extended	35	43.20	6.10				

( $P < 0.05$ )

The result of data analysed showed that, nuclear family had  $\bar{X}=43.84$ ,  $Sd=7.66$ , Extended family had  $\bar{X}=43.20$ ,  $Sd=6.10$ . With a cal.  $t$  of .695,  $df=78$ , crit.  $t.=2.00$ . The result showed that, since cal.  $t$  is less than the crit.  $t$ . It therefore means that the hypothesis of no significant difference is accepted. This means that, both nuclear and extended family types contribute to the development of ADHD among children studied (See table 1).

**Hypothesis 2:** There is no significant difference between participants from high and low socio-economic status on the development of ADHD.

**Table 2. Showing the influence of socio- economic status on the development of ADHD**

<i>SES</i>	<i>N</i>	$\bar{X}$	<i>Std. Dev.</i>	<i>Crit-t</i>	<i>Cal-t</i>	<i>df</i>	<i>P</i>
High	36	41.08	5.26	1.96	3.014	78	S
Low	44	45.59	7.60				

The result of data analyzed showed that, High SES  $\bar{X}=41.08$ ,  $Sd=5.26$ , Low SES;  $\bar{X}=45.59$ ,  $Sd=7.60$ . With a cal.  $t=3.014$ ,  $df=78$ , crit.  $t.=1.96$ , the result showed that, since cal.  $t$  is higher than the crit.  $t$ . it means that, the hypothesis of no significant difference is rejected. Meaning that, low SES children are more liable to develop ADHD among participants studied (see table 2).

## RESEARCH FINDINGS AND DISCUSSION

The null hypothesis statement that there is no significant difference between nuclear and extended family types in the development of ADHD was accepted. This implies that, family types either nuclear or extended do not contribute to the development of ADHD. This by implication means that, children cannot develop ADHD no matter the family types they come from. Besides, family types have not been implicated in the development of ADHD. The result of this study supports the findings of (2006) who explained that family types do not influence the development of ADHD rather, parents have been known not to obtain mental health services, some are even shy to discuss with those who can help with their children's condition, ignorance and illiteracy is the lot of so many parents either nuclear or extended family. The difficulty parents have identifying the disorder is a factor considered meaningful on the child's development of this disorder. There is the problem of this disorder not common within the population studied. And, within the African region, the knowledge about the condition is low. Added to the fact that, poor education, and ignorance contribute to the lives of the people that disease are generally not seen as originating from defects during conception and birth.

The null hypothesis that there is no significant difference between high and low socioeconomic status in the development of ADHD was rejected. This implies that, socioeconomic status influenced the development of ADHD. This finding support Deutsch (2002) who found that there are surely multiple etiologies for hyperactivity. These finding showed that, when the home environment is negative in terms of poor parental attention, it could result to the development of reactions and negative emotions. Such emotions may hinder any meaningful control of the child's behaviours. The inability to reduce hyperactivity may mean activation of restlessness and by implication may lead to the development of ADHD especially among children. This is a common trait among parents in the low SES with multiple births and wives, with poor finance that cannot support the family in the case of need for medical attention and others.

## **CONCLUSION AND RECOMMENDATIONS**

The study sought to know if certain interpersonal factors (socioeconomic status and family type) could cause attention deficit hyperactive disorders. The findings clearly showed that socio-economic status could cause ADHD while, family types does not. It is therefore recommended that school psychologist, and counselor, special educators, social workers and teachers should endeavour to identify the symptoms of ADHD especially among the low socio-economic status group such that their treatment will be timely. ADHD children, including those already with the symptoms should be provided with a strength – based approval than a deficit – based one that is, providing them with high stimulation learning environments grounded in what they enjoy to do and can succeed in, this will amount to giving them a kind of educational stimulation that will make them work well and adequately to enable them overcome their deficiency considering their background and ADHD effect.

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