Non-pharmacological interventions for attention-deficit/hyperactivity disorder (ADHD) delivered in school settings: systematic reviews of quantitative and qualitative research

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Declared competing interests of authors: Ken Stein is chair of the NIHR HTA Editorial Board and a member of the NIHR Journals Library Board.

Disclaimer: This report contains quotations from transcripts of interviews conducted in the course of research and contains language that may offend some readers.

Published June 2015
DOI: 10.3310/hta19450
Plain English summary

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Health Technology Assessment 2015; Vol. 19: No. 45
DOI: 10.3310/hta19450

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Pupils diagnosed with attention-deficit/hyperactivity disorder (ADHD) are typically restless, act without thinking and struggle to concentrate. This project brought together findings from research about strategies used in schools to help pupils with these difficulties; these strategies are sometimes called 'interventions'.

We found 54 studies that evaluated school interventions. Overall, these interventions appeared to reduce hyperactivity, impulsiveness and inattentiveness, and improve some measures of problem behaviours, school skills and achievement. Short-term interventions seemed to be more beneficial than longer-term ones, and strategies targeting social skills did not seem particularly helpful. Separately, we also looked at relevant research that explored the attitudes and experiences of pupils showing ADHD symptoms in school, and their teachers and parents. We found 84 studies that highlighted the importance of taking account of the school's situation and national policies for education, as well as attempting to meet the individual needs of pupils. The research also suggests that negative attitudes about ADHD and the relationships children have with teachers and peers can influence how well interventions work.

Many of the studies we looked at were not very well designed or carried out, or were not described in enough detail, and it was difficult to bring the findings together as the studies used different methods and various ways to measure outcomes. Therefore, our conclusions must be considered cautiously. More carefully designed research is needed before we can be clear about what works for whom when trying to support pupils with ADHD in school.
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This report

The research reported in this issue of the journal was funded by the HTA programme as project number 10/140/02. The contractual start date was in May 2012. The draft report began editorial review in November 2013 and was accepted for publication in April 2014. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors’ report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

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