

Understanding Academic and Educational Problems Fit for Purpose in the Contributing to Attentional and Learning Difficulties in Our Children?



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Abstract

Innocent smile is a natural transition that consists of biological and psychological changes that occur for children. ADHD, painful, is a common condition of pain that affects a wide range of young children capable of reducing their quality of life, decrease their ability to function at a 100 percent and ultimately causing a reduction in productivity for the affected children for a period of time. Many studies have shown that the level of knowledge about ADHD is unsatisfactory especially in young children and that it indeed has the ability to disrupt a peaceful flow in rhythm and pattern of children in executing daily activities, the aim of this study is therefore to determine the true extent at which ADHD interferes with daily activities. It is an understudied and underfunded research topic that has been traditionally treated with teaching experiences with a fairly low level of success and does not address the most significant symptoms of ADHD which include anxiety, fear and insomnia.

Introduction

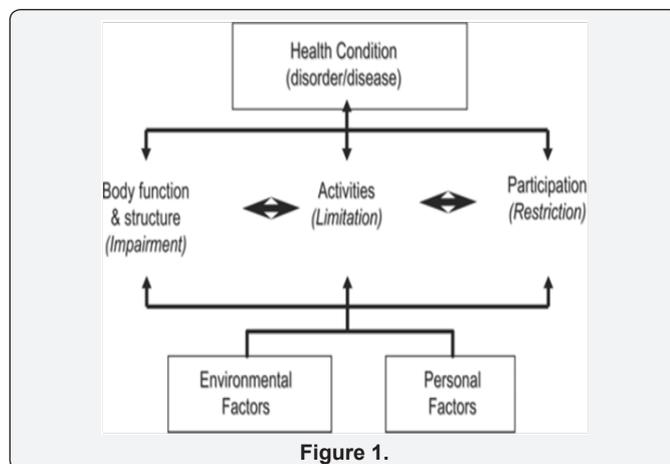


Figure 1.

Developmentally and neurologically it does not make sense. There is a developmental progression of sensory-motor skills that a young child needs to master in the first 7 to 9 years of life, before reading and writing can properly develop. Despite what I think, learning is not «all from our head». It is the movements of our body, in utero through infancy and childhood, and even into adulthood, that form the neural pathways in our brain, that later use to read, write, spell, and do mathematics (Figure 1). Over the past 12 years of practicing as a teacher and researcher, I have seen countless numbers of young children in my practice, diagnosed with ADHD and «Learning Disabilities», who miraculously improve when they are taken out of an «Academic» preschool or kindergarten and

placed in a developmental preschool or kindergarten and other, that emphasizes movement and creative, imaginary play.

I have also watched attention problems and learning challenges in older children and teenagers completely resolve, when reading is moved from the right side of their brain (i.e. sight reading) to the left side of their brain (i.e. phonetic-based reading). They will have resolved any cranial compressions from their birth, and therefore be able to easily converge with their eyes and effortlessly and smoothly track with their eyes (for at least 90 seconds). They also will have integrated their early primitive reflexes, and therefore they won't show tongue movements while writing (i.e. the Palmar reflex) or «Startle» when they catch a ball (i.e. Moro reflex). This is regulated by the portion of the autonomic nervous system, referred to as the parasympathetic, and it is supported by; adequate sleep, predictable rhythms and routine, wholesome nutrition, warmth, harmonious, non-competitive, rhythmic movements, and most importantly, unconditional love and care.

Children's brains develop and integrate when they are in the «God» state. Their brains cannot fully integrate or develop when they are in a state of fear mode, i.e. «fight or flight». Therefore, I support healthy movements. I remain ill informed about how to improve academic and educational outcomes of children with ADHD, despite decades of research on diagnosis, prevalence, and short-term treatment effects. I urge research on this important topic. It may be difficult but not impossible to conduct long-term randomized, controlled trials with medication or behaviour management used

as treatment modalities for practical and ethical reasons. However, large-scale studies that use modern statistical methods, such as hierarchical linear modelling, hold promise for teasing apart the impact of various treatments on outcomes. Such methods can take into account the number and types of interventions, duration of treatment, intensity of treatment, and adherence to protocols. Educational interventions for children with ADHD must be studied.

I recommend large-scale, prospective studies to evaluate the impact of educational interventions. These studies should be tiered, introducing universal design improvements and specific interventions for ADHD. They must include multiple outcomes, with emphasis on academic skills, high school graduation, and successful completion of postsecondary education. Such studies will be neither cheap nor easy. A broad-based coalition of parents, principal, educators, administrator and health care providers must work together to advocate for an ambitious research agenda and then design, implement, and interpret the resulting research. Changes in local, state, and federal policies might facilitate these efforts by creating meaningful databases and collaborations.

The aim of this study is therefore to determine the true extent at which ADHD interferes with daily activities. I also think that it

is an educational controlled by in regards to traditional laws of educational policies of India has been accepted, is the first of its sub kind facility. Born out of the Indian legacy it is mandate is to provide "high throughput, education quality as well as basic research with understanding ADHD. There was no external financial support for this study further. I also appreciate the anonymous readers for their consistency and constructive comments that helped strengthen this article.

Conclusion

ADHD is a common health problem and high clinical referral rate due to its high prevalence rate. It exerts a significant effect on the daily activities and effect on the quality of life among the young children population.

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