require the assistance of a knowledgeable professional in the field of autism. This professional can develop and help implement a plan which can be carried out at home and school.

The classroom environment should be structured so that the program is consistent and predictable. Students with autism or PDD learn better and are less confused when information is presented visually as well as verbally. Interaction with nondisabled peers is also important, for they provide models of appropriate language, social, and behavior skills. To overcome frequent problems in generalizing skills learned at school, it is very important to develop programs with parents, so that learning activities, experiences, and approaches can be carried over into the home and community.

With educational programs designed to meet a student's individual needs and specialized adult support services in employment and living arrangements, children and adults with autism or PDD can live and work in the community.

For more information, go to www.autism-society.org.

Tips for Leaders

- Provide consistent, predictable structure
- · Give warnings before activity transitions
- · Limit stimulation such as bright lights and noise
- · Respect body space
- Create and implement a written Scouting program plan
- · Provide a visual schedule
- Monitor closely for dangerous situations since children with autism may not have appropriate fear of such
- Have written rules for meetings, campouts, and outings
- Focus on games that develop social skills (good for all Scouts)

D. ADD/ADHD—Attention-Deficit/Hyperactivity Disorder

1. What Is ADHD?

Attention deficit/hyperactivity disorder is a condition that can make it hard for a person to sit still, control behavior, and pay attention appropriately. These difficulties usually begin before the person is 7 years old. However, these behaviors may not be noticed until the child is older.

Doctors do not know what causes ADHD. However, researchers who study the brain are coming closer to understanding what may cause ADHD. They believe that some people with ADHD do not have enough of certain chemicals (called neurotransmitters) in their brain. These chemicals help the brain control behavior.

Parents and teachers do not cause ADHD. Still, there are many things that both parents and teachers can do to help a child with ADHD.

2. How Common Is ADHD?

As many as five out of every 100 children in school may have ADHD. Boys are three times more likely than girls to have ADHD.

3. What Are the Signs of ADHD?

There are three main signs, or symptoms, of ADHD. These are:

- 1. Problems with paying attention appropriately.
- 2. Being very active (called "hyperactivity").
- 3. Acting before thinking (called "impulsivity"). More information about these symptoms is listed in the *Diagnostic and Statistical Manual of Mental Disorders (DSM)*, which is published by the American Psychiatric Association (1994). Based on these symptoms, three types of ADHD have been found:
- Inattentive type—the person can't seem to get focused or stay focused on a task or activity.
- Hyperactive-impulsive type—the person is very active and often acts without thinking.
- Combined type—the person is inattentive, impulsive, and too active.

Inattentive type. Many children with ADHD have problems paying attention. Children with the inattentive type of ADHD often

- · do not pay close attention to details
- · can't stay focused on play or school work
- don't follow through on instructions or finish school work or chores
- · can't seem to organize tasks and activities
- · get distracted easily
- lose things such as toys, school work, and books
 Hyperactive-impulsive type. Being too active

is probably the most visible sign of ADHD. The hyperactive child is "always on the go." (As he or she gets older, the level of activity may go down.) These children also act before thinking (called impulsivity). For example, they may run across the road without looking or climb to the top of very tall trees. They may be surprised to find themselves in a dangerous situation. They may have no idea of how to get out of the situation.

Hyperactivity and impulsivity tend to go together. Children with the hyperactive-impulsive type of ADHD often may

- fidget and squirm
- get out of their chairs when they're not supposed to
- run around or climb constantly
- have trouble playing quietly
- · talk too much
- blurt out answers before questions have been completed
- have trouble waiting their turn
- interrupt others when they're talking
- butt in on the games others are playing
 Combined type. Children with the combined type
 of ADHD have symptoms of both types described
 above. They have problems with paying attention, with hyperactivity, and with controlling their

Of course, from time to time, all children are inattentive, impulsive, and overly active. With children who have ADHD, these behaviors are the rule, not the exception.

These behaviors can cause a child to have real problems at home, at school, and with friends. As a result, many children with ADHD feel anxious, unsure of themselves, and depressed. These feelings are not symptoms of ADHD. They come from having problems again and again at home and in school.

4. How Do You Know If a Child Has ADHD?

When a child shows signs of ADHD, he or she needs to be evaluated by a trained professional. This person may work for the school system or may be a professional in private practice. A complete evaluation is the only way to know for sure if the child has ADHD. It is also important to

- · rule out other reasons for the child's behavior
- find out if the child has other disabilities along with ADHD

5. What About Treatment?

There is no quick treatment for ADHD. However, the symptoms of ADHD can be managed. It's important that the child's family and teachers

- find out more about ADHD
- learn how to help the child manage his or her behavior
- create an educational program that fits the child's individual needs
- provide medication, if parents and the doctor feel this would help the child

6. Tips for Parents

- Learn about ADHD. The more you know, the more you can help yourself and your child. See the list of resources and organizations at the end of this publication.
- Praise your child when he or she does well. Build your child's abilities. Talk about and encourage his or her strengths and talents.
- Be clear, be consistent, be positive. Set clear rules for your child. Tell your child what he or she should do, not just what he shouldn't do. Be clear about what will happen if your child does not follow the rules. Have a reward program for good behavior. Praise your child when he or she shows the behaviors you like.
- Learn about strategies for managing your child's behavior. These include valuable techniques such as: charting, having a reward program, ignoring behaviors, natural consequences, logical consequences, and time-out. Using these strategies will lead to more positive behaviors and cut down on problem behaviors. You can read about these techniques in many books. See Section XI, Appendix—Resources.
- Talk with your doctor about whether medication will help your child.
- Pay attention to your child's mental health (and your own!). Be open to counseling. It can help you deal with the challenges of raising a child with ADHD. It can also help your child deal with frustration, feel better about himself or herself, and learn more about social skills.
- Talk to other parents whose children have ADHD.
 Parents can share practical advice and emotional support. Contact the National Dissemination
 Center for Children with Disabilities to find out how to find parent groups near you.
- Meet with the school and develop an educational plan, an IEP or 504 plan, to address your child's needs. Both you and your child's teachers should get a written copy of this plan.
- Keep in touch with your child's teacher. Many teachers will fill out a quick daily report for your child. Tell the teacher how your child is doing at home. Ask how your child is doing in school. Offer support.

7. Tips for Teachers or Scout Leaders

 Learn more about ADHD. The resources and organizations in the appendix in Section XI will

- help you identify behavior support strategies and effective ways to support the youth educationally. We've listed some strategies below.
- Notice what specific things are hard for the youth.
 For example, one youth with ADHD may have trouble starting a task, while another may have trouble ending one task and starting the next.
 Each youth needs different help.
- Post rules, schedules, and assignments. Clear rules and routines will help a youth with ADHD.
 Have set times for specific tasks. Call attention to changes in the schedule.
- Show the youth how to use an assignment book and a daily schedule. Also teach study skills and learning strategies, and reinforce these regularly.
- Help the youth channel his or her physical activity (e.g., let the youth do some work standing up or at the board). Provide regularly scheduled breaks.
- Make sure directions are given step by step, and that the youth is following the directions. Give directions both verbally and in writing. Many youth with ADHD also benefit from doing the steps as separate tasks.
- Let the youth do work on a computer.
- Work together with the parents to create and implement an educational plan tailored to meet the youth's needs. Regularly share information about how the youth is doing at home and at school.
- Have high expectations for the youth, but be willing to try new ways of doing things. Be patient.
 Maximize the youth's chances for success.
- Eye contact is essential when talking to ADD and ADHD children
- · Eliminate or reduce external stimuli
- Request that the child repeat directions to you for understanding
- Give directions slowly and repeat if necessary
- · Give a few directions at a time
- Be cognizant that ADD does not go away (The child simply acquires coping skills that help him work within the confines of ADD.)
- ADHD children may often misunderstand what is said
- Give positive feedback and ignore negative behavior whenever possible

Consequences and Rewards

- Give short time-out periods
- For younger children, give small amounts of work. The amount of time spent on restricted work is the child's responsibility (what he/she can handle). Time restriction is not recommended.

Reward positive behaviors. Immediate reinforcement (hourly, daily, weekly) is better than long-term. One technique may be effective for a short time (a few weeks or months). Alternating between two or more systems may be successful.

E. Hearing/Speech/ Language Disorders

How can youth with hearing loss become Cub Scouts, Boy Scouts, Varsity Scouts, and Venturers? What benefits can boys with hearing loss obtain from membership in Scouting?

What kinds of program adaptations can and should be made to fit the needs of youth who are deaf?

What special problems are encountered in Scouting for boys with hearing loss and how can they be handled?

What kinds of resources are available for those who wish to pursue the subject further?

Scouting is good for all youth and teaches values, including

- The development of social skills—getting along with others, adapting, cooperating, helping
- The development of social responsibility—learning to recognize and do something about individual and community needs
- The development of self-reliance—learning to become competent, acquiring skill, accepting one's self Such values, of course, are not gained automatically by membership. The level of exposure to the program, the quality of the program, the caliber of the Scout's unit leader, the individual Scout's receptiveness to his Scouting opportunities, and the degree of his participation all affect the values he develops.

Some general observations can be made about the relevance of Scouting for youth with hearing loss.

- Scouting is aimed at the common interests of youth. A hearing impairment does not change a youth's interests, but unless someone makes special efforts, the youth who is deaf often misses out on things that interest him.
- Scouting's emphasis on high ideals of social responsibility is a good influence on youth with hearing loss, who may be isolated from concerns outside their immediate surroundings. Often the recipients of service, youth with hearing loss can learn to be givers as well.
- Scouting can provide youth with hearing loss the opportunity for contact with hearing persons, lessening the isolation that people with hearing impairments often experience.