

Modifications and Accommodations Medford Middle  
School Teachers Make For Students Demonstrating  
Behaviors Of Attention Deficit / Hyperactivity Disorder

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## ABSTRACT

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**Modifications and Accommodations Medford Middle School Teachers Make For**  
(Title)

**Students Demonstrating Behaviors of Attention Deficit/Hyperactivity Disorder (AD/HD).**

<b>K-12 School Guidance &amp; Counseling</b>	<b>Amy Schlieve</b>	<b>12/2000</b>	<b>49</b>
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## APA

(Name of Style Manual Used in this Study)

This study involves Medford Middle School teachers identifying the modifications and/or accommodations they make for children that demonstrate Attention Deficit / Hyperactivity Disorder (AD/HD) type behaviors in the classroom setting. The teachers surveyed encompass all subjects including the Related Arts classes of band, chorus, physical education, art and family and consumer education. The six behaviors identified in the survey were taken from the DSM-IV criteria for diagnosing AD/HD in children. Part one of each question was the identified behavior and how the teacher accommodated it. Part two of the behavioral question was a continuum of the level of tolerance the teacher has for each specific behavior. The continuum range from “Little Tolerance” (1) to “Some Tolerance” (3) to “Much Tolerance” (5). In addition to the six behavioral questions, the teachers were asked to respond as to what their definition of a

504 Plan is and their willingness to make modifications/accommodations for a student that demonstrates AD/HD like behaviors, but does not have an Individual Education Plan (IEP).

The findings of this research describe how Medford Middle School teachers utilize at least six to 20 strategies or accommodations in order to help students succeed in school. Twelve percent of teachers demonstrated knowledge of what a 504 Plan is. The last question surveyed their willingness to make modifications or accommodations without an IEP or 504 Plan directing them. The average responses by grade ranged from 2.6 (slightly less than “somewhat likely” to modify or accommodate) in eighth grade to 3.5 (slightly higher than “somewhat likely” to modify or accommodate) in fifth grade. Sixty-three percent of Medford Middle School teachers modify, accommodate or utilize behavior management strategies for teaching children that demonstrate AD/HD like behaviors.

## **Chapter 1**

### **Introduction**

Life can be challenging for children with Attention Deficit Disorder. According to CHADD (Children and Adults with Attention Deficit Disorder) 1996-1999, children with AD/HD are often in trouble at school, cannot finish a game, loses friends due to inappropriate behaviors and may spend agonizing hours each night struggling to keep their minds on their homework and then forget to bring it to school. Clearly, school personnel consider AD/HD an important issue in schools today. The research this study utilized describes the problems children with AD/HD experience, all of which schools can influence. Identification of AD/HD is vital for designing appropriate educational strategies for the child to succeed. Self-esteem is many times poor due to failing grades, teasing from other children and the constant struggle to behave appropriately in school. Lastly, another challenge facing Wisconsin children will be to pass a graduation test or meet other criteria for graduation. A child with AD/HD may have great difficulty graduating from high school.

Attention Deficit Disorder (ADD) also referred to as Attention Deficit Hyperactivity Disorder (ADHD) is a chronic and pervasive neurological based condition common in children, adolescents and adults. For the purpose of this study, the behaviors of children with ADD and ADHD are of similar importance resulting in the combined behaviors being referred to as AD/HD (Barkley, 1994).

AD/HD is usually identified in early childhood or during elementary school years and may persist into adulthood (Cowan, 1998). Individuals with AD/HD have difficulty sustaining attention, planning and organizing, controlling impulses and physical activity, attending to detail,

and being aware of their own actions (Shinsky, 1996). Additionally, Shinsky states children with AD/HD may display poor motivation, poor task persistence and disorganization when they engage in activities that require sustained attention. These problems are often apparent during preschool years. The AD/HD like behaviors become even more obvious in older children when more demands are placed on sustained attention and concentration (ERIC E512, 1992). AD/HD often has a negative influence on school and job performance, study habits and learning strategies, self-esteem, social interactions, and family life. Barkley (1994) states that children with AD/HD are often on a path of low self-esteem (often present by age 10-12), failure, poor peer relations, and dropping out of school. If not treated effectively, AD/HD can become extremely frustrating and distressing for the individual, family members, school personnel and employers.

The Council for Exceptional Children (1992) states AD/HD is a significant problem in the nation's schools due to the difficulties the children with AD/HD experience for themselves and impose on other children in class and due to the number of students diagnosed with AD/HD. It is estimated that AD/HD makes up 3% to 5% of the current school age population which would represent 1.35 to 2.25 million children (Council for Exceptional Children 1992). The number of children affected by AD/HD does not stop there. According to CHADD (1996-1999), there are between 5% to 10% of children with partial AD/HD. Another 15% to 20% of the school age population may demonstrate AD/HD type behaviors, but the behaviors are transient or change depending on the situation and an AD/HD diagnosis is not warranted.

According to Barkley (1994), children with AD/HD can be an extreme challenge to teach effectively. They are at risk for school failure, emotional difficulties and strained peer relations.

Additionally, Barkley (1994) states, children with AD/HD many times suffer demoralization in school due to the difficulties they experience such as excessive numbers of detentions, behavior modification programs that single the child with AD/HD out, and embarrassment from seemingly not being able to change the troublesome behaviors. Other students in the class know whom the person is that causes all the disruptions and seems to stress the teacher's patience and will use this for an opportunity to tease the child with AD/HD.

From this researcher's perspective, the limitation this study has to battle is teacher apprehension to admit deficits in their knowledge base in dealing with children with AD/HD. Acknowledging that one knows little about teaching strategies for children with AD/HD or does nothing to assist a child with AD/HD succeed in school, may be difficult for teachers. Also, there are teachers that have a "zero tolerance" (CHADD 1998) attitude toward children with AD/HD due to their disruptions and lack of motivation in school. "Zero Tolerance", as defined by seventh grade math teacher McMurry (personal communication December 18, 2000), is, "The child is old enough to manage their own behaviors and take responsibility for their school work. I will not do anything extra besides teach seventh grade math." Teachers may not respond to the survey or they may simply discard the resource given to them because they may not choose to devote the time and energy needed to effectively teach children with AD/HD.

The purpose of this study was to determine the number of modifications teachers at Medford Middle School are aware of and make for students who have been diagnosed or display behaviors suggestive of AD/HD. The research hypothesis for this study assumes the greater the repertoire of behavior management techniques and accommodations teachers know, the more strategies and techniques they may utilize to teach the child with AD/HD.

**Statement of the Problem**

The purpose of this study was to research the modifications, accommodations and tolerance level Medford Middle School teachers, in grades 5-8, have identified for working with children that demonstrate behaviors of AD/HD. The six behaviors identified in the survey were taken from the DSM-IV criteria for diagnosing AD/HD in children. Part one of each question included the identified behavior and how the teacher manages the behavior. Part two of the behavioral question included a continuum of the level of tolerance the teacher has for each specific behavior. The continuum ranged from “Little Tolerance” (1) to “Some Tolerance” (3) to “Much Tolerance” (5). In addition to the six behavioral questions, the teachers were asked to respond as giving their definition of a 504 Plan and their willingness to make modifications /accommodations for a student that demonstrates behaviors of AD/HD but does not have an Individual Education Plan (IEP). The measurement tool developed was designed by the researcher and will specifically question the above criteria.

**Research Objectives**

- 1) Describe, by listing, accommodations in class work, tests and classroom environment the teachers at Medford Middle School utilize in working with AD/HD student behaviors as reported on the survey.
- 2) Describe, by listing, modifications in class work, tests and classroom environment the teachers at Medford Middle School utilize in working with AD/HD student behaviors as reported on the survey.
- 3) Indicate, by analyzing and listing teacher responses to the survey, the number that report knowledge of what a 504 Plan requires of them.



- 4) Report teacher responses of their willingness to make modifications and accommodations for students that do not have an IEP or 504 Plan directing them.
- 5) Report by grade the average tolerance level of teachers for each of the surveyed behaviors.

## Chapter 2

### Literature Review

Educating children with AD/HD is becoming increasingly more important for schools. Therefore, the literature review for this study will investigate how AD/HD is identified in children; the prevalence of AD/HD in school aged children; Federal laws associated with AD/HD; the life-long implications of AD/HD; and strategies for effectively teaching a child with AD/HD.

#### Identification of AD/HD

The first step in dealing with a child with AD/HD is identification of the disorder. Shinsky (1996) writes, the essential feature of AD/HD is a persistent pattern of inattention or hyperactive-impulsivity. The attention and/or hyperactivity needs to be more frequent or severe than for the normal developmental age. Shinsky (1996) further identifies other classifying characteristics of AD/HD as: the behaviors need to have been present before the age of seven; the impairment needs to affect the person in at least two settings (home and school) and common characteristics of the inattention or hyperactive-impulsive type need to have been present for at least six months.”

According to the DSM-IV (1994, 83), for the inattentive type of AD/HD, the child must display at least six of the following characteristics: a) Fails to give close attention to details or makes careless mistakes in school work, work or other activities; b) has difficulty sustaining attention in tasks or play activities; c) does not seem to listen when spoken to directly; d) does not follow through with instruction and fails to finish schoolwork, chores, or duties in the workplace; e) has difficulty organizing tasks and

activities; f) avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as homework or schoolwork); g) misplaces things necessary for tasks or activities (ex. toys, school assignments, pencils); h) easily is distracted by extraneous stimuli and; i) is forgetful in daily activities.

The DSM-IV (1994,84) criteria for the hyperactive-impulsive type of ADHD is:

six or more of the following characteristics must have been present for six months or more: a) Fidgets with hands or feet and squirms in seat; b) leaves seat in classroom or in other situations in which remaining seated is expected; c) runs about or climbs excessively in situations in which it is inappropriate; d) has difficulty playing or engaging in leisure activities quietly; e) is “on the go” or often acts as if “driven by a motor”; f) talks excessively; g) blurts out answers before questions have been completed; h) has difficulty awaiting turns and; i) interrupts or intrudes on others’ conversations or games.

Diagnosis of children with suspected AD/HD needs to be multistep and multidisciplinary (Council for Exceptional Children, 1992). According to Barkley (1994), two questions must be asked. First, does the child meet the criteria previously mentioned and secondly, to what degree does the AD/HD adversely affect the child’s education performance (Barkley, 1994)? The evaluation needs to take place in various situations in the child’s life, displayed behaviors need to be identified in each situation, and one needs to determine how these affect the child’s educational performance. The behaviors the child displays may negatively affect the child in one life setting and not in another (Barkley, 1994). The professionals need to get a very clear picture of how it affects the child.

According to Cowan (1990), the child needs to be evaluated in different classroom situations, such as in, art, music, and regular education classroom(s). A sampling of questions a teacher could ask him/herself are as follows: a) can the child pay attention during class; b) is the child impulsive; c) does the child blurt out in class; d) does he bother other kids with his impulsivity; e) does he have trouble staying in his seat when he is supposed to; f) how is the child on the playground; g) emotionally, can the child delay gratification; h) is he constantly seeking approval for what he has done; i) is the child working at grade level; j) does the child stay on task?

The second area a child suspected of having AD/HD needs to be observed in is the home setting. Utilizing the Connors AD/HD Rating Scales Manual (1990, 32), questions to ask oneself about the child's behavior at home are:

a) is the child excitable, impulsive; b) does the child want to run things at home; c) does the child cry easily or often; d) is the child restless in the "squirmy" sense; e) is the child destructive; f) does the child fail to finish things; g) is the child's distractibility or attention span a problem; h) does the child's mood change quickly and drastically; i) is the child easily frustrated in his/her efforts; j) does the child disturb other children?

Upon answering the aforementioned questions, the goals for working with a child with AD/HD are success in school and a healthy home life. Once a clear picture of home and school behavior is established, then professionals and parents can begin to intervene with the child using learning strategies and behavior management techniques.

### Prevalence in school age children

CHADD (1996-1999) states the prevalence of AD/HD is listed at 3% to 5% of the school age population and anywhere from 5% to 20% of school age children have partial or other similar attention disorders. According to Barkley (1994), two-thirds of children with AD/HD will have other problems associated with AD/HD. Aggression and Conduct Disorders, Oppositional Disorder, low intelligence and Learning Disabilities are problems that commonly occur with AD/HD in children. In fact, 20% to 25% of children with AD/HD are also Learning Disabled (Barkley, 1994). With the vast number of children affected with AD/HD, it is understandable that many classrooms across the nation have one or more children with AD/HD. It is also understandable why laws needed to be developed to assist the children, parents and the school in dealing with the vast numbers of children with AD/HD.

### Federal laws that govern AD/HD

Due to the prevalence of AD/HD, federal laws were established to provide guidelines for parents and children to receive the services that are appropriate for each individual case. The Individuals with Disability Education Act (IDEA) and the Section 504 of the Rehabilitation Act of 1973 regulates the services children with AD/HD need to have offered to them. When the AD/HD adversely affects educational performance, services can be approached through Special Education and IDEA. IDEA is the law that governs Special Education (Council for Exceptional Children, 1992). Due to AD/HD not being classified as mental retardation or a physical disability, the federal government needed to find a classification that can fit with the criteria of AD/HD. AD/HD is classified under IDEA as “Other Health Impaired” (CHADD, 1996-1999) and children could receive services through Special Education. Other Health Impaired is a

category that can be adapted to many different handicapping conditions. The criteria still need to be that the disability must be substantially affecting the child's educational performance (Council for Exceptional Children, 1992). If the child with AD/HD does not qualify for Special Education under Other Health Impaired, the child could qualify for Section 504 of the Rehabilitation Act of 1973 (504 Plan). Section 504 states (Cohen, 1998, 1) "any student with an identified physical or mental disability which substantially limits a major life activity, e.g. learning, is entitled to protection under Section 504."

As stated in earlier research, schools are very concerned about children with AD/HD because of the type and amount of discipline directed to them. Discipline of children which qualify for IDEA or Section 504 are governed by special disciplinary procedures. The need for these procedures arose to combat teacher philosophy of "zero tolerance" for the behaviors that are associated with AD/HD. Children with AD/HD were being punished with detentions, suspensions and expulsions. Today, if a child with AD/HD qualifies for Special Education, there needs to be a positive behavior management plan tailored to his / her needs in the Individualized Education Plan. Suspensions are limited if the discipline is directly related to the disability (CHADD, 1996-1999). A parent / school meeting must be held (or at least three attempts to make contact) to discuss what needs to occur with the child. A child with AD/HD that qualifies for a 504 Plan will have modifications, accommodations or procedures for dealing with the student's educational and behavioral needs, helping to ensure the child's success in school.

#### Life long implications of AD/HD

Schools need to address AD/HD issues with children because of the long term possible effects. Schools need to do as much as possible to ensure that children with AD/HD graduate

from high school. As stated in earlier research, 82% of prisoners were high school dropouts (Waddell, 1999). If the educational system can provide necessary assistance to these children, then possibly better self-esteem, self-responsibility and coping skills for the impulsivity will be developed in these children and may assist them in not becoming a prison statistic. According to Barkley (1994), fewer children with AD/HD graduate from high school, and they have to repeat classes due to failures more often than a non-AD/HD peer does.

As the child with AD/HD gets older, the behavior problems do begin to decline, but the emotional maturity continues to be age inappropriate (Barkley, 1994). Adolescents with AD/HD have more problems with truancy, and they tend to be involved in more car accidents (Barkley, 1994). One last implication of AD/HD for the aging teen is depression. Many suffer depression due to their struggle and failures both educationally and socially (Teeter, 1999). Having presented the above scenario, Barkley (1994) does state that 60% of adults with AD/HD lead satisfactory lives. One last argument for the need for schools to help these children as much as possible comes from, JoEllen Waddell of the Wisconsin ADD Consortium (April, 1999) she states, how many of the prisoners incarcerated today have disabilities, have dropped out of high school and many have AD/HD. The child with ADHD is caused more from lack of impulse control than hyperactivity. “Poor impulse control has landed many people in prison” (Waddell, 1999, 6).

#### Accommodations for classroom use

Teaching a child with AD/HD coping skills for his/her specific behaviors and deficits is necessary for the child to experience school success. The following research describes a sample

of behavior management techniques and accommodations or modifications a teacher can utilize to assist the child in learning coping techniques for specific behaviors.

Children with AD/HD have very little self-control and self-regulation resulting in poor motivation, low persistence and lack of goal-directedness for things that do not truly interest them (Teeter, 1999). Their motivation must come from external sources of feedback that are immediate and frequent from the teacher (Barkley, 1994). Rewards need to be used to help students learn what it “feels like inside of themselves” when they succeed in meeting a goal, finishing a task or taking the initiative in fulfilling a responsibility; thus developing intrinsic motivation (Teeter, 1999). As children age, they will have learned strategies that help them cope with their AD/HD.

Classroom management is a real concern for a teacher that has one or more children with AD/HD in his/her classroom. CHADD (1996-1999) suggests the following accommodations a teacher can make for better classroom management of AD/HD type behaviors: (a) post the classroom rules for all to see and make sure they are clear; (b) seat the child close to the teacher’s desk so you can bring him/her back to task often; (c) stress accuracy on assignments, not speed; (d) establish routines to maintain as much control as possible in the classroom; (e) avoid change in daily routine as it disrupts the child’s sense of “knowing” (security). Warning the children ahead of time and even practicing what it will be like with the change can help them handle the change.

Lastly, *50 Tips on the Classroom Management of Attention Deficit Disorder* (1992) has provided valuable information to this study. The CHADD organization stresses that AD/HD is a difficult disorder to manage because of how emotionally draining each school day is, especially



by oneself. The success of the child depends primarily on the patience, persistence and knowledge of AD/HD by the teacher (Hallowell & Ratey, 1992). All the best-proven strategies for the teacher will not benefit the child with AD/HD if the teacher will not take the time to work with the student.

Teacher assistance is essential in working with Children with AD/HD. Assistance can be in the form of teacher aids in the classroom, working with the children that need extra attention or implementing new and different teaching techniques. The administration at school can encourage attendance at workshops on AD/HD, can provide time for classroom aids to assist the students, and provide positive recognition for the teachers' efforts. Without assistance, teacher burnout could be a result sooner than normal (Hallowell & Ratey, 1992).

## **Chapter 3**

### **Methodology**

#### **Subjects**

1.0 The subjects in this study were Medford Middle School teachers (grades 5-8). The subjects' teaching experience varied from first year teachers to veterans of more than 20 years. All subject areas were included. Both males and females were surveyed. A gender distinction was not carried out.

1.1 All teachers in each grade level were sent surveys (see Appendix C) and the teachers of the Related Arts classes for each grade also received a survey. Related Arts classes are band, chorus, art, technology education, family and consumer education, physical education, health, gifted and talented and business education. Eleven surveys were sent to fifth grade teachers, twelve surveys to sixth grade teachers, twelve surveys to seventh grade teachers and thirteen surveys to eighth grade teachers. In all 48 surveys were sent out to Medford Middle School teachers.

#### **Procedure**

2.0 The survey (see Appendix C), consent form (passive) (see Appendix A), cover letter (see Appendix B) and return, self-addressed stamped envelope were mailed to all the teachers at Medford Middle School.

#### **Instrumentation**

3.0 The researcher developed the survey instrument utilized in this study.

3.1 The survey consisted of six questions on behaviors associated with ADHD and the teacher was asked to list modifications or accommodations he / she uses to deal with the

behavior in the classroom. The behavior questions were taken from the DSM-IV Diagnostic Criteria for ADHD, of which three were taken from the “Inattention” type and three from the “Hyperactivity” type.

3.2 Following each behavioral question, the teacher was asked to rate his/her tolerance level for that behavior in class.

3.3 The second to the last question surveyed the teacher’s willingness to make accommodations or modifications for the child without having an IEP directive.

3.4 The final question surveyed the teacher’s knowledge of a 504 Plan.

3.5 The surveys were color-coded so the grade level of the response would be known, but not the particular teacher or subject area.

### Outcomes

4.0 For each behavior questioned, a list of teacher modifications and accommodations have been developed.

4.1 This researcher developed a “Tolerance Continuum” to collect data on teacher attitude. Collecting valid information on people’s attitudes was difficult due to the inability to determine each possible attitude a person could hold on a topic (Pannell & Pannell, 1993). The “Tolerance Continuum” is an example of a Lickert Scale, which is easy to construct, and the attitudes of the participants can be placed on a range and not specifically stated (Pannell & Pannell, 1993). This researcher chose a Lickert Scale to collect data on Medford Middle School teachers attitudes because of the previously stated reasons.

4.2 A grade level average of each behavior’s tolerance level from the teachers has been placed along the “Tolerance Continuum”.

4.3 Teacher willingness to make modifications and accommodations without an IEP was calculated.

4.4 The final outcome from this study was the number of teachers that identify an understanding of what a 504 Plan is.

## **Chapter 4**

### **Results**

The following pages contain the survey responses of Medford Middle School teachers. The teachers responses included the identified modifications, accommodations, and behavior management strategies they utilize to manage children that demonstrate AD/HD like behaviors. Many of the teachers use multiple strategies to deal with the specified behavior, resulting in a varying numbers of responses. Teachers reported behavior management strategies versus accommodations and modifications, as the method most utilized to manage the child demonstrating AD/HD like behaviors. As part of each behavior question, a Tolerance Continuum questioned the teacher as to how tolerant h/she is for the specified behavior. The Tolerance Continuum ranged from “little tolerance” to “some tolerance” to “much tolerance”.

Table 1 surveyed Medford teachers as to how they managed a child that often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.

Table 1

Behavior #1

**Often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.**

<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Daily assignment notebook checks	1			
Parent signature on daily assignments	1		1	1
Work with student after school to redo Assignment	1	1	1	
Send them to work with Tutor Lab Teacher to redo	1			
Must redo the assignment on their own	1	1	1	3
Student must look through paper Before handing in for final grading	1	1	1	
One-on-one conference with teacher For need to correct error then Student explains how they corrected The error (staying very positive).		1	2	1
Reward other students for having It done correctly		1	1	
Read directions out loud for Entire class/ repeat		1	1	1
Assist student with first one or Two problems		1		

(table continues)

<u>Responses: Continued</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Ignore carelessness and celebrate The completion		1	1	
Encourage reading through directions	1	1	1	1
Partner checks over work			1	
Bold face the important points of directions			1	1
Take 5 points off total score for carelessness			1	1
TOLERANCE AVERAGE BY GRADE	3.4	3	3	3.1
<p style="text-align: center;"><b>Tolerance Continuum</b></p> <p style="text-align: center;"> <b>1</b>                      <b>2</b>                      <b>3</b>                      <b>4</b>                      <b>5</b>  *                      *                      *                      *                      * </p> <p style="text-align: center;"> <b>Little</b>                      <b>Some</b>                      <b>Much</b>  <b>Tolerance</b>                      <b>Tolerance</b>                      <b>Tolerance</b> </p>				

Teachers, in dealing with behavior #1, described 14 behavior management strategies and three accommodations. When considering the accommodations used by grade, fifth and seventh utilized two accommodations each and sixth and eighth grade utilized one accommodation each. Only grades eight and seven reported a negative consequence as an option for managing the behavior. The range of tolerance level for behavior #1 was 3.0 to 3.4 (some tolerance).

Table 2 surveyed Medford teachers as to how they managed a child that often has difficulty organizing tasks and activities.

Table 2

<u>Behavior #2</u>				
<b>Often has difficulty organizing tasks and activities (doesn't know how to start a project, keeping their schoolwork organized).</b>				
<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Extra one-on-one help	1	1	1	1
Daily assignment notebook checks/ same routine	1			
Binder / subject folder checks	3	2		
Positive rewards for completion	1	1		
Work on a task as a group / small group	2			
Project G.O.A.L.S. for long term assignments	5	3	2	3
Tape items to their desk	1			
Constantly monitoring their desks... sorting, cleaning, organizing	2			
Individual help with organization		1	2	2
Practice exercises in starting a task		2		
Verbal hints for starting a project		2		2
Penalized for not having assigned work on due date		3	3	
Collect work as soon as it is finished		1		
Use of rubric checklist for long term tasks		1	1	
(table continues)				



<b>Responses: (continued)</b>	<b><u>Fifth Grade</u></b>	<b><u>Sixth Grade</u></b>	<b><u>Seventh Grade</u></b>	<b><u>Eighth Grade</u></b>																				
Use of student helper in class		1		2																				
Assist student before or after school with task		2																						
Create an organized filing system for the students			1	2																				
Break long project into smaller steps			2	2																				
Prioritize with the student the parts of the project			1																					
TOLERANCE AVERAGE BY GRADE	3.2	3	3.6	3.8																				
<p style="text-align: center;"><b>Tolerance Continuum</b></p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><b>1</b></td> <td style="text-align: center;"><b>2</b></td> <td style="text-align: center;"><b>3</b></td> <td style="text-align: center;"><b>4</b></td> <td style="text-align: center;"><b>5</b></td> </tr> <tr> <td style="text-align: center;">*</td> <td style="text-align: center;">*</td> <td style="text-align: center;">*</td> <td style="text-align: center;">*</td> <td style="text-align: center;">*</td> </tr> <tr> <td style="text-align: center;"><b>Little</b></td> <td></td> <td style="text-align: center;"><b>Some</b></td> <td></td> <td style="text-align: center;"><b>Much</b></td> </tr> <tr> <td style="text-align: center;"><b>Tolerance</b></td> <td></td> <td style="text-align: center;"><b>Tolerance</b></td> <td></td> <td style="text-align: center;"><b>Tolerance</b></td> </tr> </table>					<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	*	*	*	*	*	<b>Little</b>		<b>Some</b>		<b>Much</b>	<b>Tolerance</b>		<b>Tolerance</b>		<b>Tolerance</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>																				
*	*	*	*	*																				
<b>Little</b>		<b>Some</b>		<b>Much</b>																				
<b>Tolerance</b>		<b>Tolerance</b>		<b>Tolerance</b>																				

Behavior #2 was managed with 15 behavior management strategies and four accommodations.

The grades six, seven and eight all utilized two accommodations each and grade five reported no accommodations for managing the behavior. All grades utilized many unique organizational strategies for managing the behavior. The tolerance range for behavior #2 was 3.0 to 3.8 (Some tolerance to approaching much tolerance).

Table 3 surveyed Medford teachers as to how they managed a child that often loses things necessary for tasks or activities.

Table 3

<u>Behavior #3</u>				
<b>Often loses things necessary for tasks or activities (ex. Toys, school assignments, pencils, books, etc.)</b>				
<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Binder checks	1			
Teacher holds on to important things.	1	1		
Extra set of books at home	1	1		
No sympathy, must redo work or tough luck	1		1	2
Tape items on desk,	1			
Have extra supplies for students to borrow	2	1	3	
Student must come up with own way Of getting what they lost.		1		
Consequences for lost items, not prepared for class	2	1	1	1
Reward for having supplies		1		
Project G.O.A.L.S check by principal	1	2		1
Hand in assignment to teacher, Teacher holds on to long term Assignments until finished.		1		
Everyone checks first thing in morning for supplies for the day	2	2	1	1
Word process assignments so if lost, can re-print			1	
				(table continues)

<u>Responses: (continued)</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Restricted lunch for not being prepared for class		4	2	2
Class store where things purchased with sunshine passes	1			1
“Done” folder for finished assignments	2	2		
Behavior chart for responsibility of Bringing necessary materials for class				1
TOLERANCE AVERAGE BY GRADE	3	1.6	2.6	2.4
Tolerance Continuum				
1	2	3	4	5
*	*	*	*	*
Little Tolerance		Some Tolerance		Much Tolerance

Behavior #3 was managed with 15 behavior management strategies and two accommodations.

Grades five, six and seven all utilized one accommodation each for managing the behavior.

Grade eight utilized no accommodations for behavior 3. All grades utilized at least two negative consequences for lost items. The tolerance range was 1.6 to 3.0 (little tolerance to some tolerance).

Table 4 surveyed Medford teacher as to how they managed a child that is often “on the go” or acts as if “driven by a motor”.

Table 4

Behavior #4

**Is often "on the go" or acts as if "driven by a motor" (consistently out of seat, constant talking, continual activity from the student, many trips to the teachers desk)**

<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Student receives 3 "out of desk passes" when they are gone, they cannot get up.	1	2		
They are told to "stay seated", "sit back down"	5	2	2	3
Detentions for out of seat too much (name on board)	1	1	2	4
Give extra breaks then expected to stay seated.	2	2	1	
Role play the inappropriate behavior to them.		1		
Draw attention to how the other kids are seated	1	1	1	
Reward for staying in seat ("good days").	1	2	1	2
Detentions only if they bother other kids.	2	3		2
Paper clip chain on desk to keep hands busy		1		1
Not allowed out of desk unless they ask permission	1			2
TOLERANCE AVERAGE BY GRADE	3.2	3	2.6	2

(table continues)

		<b>Tolerance</b>		<b>Continuum</b>	
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	
*	*	*	*	*	
<b>Little</b>		<b>Some</b>		<b>Much</b>	
<b>Tolerance</b>		<b>Tolerance</b>		<b>Tolerance</b>	

Behavior #4 was managed with eight behavior management strategies and one accommodation.

Grades five, six and seven utilized one accommodation to manage the restlessness. Grade eight utilized no accommodation. All grades gave detentions for the student being out of his/her seat too much. The tolerance range for behavior #4 was 2.0 to 3.2 (some tolerance).

Table 5 surveyed Medford teachers as to how they managed a child that often leaves seat in classroom or in other situations in which it is inappropriate.

Table 5

Behavior #5

**Often leaves seat in classroom or in other situations in which it is inappropriate  
(ex. getting up to sharpen pencil during lecture,  
Excessive trips to the teachers desk)**

<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eighth Grade</u>
Verbal reminders to get back to seat	2	1	1	2
Not allowed out of desk unless they ask teacher	1			2
Give a consequence if they bother others while up	1		1	
Use humor to remind them to find their way back to their seat quickly	1			
Just accept it as part of them	1			1
Name in discipline book if excessive	3			
Out of desk passes, must present pass to teacher	1	2	1	
Name on board...3 times...detention	2	1	1	2
Student desk near the teacher	1	2	2	
Point out behavior as to "are others doing this?"	1		1	
Make sure "ready" before starting class		1	1	1
TOLERANCE AVERAGE BY GRADE	3.8	3.2	2.4	2.5

(table continues)

		Tolerance		Continuum	
1	2	3	4	5	
*	*	*	*	*	
Little		Some		Much	
Tolerance		Tolerance		Tolerance	

Behavior #5 was managed with 11 behavior management strategies and one accommodation.

Grade five utilized 10 of the 11 behavior management strategies reported where grades six, and eight utilized 5 strategies each and grade seven reported 7 utilized. All grades reported giving a detention after the student had his/her name on the board three times. The tolerance range for behavior #4 was 2.4 to 3.8 (above and below some tolerance).

Table 6 surveyed Medford teachers as to how they managed a child that often interrupts or intrudes on others.

Table 6

Behavior #6**Often interrupts or intrudes on others (ex. interrupts conversations or games).**

<b><u>Responses:</u></b>	<b><u>Fifth Grade</u></b>	<b><u>Sixth Grade</u></b>	<b><u>Seventh Grade</u></b>	<b><u>Eighth Grade</u></b>
Verbal reminders	1			2
Name in discipline book	1			
Peer helpers to curb/model behavior	1			
Talk to student privately about disrespect being unacceptable	5	1		1
Interrupt them back so they "feel" how disrespectful it is	1			
Detentions for aggressive behaviors	1			1
Role play the inappropriate behavior		1	1	1
Reward good manners		1	2	
Teach social skills / manners		1	1	2
Correct it when it happens		1	1	
Use "Koosh" to speak when in groups			1	
TOLERANCE AVERAGE BY GRADE	2.6	2.2	2.2	1.6

**Tolerance Continuum**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
*	*	*	*	*
<b>Little</b>		<b>Some</b>		<b>Much</b>
<b>Tolerance</b>		<b>Tolerance</b>		<b>Tolerance</b>



Behavior #6 described 10 behavior management strategies and one accommodation. Grades six, seven and eight utilized the accommodation of, teaching social skills, as a method of managing the student that demonstrates behavior #6. Grade five reported, talking with the student about the inappropriate behavior, as 5 out of 10 behavior management strategies reported. The tolerance range was 1.6 to 2.6 (little tolerance to some tolerance).

Question 7 surveys teacher attitude in regard to making modifications or accommodations.

Results are listed by individual response and grade average for attitude.

Table 7

**IEP Willingness Question:**

In consideration of the state testing and state standards, how likely are you to make modifications or accommodations for a student that exhibits the above listed behaviors, but does not have and IEP or 504 Plan?

**Attitude Continuum**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
*	*	*	*	*
<b>Not very Likely</b>		<b>Somewhat Likely</b>		<b>Very Likely</b>

**Individual Responses**

<b><u>Fifth Grade</u></b>	<b><u>Sixth Grade</u></b>	<b><u>Seventh Grade</u></b>	<b><u>Eighth Grade</u></b>
4	5	4	3
3	4	3	2
5	3	2	1
2	1	5	3
5	4	4	5
4	3	2	4
2	1	3	2
			3
			1
			2
<hr/>			
3.5	3	3.2	2.6

**Teacher response average by grade for making modifications and accommodations without an IEP or 504 Plan**

Upon reviewing the data, the average response for grade five was 3.5 (somewhat likely), grade six was 3.0 (somewhat likely), grade seven 3.2 (somewhat likely) and grade eight 2.6 (between

not very likely and somewhat likely). In grades five, six, and seven, the teachers were all somewhat likely to make modifications or accommodations, but in grade eight, the teachers were less than somewhat likely to make modifications.

Question 8 surveyed the teachers as to what they understood a 504 Plan to be. The "most" correct response for Medford School District is printed in bold type.

Table 8

<b>Question #8</b>				
<b>What is your understanding of what a "504 Plan" is?</b>				
<b><u>Responses:</u></b>	<b><u>Fifth Grade</u></b>	<b><u>Sixth Grade</u></b>	<b><u>Seventh Grade</u></b>	<b><u>Eight Grade</u></b>
<b>Student that has a handicapping condition, but does not qualify for Special Education. Accommodations and modifications need to be made (504 Plan) to help them be Successful in school. The counselor is Responsible for it, not Special Education Teachers.</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>3</b>
No Response	2	3	3	4
When the classroom teacher modifies and Accommodates the needs of the student. Special Education is a resource, but not directly involved.	1			
Student is tested and qualifies for services, but there is no set program to meet his/her needs. An "IEP" is written.	1			1
No learning disabilities, but a definite health disorder that distracts / hinders education.	1			
Not much...educational plan for particular student.		1		1
Individual plan for students who do not fit in the "state guidelines" for inclusion in Special Education, but have a deficit in certain content area's.	1	1	2	
Plan discussed by parent, teachers, and Counselor to meet the needs of a student not capable of doing everything expected of his/her grade level.		1	1	
				(table continued)

<u>Responses:</u>	<u>Fifth Grade</u>	<u>Sixth Grade</u>	<u>Seventh Grade</u>	<u>Eight Grade</u>
Plan to help “At Risk” students succeed in class by Modifications of homework, test, quizzes or through placement in classrooms where the student can be dealt with one-on-one.				1

One teacher in each of grades five, six and seven responded with the correct definition. In grade eight, three teachers responded with the correct definition. All teacher responses described a student that has difficulty in the regular classroom or with regular class expectations for schoolwork.

The conclusion drawn from the results of this research show there are a minimum of 11 behavior management strategies or accommodations and a maximum of 19 being utilized by Medford teachers to manage children that demonstrate one of the six selected AD/HD type behaviors. For the six behaviors surveyed, 65 different behavior management strategies were utilized, nine accommodations and zero modifications. Strategies that dealt with the student earning a consequence for the behavior, an detention, decreased points on assignments and no sympathy, were dispersed throughout all grade levels. The teachers reported on an Attitude Continuum an average of being “somewhat likely” (3.1) to make accommodations or modifications without an IEP or 504 Plan directing them to do so. Lastly, of the 18 teachers that responded to the 504 Plan question, six teachers responded with the correct definition of a 504 Plan.

## **Chapter 5**

### **Discussion**

The research conducted in this study supports the hypothesis that the greater the repertoire of behavior management strategies and accommodations teachers know, the more approaches and techniques they may utilize to teach the child demonstrating AD/HD like behaviors. Upon reviewing the reported responses of Medford Middle School teachers, 63% utilized behavior management strategies and accommodations to teach children who demonstrate AD/HD like behaviors.

The researcher concluded that teachers are utilizing behavior modification strategies to assist students in learning. The average tolerance level for the combined six AD/HD like behaviors was slightly below “some tolerance” (2.7) for the behaviors. One teacher indicated on his/her 5<sup>th</sup> grade survey that h/she had much tolerance for AD/HD like behaviors. This same survey stated that the teacher realized there are strategies to help the child learn how to manage the behaviors.

Medford Middle School teachers are somewhat likely to modify or make accommodations for children that demonstrate AD/HD like behaviors. Upon analyzing the teachers’ responses, they utilize primarily behavior management strategies to help children learn and turn their schoolwork in, but are not making substantial daily accommodations for children. Consequently, when taking the state mandated tests, Medford students will not be at a disadvantage due to special accommodations during the regular school year that are not available during the testing situation.

Medford School District's Student Services Department needs to consider and remedy the fact that only 12% of certified teaching staff accurately understands what a 504 Plan is. Without 504 Plan knowledge, the teachers may not carry out the plans that are in place and the child may not get the appropriate assistance. It is critical that in-service programs be utilized to educate the certified teachers as to their responsibility in carrying out a 504 Plan.

In light of Wisconsin's new graduation test policy and high stakes testing for grades four, eight and ten, there are two implications for further research. The first being, the students that fail the state test at grades four, eight and ten need to be screened to determine if they have AD/HD or are demonstrating AD/HD like behaviors. In the following years, the students identified, will need to be targeted for special assistance in order to pass the state testing. Also, these identified students will need to be kept on track for the alternate graduation requirements, so in case they do not pass the graduation test, they will be able to fall back on the alternate graduation requirements.

The second implication for further research would be to determine the number of students that are diagnosed with AD/HD or that demonstrate AD/HD like behaviors and their success rate on the graduation test. This coupled with the aforementioned research, will give the school district an indication of the effect AD/HD has on student success with state testing.

In conclusion, Medford Middle School teachers use behavior management strategies and accommodations in order to assist children that demonstrate AD/HD like behaviors. It is critical that teachers continue this practice and utilize more strategies in an effort to assist children demonstrating AD/HD like behaviors in order to have school success.

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## Appendix A

## HUMAN RESEARCH SUBJECTS CONSENT FORM

I understand that by returning the/this questionnaire, I am giving my informed consent as a participating volunteer in this study. I understand the basic nature of the study is **to identify the modifications / accommodations that are made by Medford Middle School teachers for students that demonstrate AD/HD type behaviors in class** and agree that any potential risks are exceedingly small. I also understand the potential benefits that might be realized from the successful completion of this study will be to **receive a resource of techniques to deal with AD/HD behaviors in the classroom.** I am aware that the information is being sought in a specific manner so that no identifiers are needed and so that confidentiality is guaranteed. I realize that I have the right to refuse to participate and that my right to withdraw from participation at any time during the study will be respected with no coercion or prejudice.

NOTE: Questions or concerns about participation the research or subsequent complaints should be addressed first to Jackie Strick, researcher, or Amy Schlieve, research advisor UW-Stout. Secondly to Dr. Ted Knous, Chair, UW-Stout Institutional Review Board for the Protection of Human Subjects in Research, 11 HH, UW-Stout, Menomonie, WI 54751, phone (715) 232-1126.

Appendix B

ATTENTION DEFICIT HYPERACTIVITY DISORDER  
SURVEY

The intent of this survey is to describe the strategies, modifications and/or accommodations that the teachers at Medford Middle School utilize to deal with the below listed behaviors. As a final product, the information will be compiled, along with other sources, and a resource will be made available to those people that would like one. *Please take the time to consider and fill out as completely as possible this survey. Thank you.*

Please mail the survey back as soon as possible using the envelope provided. Thank you.

*Thank you for your time and effort in filling out this survey !  
It is greatly appreciated. Please enjoy your candy bar...you are  
GRAND !!!*

### Appendix C

With the following behaviors, please list strategies you have used, if any, to deal with the behaviors. Also, please rate on the continuum your tolerance level for the demonstrated behavior in your class (circle the number on the continuum).

#### THE STUDENT:

- 1) Often fails to give close attention to details or makes careless mistakes in school work, work, or other activities (ex. Circles answer instead of underlining, addition is wrong because of rushing though assignment).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 2) Often has difficulty organizing tasks and activities (doesn't know how to start a project, keeping their schoolwork organized).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 3) Often loses things necessary for tasks or activities (ex. Toys, school assignments, pencils, books, etc.).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 4) Is often “on the go” or acts as if “driven by a motor” (consistently out of seat, constant talking, continual activity coming from the student, many trips to teachers’ desk).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 5) Often leaves seat in classroom or in other situations in which it is inappropriate (ex. Getting up to sharpen pencil during a lecture, excessive trips to teachers desk).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 6) Often interrupts or intrudes on others (ex. Interrupts conversations or games).

1	2	3	4	5
*		*		*
Little		Some		Much
Tolerance		Tolerance		Tolerance

- 7) In consideration of the state testing and state standards, how likely are you to make modifications, or accommodations for a student that exhibits the above listed behaviors, but do not have an IEP or a 504 plan?

1	2	3	4	5
*		*		*
Not very Likely		Somewhat Likely		Very Likely

- 8) What is your understanding of what a “504 plan” is?