A Response to Fintan O’Regan’s Exclusion from School and Attention Deficit Hyperactivity Disorder (1)

Richard Rose¹
Univerisity of Northampton, UK

In his paper Exclusion from school and attention –deficit/hyperactivity disorder, Fintan O’Regan addresses an important area which is of concern to teachers, parents and young people alike. Early in the paper he presents a series of facts and figures which identify the use of school exclusions as a means by which schools in the UK impose sanctions in order to provide teachers and pupils with respite from those young people whose undesirable behaviours are seen to have reached a level which cannot be easily managed within the school. Through a summary of published reports and media coverage, O’Regan presents an analysis of school exclusions sufficient to show why this is an area of concern, whilst recognising that the efficacy of this particular approach to dealing with behaviour difficulties has become a subject of considerable debate. The presentation of facts and highlighting of an issue of concern within this paper is to be welcomed by anyone who wishes to engage in this particular discourse on the basis of an understanding of the statistics which provide evidence of a contended and pervasive approach to addressing a problem. However, in applying the discussion of school exclusion to a specific population, that of pupils with ADHD, which by the author’s own admittance is at best ill-defined, a number of issues are raised which need further exploration.

The first difficulty which I have with regards to O’Regan’s paper is the focus of attention given to exclusion as sanction that is concentrated upon ‘within pupil’ factors. Within his discussion of a difficult and oft contested area, O’Regan makes a number of assertions regarding the assessment and identification of ADHD in relation the management of behaviour and the potential for addressing school exclusions. In particular he suggests that equipping teachers with improved diagnostic tools and greater understanding will enable them to address an issue of ‘undiagnosed’ students with ADHD and will thereby raise awareness of the condition. Furthermore, he surmises that it is ‘plausible’ that a significant number of pupils excluded from school as a result of disruptive behaviour present with ‘unidentified, untreated or poorly managed ADHD’. These are bold assertions which are certainly useful if the author wishes to provoke reaction and debate. However, I believe that there are a number of claims and contradictions in this paper which should not go unchallenged.

¹ Address for correspondence: Richard.Rose@northampton.ac.uk
O’Regan, citing the work of Daniels and Porter (2007), states that there is evidence that rates of exclusion are higher amongst the population of pupils with a diagnosis of ADHD than for the school population in general. What is not discussed in any detail are the reasons why this might be the case. To what extent does the very fact that a pupil has a label make them more likely to be subjected to exclusion? If being identified as a pupil with ADHD is associated in the minds of teachers and others with likely persistent disruptive behaviours of the type described by O’Regan in this paper, is there a potential for the condition itself to become a ‘justifiable’ reason to exclude? The creation of a self-fulfilling prophesy based upon low expectations of academic performance has been widely discussed in respect of the categorisation of individuals (Pullin 2008; Loreman, Deppeler and Harvey 2010). By drawing attention to perceived pupil deficits by attaching a label to the individual is as likely to attract a negative view of the pupil as it is to guarantee appropriate levels of support. Whilst it may be the case that improved diagnosis of pupil needs is an essential first step in enabling teachers and other professionals to develop pedagogical approaches for the support of learning, it cannot be assumed that this will always be the outcome of such assessment procedures. O’Regan quite rightly emphasises that appropriate intervention is the key to enabling pupils with a diagnosis of ADHD to be included in mainstream classrooms, yet his assertion that greater awareness of behaviour difficulties among educators will prove beneficial to the pupil is open to question.

The emphasis within O’Regan’s paper is firmly placed upon within child factors. ADHD is emphasised as a deficit in need of remediation, including at times the administration of medication for the control of symptoms. The attention given to the development of appropriate interventions is dealt with only in limited terms and the desirability to effect whole school change in support of inclusion receives only a cursory mention. Within this paper the positioning of ADHD within a biomedical paradigm is unlikely to either give assurances to teachers that they have the ability to manage pupils labelled as having ADHD, or to encourage school managers and policy makers to examine how changes to schools and educational structures may be of benefit. Visser and Jehan (2009) suggest that professionals working with this population would be well advised to consider not only the individual pupil, but also the context in which they are educated if they wish to adopt strategies for the benefit of all learners in the class. Their views reinforce those of Cooper (1997) who demands a shift to a more bio-psychosocial model whereby a balanced intervention can be achieved in order to effect wider environmental changes within which the individual pupil can be supported and retained.

Exclusion as a disciplinary tool within the UK education system impacts not only upon the lives of the individual pupil removed from school, but also has the potential to have a negative effect upon families, teachers and other pupils. Daniels and Cole (2010) indicated that significant numbers of young people who have experienced exclusion from school saw the process as damaging. They perceived the experience as having had detrimental effects including loss of educational opportunity and stigmatisation which hindered employment opportunities. For teachers, whilst exclusion may bring short term respite from the disruptive behaviours of an individual pupil, it serves mainly to reinforce the message that this individual is difficult to manage and that the teacher may not be equal to the task. Such feelings of inadequacy may, of course, be to
some extent mollified if the pupil has a label which accounts for the extent of the difficulties to be faced. Improved diagnosis would certainly provide some comfort for teachers in knowing that others are equally likely to experience difficulties with a pupil. But where does this leave the pupil and his family? There is a need to acknowledge that for many young people diagnosed with ADHD the major problems associated with their management resides in the educational structures within which they must operate. Reid (2006, p.201) states that

“The nature of the provision that is suitable for children with attention difficulties can vary. For some, specialised intervention may be appropriate, but for most, differentiation, curriculum and classroom adaptations and acknowledging learning styles will be sufficient. Considering the range of difficulties that can also be associated with attention disorders, this of course provides a challenging situation for teacher”.

The suggestion here is that as a first step to addressing those disruptive behaviours to which O’Regan quite correctly draws our suggestion, we should be taking a more holistic view of the ways in which we develop the learning environment and teaching approaches in our schools. This is not to deny the value of improved mechanisms of diagnosis or increased understanding of ADHD on the part of teachers, but rather to adopt a set of inclusive principles aimed at creating schools that are welcoming to all pupils.

O’Regan’s paper serves an important purpose in drawing the attention of readers to a major concern which persists in our schools. The disproportionate numbers of pupils from marginalised groups within our schools who are subjected to exclusion as a means of managing their disruptive behaviour continues to be a source of worry. For some pupils exclusion may provide a route into an alternative educational provision which may ultimately better serve their needs. But as O’Regan indicates for many young people a failure to make appropriate provision results in a loss of education and further alienation from the education system and potentially from wider aspects of society. In his conclusion, O’Regan observes that the persistent disruptive behaviour that accounts for a high proportion of the exclusions issued to young people is often ill-defined and may lack a consistency of interpretation across the education system. He is right to emphasise that teachers, and others need to be better informed to understand the meaning and causes of disruption, it is also evident that more accurate diagnosis is essential. However, a focus upon changing classroom practice is more likely to benefit a wider population of pupils.

References


Visser, J. and Jehan Z. 2009 ADHD: a scientific fact or a factual opinion? A critique of the veracity of Attention Deficit Hyperactivity Disorder. *Emotional and Behavioural Difficulties*, 14 (2) 127-140